First Aid Policy

Amwell View School and Specialist Sports College

Last Reviewed Date:	28/07/2025	Dated:	29/04/2026

School Business Manager:		**Date:**	29/04/2026
Headteacher:		**Date:**	30/04/2026

Date of Next Review:	April 2027

This school policy has been written using the Hertfordshire County Council Health and Safety Guidance for First Aid arrangements in Educational Establishments dated September 2025 (Review Date September 2027) Version 10.

This Policy links to other school policies:

- Health and Safety Policy
- Supporting Pupils with Medical Conditions Policy
- Health Attendance Policy – pupils
- Health Attendance Policy - staff

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1. Introduction

This document provides guidance to schools on the assessment and provision for first-aid needs in order to ensure that the requirements of the First-aid regulations (Health and Safety (First Aid) Regulations 1981) are met.

This legislation relates to the provision of first aid for **employees** if they are injured or become ill at work, however when assessing the overall risk and number of first aiders required pupil needs must also be considered.

In addition **The Early Years Foundation Stage Statutory framework (EYFS)** mandates some first aid requirements and is mandatory for all schools and early years providers in Ofsted registered settings attended by young children (i.e. children up to the end of the academic year in which the child has their 5th birthday).

2. Provision of First Aiders

Schools should determine the required number of first aiders for their individual circumstances. First aid provision must be adequate and appropriate in the circumstances. Amwell View School must provide sufficient first aid equipment (first aid kit), facilities and personnel at all times. This assessment of need should be reviewed at least annually.

Suggested minimum numbers based on the HSE guidance are given in the table below.

Category of Risk	Numbers employed at any one location	Suggested minimum number of First Aid Personnel within the school
Lower Hazard	fewer than 25	In school settings even where there are fewer than 25 staff then **EFAW** / a basic level of first aid training in order to meet pupil needs would be expected as a minimum.
	25 -50	At least one first aider trained in **EFAW**
	more than 50	At least one first aider trained in first aid at work **(FAW)** for every 100 employed (or part thereof).
Higher Hazard[1]	5-50	At least one First Aider trained in **EFAW** or **FAW** depending on types of injuries that may occur.
	more than 50	At least one additional First Aider trained in **FAW** for every 50 employed (or part thereof)
School settings where the EYFS framework applies	N/A	At least one person who has a current paediatric first aid certificate (12 hours) must be on the premises at all times when children are present, and must accompany children on outings.

Details of Amwell View School's First Aid provision are shown in **Appendix B**.

[1] Schools will generally fall into the lower hazard category, although some areas of activity (i.e. DT, Swimming pool plant room, laboratories etc.) may fall into the higher risk category.

To ensure adequate coverage and quick accessibility to a first aider for both students and staff the following must also be considered:

- adequate provision in order to cover absence, leave, offsite activities etc;
- previous injuries / illnesses experienced;
- the layout of the premises e.g. split sites;
- the location of the school and remoteness from emergency services;
- any specific hazards on site (e.g. DT machinery, hazardous substances);
- numbers of pupils on site;
- extended / extra-curricular school activities.

Where the school site is shared (be that on a permanent or temporary basis) the first aid arrangements should be agreed by all employers and clearly communicated to employees.

In higher risk areas such as science, DT, PE etc. staff must be aware of immediate remedial measures in order to manage the initial injury and ensure an effective hand over of any specific information (particularly relating to chemical incidents) to the school first aiders.

Unless first aid cover is part of an employees contract of employment those who agree to become first aiders do so on a voluntary basis.

First aid arrangements must also be in place where school premises are used outside of 'normal' hours, e.g. for lettings. Arrangements must be in place to ensure a first aid kit / telephone is available to persons who may require its use.

3. Specific Medical Needs

This document sets out to provide general guidance only, specialist advice should be sought for individuals with disabilities, long-standing medical conditions or allergies which may require special treatment in the case of accidents or illness.

The DfES Document **Supporting pupils with medical conditions** should be referred to for guidance in such situations. **Please refer to Amwell View Schools policy on the school website.**

A first-aid certificate does not constitute appropriate training in supporting children with medical conditions. The school nurse or other suitably qualified healthcare professional should confirm that staff are proficient before providing support to a specific child.

In addition some staff carry their own prescribed medication such as inhalers for asthma, insulin for managing diabetes etc. If an individual needs to take their own prescribed medication, the first aider's role is limited to helping them do so and contacting the emergency services as appropriate.

4. First Aid Training

Depending on the school's size and assessment of need school first aiders should hold a valid certificate in either:

- **First aid at work (FAW)** –a three-day course (18 hours);

- **Pediatric first aid** – a 2 day (12 hour) course to meet the requirements of the EYFS statutory framework;
- **Emergency first aid at work (EFAW)** – a one-day course (6 hours).

To support the school's appointed first aiders many training providers also offer Inset training in order to ensure basic first aid skills (applicable to both staff and pupils) are held by a wide number of other teaching and support staff, MSAs etc.

First aid training is valid for three years, after which a refresher course is required before re-certification. An annual refresher is also available but this is not mandatory.

Schools should ensure that refresher training is undertaken before certificates expire and a record of first aiders and their certification dates should be maintained. Whilst FAW first aiders can undertake the 2 day requalification course after the expiry date, the HSE recommends you attend **First Aid at Work (3 day course)** if more than a month has elapsed since expiry.

Since 1st October 2013, the HSE no longer approves first aid training and qualifications. This training is available from a wide range of providers. **Guidance on selecting a first aid provider** is available from the HSE, this provides further detail on the criteria a competent provider should be able to demonstrate and checks which should be conducted when selecting a first aid training provider.

The voluntary aid societies (e.g. St.John Ambulance, British Red Cross) are recognised by the HSE as one of the standard setters in currently accepted first aid practice.

Health professionals with the following training / experience are qualified to administer first aid without the need to hold a FAW or EFAW qualification.

- Doctors registered with the General Medical Council;
- Nurses registered with the Nursing and Midwifery Council;
- Paramedics registered with the Health Professions Council.

Staff who administer first aid according to their training and in the course of their employment should be covered by employer's liability insurance.

Automated External Defibrillators (AED)

See DfE guidance on Automated external defibrillators (AEDs) in schools **https://www.gov.uk/government/publications/automated-external-defibrillators-aeds-in-schools**.

AEDs are designed to be used by anyone without any specific training and by following the step-by-step instructions provided by the AED at the time of use.

It would therefore be adequate for schools to circulate the manufacturer's instructions to all staff and provide a short general awareness briefing session in order to meet their statutory obligations.

However, it should be recognised that staff confidence in the use of an AED is likely to be enhanced by training – this may be available via the supplier, East of England ambulance service and 1st aid providers. Since 2016 First aid at work training courses (FAW / EFAW) cover the use of defibrillators (prompts and how to respond and pad placement.

AEDs should be located to ensure that they can be accessed quickly in an emergency. Ideally situated no further than a maximum of two minutes' brisk walk from the areas where they are most likely to be needed.

Registering your AED with the local ambulance service (**East of England**) provides ensures that your device's location is provided to 999 callers when a cardiac arrest is reported. See **https://www.eastamb.nhs.uk/your-service/campaigns/the-circuit.htm** for registration.

A **Defibrillator and Cabinet Check Sheet (eastamb.nhs.uk)** is also available from East of England Ambulance service.

Amwell View School's AED is located in the Front Office and AED training is part of the CPR and basic first aid annual refresher staff training.

Please refer to Appendix B to see Amwell View School First Aid trained staff and provision.

5. First Aid Equipment

All schools should have a minimum of one first aid kit, clearly marked, readily accessible and its location known by all staff and pupils.

Additional kits may then be needed for split sites, specific higher hazard areas (kitchens, DT workshops etc.) and for offsite visits.

Travel first aid kits should be kept in minibuses or other such vehicles.

First aid kits should contain a sufficient quantity of suitable first aid materials and nothing else. See **appendix A** for a suggested list of minimum contents.

All first aid kits must be checked regularly and restocked by a designated member of staff, items should not be used after expiry date shown on packaging. Extra stock should be kept in the school.

First aid does not include the administration of medicines and thus first aid boxes should **NOT** contain drugs of any kind including paracetamol, antiseptic creams etc.

Where mains tap water is not readily available for eye irrigation, sterile water or sterile normal saline (0.9%) in sealed disposable containers should be provided. Each container should hold at least 300ml and should not be re-used once the sterile seal is broken. At least 900ml should be provided. Eye baths/eye cups/refillable containers should not be used for eye irrigation.

See Appendix C for location of First Aid Bags and Boxes.

6. First Aid Rooms

The School Premises (England) Regulations 2012 require that every school have a suitable room that can be used for medical treatment / the short term care of sick and injured pupils when required. This area should be equipped with a sink, be reasonably near a WC. The room can be used for other purposes, except teaching, so long as it is readily available for medical use when needed.

Where a school caters for pupils with complex needs, additional medical accommodation must be provided which caters for those needs.
See **https://www.gov.uk/government/publications/standards-for-school-premises.**

Amwell View School and Specialist Sports College has a nurse's room and when pupils are in school the nurses are on site.

7. Emergency Procedures

In the case of serious or potentially serious injuries, professional medical assistance should be sought at the earliest possible time so as to avoid the danger of inappropriate diagnosis or treatment.

Staff should not take children to hospital in their own car, it is safer to call an ambulance.

The parents will be called to accompany the child to hospital. Health professionals are responsible for decisions on medical treatment where a child's parent or guardian is unavailable.

School Procedure: Call for assistance and dial 999 if required. Notify the Front Office who will notify the school Nursing Team and SLT. A Defibrillator can be found in the Front Office on the wall to the left of the doorway. Staff qualified in FIRST AID are listed on a red sheet of paper on noticeboards around the school.

Emergency Procedures for identified most vulnerable pupils:

Pupils identified as having a high-risk medical needs will have a dedicated mobile phone or walkie-talkie with them at all times. This will be used solely in emergencies and will directly call the school nursing team, who will know from the number which pupil needs medical support and react immediately.

8. Provision of Information

Schools should ensure that their first aid arrangements are detailed in their health and safety policy and that all staff are aware of these. These arrangements (including the location of equipment, facilities and personnel) should form part of induction training for all new and temporary staff.

There should be at least one notice posted in a conspicuous position within the premises, giving the location of first aid equipment and facilities and the name(s) and location(s) of the personnel concerned.

9. Record Keeping

Schools should ensure the following records are available:

- Certification of training for all first-aiders and refresher periods;
- Any specialised instruction received by first-aiders or other staff (e.g. AED, Epi-pens);
- First aid cases treated (see accident / incident reporting – **Appendix D**).

10. First Aid and Blood borne viruses

First aid training courses should highlight the importance of preventing cross-infection in first-aid procedures. 'Universal Precautions' must always be followed to reduce the risk of transmitting blood borne infections such as hepatitis and HIV.

This approach assumes that all blood products and bodily fluids are potentially infectious thus the following procedures should always be applied:

- Always cover any open wounds on your own hands with a waterproof adhesive dressing;
- Disposable gloves (un-powdered latex, nitrile or vinyl) to be worn when dealing with bleeding / cleaning up bodily fluids.

Small quantities of contaminated waste (soiled or used first aid dressings) can be safely disposed of via the usual refuse collection arrangements. Waste to be double bagged in plastic and sealed by knotting.

11. Head Injuries

Injuries to the head need to be treated with particular care. High energy head injuries or those with any evidence of following symptoms may indicate serious injury and immediate medical advice should be sought by calling 999.

- unconsciousness, or lack of full consciousness (i.e. difficulty keeping eyes open);
- confusion;
- irritability or altered behaviour ('easily distracted', 'not themselves' 'no concentration', 'no interest in things around them')
- any problems with memory;
- persistent headache;
- blurred or double vision;
- vomiting;
- clear fluid coming from ears or nose;
- loss of balance;
- reading or writing problems;
- loss of power or sensation in any part of body, such as weakness or loss of feeling in an arm or leg;
- general weakness;

- seizure or fit.

NHS Direct provide full details of symptoms and treatment for minor head injuries **http://www.nhs.uk/Conditions/Head-injury-minor/Pages/Symptoms.aspx**. Where pupils receive a head injury their parents/carers should be informed, this should be done immediately by telephone if symptoms described above occur. For minor bumps the parent could be informed via letter, bumped head note etc.

12. Further Information

Further advice and information on first aid matters can be obtained from the Health and Safety Team on 01992 556478 **healthandsafety@hertfordshire.gov.uk**

DfE good practice guide, **Guidance on First Aid for Schools**

Please note information regarding first aid training providers in this advice is no longer current.

HSE First Aid homepage **http://www.hse.gov.uk/firstaid/index.htm**

Appendix A
Suggested contents for First Aid Kit

The contents of your first aid kit should be based on your first aid needs assessment.

As a guide a suggested contents lists for first aid kits are as follows:

First aid kit

- a leaflet giving advice on first aid
- twenty individually wrapped sterile plasters (assorted sizes) appropriate to the work environment (which must be detectable for the catering industry)
- two sterile eye pads
- four individually wrapped triangular bandages
- six safety pins or bandage clips
- six medium-sized individually wrapped sterile unmedicated wound dressings (12x12cm)
- two large sterile individually wrapped unmedicated wound dressings (18x18cm)
- at least 3 pairs of disposable gloves

Travel first aid kit

- Leaflet giving advice on first aid;
- Six individually wrapped sterile plasters (assorted sizes);
- Two individually wrapped triangular bandages;
- Two safety pins;
- Individually wrapped moist cleaning wipes;
- One large sterile unmedicated wound dressing (18x18cm); and
- Two pairs of disposable gloves.

Disposable gloves should be vinyl, nitrile or powder free, low protein latex and CE marked.

Blunt ended stainless steel scissors (minimum length 12.7cm) may also be useful to cut clothing away.

This is a suggested contents list.

Amwell View School's kits are British Standard (BS) 8599. British Standard BS 8599 provides further information on the contents of workplace first-aid kits. Whether using a first-aid kit complying with BS 8599 or an alternative kit, the contents should reflect the outcome of the first-aid needs assessment.

Appendix B Amwell View School Provision			
Category of Risk	**Numbers employed at any one location**	**Suggested minimum number of First Aid Personnel within the school**	**Amwell View School**
Higher Hazard[2]	5-50 more than 50	At least one First Aider trained in **EFAW** or **FAW** depending on types of injuries that may occur. At least one additional First Aider trained in **FAW** for every 50 employed (or part thereof)	**130 Staff employed at Amwell View School, with a Hydrotherapy Swimming Pool and Plant Room.** First Aid at Work (3 day): Janet Warrington, Carly McNamee Emergency FAW (1 day): Matt Oxley, Wini Azilah, Delka Vazova, Hayley Warrington, Stacey Charlton, Ben Warrington, Olivia Searle, Kelly Aimable School Nurses on site provided by East and North Herts: Basic First Aid Training, CPR including use of defibrillators': Completed by all staff including annually September. New staff who are employed within the academic year are trained at the beginning of the term (January and April). Emergency Epilepsy & Asthma Training: Completed by Staff who work with pupils who have epilepsy or asthma. National Rescue Award for Swimming Teachers and Coaches (NRASTC): Molly Blackford, Amanda Coote, Matthew Oxley, Chloe Rees, Amy Gregg, Lucy McFayden, Fay Fairbrother, Faye Bellas.
School settings where the EYFS framework applies		At least one person who has a current paediatric first aid certificate (12 hours) must be on the premises at all times when children are present, and must accompany children on outings.	School Nurses on site provided by East and North Herts. Paediatric First Aiders: Janet Warrington, Carly McNamee, Felicity Kwatemaah, Kelly Aimable EFAW x 8 staff All staff trained in basic first aid, adult and child CPR. Staff received specific training for individual medical needs.

[2] Schools will generally fall into the lower hazard category, although some areas of activity (i.e. DT, Swimming pool plant room, laboratories etc.) may fall into the higher risk category.

Appendix C

FIRST AID AND MEDICATION

The school has assessed the need for first aid provision and identified the following staff to provide first aid (both on site and where required for trips/visits and extra-curricular activities)

TRAINING (3 Day) FIRST AID at Work Qualification and Paediatric Basic Life Support and AED.

Janet Warrington (expires July 2028)
Carly McNamee (expires July 2028)
Claire Clark (expires Feb 2029)

TRAINING IN EMERGENCY FIRST AID (6 hr): (Expires March 2026)

Kelly Aimable (expires 30/11/2026)
Alice Bryant
Alex Cloona
Ian Hayter
Abbey Herridge
Louis Jordan
Lucy McFayden
Amy McKenzie-Smith
Neil Ward
Ben Warrington
Hayley Warrington
Laura Wing

First aid qualifications remain valid for 3 years. Neil Ward will ensure that refresher training is organised to maintain competence and that new persons are trained should first aiders leave.

FIRST AID BOXES ARE LOCATED AT THE FOLLOWING POINTS:

- Front Office
- Outside Deputy Headteacher's Office
- Swimming Pool
- Kitchen
- Science
- Community Classroom (Satellite Provision)
- 4 x Mini-Buses

AEDs (automated external defibrillators) **ARE LOCATED AT THE FOLLOWING POINTS:**

- Front Office
- *Needs Assessment has identified a further defibrillator to be placed 1st floor near Deputy Headteacher's office.*

The School Business Manager is responsible for regularly checking (termly) that the contents of first aid boxes are complete and replenished as necessary.

Transport to hospital: Where a first aider considers it necessary, the injured person will be sent directly to hospital (normally by ambulance). Parents / carers will be notified immediately of all major injuries to pupils.

No casualty will be allowed to travel to hospital unaccompanied and an accompanying adult will be designated in situations where the parents/carers cannot be contacted in time.

Where there is any doubt about the appropriate course of action, the first aider will consult with the Health Service helpline (NHS Direct 111) and, in the case of pupil with the parents/carers.

A&E Department
Princes Alexandra Hospital
Hamstel Road
Harlow
Essex
CM20 1QX
Phone: **01279 444455**

A&E Department
Lister Hospital
Coreys Mill Ln,
Stevenage
Herts
SG1 4AB
Phone**: 01438 314333**

Amwell View's School Nurse – ext. 212 or 213

Administration of medicines

All medication will be administered to pupils in accordance with the DfE document **Supporting pupils at school with medical conditions**. Detailed arrangements are provided in a separate policy.

- **Amwell View's Supporting pupils at school with medical conditions policy** can be found on the school website and staff shared drive under Statutory Policies.

No member of staff will administer **any** medication (prescribed or non-prescribed) to children under 16 without a parent's written consent except in exceptional circumstances.

The School Nurse is responsible for accepting medication and checking all relevant information has been provided by parents / carers prior to administering.

Records of administration will be kept by the school nursing team.

All non-emergency medication kept in school is securely stored, e.g. lockable cupboard in school office, refrigerated meds kept in clearly labelled container within fridge in the nurses room, with access strictly controlled. All pupils know how to access their medication. Under no circumstances will medication be stored in first aid boxes.

Emergency medication and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens are always readily available to children and not locked away. These are kept in Nurses Offices and clearly labelled.

Pupil Care Plans
Parents / carers are responsible for providing the school with up-to-date information regarding their child's health care needs and providing appropriate medication. In the event of changes written correspondence from a health professional identifying the changes should be provided to the school nursing team.

Pupil care plans are in place for those pupils with significant medical needs e.g. chronic or ongoing medical conditions such as diabetes, epilepsy, anaphylaxis etc.

The care plan is developed with the pupil, parent/carer, designated named member of school staff, school nurse and relevant healthcare services. These plans will be completed at the beginning of the school year / when child enrols / on diagnosis being communicated to the school and will be reviewed annually by Class Teacher and Nursing Team.

All staff are made aware of any relevant health care needs and copies of health care plans are available on the school shared drive.

Staff will receive appropriate training related to health conditions of pupils and the administration of medicines by a health professional as appropriate.

If a pupil is admitted to hospital during school term there should be a full 24 hour period following the hospital admission and parents/carers must meet or call the school nurse prior to the pupil returning to school.

Appendix D

ACCIDENT REPORT PROCEDURES

Accidents to employees
Hertfordshire County Council is the employer therefore all employee accidents, no matter how minor, must be reported to them using the online accident reporting system hosted on Solero.

Employee accident / incident forms are to be retained for a minimum of 3 years and can be found on the shared **Staff drive > Admin > Blank Proformas – Accident Incident Form – white**.

Accidents to pupils and other non-employees (members of public / visitors / contractors to site etc.)
A local accident folder is held in the front office and is used to record all minor incidents to non-employees, more significant incidents as detailed below must also reported to HCC using the online accident reporting system hosted on Solero.

- Major injuries.
- Accidents where significant first aid treatment has been provided.
- Accidents which result in the injured person being taken from the scene of the accident directly to hospital.
- Accidents arising from premises / equipment defects.

Parents / carers will be notified immediately of all major injuries.
Pupil / student accident forms are to be retained for a minimum of 3 years after their 25th Birthday.

All Accidents

All major incidents will be reported to the Headteacher and the Governing Body Health and Safety Governor **Derek Goodall and Ellen-May Shipp**.

Accidents will be monitored for trends and a report made to the Governing Body as necessary.

The Headteacher, or their nominee, will investigate accidents and take remedial steps to avoid similar instances recurring. Faulty equipment, systems of work etc. must be reported and attended to as soon as possible. Any relevant learning points will be communicated to relevant staff and pupils.

Reporting to the Health and Safety Executive (HSE)
The Headteacher is responsible for ensuring all RIDDOR reportable incidents are reported.

Incidents involving a fatality or major injury will be reported immediately to the Health and Safety Executive (HSE) on 0345 300 9923 and the Education Health and Safety team on 01992 556478.

Incidents resulting in the following outcomes must be reported to the HSE via their online reporting system **http://www.hse.gov.uk/riddor/** within 15 days of the incident occurring.

- A pupil or other non-employee being taken directly to hospital for treatment and the accident arising as the result of the condition of the premises / equipment, due to the way equipment or substances were used or due to a lack of supervision / organisation etc.
- Employee absence or inability to carry out their normal duties as the result of a work related accident, for periods of 7 days or more (including w/e's and holidays).

Any incident notified to the HSE must also be reported to the LA's Health and Safety Team.

Appendix E

RISK ASSESSMENTS

General Risk Assessments

The school conducts and documents risk assessments for all activities presenting a significant risk. These are co-ordinated by the SBM following guidance contained on the H&S pages of the **Hertfordshire Grid** and are approved by the Headteacher.

Risk assessments are available for all staff to view and are held centrally on the staff drive under **Health and Safety / Risk Assessments** these assessments will be dated and reviewed on an annual basis, or when the work activity changes, whichever is the soonest. Staff will be made aware of any changes to risk assessments relating to their work.

Individual Risk Assessments

Specific assessments relating to staff member(s) or pupil(s) are held on that individual's file and will be undertaken by the class teacher.

Such risk assessments will be reviewed on a regular basis.

It is the responsibility of all staff to inform their line manager of any medical conditions (including pregnancy) which may impact upon their work.

Curriculum Activities

Risk assessments for curriculum activities will be carried out by Head of PE, class teacher, subject teacher, or senior leader using the relevant codes of practice and model risk assessments and can be accessed on the school shared drive: Staff > Health and Safety > Risk Assessments.

Whenever a new course is adopted or developed all activities are checked against these and significant findings incorporated into texts in daily use in the lesson plan.

All LA schools have a subscription to CLEAPSS and their publications are used as sources of model risk assessment within Science, Art and DT.

- CLEAPSS technology site **http://dt.cleapss.org.uk**
- CLEAPSS science site **http://science.cleapss.org.uk/**
- CLEAPSS primary school's site **http://primary.cleapss.org.uk/**

APPENDIX 2

Appendix F

OFFSITE VISITS

HCC has adopted the Outdoor Education Advisory Panel's (OEAP) **national guidance** for learning outside the classroom and offsite visits and all offsite visits will be planned following this guidance available via **https://oeapng.info/**

Responsibilities of key roles are outlined by the OEAP here:

- **Visit leader**
- **EVC**
- **Headteacher**

See HCC's policy for the **management of Learning outside the classroom and offsite visits**

The LA's Offsite Visits Advisor must be notified of all level 3 trips, which include self-led adventurous activities, fieldwork trips to open or "wild" country, and all trips overseas. This will be done via the use of Evolve, the online notification and approvals system.

Evolve is used for the planning and approval of offsite visits. Relevant risk assessments, participant's names etc. will be attached electronically as required.

The member of staff planning the trip (visit leader) will submit all relevant paperwork and risk assessments relating to the trip to the school's **Educational Visits Co-ordinator Hayley Warrington** who will check the documentation and planning of the trip and if acceptable refer the visit for approval to **Headteacher Neil Ward** for approval.

HCC recommends that the EVC should attend training and refresher training every 3 -5 years.

The school policy for learning outside the classroom and offsite visits can be found on the school website and shared drive: Staff:\Statutory Information (Policies, PP, Mental Health Lead etc)\Policies\Additional Policies\Mgt of Off Site Visit

First Aid kits are on the mini-bus and if a group goes off-site a first-aid kit is taken.