

First Aid Policy

North East Futures UTC has been established to change the education, skills and employment paradigm in our IT and Healthcare Science sectors in the North East. It provides the opportunity for young people from all the communities in this region to benefit from its specialist provision.

Local Governors and all the North East Futures staff are committed to a policy of equality and aim to ensure that all students, employees, job applicants, other member of the school community and visitors are treated fairly and with respect.

We aim to give equal access to the high-quality educational opportunities we provide and to ensure that everyone feels that they are a valued member of the school community. We seek to create a safe and happy environment where all our students can flourish and where social and cultural diversity are celebrated.

Reviewed by:	Principal and Local Governing Body
Frequency of policy review:	Annual
Last Reviewed:	October 2023
By Dan Sydes	Inner 1

Ratified by Local Board of Governors on:	6 th December 2023	
By Derek Marshall	Denel Marshon,	
Next Review Date:	October 2024	

1. General Policy Statement

North East Futures UTC is committed to providing suitable and sufficient first aid provision. All staff will be made aware of the procedures to be adopted in the event of injury or medical emergency.

An assessment of first aid needs will be completed to ensure adequate first aid provision is available, including competent persons, appropriate equipment and suitable facilities.

An appointed First Aider will be responsible for the maintenance of the first aid boxes and their contents. The current list of First Aiders is prominently displayed across the UTC on all floors and can be made available by contacting office@nef.tynecoast.academy

All members of staff will be advised who their First Aider is, how to contact them and the location of first aid equipment and signage will provide this information on each floor.

All First Aiders will be required to provide first aid assistance within the limits of that which they are competent to do.

In the event of injury or illness resulting in first aid being administered, the First Aider will ensure that a record is made in respect of first aid treatment. A judgement will be made by the First Aider in cases where it is a minor injury, e.g., a paper cut which requires a plaster, as to whether this needs to be logged as in incident to minimise time spent on paperwork for staff. The First Aider will, through appropriate training, ensure that any injury or illness which is required to be reported, in accordance with RIDDOR, is notified to the responsible person for reporting purposes.

2.0 Legislation and Guidance

This policy is based on advice from the Department for Education on <u>first aid in schools</u> and <u>health</u> <u>and safety in schools</u>, along with guidance from the Health and Safety Executive (HSE) on <u>incident</u> <u>reporting in schools</u>, and the following legislation:

<u>The Health and Safety (First-Aid) Regulations 1981</u>, which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel

<u>The Management of Health and Safety at Work Regulations 1992</u>, which require employers to make an assessment of the risks to the health and safety of their employees

<u>The Management of Health and Safety at Work Regulations 1999</u>, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training

<u>The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013</u>, which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept

<u>Social Security (Claims and Payments) Regulations 1979</u>, which set out rules on the retention of accident records

<u>The Education (Independent School Standards) Regulations 2014</u>, which require that suitable space is provided to cater for the medical and therapy needs of pupils

This policy complies with our funding agreement and articles of association.

3.0 Roles and Responsibilities

The school's arrangements for carrying out the policy extends to the employer and the employees and are detailed below.

3.1 Appointed person(s) and first aiders

The school's appointed person(s) are Sarah Hughes and Charlotte Murray. They are responsible for:

- o Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Ensuring that an ambulance or other professional medical help is summoned when appropriate

First aiders are trained and qualified to carry out the role and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Sending pupils home to recover, where necessary
- Filling in an accident report out in Handsam on the same day as, or as soon as is reasonably practicable after, an incident
- Keeping their contact details up to date

Our school's first aiders names and photographs are displayed prominently around the school site and a list of names and qualification dates can be found in Appendix 2.

3.2 The Employer

Health and Safety legislation places duties on employers for the health and safety of their employees and anyone else on their premises. This includes responsibility for the Senior Leadership Team, teachers, non-teaching staff, students and visitors (including contractors). The employer at North East Futures UTC is the Board of Trustees of the Tyne Coast Academy Trust.

The employer is responsible, under the Health and Safety at Work Act 1974 (HSWA), for making sure that a school has a health and safety policy. This should include arrangements for first aid, based on a risk assessment of the school, and should cover:

- number of First Aiders/appointed persons.
- numbers and locations of first aid containers.
- first aid arrangements for off-site activities/trips.
- Out-of-hours first aid arrangements e.g., sports matches, parents evening.

Additionally, the employer should ensure that:

- all accidents are reported, recorded and where appropriate investigated.
- all incidents when first aid is administered to employees, students and visitors are recorded except for very minor injuries e.g., papercut, blister.
- the school premises are equipped with apparatus and materials to carry out first aid treatment.
- arrangements are made to provide training to employees, records are maintained of that training and reviewed annually.
- a procedure for managing accidents in the school which requires first aid treatment is established.
- employees are provided with information regarding the arrangements for first aid.
- a risk assessment of the first aid requirements of the school is undertaken.
- If the school has any out-of-hours lettings to third parties the letting agreement should state whether or not any first aid provision will be made.

3.3 The Local Governing Body

The Local Governing Body is required to ensure that the UTC:

- has a First Aid Policy.
- the policy is reviewed annually.
- the Principal has the resources necessary to implement the policy.
- the implementation of the policy is monitored.

Additionally, the Governing Body accept their responsibilities towards non-employees. In order to provide first aid for students and visitors, TCAT will ensure that a risk assessment to determine, in addition to the Appointed Person/s, how many persons with a First Aid at Work certificate of competence are required.

3.4 Employees

All employees are required to:

- · Comply with their employers' arrangements for first aid.
- Report any adverse events which could give rise to or have resulted in an accident.

Teachers' conditions of employment do not include giving first aid, although any member of staff may volunteer to undertake these tasks. Teachers and other staff in charge of students are expected to use their best endeavours at all times, particularly in emergencies, to secure the welfare of the students at the school in the same way that parents might be expected to act towards their children. In general, the consequences of taking no action are likely to be more serious than those of trying to assist in an emergency.

4. Arrangements for First Aid

4.1 Materials, equipment and facilities

The school will provide materials, equipment, and facilities as set out below.

First Aid Boxes/Kits

The school must provide at least one fully stocked first aid container for the site. Additional first aid containers will be provided for each level of the site or playgrounds, any other high-risk areas and any off-site activities. First aid kits should be BS8599 compliant or based on the outcome of the first aid needs risk assessment. The contents of the first aid box will be regularly checked for product expiry dates. The first aid boxes/kits will contain the following items as a minimum:

Contents of British Standard Compliant (BS 8599-1) First Aid Kits

Contents	Small	<u>Medium</u>	<u>Large</u>	Travel
F/A guidance leaflet	1	1	1	1
Medium sterile dressing	4	6	8	1
Large sterile dressing	1	2	2	1
Triangular dressing	2	3	4	2
Safety pins	12	12	24	12
Eye dressing	2	3	4	1
Adhesive dressings	40	60	100	20
Sterile wet wipe	20	30	40	4
Microporous tape	1	1	1	1
Nitrile gloves - pair	6	9	12	1
Face shield	1	2	3	1
Foil blanket	1	2	3	1
Burn dressing 10 x 10cm	1	2	2	1
Clothing shears	1	1	1	1
Conforming bandage	1	2	2	1
Finger dressing	2	3	4	0
Sterile eyewash 250ml	0	0	0	1

This first aid container shall be:

- · maintained in a good condition.
- suitable for the purpose of keeping the items referred to above in good

condition.

- readily available for use; and
- prominently marked as a first aid container.

In addition to the items set out for the first aid box the following items will be provided in the medical room:

- · Hand gel cleaner
- · Disposable drying materials.
- Plastic bowls one for cleaning wounds and one for cleaning vomit, excreta, etc.
- Disinfectant/household bleach or similarly effective solution one part to ten parts water for cleaning sinks and bowls and soiled surfaces.
- Biohazard bags for disposing of clinical waste (see section 7b). Hazardous items will be secured from access by students.
- A temperature monitored fridge, preferably lockable, to store prescribed medicines.

Due to the School operating a prescribed medication only policy, if a student requires non-prescribed medication for symptoms such as dysmenorrhoea (period pains), the parent / carer should be contacted by a First Aid trained member of staff for arrangements to be made for the Parent / Carer to attend the school and administer the non-prescribed medication to the student if the Parent / Carer deems this necessary to do so.

Where non-prescribed medicine is administered to a student by the Parent / Carer on the school premises a record will be kept stating the medication dosage, time administered, by whom and the reason; the Parent / Carer must sign the form.

The availability and contents of the first aid box(es) and other medical supplies will be checked on a regular basis by a designated First Aider/Appointed Person/s. They will also be responsible for all record keeping including:

- keeping first aid signage up to date
- maintaining an inventory of the location of first aid boxes/supplies
- recording when first aid boxes were checked for sufficient and in-date supplies.
- Maintaining risk assessments and COSHH assessments relating to first aid (bodily fluids, antibacterial hand gel, disinfectant, etc.)
- ensuring that first aiders are still qualified to carry out their duties and certificates are in-date.
- ensuring all first aiders are aware of the First Aid Policy, Medical Conditions and Administering Medication Policy
- ensuring all first aiders are aware of procedures/documentation operating in the Medical Room and their responsibilities.

Medical Room

In compliance with The Education (School Premises) Regulations 1996 the Governing Body will ensure that a room will be made available for medical treatment. This facility will contain the following and be readily available for use:

sink with running hot and cold water.

- drinking water (if not available on mains tap) and disposable cups.
- paper towels
- smooth-topped working surfaces
- a range of first aid equipment (at least to the standard required in first aid boxes) and proper storage.
- chair
- a couch or bed (with waterproof cover), clean pillow and blankets
- soap
- clean protective garments for first aiders
- suitable refuse containers (foot operated) lined with a clinical waste bag, including separate sharps disposal units.
- Hand gel cleaner
- · an appropriate record-keeping facility
- a means of communication, e.g., telephone.

4.2 Appointment of First Aid Personnel

The appointment of first aiders within the school will be calculated in accordance with the first aid risk assessment provided at Appendix 1.

Unless first aid cover is part of a staff member's contract of employment, those who agree to become First Aiders do so on a voluntary basis.

In determining who should be trained in first aid the Principal will consider each individual against the following criteria:

- reliability and communication skills.
- aptitude and ability to absorb new knowledge and learn new skills.
- ability to cope with stressful and physically demanding emergency procedures.
- ability to leave normal duties to go immediately to an emergency.

Appointed Persons

The Principal will appoint a member of staff to be the Appointed Person. The duties of the Appointed Person are to:

- take charge when someone is injured or becomes ill, and the attending first aider feels the decisions are out of their scope of practice.
- look after the first aid equipment e.g., arranging restock of first aid containers.
- Investigate any complex first aid incidents.
- Report to H&S Manager/Principal
- · Review first aid logs for trends which may need to be addressed.

Appointed persons are not always First Aiders. They should not give first aid treatment for which they have not been trained. However, it is good practice to ensure that appointed persons have emergency first aid training/refresher training as appropriate.

First Aid at Work Certificate

This qualification is obtained through a 3-day course approved by the Health and Safety Executive, and after the attendee has successfully completed an assessment. Holders of this qualification are normally referred to as First Aiders. At the school the main duties of a First Aider are to:

- give immediate help to casualties with common injuries or illness and those arising from specific hazards at the school.
- ensure that an ambulance or other professional medical help is called if it is deemed necessary.

The role of the qualified First Aider includes the treatment of any person on the school site/premises whether or not they are an employee, student, contractor, or member of the public.

Emergency First Aid at Work

Emergency First Aid at Work is an HSE approved one day course which provides basic lifesaving first aid and guidance on workplace health and safety regulations. The course is ideal for smaller workplaces which present few health and safety risks.

Rescue and Emergency Care

There are other HSE recognised first aid qualifications which are specialised for particular circumstances. Many of these are designed for use where access to medical emergency services is limited and where the welfare of the injured may depend on immediate treatment.

These are particularly useful for off-site visits and most outdoor activity qualifications are only valid with up to date specific first aid qualifications.

They are normally gained through intensive 2- or 3-day practical courses and are renewable every 3 years.

General Points

- First Aid at Work certificates are only valid for three years. The school must arrange refresher training and retesting of competence before certificates expire. If a certificate expires, the individual will have to undertake another full course of training to become a First Aider.
- Records of First Aiders certification dates and dates of additional specific or refresher training should be kept in school.

4.3 Information on First Aid arrangements

The Principal will inform all employees at the school of the following:

- the arrangements for recording and reporting accidents
- the arrangements for first aid
- · those employees with qualifications in first aid
- the location of first aid boxes.

In addition, the Principal will ensure that signs are displayed throughout the school providing the following information:

- names of employees with first aid qualifications
- location of first aid boxes.

All members of staff will be made aware of the First Aid Policy.

4.4 Assessment of First Aid Requirements

The <u>minimum</u> number or basic level of first aid provision is calculated using a risk assessment (see Appendix 1), taking into account factors such as:

- staff and/or students with disabilities or special health needs
- age range of the students
- · activities undertaken during school session times.
- materials and equipment to which students have access.
- number of students on site
- the number of buildings on the site.

However, schools must give additional consideration to the following factors when determining the level of provision:

- the arrangements when a qualified first aider is not on site due to absence/training.
- the design/layout of the site/premises is such that staff who are trained in emergency first aid should be readily available.
- first aid requirements for educational visits and journeys, breaks and lunchtimes.

Therefore, there will often be more first aiders than are required by the risk assessment.

4.5 Record Keeping

The school will organise first aid training from a provider agreed through the school. Additionally, there may be employees who may come into a post who already hold a first aid qualification. In such cases, the school needs to be notified of these employees, a copy of the qualification they hold and the date of its expiry.

Information in relation to First Aid training should be recorded on the North East Futures UTC Training Matrix.

5. Accident Reporting

The Governing Body will ensure that North East Futures UTC Procedures for reporting are implemented including:

- · all accidents to employees
- · all incidents of violence and aggression.

The Governing Body is aware of its statutory duty under The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) in respect of reporting the following to the Health and Safety Executive as it applies to employees.

Detailed guidance on the reporting of accidents can be found on the Health and Safety Executive website.

Student accidents involving Head Trauma

Accidents involving the student's head can be problematic because the injury may not be evident (e.g. internal) and the effects only become noticeable after a period of time.

Where a student receives a blow to the head as a result of an accident:

- an incident report will be completed in Handsam.
- a call will be made to the parents to inform them.
- a paper notice will be provided to parents to provide aftercare, concussion awareness and advice to seek medical attention if symptoms arise once the student has left site.

7. Transport to Hospital or Home

The Principal will determine what is a reasonable and sensible action to take in the circumstances of each case.

Where the injury is an emergency, an ambulance will be called following which the parent will be called.

Where hospital treatment is required but it is not an emergency, then the Principal will contact the parents for them to take over the responsibility of their child.

If the parents cannot be contacted, then the Principal may decide to transport the student to hospital.

Where the Principal makes the arrangements for transporting a child then the following points will be observed:

- only staff cars insured to cover such transportation will be used.
- no individual member of staff should be alone with a student in a vehicle.
- the second member of staff will be present to provide supervision for the injured student.
- at least one member of staff will be the same gender as the student.

8. Associated Advice

Emergency Dental Care

The Community Dental Services offer the following guidance on procedures to be

followed when a child has a tooth displaced during an accident at school. The advice, if followed, may well prevent the disfigurement of a child by the loss of a front tooth.

Emergency First Aid following trauma to the teeth

Dentists advise that following trauma to the mouth it is important that the child is assessed by a dentist as soon as possible, even if there is no apparent damage to the teeth.

This treatment may be provided by the child's dentist, by the Community Dentist at the nearest Community Dental Clinic, or by any other dentist who can be contacted and is willing to provide immediate treatment.

It is not advisable to attend hospital for the urgent dental treatment required as valuable time may be lost during travelling or waiting while more serious accident cases are treated.

When one or more of the permanent front teeth are completely knocked out, immediate first aid is essential for successful treatment. The advice does not apply to teeth with broken roots or baby teeth, neither of which should be re-implanted.

- Pick the tooth up carefully by the crown the shiny part which is usually visible in the mouth.
- If the tooth looks quite clean do not worry about further cleaning, but if it has been badly contaminated with dirt or mud, GENTLY wash under warm tap water or milk. Do not scrub or apply any form of disinfectant.
- Next, push the tooth gently back into the socket, still holding the crown only. If
 this is done quickly it is not usually painful. Get the child to bite on a clean
 handkerchief to hold the tooth in place and accompany the child to the dentist
 immediately.
- Do not store the tooth in water, or disinfectants such as Savlon or Milton. Store the tooth in milk.
- Do not wrap the tooth in a wet or dry handkerchief.
- Get to the dentist as soon as possible.

If the tooth has been stored in milk it may be possible to implant up to twelve hours after the accident. However, chances of success are greatest within thirty minutes and are still high up to two hours later.

After receiving dental treatment, if anti-tetanus protection is required, the child will need to attend the family doctor.

Further information, if required, may be obtained by contacting the Community Dental Service.

Blood Spillages and bodily fluids (including vomit)

A COSHH assessment should be obtained and displayed with the supplies for dealing with body fluids and clinical waste. The procedure for dealing with bodily fluids is:

- put on plastic apron, Nitrile gloves and safety glasses
- place paper towels over spillage
- gently pour disinfectant on to the paper towels.
- for carpets use soap and hot water as some disinfectants will bleach
- wash gloved hands and leave the solution as directed on the label.
- pick up towels (with gloves) and place them in a plastic bag.
- wash the area thoroughly with detergent and hot water, then dry
- wash gloved hands, place gloves in plastic bag and seal.

- send bag for incineration
- · wash hands.

Clinical Waste and Contaminated Injuries

Clinical waste is disposed of in yellow/orange bags as this colour identifies the contents as bodily fluids or waste. The schools' clinical waste and hygiene services which collect sanitary waste can be asked to provide larger bins for nappies and body fluids if required.

If it is thought that biological pathogens have entered the body via a contaminated injury, the guidance on Infection Control in Schools and other Childcare settings should be referred to.

Contaminated injuries include:

- Human bites
- Scratches by humans
- Injuries caused by an object contaminated with visible blood
- Needlestick injury/injury with a needle
- Exposure to blood borne viruses (e.g., hepatitis B, hepatitis C, Human Immunodeficiency Virus (HIV))

Educational Visits

The provision of adequate first aid cover should form part of the essential risk assessment involved in organising any off-site activity.

- Where the trip is extended or remote in nature, or the likelihood of injury is higher, a qualified First Aider should accompany the group.
- Where journeys are close to populated areas, or the likelihood of injury is minimal, then an appointed person or someone with a working knowledge of first aid procedures should accompany sports or field trips and other school journeys, and a travelling first aid kit should be provided.
- The planning for such journeys will include what to do in case of accident and emergency (see Educational Visits Policy).

Access for Ambulance

Unobstructed and adequate access should be maintained for ambulances and for ambulance staff and their equipment. Suitable signs should be displayed if deemed appropriate.

Hospital Consent Forms

It is unlikely that school staff who take students to hospital after accidents will be asked by the hospital to sign consent forms but if asked, they must decline.

The hospital will have procedures for obtaining consent from other sources if the parents are not available.

Religious Considerations

Due to religious convictions, some families choose to decline certain medical procedures or treatments. If this is made known to the school, students' records should have an appropriate entry regarding this, and this should be known to the First Aider or teacher who may have the duty of taking the child to hospital in emergency if the parent is not available.

Other Users of the Premises

The Principal should encourage mutual cooperation and assistance between the other users of the premises (for example Sodexo Catering and Kingdom Cleaning Services) and the school in first aid matters.

Contractors may have their own First Aiders or Appointed Persons. The school and the contractors should co-operate and exchange information about First Aiders, etc. in case there is a need for help and assistance in an emergency.

Similarly, the Principal should inform those hiring the premises where the First Aid facilities are.

Children with Medical Conditions

There are children in mainstream schools and special schools who may have particular medical conditions where the administering of first aid may require variation. Such children should be subject to an individual healthcare plan and may require special procedures in the event of an accident.

Contaminated Injuries

Additional, specific advice on dealing with contaminated injuries is available on the HSE website.

9. Provision away from the school

Provision of first aid away from the school site is part of the arrangements under visits and journeys. The level of first aid provision is an integral part of the risk assessment process.

The provision of first aid will reflect whether the visit or journey is deemed to be low, medium or high risk.

Factors which will determine the level of risk will include:

- means of transport
- whether the visit is to a remote location or an establishment with first aid provision
- nature of any activities the students might be involved in

estimated time for emergency services to arrive.

A risk assessment is by its very nature, a response to several variables, and as such it is impossible to provide a table that details the level of first aid provision to a specific visit or journey. Some examples are:

Low risk - walking a class from the school to a nearby building.

In such a case carrying first aid provisions would not appear to be necessary. The important factor would be the need to summon assistance in the event of any accident (e.g., road traffic collision). A mobile phone would be an appropriate risk management control.

Medium Risk - sports activity after hours

In this case the risk of personal injury is increased and therefore it would be expected that first aid provisions would be available, and the member of staff would have a knowledge of first aid, such as the Emergency First Aider at Work certificate.

High Risk - an adventurous activity where the group leader is a member of the school staff

In order to undertake this activity, the group leader would normally hold a nationally recognised qualification, which requires the possession of a first aid qualification enabling them to administer first aid.

They should carry an appropriate first aid kit throughout the activity.

The attainment of the Rescue and Emergency Care first aid qualification may be appropriate for staff who organise or accompany educational visits on a regular basis. In any case where a school is uncertain of the level of first aid provision, they should seek advice from your local Educational Visits Coordinator.

APPFNDIX 1

a)

b)

c)

a)

b)

c)

Intolerable Risk (3)

FIRST AID RISK ASSESSMENT FORM

Site/location: North East Futures UTC Date: 25/10/23 SUS Assessor's signature: Assessors name: Sarah Hughes This form is to assist Principals in determining the number of appointed persons/first aiders required by The Health and Safety (First Aid) Regulations 1981 and the Approved Code of Practice. The form allocates weightings to possible replies to the questions. These weightings are shown in brackets. Complete Parts 1-13 of the Assessment by writing the weighting for the reply in the appropriate box. Unless otherwise stated, choose only one reply for each question. Calculate the overall total for Parts 1-13 using the space provided on page 6 of the form. Once you have calculated your overall total refer to the table on page 7 to determine your first aid requirement. Consider whether it is necessary to have an additional provision of paediatric first aiders PART 1 What types of injury have been recorded in the past? Injury (Choose one reply only) Minor cuts and bruises; eye irritation. (1) Lacerations; burns; concussion; serious sprains; minor fractures. (2) Amputations; poisonings; major fractures; multiple injuries; fatalities. (3) PART 2 What are the risks of injury arising from the work as identified in your risk assessments? Category of Risk (Choose one reply only) Trivial/Tolerable Risk (1) Moderate/Substantial Risk (2)

PART 3

No (1)

b)

Doe	s your workplace contain any of the specific hazards listed below	?	
	(Ch	oose appropriate reply/replies)	
a)	Hazardous substances (3)	X	
b)	Dangerous tools (3)	×	
c)	Dangerous machinery (3)		
d)	Dangerous loads/animals (3)		
	Total for Part 3	6	
PAR	<u>T 4</u>		
Are	there parts of your establishment where different levels of risk c	an be identified?	
	Yes (2) No (1)	(Choose one reply only)	
PAR	<u>xT 5</u>		
Тур	e of Work Undertaken	(Choose one reply only)	
a)	Offices, libraries etc. (1)	x	
b)	Light engineering, warehousing etc. (2)		
c)	Construction, work with dangerous machinery, sharp (3) instrumetc.	nents,	
Are	there hazards for which additional first aid skills are necessary?		
a)	Yes (2)	X	
b)	No (1)		
PART 6			
Are	there inexperienced workers on site or employees with disabilitie		
a)	Yes (2)	X	

PART 7	
Are there several buildings on site or multi-floor buildings?	(Choose one reply only)
a) Yes (2)	x
b) No (1)	
5, 110 (1)	
PART 8	
Is there shift work or out-of-hours working?	(Choose one reply only)
a) Yes (2)	x
b) No (1)	
PART 9	
Is the workplace remote from emergency medical services? a) Yes (2)	(Choose one reply only)
	X
b) No (1)	
PART 10	
Do you have employees at work sites occupied by other employees?	(Choose one reply only)
	x
a) Yes (2)	
b) No (1)	
PART 11	
Do you have any work experience trainees?	(Choose one reply only)
	×
a) Yes (2)	
b) No (1)	
PART 12	
	(Ch
Do members of the public visit your premises?	(Choose one reply only)
a) Yes (2)	×
b) No (1)	

PART 13

Do you have employees with reading or language difficulties?

(Choose one reply only)

- a) Yes (2)
- b) No (1)



PART 14

Do you have students with disabilities or special health care needs?

(Choose one reply only)

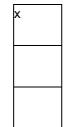
- a) Yes (2)
- b) No (1)



<u>PART 15</u>

What is the age range of your students?

- a) 11-18 (3)
- b) 11-16 (2)
- c) 3-11 (1)



<u>PART 16</u>

What is the net capacity of the school?

- a) Under 100 places (1)
- b) 101 210 places (2)
- c) 211 420 places (3)
- d) 421 500+ places (4)

TABLE A

Now that you have completed the risk assessment, enter the totals for each part in the boxes below and calculate the overall total.

Part 1	2
Part 2	1
Part 3	6
Part 4	2
Part 5	2
Part 6	2
Part 7	2
Part 8	2
Part 9	1
Part 10	1
Part 11	2
Part 12	2
Part 13	2
Part 14	2
Part 15	3
Part 16	4
Overall total	36

Having obtained the overall total refer to Table B to determine the recommended level of first aid personnel.

TABLE B Recommended First Aid Personnel

LOW RISK			
	Overall Total 16 to 33		
A	Fewer than 50 employees and up to 210 student places:		
	one appointed person.one emergency first aider.		
	OR		
В	Fewer than 50 employees and more than 210 student places:		
	• one appointed person.		
	one qualified first aider at work.		
Where no member of staff will volunteer for the first aid at work qualification, then the school should substitute with employees who have been trained in emergency first aid.			
MEDIUM TO HIGH RISK			
Overall Total 34 to 51			
A	 one appointed person two qualified first aiders at work 		
Where the net capacity of the school is above 1000 places then an additional qualified first aider at work.			
В	consideration should be given to having additional emergency first aider at work		

The above table is a recommended minimum level of provision.

The UTC must give additional consideration to the following factors when determining the level of provision:

- a) the arrangements when a qualified first aider is not on site due to absence/training.
- b) the design/layout of the site/premises is such that staff who are trained in emergency first aid should be available.

APPENDIX 2

First aider training log

Member of staff	Type of qualification	Exp Date/ Requal by
Andrew Noakes	Full first aid at work	Jun-26
Charlotte Murray	Emergency FA	Oct-24
Jen Lorimer	Emergency FA	Apr-25
Mark Woods	Full first aid at work	Jun-25
Rebecca Oates	Emergency FA	Apr-25
Sarah Galvayne	Emergency FA	Oct-24
Sarah Hughes	Emergency FA	Oct-24