ACADEMY
GREAT BARR

First Aid Procedures

2026-27



Policy owner	Mrs H Griffiths
Approval	Local Governing Body
Effective from	November 2026
Next review	November 2027

1. Purpose and scope

This policy explains how Q3 Academy Great Barr provides first aid and responds to medical emergencies. It applies on school premises and during school-organised activities, including educational visits.

First aid is immediate help before professional medical care is available. It does not replace diagnosis or treatment by a healthcare professional.

The school will make reasonable adjustments so disabled students and students with special educational needs can get help promptly.

2. Governance and first aid cover

The Mercian Trust is the school's employer and proprietor. It is responsible for adequate and appropriate first aid provision.

The Local Governing Body oversees the school's arrangements under the Trust's scheme of delegation. The headteacher is responsible for day-to-day implementation.

The first aid coordinator manages first aid cover and holds the current list of trained first aiders. Cover is based on the school's first aid needs assessment.

First aiders will assess casualties within the limits of their training, give immediate help, and seek professional medical care when needed.

3. Getting first aid

In an emergency, call 999 and alert Student Services and Reception. Students may seek urgent help from any member of staff.

For non-emergency help, students should report to a member of staff, who will follow the school's first aid procedures and contact the appropriate staff.

If a casualty cannot move safely, staff should contact Reception and give their exact location. Staff can also indicate a 'medical' emergency using Bromcom. Staff should not move the casualty unless there is an immediate danger.

Illness or an injury that began outside school should normally be reported to Student Services. This will not delay first aid where needed or emergency help.

The Medical Room may be used for first aid and agreed self-administered treatment. Students may freely request emergency sanitary products from the Ethos Room.

Any member of staff may provide a plaster for a minor wound after checking for a known adhesive allergy or sensitivity.

4. Emergency response and consent

A first aider will assess the casualty and seek professional help if the condition is serious, uncertain, worsening, or beyond first aid.

Any member of staff may call 999 without waiting for a first aider, senior leader, or parental permission. Staff will alert Reception so it can direct the ambulance. They will contact the student's parent or other appropriate contact as soon as practicable, subject to the confidentiality safeguards below.

Staff will explain the proposed help and seek consent where the casualty can give it. A young person aged 16 or 17 is presumed able to consent. A student under 16 may consent if they have enough understanding. Capacity and competence are decision specific.

If a casualty cannot consent in an emergency, staff may give necessary first aid in the casualty's best interests. A refusal does not prevent staff from calling emergency services, monitoring the person, or taking safeguarding action.

Parents will be involved where appropriate. Information sharing will respect the student's competence, capacity, and confidentiality. The school may share necessary information without consent in a serious emergency, where the person lacks capacity, for safeguarding, or where the law otherwise allows it.

If a student needs to go home, the first aider will tell Reception, which will arrange a safe handover.

5. Head injuries and concussion

A student with a head injury will usually be sent home following first aid assessment. The decision will take account of the injury and the student's circumstances.

Staff will call 999 if there are signs of serious injury or immediate concern. If the student is sent home, the school will arrange a safe handover to a responsible adult who can monitor them.

The school will inform a parent or other appropriate contact and provide written head injury safety advice, subject to section 4. Parents or the student, as appropriate, should seek advice from a healthcare professional and follow NHS head injury guidance. An adult should stay with the student for at least the first 24 hours.

Where concussion is suspected, the student must stop the activity immediately and seek assessment by an appropriate healthcare professional or NHS 111 within 24 hours. They must not take part in physical education, training, or competition for at least 24 hours and until assessed.

Where concussion is not excluded, the student will follow a graduated return programme that prioritises return to education. They may return to competition only from day 21, and only when symptom-free at rest for the preceding 14 days and throughout pre-competition training.

6. Urgent medical conditions

Asthma

Students with asthma should have rapid access to their prescribed reliever inhaler. Staff will follow the student's individual healthcare plan or asthma action plan and call 999 if symptoms are severe or do not respond.

The school holds an emergency salbutamol inhaler in Student Services. It may be used only for a student who has been prescribed a reliever inhaler, whose own inhaler is unavailable, and where written consent has been given by the student if legally competent or otherwise by someone with parental responsibility.

Anaphylaxis

Suspected anaphylaxis is a medical emergency. Staff will bring help and adrenaline to the casualty. They will place the casualty flat with their legs raised. If breathing is difficult, the casualty may raise their shoulders or sit up slowly. Staff will follow the action plan and 999 instructions and will not make the casualty stand or walk.

Staff will use the casualty's own prescribed adrenaline device first, if available. This may be an auto-injector or person-specific prescribed nasal adrenaline. Staff will give adrenaline immediately, call 999, and follow the device and call handler's instructions. Uncertainty about anaphylaxis or checking prior consent will not delay life-saving treatment. If there is no improvement after 5 minutes, staff will give a further dose where one is available.

Person-specific nasal adrenaline is not part of the school's spare auto-injector stock. If the prescribed device is unavailable, has misfired, or the casualty has no prescribed device, staff may use a suitable spare auto-injector in a life-saving emergency.

The school's spare adrenaline auto-injectors are held in Student Services. Arrangements on school premises will allow the correct dose to reach a casualty and be given within 5 minutes.

Sudden breathing difficulty in someone with asthma and food allergy will be treated as possible anaphylaxis, with adrenaline given first. Staff will not substitute an inhaler for adrenaline when treating anaphylaxis.

The dedicated allergy safety policy, including prevention, emergency medicine, training, and incident review arrangements, is in 'Supporting Students with Medical Conditions'.

Cardiac arrest and defibrillators

For a person who is unresponsive and not breathing normally, staff will call 999, start cardiopulmonary resuscitation, and send for an automated external defibrillator (AED). AEDs are located at the student entrance, the Grace Payne Centre, and the Fitness Suite.

Anyone may use the AED by following its instructions. Staff will continue cardiopulmonary resuscitation, following the AED and 999 instructions, until professional help takes over or the casualty is breathing normally.

7. Medicines and individual healthcare plans

Medicines will not be kept in first aid kits. Staff may administer or help with medicine under an agreed arrangement, with suitable information, consent, and training. This does not prevent life-saving action allowed by law.

Medicines accepted for storage will normally be kept securely in Student Services. Emergency medicine will remain readily accessible. Students may carry and self-administer agreed medicines and devices, such as inhalers and adrenaline auto-injectors, under the arrangements in 'Supporting Students with Medical Conditions'.

Students who self-administer at set times must follow the agreed collection arrangements. Parents must provide a copy of any healthcare or action plan issued for their child and any updates. Students who manage their own care should provide this information themselves. Parents and students should also provide current prescriptions and information about changes in need.

Full arrangements for medicines, self-administration, training, and individual healthcare plans are in 'Supporting Students with Medical Conditions'.

8. Infection prevention

Staff will use standard infection-control precautions for blood and body fluids. They will report any exposure and seek medical advice without delay. These precautions will not delay life-saving help.

9. Educational visits and off-site activities

The visit leader will take a portable first aid kit or confirm that suitable first aid is available at the venue. The visit risk assessment will address individual medical needs, emergency medicine, and first aid cover.

Prescribed emergency medicines will remain readily accessible during visits. The visit risk assessment will decide whether to take spare adrenaline auto-injectors without depleting on-site provision.

The emergency and recording arrangements in this policy also apply during school-organised off-site activities. Suspected concussion during sport will be managed under section 5.

10. School nursing and vaccinations

The Sandwell School Nursing Service may use the Medical Room when attending the school. Its staff do not form part of routine first aid cover.

A health concern may be raised with the student's head of year, who can help with a referral where needed. This route does not prevent students using any confidential self-referral or drop-in service offered by the nursing team.

The school hosts school-aged vaccination sessions delivered by VaccinationUK. VaccinationUK is responsible for clinical delivery and consent. Direct vaccination programme enquiries to VaccinationUK.

11. Records and confidentiality

All first aid will be recorded on EVOLVEaccidentbook as soon as practicable, including what happened and the treatment given.

Records will be kept under the Trust's retention schedule and applicable statutory minimums. Health and accident information will be shared only where necessary and lawful.

An injury or account of an incident may raise a safeguarding concern. Staff will give urgent help first and then follow the school's 'Safeguarding and Child Protection Policy'.

12. Concerns and complaints

Raise an immediate concern with Reception, the first aid coordinator, or a senior leader. A formal complaint may be made under the Trust's 'Complaints, Compliments and Comments Policy and Procedure'.