



New Mills School

FIRST AID POLICY

Revision	Authorised by	Date	Adopted by	Date
Draft	C Jesson	November 2020	FGB Min No. 5	15/12/2020

Revision	Date	Description of Changes
Draft	November 2020	New issue based on model policy following statutory guidance.

Signed:F Wicks..... Date:15/12/2020.....

Chair of Governors

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1. Aims

The aims of this policy are to:

- Ensure the Health and Safety of all staff, pupils and visitors
- Ensure that staff and governors are aware of their responsibilities with regards to Health and Safety
- Provide a framework for responding to an incident and recording and reporting the outcomes

2. Legislation and Guidance

This policy is based on advice from the Department for Education on [First Aid in Schools](#) and [Health and Safety in Schools](#), and the following legislation:

- [The Health and Safety \(First Aid\) Regulations 1981](#), 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
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the Health and Safety of their employees
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), 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
- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident records
- [The School Premises \(England\) Regulations 2012](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils

3. Roles and Responsibilities

3.1. Appointed Person(s) and First Aiders

New Mills School has three appointed persons with differing roles.

The Student Support Manager is responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring that an ambulance or other professional medical help is summoned when appropriate
- Informing the Facilities Manager when an incident needs to be reported to HSE [refer to *Accident/Incident (including Physical & Verbal Assault) Reporting Procedures*]

The School Business Assistant is responsible for:

- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits on a termly basis

The Facilities Manager is responsible for:

- Reporting to the HSE when required [refer to *Accident/Incident (including Physical & Verbal Assault) Reporting Procedures*]

First aiders are trained and qualified to carry out the role (see section 10) and are responsible for:

- Acting as first responders to any incidents
- Assessing the situation where there is an injured or ill person
- Giving immediate and appropriate help to casualties with common injuries or illnesses and those arising from specific hazards at school
- When necessary, ensuring that an ambulance or other professional medical help is called
- Sending pupils home to recover, where necessary
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident [refer to *Accident/Incident (including Physical & Verbal Assault) Reporting Procedures*]
- Keeping their contact details up to date

New Mills School's first aiders are listed in [appendix 1](#). Their names are also displayed around the school.

3.2. The Local Authority and Governing Body

Derbyshire County Council has ultimate responsibility for Health and Safety matters in the School, but delegates responsibility for the strategic management of such matters to the School's Governing Body.

The Governing Body has ultimate responsibility for Health and Safety matters in the School, but delegates operational matters and day-to-day tasks to the Headteacher and staff members.

3.3. The Headteacher

The Headteacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of appointed persons and trained first aid personnel are always present in the school
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role
- Ensuring all staff are aware of first aid procedures
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of pupils
- Reporting specified incidents to the HSE when necessary [*refer to Accident/Incident (including Physical & Verbal Assault) Reporting Procedures*]

3.4. Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders in School are via referring to lists/posters
- Completing accident reports [*refer to Accident/Incident (including Physical & Verbal Assault) Reporting Procedures*] for all incidents they attend to where a first aider is not called and updating SIMS accordingly
- Informing the Headteacher or their manager of any specific health conditions or first aid needs

4. Risk Assessment

New Mills School reviews the risk assessment in relation to first aid annually, alongside the review of this policy. Changes in staffing, students, premises, and the curriculum are considered in this. The risk assessment results in decisions on:

- The number of appointed people needed
- The number of first aiders needed
- The number and locations of first-aid containers
- Arrangements for off-site activities/trips
- Out of school hours arrangements e.g. lettings, parents' evenings, clubs
- Adequate provision for leave and in case of absences

New Mills School is generally a low risk environment; however, consideration is given to adequate first aid cover in higher risk areas such as PE, science, technology, art and drama

5. Liability and Indemnity

The Governing Body will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

Staff who undertake responsibilities within this policy are covered by the School's public liability insurance which is arranged through Derbyshire County Council and provides up to £50m for each and every incident, unlimited in the aggregate and covers visitors, students and members of the public for injury or loss caused by the School's negligence.

6. First Aid Procedures

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 pupils are always expected to use their best endeavours, particularly in emergencies, to secure the welfare of the pupils 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.

6.1 In-School Procedures

a. In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate
 - If assistance from a first aider is required, this will be obtained by either clicking the appropriate first aid button in class charts, or by radioing "first aider needed in...."
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives
- If emergency services are called for a student (see appendix 3), the Student Support Manager or relevant Year Manager will contact parents immediately.
- If emergency services are called for an adult (see appendix 3), their emergency contacts will be informed immediately by the most appropriate member of staff. At an appropriate point during the care of the member of staff, SLT will be informed that the emergency services have been contacted.
- If emergency services are called for a student (see appendix 3), and a parent/carer is not available, a member of staff or parent/carer must accompany the person to hospital and remain there. At an appropriate point during the care of the student, SLT will be informed that the emergency services have been contacted.
- If further assistance is not required, the first aider will provide the required first aid treatment
- Before administering first aid, consideration should be given to potential allergies (for example with plasters). Reference can be made to the student as secondary school students should be considered competent and fully aware of their allergies.
 - In the event of a head injury, the first aider will ascertain:
 - how it happened
 - when it happened
 - where it happened
 - how the patient feels
 - Patients should be monitored in the first aid room for 20 minutes for signs of concussion. The student can return to lesson with a head injury note but told to return to the medical room if they feel faint/dizzy/sick. If the student is to be collected, the parent should be advised to seek medical advice if the condition deteriorates etc
- The first aider will decide whether the injured person should be moved or placed in a recovery position
- If the first aider judges that a student is too unwell to remain in school, parents will be contacted and asked to collect their child.
- Upon their arrival, the first aider will recommend next steps to the parents. Reference should be made by the first aider to the [Health Protection Agency \(HPA\) Guidance on Infection Control in Schools and other Childcare Settings](#) to advise on timescales for periods off school in case of illness (for example: nausea/vomiting/diarrhoea – 48 hours from last bout).
- The first aider will complete an accident report form on the same day, or as soon as is reasonably practical after an incident resulting in an injury

b. In the event of an asthma attack:

- **CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE WITHOUT DELAY IF THE PERSON**
 - **Appears exhausted**
 - **Has a blue/white tinge around lips**

- Is going blue
 - Has collapsed
- If emergency services are called for a student (see appendix 3), the Student Support Manager or relevant Year Manager will contact parents immediately.
- If emergency services are called for an adult (see appendix 3), their emergency contacts will be informed immediately by the most appropriate member of staff. At an appropriate point during the care of the member of staff, SLT will be informed that the emergency services have been contacted.
- If emergency services are called for a student (see appendix 3), and a parent/carer is not available, a member of staff or parent/carer must accompany the person to hospital and remain there. At an appropriate point during the care of the student, SLT will be informed that the emergency services have been contacted.
- The closest member of staff present will seek the assistance of a qualified first aider by either clicking the appropriate first aid button in class charts, or by radioing “first aider needed in....”
- The closest member of staff will:
 - Keep calm and reassure the person
 - Encourage the person to sit up and slightly forward
 - Ask the person to use their own inhaler
 - Stay with the person
 - If needed, obtain emergency asthma kit by calling S1 or radioing using channel 3 “asthma kit needed in...” or by sending a responsible person to S1
- The first aider (or closed member of staff who is trained to do so) will:
 - Keep calm and reassure the person
 - Encourage the person to sit up and slightly forward
 - Ask the person to use their own inhaler
 - Stay with the person
 - If needed, obtain emergency asthma kit by calling S1 or radioing using channel 3 “asthma kit needed in...” or by sending a responsible person to S1
 - If their own inhaler is not available, use the emergency inhaler
 - Immediately help the person to take two separate puffs of the salbutamol via the spacer

A student may be prescribed an inhaler for their asthma which contains an alternative reliever medication to salbutamol (such as terbutaline). The salbutamol inhaler should still be used by these students if their own inhaler is not accessible – it will still help to relieve their asthma and could save their life.

- If there is no immediate improvement, continue to give two puffs every two minutes up to a maximum of 10 puffs, or until their symptoms improve. Shake the inhaler between puffs
 - If worried at ANYTIME before reaching 10 puffs, CALL 999 FOR AN AMBULANCE
 - If an ambulance does not arrive within 10 minutes give another 10 puffs as described above
 - If there is improvement, stay with the person until they feel better, then return the person to school activities
- If the first aider judges that a student is too unwell to remain in school, parents will be contacted and asked to collect their child.
- Upon their arrival, the first aider will recommend next steps to the parents.
- The first aider will complete an accident report form on the same day, or as soon as is reasonably practical after an asthma attack

c. In the event of a mild allergic reaction

- The closest member of staff present will seek the assistance of a qualified first aider by either clicking the first aid button in class charts, or by radioing using channel 3 “first aider needed in....”
- The closest member of staff will:
 - Keep calm and reassure the person
 - Encourage the person to sit up and slightly forward
 - Stay with the person
 - Watch for signs of anaphylaxis

d. In the event of a severe allergic reaction:

- **CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE SEVERE ALLERGIC REACTION PROCEDURE WITHOUT DELAY IF THE PERSON SHOWS SIGNS OF ANAPHALAXIS**
- **ALWAYS use adrenaline autoinjector FIRST in someone with known food allergy who has SUDDEN BREATHING DIFFICULTY (persistent cough, hoarse voice, wheeze) – even if no skin symptoms are present**
- If emergency services are called for a student (see appendix 3), the Student Support Manager or relevant Year Manager will contact parents immediately.
- If emergency services are called for an adult (see appendix 3), their emergency contacts will be informed immediately by the most appropriate member of staff. At an appropriate point during the care of the member of staff, SLT will be informed that the emergency services have been contacted.
- If emergency services are called for a student (see appendix 3), and a parent/carer is not available, a member of staff or parent/carer must accompany the person to hospital and remain there. At an appropriate point during the care of the student, SLT will be informed that the emergency services have been contacted.
- The closest member of staff present will seek the assistance of a qualified first aider by either clicking the appropriate first aid button in class charts, or by radioing using channel 3 “first aider needed in....”
- The closest member of staff will:
 - Keep calm and reassure the person
 - Encourage the person to sit up and slightly forward
 - Stay with the person
 - Ask the person to use their own AAI
 - Obtain emergency AAI by calling S1 or radioing using channel 3 “auto-injector needed in...” or by sending a responsible person to S1
- The first aider (or closed member of staff who is trained to do so) will:
 - Keep calm and reassure the person
 - Encourage the person to sit up and slightly forward
 - Stay with the person
 - Lie the person flat with legs raised:(if breathing is difficult, allow person to sit)
 - Use AAI without delay *** IF IN DOUBT, GIVE AAI ***. If their own AAI is not available, use the emergency AAI
 - Stay with the person
 - Do NOT stand person up
 - Commence CPR if there are no signs of life
 - If no improvement after 5 minutes, give a further dose of adrenaline using another AAI device, if available.
 - Stay with the person until emergency services arrive
- When emergency services are called for a student (see appendix 3), and a parent/carer is not available, a member of staff must accompany the person to hospital, and remain there
- The first aider will complete an accident report form on the same day, or as soon as is reasonably practical after an allergic reaction

6.2 Off-Site Procedures

When taking pupils off the school premises, staff will ensure they always have the following:

- A school mobile phone
- A portable first aid kit including the asthma emergency kit and AAI if appropriate
- Information about the specific medical needs of pupils
- Parents' contact details

Risk assessments will be completed by the Group Leader prior to any educational visit that necessitates taking pupils off school premises. A qualified first aider may not always be needed on an off-site visit, but this should be determined by the initial risk assessment and pre-visit planning in line with the Off-Site Visits Policy. However, there must always be an 'appointed' supervising adult who will take charge of a situation and organise assistance in the event of a first aid incident.

7. First Aid Equipment

7.1 First Aid Kits

First aid kits are clearly labelled with a green background and a white cross. A typical first aid kit in our school will include the following:

- A leaflet with general first aid advice
- Regular and large bandages
- 2 Sterile eye pad bandages
- 4 individually wrapped triangular bandages
- Adhesive tape
- 6 safety pins
- Disposable gloves
- Antiseptic wipes
- 20 individually wrapped plasters of assorted sizes
- Scissors (rounded blades)
- 6 medium individually wrapped sterile unmedicated wound dressings
- 2 large individually wrapped sterile unmedicated wound dressings
- Cold compresses
- Eye irrigation tube

No medication is to be kept in the first aid kits.

In addition to first aid kits, the school holds emergency asthma kits and emergency AAI's in S1.

Contents of the first aid kits are checked and re-stocked termly by the School Business Assistant. The check is logged and documented. In addition, members of staff can request additional supplies as required from the School Business Assistant.

First aid kits are located in the following areas:

- Student Support - S1
- Student Support - S3
- Student Support - S5
- Main Block – Staff Quiet Room
- Main Block – Library
- Science Block – Main Prep Room (ground floor)
- Science Block – P Lab/C Lab Science Office (first floor)
- Middle School – Art 1
- Terrapin – Premises Team Office
- Technology – Workshop 1
- Technology – Workshop 2
- Technology (Wagstaff) – Food 1
- Swinburn – Maths Office
- Gym
- Construction Centre

Travel first aid kits, provided for off-site visits where no additional risk has been identified, typically contain:

- A leaflet with general first aid advice
- 2 individually wrapped triangular bandages
- 2 safety pins
- Disposable gloves
- Antiseptic wipes
- 6 individually wrapped plasters of assorted sizes
- Sanitary protection
- Sick bags
- Emergency asthma kit

Group Leaders must collect a kit from the Finance Office on the day of departure and return it to the Finance Office upon the trip's return.

7.2 Defibrillator

The emergency defibrillator is located behind the counter in the Coffee Bar near to the Hall and next to a phone. This can be used in an emergency by following the verbal instructions and visual prompts on the defibrillator. The defibrillator is checked and maintained by the Facilities Manager on a termly basis.

7.3 Wheelchair

The School has a transit wheelchair which is stored in S1 and can be used when it is necessary to move a patient from one location to another, providing it is safe to do so. The wheelchair is checked over for safety on a termly basis by a member of the Premises Team and a log kept of the check.

7.4 Eye Irrigation

The Science Department has specific eye irrigation stations in each lab in case of eye contact with chemicals.

8. First Aid Facilities

Every school must have a suitable room that can be used when required for the assessment of students who are injured or who report they are unwell during school hours. The area must contain a washbasin and be reasonably near to a WC. At New Mills School the room used for this purpose is opposite S1 in the Student Support Block. The disabled WC room located off the Hall Atrium can also be used as reserve medical room if needed.

9. Record-Keeping and Reporting

9.1 Accident Recording

An accident form [*refer to Accident/Incident (including Physical & Verbal Assault) Reporting Procedures*] will be completed by the first aider on the same day or as soon as possible after an incident resulting in an injury in as much detail as possible. This includes:

- the date, time and place of incident
- the name and class of the injured or ill person
- details of the injury/illness and what first aid was given
- what happened to the person immediately afterwards (for example went home, resumed normal duties, went back to class, went to hospital)
- name and signature of the first aider or person dealing with the incident
- to whom the incident has been reported

A blank copy of the Accident Report Form is held in the staff shared drive in the Forms folder.

A copy of the Accident Report Form is given to the Facilities Manager to investigate and report to the HSE as necessary. The completed form will then be added to the pupil's educational record on SIMS by the Facilities Manager.

Paper records held in the first aid and accident book will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979, and then securely disposed of.

All first aid incidents are recorded on SIMS as a Medical Event.

9.2 Reporting to the HSE

The nominated member of staff at New Mills School is the Facilities Manager.

The nominated member of staff co-ordinates the accident reporting system and is responsible for ensuring that the correct incident report form is used and is properly completed and that the various categories of

accident below are reported in line with this guidance. The nominated responsible person must be fully aware of the *Accident/Incident (including Physical & Verbal Assault) Reporting Procedures* and have received training where necessary.

The nominated member of staff keeps a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7). [refer to the [*Accident/Incident \(including Physical & Verbal Assault\) Reporting Procedures*](#) in the Policies folder for information]

9.3 Notifying Parents

Students do not contact their parents directly in the event of them feeling unwell or if they are injured. The first aider, relevant Year Manager or Student Support Manager will inform parents/carers of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

The following events must be notified to parents/carers:

- Contagious rash
- A sting or bite from an animal or insect
- An injury to the head
- A non-accidental injury

There is no need to inform parents for:

- Minor cuts and grazes
- A headache that goes away

Students are expected to take responsibility for their own health. They are also expected to be resilient and responsibly assess their need for adult assistance in terms of first aid. Students are then expected, if possible, to inform an adult if they need first aid assistance. Where the school does not contact parents (see above), the student is expected to inform their parent/carer of any minor injury/illness that has occurred during the school day.

10. Training

All school staff can undertake first aid training if they would like to.

All first aiders must have completed a training course and must hold a valid certificate of competence to show this. The school keeps a register in the Finance Office of all trained first aiders, what training they have received and when this is valid until (see [appendix 1](#)). From time-to-time, the School will arrange group first aid training on an INSET day which will cover a maximum of 12 delegates. Alternatively, training can be arranged through DCC if off-site training is required

Staff are encouraged to renew their first aid training when it is no longer valid.

11. Monitoring Arrangements

This policy will be reviewed annually. At every review, the policy will be approved by the Headteacher and the RM governors committee.

A report from SIMS for Medical Events is run regularly by the Facilities Manager to review and analyse incidents in order to spot trends, identify training needs and areas for improvement.

12. Links with Other Policies

This first aid policy is linked to the:

- Health and Safety policy
- Supporting Pupils with Medical Conditions
- Accident/Incident (including Physical & Verbal Assault) Reporting Procedures

Appendix 1: List of First Aiders at 06/11/20

FIRST AIDERS					
FAW = First Aid at Work (3 day course) EFAW = Emergency First Aid at Work (1 day course) MHFA = Mental Health First Aider (2 day course)					
Maxine Johnston	135	Year Manager - Y7 & Y8		Youth MHFA	
Emma James	203	Year Manager - Y9	EFAW	MHFA	Exp Sep 2022
Marc Bailey	293	Year Manager - Y10 & Y11	EFAW		Exp Nov 2022
Jackie Donnelly	113	Student Support Manager	EFAW		Exp Feb 2021
Caroline Jesson		Co-Head of School	EFAW		Exp Nov 2020
Shirley Hughes		Food Technician	EFAW		Exp Feb 2021
Tracey Perkins		HLTA – The Bridge	EFAW	Youth MHFA	Exp Feb 2021
John Worsley		Teacher – PE	EFAW		Exp Feb 2021
Mike Taylor		Teacher – PE	EFAW		Exp Feb 2021
Cheryl Nield		Teacher – PE	EFAW		Exp Feb 2021
Anna Shaw		Site Supervisor	EFAW		Exp Feb 2021
Craig Pickering		Groundsman	EFAW		Exp Feb 2021
Rachael Quinn		Teacher - History	EFAW		Exp Feb 2021
Rachel Brindley		Teacher – Geography	EFAW		Exp Feb 2021
Jo Gutteridge		Librarian	EFAW		Exp Feb 2021
Garry Cash	124	School Business Manager		Adult MHFA	
FIRST AID BOXES ARE LOCATED IN:					
<ul style="list-style-type: none"> ▪ Student Support - S1 ▪ Student Support - S3 ▪ Student Support - S5 ▪ Main Block – Staff Quiet Room ▪ Main Block – Library ▪ Science Block – Main Prep Room (ground floor) ▪ Science Block – P Lab/C Lab Science Office (first floor) ▪ Middle School – Art 1 ▪ Terrapin – Premises Team Office ▪ Technology – Workshop 1 ▪ Technology – Workshop 2 ▪ Technology (Wagstaff) – Food 1 ▪ Swinburn – Maths Office ▪ Gym ▪ Construction Centre 					

Appendix 2: First Aid Risk Assessment Template

School Appointed Person for First Aid		
Date		
Assessors		
How many first aiders does the school have currently, and what is their level of training?		
How many staff work on site between 8.00am and 5.30pm (approximately)?		
How many staff work on site outside work hours (incl. weekends)?		
Are there any staff with medical conditions or disabilities? If so, what are these conditions/disabilities?		
Is lone working carried out in school?		
Does the school have (or plan to have over the next year) any work experience trainees, volunteers, or honorary staff?		
How many students work on site between 8.00am and 5.30pm (approximately)?		
How many students work on site outside work hours (incl. weekends)?		
Are there any students with medical conditions or disabilities? If so, what are these conditions/disabilities?		
Is the school spread out e.g. Are there several buildings on the site or multi-floor buildings?		
What is the distance and travel time to nearest major hospital?		
What is the maximum distance an incident could be to the location of existing first aid kits?		
What are the most common injuries, times, locations, and activities in school according to past accident statistics?		
Has there been any major incidents over the last year? If so, what were they?		
What are the specific hazards on site? <i>(for example, slips & trips, work at height, plant or machinery, moving objects, electricity, radiation, chemicals, dust, manual handling)</i>	Hazard:	Location:
Are there hazards for which an extra first aid kit or specialised treatment is required? <i>(for example, chemicals, potential for burn, eye injuries, field trips)</i>	Details:	

Recommendations

Contents of a school first aid kit	
Number and location of first aid kits	
Number and names of first aider at work	
Number and names of emergency first aider	
Number and names of first aid names person(s)	
Additional recommendations	

Action list

Items for Action	Completion Date	Date Signed Off	Initials

Guidance on the first aid risk assessment

- For low risk areas such as offices the minimum requirement is for a first aid appointed person and a suitably stocked first aid box. For higher risk activities the recommended numbers of first aiders will need to be increased.
- For larger numbers of employees, consideration needs to be given to providing a suitable number of EFAW or FAW trained first aiders and suitably placed first aid boxes

Number of staff	Recommended minimum provision
<25	first aid appointed person
25 – 50	first aider (EFAW)
>50	a first aider (FAW), plus one more for every 100 employed

Appendix 3: Emergency Services

To request an ambulance - dial 999, ask for an ambulance and be ready with the information below.

Speak clearly and slowly and be ready to repeat information if asked.

- Your telephone number – 01663 743284
- Your name
- Your location
 - New Mills School
 - Church Lane
 - New Mills
 - High Peak
 - SK22 4NR
- The exact location of the patient within the school.
- The name of the child and a brief description of their symptoms.
- The best entrance to use and state that the crew will be met and taken to the patient.

Appendix 4: Asthma Signs and Symptoms

Common 'day to day' symptoms of asthma are:

- Cough and wheeze (a 'whistle' heard on breathing out) when exercising
- Shortness of breath when exercising
- Intermittent cough

These symptoms are usually responsive to use of a person's own inhaler and rest (e.g. stopping exercise). They would not usually require the person to be sent home from school, or to need urgent medical attention.

Signs of an asthma attack include:

- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)
- Being unusually quiet
- The student complains of shortness of breath at rest, feeling tight in the chest (younger children may express this feeling as a tummy ache)
- Difficulty in breathing (fast and deep respiration)
- Nasal flaring
- Being unable to complete sentences
- Appearing exhausted
- A blue / white tinge around the lips
- Going blue

Appendix 5: Allergic Reaction and Anaphylaxis Signs and Symptoms

Mild-moderate allergic reaction:

- Swollen lips, face or eyes
- Itchy/tingling mouth
- Hives or itchy skin rash
- Abdominal pain or vomiting
- Sudden change in behaviour

Anaphylaxis

- Airway: Persistent cough Hoarse voice Difficulty swallowing, swollen tongue
- Breathing: Difficult or noisy breathing Wheeze or persistent cough
- Consciousness: Persistent dizziness Becoming pale or floppy Suddenly sleepy, collapse, unconscious
- IF ANY ONE (or more) of these signs are present, treat as anaphylaxis
- Anaphylaxis may occur without initial mild signs