



# DEVONPORT HIGH SCHOOL FOR GIRLS

## First Aid Policy

Named person: Alan Thomas

Category: School

Review: Bi-annually

Date to be reviewed: Spring 2028

**This policy has been reviewed with regard to the work /  
life balance of staff.**

Ratified and Adopted by the Head Teacher on behalf of the Board  
of Trustees : 30/03/2026

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## 1. Policy Statement

Devonport High School for Girls is committed to providing effective first aid provision to ensure the health, safety and welfare of pupils, staff and visitors. The school provides adequate equipment, facilities and trained personnel to enable first aid to be administered promptly and effectively. This policy reflects duties under the Health and Safety (First-Aid) Regulations 1981 and the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR). Guidance from the Health and Safety Executive (HSE) and the Department for Education is followed when determining first aid arrangements.

## 2. Aims

- Ensure the health and safety of pupils, staff and visitors
- Ensure adequate first aid provision across the school
- Provide clear procedures for responding to illness or injury
- Ensure staff understand their responsibilities
- Maintain accurate accident records
- Promote a safe school environment

## 3. Roles and Responsibilities

As an academy, health and safety legislation places duties on the board of trustees and members at Devonport High School for Girls for the health and safety of their employees and anyone else on the premises.

The Headteacher has overall responsibility for implementation of this policy.

The First Aid Appointed Person at this time is appointed to the Deputy Office Manager. As suggested by guidance from the Department for Education the role of the appointed person is to:

- **Take charge of arrangements:** Coordinating first aid provision, including calling emergency services and managing accidents.
- **Manage Equipment:** Ensuring first aid kits are fully stocked, in date and that equipment is in good condition.
- **No Mandatory Training:** They do not need formal training, though it is considered “good practice” to have some training.
- **Emergency Cover:** They can take charge when someone is ill or injured but should only perform first aid if they have been trained to do so.

The Lead First Aiders at this time are appointed to members of support staff that hold a First Aid at Work (FAW) 3-Day training qualification. The key duties include:

- **Coordinate Response:** Acting as the main point of contact for staff, students and parents during medical emergencies.
- **Administer First Aid:** Providing high-level, trained care to injured or sick persons on site.

- **Record Keeping:** Maintaining records of all medical and first aid incidents, treatment given and acknowledging individual health care plans.

It is the responsibility of the personnel manager to arrange first aid training for staff. First aiders provide treatment, assess incidents and maintain records.

All staff must take reasonable care of pupils and know how to summon a first aider in an emergency.

#### **4. First Aiders**

The school has a number of staff who have received First Aid Training approved by the HSE. All certificates are valid for 3 years. There is a rolling programme in place at the school organised by the personnel manager to ensure that there is always an adequate supply of First Aiders for trips, PE activities, and on the school site.

All trained staff do so voluntarily and the decision to select the person considers the following:

- 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
- Availability to respond to an emergency immediately

First aiders will be expected to:

- Give immediate help to casualties with common injuries or illnesses and those arising from specific hazards at the school or college or on educational visits
- When appropriate, ensure that an ambulance or other professional medical help is called

Some staff also receive annual Diabetes Training and training in Supporting Pupils at School with Medical Conditions this includes treatment for Anaphylaxis, Asthma and Administration of medications. Staff are informed that they must not give prescription medicines or undertake health care procedures without appropriate training in addition to first aid training.

The annual Staff Handbook, which staff are instructed to read, includes a list of current First Aid and other trained staff and information on procedures for dealing with illness, accidents, administration of medicines, chronic illness, asthma attacks and epilepsy.

## **5. First Aid Provision**

The school ensures that sufficient trained first aiders are available based on the school's risk assessment, size, layout and activities. Provision is available during school hours, sporting activities, trips and extra-curricular activities.

During off site activities, the school provides adequate and appropriate equipment, facilities and personnel based on a first aid needs assessment.

When planning lessons and events, staff in charge of students are expected to ensure the safety of the students under their charge. All staff will familiarise themselves with the specific risk assessments when carrying out any activity with students.

## **6. First Aid Equipment and Facilities**

**First Aid Kits** First aid equipment is available in first aid kits located in selected areas around the school site and in travelling first aid kits. All first aid kits contain the minimum provision of items, as recommended by HSE. Medication should not be kept in a first aid container.

All first aid equipment is ordered, stocked and restocked by the appointed person twice a year, ensuring all items are in date and safe to use.

Any persons using items from first aid kits must organise their replacement by informing the appointed person by emailing [firstaid@dhsg.co.uk](mailto:firstaid@dhsg.co.uk) with details of which items are required.

### **Automated External Defibrillator (AED) – Storage and Use**

An AED is designed for use by all members of the public and those with associated training.

The school has 3 AEDs in the following locations:

- Main Office
- Maths Block
- Nurture Base (This is carried by selected staff members during the day around the school to comply with the medical need of a student. It is stored in the Nurture Base outside of school hours.)

### **Emergency Salbutamol Inhalers**

From 1st October 2014 the Human Medicines (Amendment) (No. 2) Regulations 2014 allows schools to obtain, without a prescription, salbutamol inhalers for use in emergencies. This will be for any person with Asthma, or who has been prescribed an inhaler as reliever medication. The inhaler can be used if the person's prescribed inhaler is not available (for example, because it is broken, or empty).

The school hold 2 Emergency Salbutamol Inhaler Kits in the following locations:

- Main Office
- Sixth Form Centre

They are clearly labelled and easily accessible at all times. The kits include a Salbutamol inhaler, reusable spacers and an asthma attack pocket guide.

Consent forms for use of emergency inhaler in school will be given to parents / carers of students who have declared a diagnosis of asthma. **(See Appendix 3)**

Use of emergency inhaler should be recorded. This should include where and when the attack took place, how much medication was given, and by whom.

The student's parents/carers must be informed in writing so that this information can also be passed on to the student's GP. The specimen letter may be used to formally notify parents/carers. **(See Appendix 4).**

### **Wheelchairs**

The school has two wheelchairs available for use during a medical incident where first aid requires a wheelchair. Wheelchairs must be regularly checked, serviced and maintained by a competent person.

Only trained or competent staff should operate a wheelchair.

### **Accommodation**

The school provides a suitable area adjoining the main office which is reserved exclusively for the provision of first aid. The area can be made private for medical examination and treatment of pupils and for the short-term care of sick or injured pupils. It includes a washbasin and is near to a toilet. It is not used exclusively for medical purposes but is appropriate for that purpose and is readily available for use when needed.

## **7. First Aid Procedure**

### **Minor Injuries / Illness**

- The injured or ill person will be treated by a qualified first aider accordingly who must follow basic hygiene procedures.
- It may be necessary for a first aider or office staff to contact the parent or emergency contact to collect them if they are too unwell to continue at school. Students in the lower years, 7-11 are not permitted to leave school site without being accompanied by an adult.
- Staff will add to the incident log, the names of all persons who report injuries or illness with brief details including action taken.

### **Serious Injuries**

- A first aider must be contacted immediately to assess the injury.
- If the injury cannot be treated at the school, arrangements will be made to transport the person to hospital and inform their parent/emergency contact immediately to advise seeking further medical attention.
- 
- Emergency services will be called if necessary. In this situation, a member of SLT is informed.
- The injured person will be supervised at all times.

### **Head Injury and Concussion Guidelines**

If a person has a head injury on school site or during the school day, they should be assessed by a First Aider who should apply an ice pack, whether any injury is apparent or not. If the person then appears well enough, they can continue their school or work day with advice to inform a first aider if they experience symptoms of concussion i.e., headache, nausea, dizziness, drowsiness, changes in vision or mood. **Staff must contact parents/carers of students to inform them of the incident.**

**If the person is experiencing symptoms of concussion, advise their parents/emergency contact to collect them and to seek further medical advice. Closely monitor them until they are collected.**

The government and the Sport and Recreation Alliance has published the first UK-wide Concussion Guidelines for Grassroots Sport which will help players, coaches, parents, schools, national governing bodies and sports administrators to identify, manage and prevent the issue.

Participants in grassroots sports will be better protected from the potentially devastating effects of head injuries and concussion thanks to new official guidelines advising: ***'if in doubt, sit them out'***.

[The UK Concussion Guidelines for Non-Elite \(Grassroots\) Sport can be viewed here.](#)

Players, parents, coaches, teachers and administrators are now asked to read the guidance and familiarise themselves with the necessary steps to:

- **RECOGNISE** the signs of concussion;
- **REMOVE** anyone suspected of being concussed immediately and;
- **RETURN** safely to daily activity, education/work and, ultimately, sport.

If in any doubt about which course to take, refer to SLT.

## **8. Recording and Reporting**

The school keeps a record of all incidents involving staff, pupils, students and visitors which require first aid staff to be in attendance. **(See Appendix 4)**

The record should include:

- date, time and place of incident
- name of injured or ill person
- details of the injury or illness
- details of what first aid was given
- what happened immediately after the incident
- name and signature of first aider or person dealing with the incident

Accidents, incidents and hazards are reported digitally via the Plymouth City Council SHE Assure Portal. The portal can be accessed by staff members through a tile on the RM Unify Launch Pad or alternatively by scanning the QR code with a mobile device **(See Appendix 1)**.

The QR code is available in selected locations around the school as well as inside all traveling first aid kits. The report must be submitted within 4 days of the incident by the attending first aider or member of staff responsible for the student at the time of the incident and must include details of:

- what happened
- circumstances of the event
- incident outcomes
- immediate actions taken

If the accident/incident takes place during an out-of-school activity, it is important that a full report is recorded via the same process and the school informed as soon as possible.

Once an incident report has been submitted to the Portal, the Licenced User (namely the Headteacher and Deputy Office Manager) and Local Authority are automatically, digitally notified. It is the responsibility of the Licenced User to access the system, review, correct, update and complete the information submitted, and then to investigate and action the incident in a timely manner.

### **Fatal and major injuries, and dangerous occurrences - RIDDOR**

If someone has died or has been injured because of a work-related accident, this may have to be reported to the Health and Safety Executive - this is known as RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) There is a legal timeline of 10 days from the incident to report this. Our Health and Safety providers at Plymouth City Council decide whether an incident is RIDDOR-reportable. This is why it is important that incidents are reported as soon as possible.

## **9. Managing Medicines in School**

### **When should medicines be administered:**

Medicines should only be administered at school when it would be detrimental to a student's health or school attendance not to do so. Students can be administered prescription, non-prescription and emergency medicine in school if agreed or requested by a parent and only with written consent.

Some pupils may need to have access to life saving prescription drugs in an emergency which they are permitted to carry on their person during the school day, (for example, an inhaler for asthma, adrenaline for intramuscular use in anaphylaxis, and emergency equipment for diabetics ) the details will be recorded in the pupil's individual healthcare plan.

### **Who can administer medicines:**

The responsibility to administer prescription medications should only be given by those trained to do so. Annual training for supporting pupils at school with medical conditions is encouraged for all staff. A list of trained staff members is available in the staff handbook and training is renewed annually.

Any member of school staff may be asked to provide support to pupils with administering of medicines, but they cannot be required to do so.

### **Storage and Administration of Medicines in School**

All medicines brought to school to be used by students must be accompanied by written parental consent for the medication to be administered to them. Parents/Carers must complete a DHVT8 Individual Medical Record form detailing the medication, dosage, and administration (**See Appendix 5**). This should be delivered in person by the parent/carer or student, together with the medication to the school office to be recorded and stored securely.

The medicine should be in its original container, should be clearly labelled with:

- its contents
- dosage
- expiry date

**Schools should never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.**

Students can request to take their medication as needed or as necessary during the school day. This will then be administered to the student by a member of staff who will record this in their individual medical record.

### **Before administering medication, the member of staff should check:**

- the child's identity
- that there is written consent from a parent/carer
- that the medication details and dose instructions match the details on the consent form

- that the name on the medication label is that of the child being given the medication
- that the medication to be given is in date
- that the child has not already been given the medication

Medication should be returned to the parent/carer for safe disposal when:

- the course of treatment is complete
- labels become detached or unreadable
- instructions are changed
- the expiry date has been reached
- at the end of each academic year

Individual Medical Records are kept on school site and stored with the students' files once complete.

**Prime responsibility for a students' health rests with the parents/carers, who should write to the Head Teacher giving sufficient information on their child's medical needs, requesting that medication be administered to him or her.**

**When organising educational visits additional precautions must be taken, e.g. ensure staff are present who are able to administer medication and/or inclusion of the student's parent. Advice should be sought from the student's health practitioner or schools' health service.**

### **Out of School Activities**

When travelling outside of the UK, parents/carers may need to seek advice from the child's GP or pharmacist on the timings of medication, especially those such as medication for epilepsy. Information on the carriage of medication including (including Controlled Drugs) can be obtained from the Home Office and the Embassy of the country to be visited.

It is essential to inform all members of staff who may have responsibility for a student during the day about the need for medication and what to do should a medical emergency arise. The accessibility of medication, particularly for use in an emergency, may need to be reviewed if the staff running the activity differ from the staff responsible for the supervision or administration of medication during normal school hours.

### **Refusing Medicines**

If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents/carers should be informed. If a refusal to take medicines results in an emergency, the school emergency procedures will be followed.

### **Disposal of medicines and equipment**

Sharps boxes are used for the disposal of needles and other sharps and collection is arranged by the Appointed Person.

Current waste disposal regulations make the practice of disposing medication into the sewage system or refuse illegal.

Medication stored in school should be returned to the parent/carer for safe disposal when:

- the course of treatment is complete
- labels become detached or unreadable
- instructions are changed
- the expiry date has been reached
- at the end of each academic year

## **10. Mental Health**

Caring for staff and childrens' well-being is our top priority at Devonport High School for Girls. We are committed to fostering a positive environment that supports the mental health of all pupils, students, and staff.

### **How we support the well-being of our staff and students:**

- Senior Mental Health Lead: namely the Designated Safeguarding Lead, ensures effective use of resources and continuous improvement in our approach to mental health.
- Identifying Concerns: we understand and support behaviour that might indicate and underlying mental health issue.
- Mental Health First Aid: trained personnel are equipped to recognise and offer initial support for those experiencing difficulties. Remember, diagnosis remains with professionals.
- Workplace Wellbeing: Staff are supported through staff training, occupational health support, mental health first aiders, and dedicated external support programmes.
- Training Opportunities: Staff are provided with mental health awareness using HAYS online training tool to enhance skills and confidence in supporting others.
- External Resources: We collaborate with organisations like HSE and Education Support to offer a broad range of resources and support.
- Specialised Services: For more serious concerns, pupils and their families can access specialist Child and Adolescent Mental Health Services (CAMHS) , voluntary organisations, such as Jeremiah's Journey, and local GP practices.



# SHE Assure e-system

Use the new Health and Safety e-system SHE Assure via staffroom or via your smartphone, this means incidents can be uploaded as soon as they happen with supporting photos.

The SHE Portal called AssureGO+ is for all staff and can be used recording accidents, incidents and near-misses.

This is replacing the existing paper based processes for all employees that have access to a personal or work computer or smartphone.



Human Resources and Organisational Development  
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## Appendix 3: Emergency Inhaler Consent Form



### Consent Form Use of Emergency Salbutamol Inhaler

Name of Student .....

D.O.B .....

Form .....

#### Child showing symptoms of Asthma / having an Asthma attack

1. I can confirm that my child has been diagnosed with asthma / has been prescribed an inhaler [delete as appropriate].
2. My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.
3. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive Salbutamol from an emergency inhaler held by the school for such emergencies.

Parent/Carer Name (print) .....

Parent/Carer Signature .....

Date.....

## Appendix 4: Specimen Letter – Use of Emergency Inhaler



### Specimen Letter Use of Emergency Salbutamol Inhaler

Name of Student .....

Form .....

Date.....

Dear Parent/Carer

This letter is to formally notify you that .....  
has had difficulty with their breathing today. This occurred when:

.....  
.....

- A member of staff helped them to use their asthma inhaler.
  
- They did not have their own asthma inhaler with them, so a member of staff helped them to use the emergency asthma inhaler containing Salbutamol. They were given ..... puffs.
  
- Their own asthma inhaler was not working, so a member of staff helped them to use the emergency asthma inhaler containing Salbutamol. They were given ..... puffs.

Although they soon recovered from the episode, we would strongly advise that your child is seen by their GP or medical practitioner as soon as possible.

Your sincerely,

**Appendix 5: DHVT8 – Individual Medical Record**  
**DHVT8 - Individual Medical Record**

Name of Student ..... D.O.B ..... Form .....

**Part 1 – Details of Over the Counter (OTC) Medications provided by the parent/carer**

<b>Medical Condition(s)</b>	
<b>Name and strength of OTC medications that you are providing as a parent/carer for your child (Please refer to paragraph below*)</b>	
<b>Dose and Frequency Required</b>	
<b>Quantity Received</b>	
<b>Parent/carer agreement with the school (Please tick agreed box)</b>	<input type="checkbox"/> Student will self-manage all medical needs without assistance <input type="checkbox"/> Student will self-manage but may need some assistance

**\*I confirm that the medication is in its original packaging and that the following details are clearly identified; expiry date, recommended dosage and any relevant advice about how to administer the medication.**

I give my permission for this medication to be used for future medical needs, if necessary.

Yes .. No ..

Parent/Carer Signature ..... Date.....

## Appendix 5: DHVT8 – Individual Medical Record

Name of Student .....

D.OB .....

Form .....

### Part 2 – Details of Medications Prescribed by a Medical Professional

<b>Medical Condition(s)</b>	
<b>Name of medications prescribed by a medical professional (Please refer to paragraph below*)</b>	
<b>Dose and Frequency Required</b>	
<b>Quantity Received</b>	
<b>Parent/carer agreement with the school (Please tick agreed box)</b>	<input type="checkbox"/> Student will self-manage all medical needs without assistance <input type="checkbox"/> Student will self-manage but may need some assistance <input type="checkbox"/> Student will need a trained medical administrator

**\*I confirm that the medication is in its original packaging and that the following details are clearly identified by the prescriber: my child’s name, the date the medication was prescribed, expiry date, prescribed dose and any relevant advice about how to administer the medication.**

Does your child have a long-term medical condition e.g. diabetes, asthma, heart condition etc?

Yes    ..                  No    ..

If you have answered yes to the question above, have you agreed a ‘Health Care Plan’ with the school and SENDCo?

Yes    ..                  No    ..

Parent/Carer Signature .....

Date.....



