Best Foot Forward – First Aid Policy

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1. Policy Statement

Best Foot Forward is committed to protecting the health, safety and welfare of children, young people, staff and others involved in our provision.
Best Foot Forward does not operate from its own educational premises. Provision is delivered on a one-to-one or small-scale basis in:

- the young person's home;
- community locations; or
- commissioning schools and other educational settings.

Our first-aid arrangements therefore reflect this mobile and community-based delivery model rather than a traditional premises-based school model.
All Best Foot Forward staff who work directly with children and young people complete basic first aid training as part of their training and professional-development arrangements.
Staff are expected to:

- recognise common injuries and medical emergencies;
- provide basic first aid within the limits of their training and competence;
- summon appropriately qualified assistance where required;
- contact emergency services without delay where necessary;
- follow any individual medical or emergency arrangements relating to the young person; and
- record and report relevant incidents appropriately.

The purpose of this policy is to ensure that:

- children, young people and staff are kept safe;
- proportionate first-aid arrangements are available across BFF's different delivery environments;
- staff understand the limits of their training;
- medical emergencies are recognised and responded to promptly;
- relevant medical needs are considered before and during provision;
- accidents and medical incidents are recorded and reviewed; and
- emergency services and other appropriate professionals are involved whenever required.

2. Legal and Guidance Framework

This policy has regard to:

- Health and Safety at Work etc. Act 1974;
- Health and Safety (First-Aid) Regulations 1981;
- Management of Health and Safety at Work Regulations 1999;
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR);
- Department for Education guidance relating to first aid in educational settings;
- Health and Safety Executive guidance on first aid;
- Children Act 1989 and Children Act 2004;
- Equality Act 2010;
- *Keeping Children Safe in Education 2026*; and
- relevant safeguarding, medical and risk-management arrangements.

BFF recognises that some Department for Education requirements apply specifically to schools operating premises.
Best Foot Forward therefore applies the relevant principles alongside its own duties as an alternative education provider delivering provision in homes, community settings and schools.

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3. Scope

This policy applies to:

- Best Foot Forward employees;
- tutors and mentors;
- self-employed personnel undertaking BFF provision;
- volunteers and contractors where relevant;
- children and young people receiving BFF provision; and
- others affected by BFF activities where applicable.

It applies to provision delivered:

- in young people's homes;
- in community venues and public/community locations;
- on school premises;
- during agreed educational activities;
- during authorised transport where applicable; and
- remotely where relevant.

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4. Best Foot Forward's First-Aid Model

Best Foot Forward's first-aid arrangements reflect the nature of our service.
BFF:

- does not operate its own education centre or other permanent teaching premises;
- delivers predominantly low-risk tuition, mentoring and alternative education;
- normally works with individual young people rather than large groups;
- delivers provision across multiple locations;
- undertakes individual and setting-specific risk assessment where appropriate; and
- ensures student-facing staff complete basic first aid training.

First aid is therefore delivered through a combination of:

1. basic first aid capability among BFF staff;
2. individual risk assessment and medical information;
3. first-aid arrangements available within host schools and community venues;
4. parents/carers and individual healthcare arrangements during home provision; and
5. emergency services where a situation requires professional medical assistance.

BFF staff must always work within the limits of their training.
Basic first aid training does not mean staff should attempt medical procedures for which they have not been trained or delay contacting professional medical assistance.

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5. First Aid Training

Staff delivering direct provision to children and young people complete a basic first aid course.
Training is intended to give staff sufficient knowledge and confidence to:

- assess an immediate situation;
- respond to common minor injuries;
- recognise signs of serious illness or injury;
- provide basic emergency first aid;
- understand when further medical assistance is required;
- contact and communicate effectively with emergency services; and
- provide appropriate immediate assistance while professional help is being obtained.

Training will be refreshed at appropriate intervals.
BFF will maintain records of staff training and completion.
Where a particular placement involves medical needs beyond the scope of basic first aid training, additional arrangements must be considered before provision commences.
These may include:

- specific medical training;
- an individual healthcare plan;
- access to appropriately trained school personnel;
- arrangements involving the parent/carer;
- additional risk assessment; or
- another agreed safeguarding or medical arrangement.

Staff must not present themselves as medically qualified or undertake procedures beyond their training and competence.

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6. First-Aid Equipment

Because Best Foot Forward does not operate a fixed educational premises, it does not maintain a central school-style first-aid room or first-aid station.
First-aid equipment arrangements are instead determined by the location and nature of provision.
Staff will have access to appropriate basic first-aid equipment where identified as necessary through risk assessment.
This may include a portable first-aid kit for community or off-site provision.

When provision takes place within a school or another staffed venue, staff may also access the first-aid facilities of the host setting in accordance with that setting's arrangements.
First-aid equipment should be:

- appropriate to the activities being undertaken;
- readily accessible where required;
- checked periodically; and
- replenished when items have been used or expire.

Medication must not ordinarily be stored as part of a general BFF first-aid kit.

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7. Provision Within Schools

Where BFF provision takes place on school premises:

- BFF staff retain their own basic first-aid awareness and responsibilities;
- the school's established first-aid arrangements should ordinarily be used where additional assistance is required;
- staff should know how to summon the school's qualified or designated first-aid personnel;
- BFF staff should comply with the school's emergency and accident-reporting procedures;
- significant incidents should also be reported through BFF's own procedures; and
- relevant information should be shared between BFF and the school.

A BFF staff member may provide basic first aid within their competence while school assistance is obtained.
Where the situation appears to constitute a medical emergency, staff must not delay calling 999 while waiting for a school first aider.

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8. Home-Based Provision

Where sessions take place in a young person's home, BFF's first-aid arrangements will reflect both the home environment and any individual medical needs.
Before or during commencement of provision, BFF should be made aware of relevant medical information including, where applicable:

- significant medical conditions;
- serious allergies;
- epilepsy;
- diabetes;
- asthma;
- mobility needs;
- emergency medication;
- known emergency procedures; and
- other information relevant to safe provision.

Where an adult is required to remain present or available as part of the agreed home-based provision arrangement, this should be reflected within the placement arrangements.
Parents and carers will normally retain responsibility for the routine management of their child's ongoing medical condition and medication unless a different arrangement has been explicitly agreed.

However, if an accident or medical emergency occurs during a BFF session, staff must respond appropriately.
Depending on the circumstances, this may include:

- stopping the session or activity;
- providing basic first aid within their competence;
- alerting the parent/carer;
- contacting emergency services;
- following an agreed individual medical plan;
- informing BFF management;
- informing the commissioning school or organisation; and
- recording the incident.

The fact that provision is taking place within a family home does not prevent a BFF member of staff from calling emergency services directly where required.

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9. Community-Based Provision

Where sessions take place within the community, staff should consider the environment as part of normal planning and risk assessment.
Community provision may take place in locations such as:

- libraries;
- community centres;
- cafés or other agreed public venues;
- educational or recreational venues;
- outdoor community spaces; or
- other locations agreed as suitable for the young person.

Consideration should be given to:

- the nature of the activity;
- access to emergency services;
- availability of first-aid facilities within the venue;
- known medical needs;
- mobile telephone access;
- lone-working arrangements;
- environmental risks; and
- whether the location continues to be suitable.

BFF staff should retain access to a working telephone and be able to identify their location sufficiently accurately to summon emergency assistance.
Where a staffed community venue has its own first-aid arrangements, these should be used where appropriate.
A member of staff should nevertheless provide basic assistance within their competence and contact emergency services directly where required.

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10. Medical Needs and Placement Planning

Relevant medical information should be obtained from the commissioning organisation and/or parent/carer where it is necessary to safely deliver provision.
This may include:

- diagnosed conditions;
- severe allergies;
- diabetes;
- epilepsy or seizure disorders;
- asthma;
- emergency medication;
- mobility requirements;
- individual healthcare plans;
- known emergency procedures; and
- other significant medical information.

The presence of a medical condition does not automatically make a placement unsuitable.
Instead, BFF will consider:

- the individual child's needs;
- the location in which provision will be delivered;
- the competence and training required of staff;
- available support;
- any individual medical plan;
- reasonable adjustments;
- foreseeable emergency situations; and
- whether identified risks can be appropriately managed.

Where a young person's medical needs require specialist knowledge or intervention beyond staff members' basic first aid training, appropriate arrangements must be agreed before provision takes place.

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11. Medication

BFF staff do not routinely administer medication.
Where medication may be required during a session, individual arrangements should clarify:

- the medication involved;
- whether the young person self-administers;
- whether responsibility rests with a parent/carer or school;
- storage arrangements;
- emergency procedures;
- whether specific staff training is required; and
- how BFF should respond if assistance is required.

Staff should not administer prescription medication unless an appropriate arrangement has been agreed and any necessary information, consent and training are in place.
Emergency medication requirements must be identified as part of the young person's medical and risk arrangements.

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12. Medical Emergencies

Where a person becomes seriously unwell or injured, staff should:

1. remain calm and assess immediate safety;
2. stop the activity where appropriate;
3. provide basic first aid within the limits of their training;
4. summon additional assistance where available;
5. call 999 where emergency medical assistance may be required;
6. follow instructions provided by emergency call handlers;
7. remain with the young person where safe and appropriate;
8. contact the parent/carer;
9. inform the commissioning school or organisation as appropriate;
10. inform BFF management; and
11. record the incident.

Staff must not delay calling an ambulance because they are awaiting permission from a parent, school, commissioner or BFF manager.

Where staff are uncertain whether an injury or medical condition is sufficiently serious to require emergency assistance, they should err on the side of seeking appropriate professional advice.

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13. Accidents, Incidents and Near Misses

Accidents, significant injuries, medical emergencies and relevant near misses must be appropriately recorded.

Records should include where relevant:

- date and time;
- location;
- people involved;
- factual description of what happened;
- injury or illness;
- first aid given;
- assistance obtained;
- whether emergency services were contacted;
- parent/carer notification;
- commissioner notification;
- safeguarding considerations; and
- follow-up action.

Significant incidents will be reviewed to determine whether:

- risk assessments require amendment;
- the location remains suitable;
- additional training is required;
- medical arrangements need to change;
- further safeguarding action is necessary; or
- provision requires review.

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14. RIDDOR

Best Foot Forward will comply with the *Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013* where an event meets the statutory reporting criteria and Best Foot Forward is responsible for making the notification.
Not every accident, injury, ambulance attendance or hospital visit is reportable under RIDDOR.
Management will determine reportability by reference to the statutory criteria and current Health and Safety Executive guidance.
Where an incident occurs on premises controlled by another organisation, such as a school, BFF will cooperate with that organisation to establish the appropriate reporting arrangements.

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15. First Aid and Safeguarding

Medical concerns must also be considered through a safeguarding lens.
Staff should report concerns to the DSL where, for example:

- an injury is unexplained;
- an explanation appears inconsistent with the injury;
- repeated injuries are observed;
- necessary medical treatment appears to have been withheld;
- there are concerns about neglect;
- deliberate harm is disclosed or suspected;
- self-harm is suspected;
- medication appears to be misused or withheld; or
- another aspect of the incident creates a safeguarding concern.

Safeguarding procedures must not delay emergency medical treatment.
Where immediate medical attention is required, staff should obtain emergency assistance first and notify the DSL as soon as practicable.

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16. Online Provision

Physical first aid cannot ordinarily be provided during a remote session.
However, where a young person appears to become seriously unwell, injured or distressed during online provision, staff should:

- establish the young person's location if necessary;
- establish whether a responsible adult is available;
- contact the parent/carer;
- contact emergency services where an immediate serious risk is apparent;
- follow safeguarding procedures;
- inform the commissioning organisation as appropriate; and
- record the incident.

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17. Mental Health Emergencies

A serious mental-health incident may require the same urgency as a physical medical emergency.
Where a young person presents with:

- serious self-harm;
- immediate suicidal intent;
- an apparent threat to life;
- severe psychological or behavioural distress creating immediate danger; or
- another acute mental-health emergency,

staff should prioritise immediate safety.
This may require:

- contacting emergency services;
- contacting a parent/carer;
- notifying the DSL;
- seeking urgent medical assistance; and
- notifying the commissioning school or organisation.

An immediate risk to life must not be managed solely through routine safeguarding reporting.

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18. Responsibilities

Best Foot Forward Management
Management is responsible for:

- ensuring appropriate first-aid arrangements exist across BFF's delivery model;
- ensuring student-facing staff undertake basic first aid training;
- maintaining relevant training records;
- ensuring suitable risk-assessment processes are in place;
- ensuring appropriate first-aid equipment is available where necessary;
- reviewing significant accidents and incidents;
- considering additional training where individual medical needs require it; and
- reviewing this policy and associated arrangements.

Best Foot Forward Staff
Staff are responsible for:

- maintaining their required basic first aid training;
- understanding the limits of their competence;
- familiarising themselves with relevant medical information concerning the young people they support;
- knowing how to obtain emergency assistance;
- following individual risk and medical plans;
- acting promptly in emergencies;
- recording significant incidents;
- informing appropriate parties; and
- reporting safeguarding concerns.

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19. Information Sharing and Confidentiality

Medical information will be handled in accordance with BFF's data-protection requirements. Information will be shared with staff where they need it to safely support the young person. Confidentiality must not prevent information being shared where necessary to:

- protect life;
- provide appropriate emergency care;
- safeguard a young person; or
- enable safe continuing provision.

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20. Monitoring and Review

Best Foot Forward will monitor relevant:

- accidents;
- injuries;
- medical incidents;
- near misses;
- emergency-service involvement;
- training requirements;
- placement medical risks; and
- emerging patterns.

This policy will be reviewed at least annually and sooner where:

- legislation or guidance changes;
- BFF's delivery model changes;
- a serious accident or medical incident identifies learning;
- a child's needs identify a gap in existing arrangements;
- commissioning requirements change; or
- quality-assurance activity identifies a need for amendment.

Last Reviewed: September 2026
Next Review: September 2027

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21. Related Policies and Documents

This policy should be read alongside:

- Child Protection and Safeguarding Policy;
- Health and Safety Policy;
- Lone Working Policy;
- Risk Assessment procedures;
- Accident and Incident Reporting procedures;
- Behaviour and Physical Intervention Policy;
- Staff Code of Conduct;
- Data Protection Policy;
- individual learner risk assessments;
- individual medical or healthcare plans where applicable; and
- host-school or venue emergency procedures.