Background to the Compulsory Emergency First Aid Education (State-funded Secondary Schools) Bill

Inside:
1. The Bill
2. Current provision of first aid education in schools
3. Cardiopulmonary resuscitation and defibrillator awareness
4. Previous calls for compulsory first aid education
5. Reaction to the Bill
Contents

Summary 3
  The Bill 3
  Current position 3

1. The Bill 4
  1.1 Emergency first aid education in maintained schools 4
  1.2 Emergency first aid education in other state-funded schools 5
  1.3 Consultation, review and revision 5

2. Current provision of first aid education in schools 6
  2.1 The National Curriculum 6
  2.2 Personal, Social, Health and Economic Education 6
      Calls to make PSHE a statutory subject 7
  2.3 Automatic external defibrillators in schools 8
  2.4 Training and resources from other organisations 10

3. Cardiopulmonary resuscitation and defibrillator awareness 11
  3.1 Consensus paper on out of hospital cardiac arrest 11
  3.2 Cardiovascular Disease Outcomes Strategy 12

4. Previous calls for compulsory first aid education 14
  4.1 Developments inside Parliament 14
      National Curriculum (Emergency Life Support) Skills Bill 2010-12 14
      Education Bill 2010-12 15
      Personal, Social, Health and Economic Education (Statutory Requirement) Bill 2015-16 15
      Debates 15
  4.2 Government position 16
      Position of the Coalition Government 16
      Position of the current Government 17
  4.3 Other Stakeholders 18
      St John Ambulance 18
      British Red Cross 18
      British Heart Foundation 19
      British Youth Council 20

5. Reaction to the Bill 21
  5.1 Every Child a Lifesaver Campaign 21
       Mail on Sunday support 21
Summary

The Bill
On 24 June 2015, Teresa Pearce presented the *Compulsory Emergency First Aid Education (State-funded Secondary Schools) Bill*, having secured sixth place in the Private Members’ Bill ballot. This briefing has been prepared in advance of the Bill’s Second Reading in the House of Commons, which is scheduled to take place on 20 November 2015.

The Bill provides for emergency first aid education (EFAE) to be a compulsory part of the National Curriculum at key stage 3 (ages 11-14) and key stage 4 (ages 14-16). It also provides for academies, which do not have to follow the National Curriculum, to be required to teach EFAE at these key stages.

The detailed curriculum of EFAE would be determined by a school’s governing body and head teacher but the Bill specifies the skills and knowledge that it must cover, which includes cardiopulmonary resuscitation and the deployment of defibrillators. The Bill provides the Secretary of State with the power to make regulations amending the skills and knowledge that EFAE must cover, but sets out consultation requirements before such regulations are made for the first time.

The Bill also requires the Secretary of State to ensure that EFAE is included in initial and continuing teacher training, and to issue guidance on best practice in delivering and inspecting EFAE. Local authorities, governing bodies, head teachers and proprietors would be under a duty to have regard to this guidance.

The Bill extends to England only and would come into force on the day after it received Royal Assent.

Current position
Currently, EFAE is not part of the National Curriculum in England but is included in non-statutory programmes of study for PSHE published by the PSHE Association. A number of organisations also provide first aid training in schools as well as resources to assist in teaching emergency first aid. Government guidance suggests that schools may wish to consider raising awareness of automated external defibrillators and cardiopulmonary resuscitation.

There have been a number of previous attempts to make EFAE a compulsory part of the National Curriculum in England. The Coalition Government, while expressing support for raising the profile of EFAE in schools, did not favour making it a compulsory part of the curriculum for fear of producing an “over-prescribed school curriculum”.

1. The Bill

The Compulsory Emergency First Aid Education (State-Funded Secondary Schools) Bill was introduced by Teresa Pearce on 24 June 2015. The Bill makes provision for emergency first aid education (EFAE) to be compulsory at key stages 3 and 4 in maintained schools, academies, city technology colleges and city colleges for the technology of the arts. Free schools, university technology colleges and studio schools operate as academies in law.

1.1 Emergency first aid education in maintained schools

Clause 1 provides for EFAE to be part of the National Curriculum at key stage 3 (ages 11-14) and key stage 4 (ages 14-16). The National Curriculum would not be required to specify attainment targets or assessment arrangements for EFAE.

The detailed EFAE curriculum would be determined by a school’s governing body and head teacher. However, the Bill provides for EFAE to comprise “formal lessons” and to include the teaching of the following skills and knowledge:

(a) recognising when a person is in need of the attention of a medically-qualified professional;
(b) how to summon medical assistance urgently;
(c) recognising, and distinguishing between, certain common scenarios;
(d) which EFAE actions are appropriate in each such scenario, including the best management of circumstances where a person is or appears to be –
   (i) unconscious or not breathing,
   (ii) unconscious and breathing,
   (iii) choking,
   (iv) bleeding severely,
   (v) having a heart attack, or
   (vi) having an episode arising from an underlying condition such as asthma or epilepsy; and
(e) the appropriate deployment of EFAE procedures and equipment –
   (i) Cardiopulmonary resuscitation, and
   (ii) Defibrillators.

The Secretary of State would be able to provide further information relating to this list of skills and knowledge. They would also have the power to make regulations, subject to the affirmative procedure, amending the list in order to give effect to recommendations of a report laid before Parliament. Clause 3 provides that, before making such regulations for the first time, the Secretary of State would be required to conduct a public consultation on the content and delivery of EFAE.
and to lay a report before Parliament within three months of the consultation closing.

The Secretary of State would be under a duty to:

- Ensure that EFAE is included in initial and continuing teacher training.
- Issue guidance on best practice in delivering and inspecting EFAE and to review such guidance at least annually. When reviewing the guidance, the Secretary of State would be required to consult such persons as they consider appropriate.

Local authorities, governing bodies and head teachers would be under a duty to have regard to the guidance issued by the Secretary of State. In addition, governing bodies and head teachers would be under a duty to ensure that information provided in the course of providing EFAE is up to date and accurate.

1.2 Emergency first aid education in other state-funded schools

Clause 2 provides for EFAE to be included in the curriculum at key stage 3 and key stage 4 in academy schools (free schools, university technology colleges and studio schools operate as academies in law), city technology colleges, and city colleges for the technology of the arts. EFAE provided in such schools would be required to comprise the same skills and knowledge as specified with regards to maintained schools. Proprietors and head teachers of such schools would also be required to have regard to guidance issued by the Secretary of State.

Subsection 6 of clause 2 provides for clause 1 to apply to academy schools, city technology colleges, and city colleges for the technology of the arts as if they were maintained schools.

1.3 Consultation, review and revision

Clause 3 sets out the consultation requirements before the Secretary of State can make regulations for the first time amending the skills and knowledge to be included within EFAE (see section 1.1 above).

The clause also provides for the Secretary of State to be required to arrange independent reviews of the quality and impact of EFAE provision once the first cohort of pupils to receive EFAE throughout the third and fourth key stages have completed key stage 4.
2. Current provision of first aid education in schools

Summary

- Emergency first aid training is currently not part of the National Curriculum in England.
- Local authority maintained schools are required to teach the National Curriculum; academies, free schools and independent schools do not have to follow it, but may do so if they wish.
- Schools may teach emergency first aid as part of Personal, Social, Health and Economic Education (PSHE), which remains a non-statutory subject in England.
- Government guidance suggests that schools may wish to consider raising awareness of automated external defibrillators (AEDs) and cardiopulmonary resuscitation (CPR)
- A number of organisations provide first aid training in schools as well as resources to assist schools in teaching emergency first aid.

2.1 The National Curriculum

Emergency first aid education is not currently part of the National Curriculum in England.

Local authority maintained schools are required to follow the National Curriculum, which sets the required content for those subjects that should be taught to all pupils. Academies, free schools (which operate as academies in law) and independent schools are not required to follow the National Curriculum but may do so if they wish.

On 20 January 2011, the Education Secretary announced a review of the whole of the National Curriculum. The revised National Curriculum programmes of study, which were published in September 2013, have been taught in most subjects and in respect of most age groups since September 2014. A Library briefing paper provides further information on the National Curriculum review:

- Library Briefing Paper 6798, National Curriculum review, last updated 1 May 2014

2.2 Personal, Social, Health and Economic Education

Alongside the review of the National Curriculum, the Coalition Government carried out a separate review of Personal, Social, Health and Economic Education (PSHE). The remit of the PSHE review was set out in a letter from the Schools Minister to the Chair of the Education Committee on 21 July 2011.

Following the review, it was announced in March 2013 that PSHE would remain a non-statutory subject and that no new programmes of study would be published. The Government stated, however, that all schools

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1 Department for Education, National curriculum in England: framework for key stages 1 to 4, updated 2 December 2014. Information on the curriculum review is provided on the DFE’s website at: National curriculum review: targets from September 2014, last updated 11 September 2013.
2 The remit of the PSHE review was set out in a letter from the Schools Minister to the Chair of the Education Committee on 21 July 2011. HC Deb 21 March 2013 52WS
should teach PSHE and this expectation is outlined in the introduction to the revised National Curriculum:

All schools should make provision for personal, social, health and economic education (PSHE), drawing on good practice. Schools are also free to include other subjects or topics of their choice in planning and designing their own programme of education.4

The PSHE Association, which receives grant funding from the Government, has published a programme of study (non-statutory) for PSHE. Emergency first aid is included in the suggested content for children at key stages 3 and 4:

- At key stage 3 (ages 11-14) pupils should have the opportunity to learn “a knowledge of basic first aid and life-saving skills”.
- At key stage 4 (ages 14-16) pupils should have the opportunity to learn “how to find sources of emergency help and how to give basic and emergency first aid in appropriate contexts”.

The programme of study recommends that schools do not attempt to cover all of the suggested content, as doing so “would lead to a series of superficial experiences that would most likely be restricted to providing information”.6

**Calls to make PSHE a statutory subject**

There have been a number of calls for PSHE to be made a statutory subject. In its February 2015 report on PSHE and sex and relationships education, the Education Committee recommended that PSHE should be made a statutory subject but that schools should retain flexibility over what is taught as part of it.7 In its response to the Committee's report, published in July 2015, the Government agreed that more could be done to emphasise the importance of PSHE and that it would consider the arguments of the Committee as part of work to improve the quality of PSHE:

The Government wants all young people to leave school prepared for life in modern Britain. We agree with the committee that high-quality PSHE and SRE have a vital role to play in this by providing a curriculum for modern life. The Government also agrees that there is more that we can do to emphasise its importance and improve the quality and provision of PSHE education which is not yet good enough in too many schools. That is why we announced a package of support for PSHE in March 2015, including the development of a rigorous new PSHE quality mark for schools to demonstrate excellence in their teaching and further work with the PSHE Association to help them quality assure resources produced by other organisations to ensure that teachers have access to the best materials.

We now want to go further, and will take forward work with the sector to develop further measures to improve the quality of PSHE. We want to make significant progress on this issue this

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5 PSHE Association, *PSHE Education Programme of Study (Key Stages 1-4)*, October 2014, p16.

6 Ibid, p1.

parliament, and will consider in full the arguments put forward by
the Select Committee as part of this work before reporting back
later this year.8

Further information on the calls to make PSHE statutory, including
arguments made against this proposal, is including in Library Briefing
Paper 7303, Personal, social, health and economic education in schools
(England), last updated 16 September 2015.

Box 1: Compulsory first aid education in other countries

In Wales, Personal and Social Education (PSE) forms part of the statutory basic curriculum for
maintained schools. The framework for PSE states that at key stage 3 pupils should be given the
opportunity to “develop the practical skills necessary for everyday life, e.g. basic emergency first aid
procedures”. At key stage 4, the framework states that pupils should be given the opportunity to
“develop the practical skills necessary for everyday life, e.g. administer basic first aid.”9

In Northern Ireland, Personal Development forms a statutory part of the curriculum at key stages 3 and
4. The statutory minimum content requires pupils to be provided with opportunities to “develop
preventative strategies in relation to accidents in the home, school and on the road” and to be able to
“develop an awareness of emergency first aid procedures”.10 Non-statutory guidance states that this
content could include “safe practices in relation to appliances and equipment, chemicals, machinery,
vehicles, road safety; knowing what to do in the event of cuts, burns and fire; knowing emergency first
aid, etc.”11

A 2006 survey conducted by the International Federation of Red Cross and Red Crescent societies
reported that 19% of European countries had compulsory first aid training in schools.12 Another 2006
Red Cross report cited France, Denmark and Norway as examples of European countries where first aid
was part of the school curriculum.13 In addition, a briefing published by the British Heart Foundation
and the Resuscitation Council in October 2012 stated that 36 US States “have passed legislation,
curriculum content standards, or frameworks referring to teaching CPR in schools”.14

2.3 Automatic external defibrillators in
schools

In November 2014, the Department for Education (DfE) published non-
statutory advice for schools on automatic external defibrillators (AEDs).

The advice encourages schools to purchase AEDs as part of their first aid
equipment and states that the DfE has “negotiated an arrangement
with NHS Supply Chain to enable the purchase of AEDs which meet a
certain minimum specification at a discount”.15

8 Department for Education, Government Response: Life lessons: PSHE and SRE in
9 Welsh Assembly Government, Personal and social education framework for 7 to 19-
year-olds in Wales, 2008, pp21b and 23b
10 The Education (Curriculum Minimum Content) Order (Northern Ireland) 2007, SI
2004/7046.
11 Northern Ireland Curriculum, Personal Development: Key Stage 3 Non Statutory
Guidance for Personal Development, 2007, p26
12 International Federation of Red Cross and Red Crescent Societies, First aid for a safer
future: Focus on Europe, 2009, p4
13 British Red Cross, Life. Live it. The case for first aid education in UK schools, 2006,
p41
14 British Heart Foundation and Resuscitation Council, Briefing on campaign for life-
saving skills to be taught in schools 2012
15 Department for Education, Automated external defibrillators (AEDs): A guide for
maintained schools and academies, October 2015, p5
Box 2: What is an automatic external defibrillator?

The DfE advice states that an automatic external defibrillator (AED) is “a machine used to give an electric shock when a person is in cardiac arrest, i.e. when the heart stops beating normally.” It further explains that the AED will monitor an individual’s heart rhythm and apply a shock to restart it, or advise that CPR be continued. From when they are first switched on, AEDs provide voice and visual prompts to guide the rescuer through the process, including positioning and attaching the pads, when to start and restart CPR and whether or not a shock is advised.

The advice additionally states that schools may wish to consider raising awareness of AED and CPR training across the whole school, and that this may be done through PSHE:

Schools may wish to consider raising AED awareness, along with CPR training, across the entire school community to ensure that there is a greater likelihood of being able to assist someone suffering a cardiac arrest in time to save their life. The Resuscitation Council (UK) states that untrained bystanders should not be discouraged from using an AED in an emergency. Nevertheless, individuals who have received training will naturally feel more confident in doing so should the need arise.

One way in which this might be done is through personal, social, health and economic (PSHE) education, which all schools should provide. The PSHE Association’s suggested programme of study includes emergency life-saving skills as part of PSHE provision. Schools may want to consider using/contacting organisations such as the local IMPS (Injury Minimization Programme for Schools) programme, the British Red Cross, St John Ambulance and the Royal Life Saving Society UK, who may be able to provide suitable resources and/or training…

Secondary school pupils and older primary school children are generally capable of sufficiently compressing the chest to the correct depth and speed in order to successfully administer CPR. CPR training can also give children the confidence and skills to talk an adult through the administration of CPR.

Younger primary-aged children frequently lack the physical strength to carry out CPR on adults, so general awareness training (including, for example, how to dial 999 and put someone in the recovery position) may be considered more appropriate for this age group.16

Similarly, Department for Education non-statutory guidance on supporting pupils with medical conditions advises schools to consider purchasing a defibrillator and promoting CPR techniques more widely in schools.17

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2.4 Training and resources from other organisations

A number of organisations, including St John Ambulance, the British Red Cross and the British Heart Foundation offer training and resources to schools for teaching emergency first aid.

As part of the support it provides to schools, the British Heart Foundation offers free CPR training packs – the “Call Push Rescue Training kit” – to all secondary schools in the UK:

The training kit covers how and when to perform CPR on an adult or child, put someone in the recovery position and use a public access defibrillator.

It’s suitable for students 12 years old and over. The kit contains an educational DVD demonstrating how to do CPR while trainees practise along using the inflatable manikins. No instructor is needed as all of the techniques are taught using the DVD. All you need is a DVD player and a little space to practise in.

When you sign up you’ll also receive a free welcome pack with everything you need to get the CPR training up and running in your school including posters, assembly film, lesson framework and much more. Shortly afterwards you’ll receive your training kit.18

The Government has stated that it will “work with the British Heart Foundation to continue to promote this kit to schools”.19

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**Box 3: How many children currently receive emergency first aid education?**

There are no official statistics collated on the proportion of school children in England who currently receive emergency first aid education. A number of figures have been quoted, including:

- An October 2015 article on the Red Cross website stated that “research developed by” the Red Cross, the British Heart Foundation and St John Ambulance showed that “only 24% of schools currently teach first aid”.20
- In a 2012 briefing on the campaign for life-saving skills to be taught in schools, the British Heart Foundation estimated that around one in seven secondary school children in England “receive training that could help them potentially save a life.” 21
- A 2009 survey of 1552 primary and secondary school children conducted by St John Ambulance found that 69% of those surveyed “wouldn’t know how to treat a friend or loved one who needed first aid”.22
- A 2006 survey conducted by the International Federation of Red Cross and Red Crescent societies stated that the percentage of the population trained in first aid among the countries who responded to the survey ranged from 95% in Norway to 0.3% in Hungary.23

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18 “Train your students”, British Heart Foundation, last accessed 9 November 2015.
19 PQ3525, 25 June 2015
20 Top charities join forces to launch Every Child a Lifesaver campaign, British Red Cross, 1 October 2015.
21 British Heart Foundation and Resuscitation Council UK, *Briefing on campaign for life-saving skills to be taught in schools*, October 2012.
22 Pupils speak out about first aid, St John Ambulance, March 2009.
23 International Federation of Red Cross and Red Crescent Societies, *First aid for a safer future: Focus on Europe*, 2009, p3
3. Cardiopulmonary resuscitation and defibrillator awareness

The Bill provides for EFAE to include the use of cardiopulmonary resuscitation (CPR) and defibrillators. This section provides background information on out of hospital cardiac arrests (OHCA), and the effect of CPR and defibrillation on survival rates following an OHCA.

3.1 Consensus paper on out of hospital cardiac arrest

A consensus paper on OHCA in England, developed by the British Heart Foundation, NHS England and the Resuscitation Council, was published in October 2014. It reported that in 2013, the emergency medical services attempted to resuscitate approximately 28,000 cases of OHCA in England. Of these cases, the overall rate of survival to hospital discharge was 8.6%.\(^{24}\) The paper stated that the survival rates from other developed countries indicate that there is potential to improve survival rates in the UK.\(^{25}\)

**Box 4: How many OHCAs occur in England each year?**

The consensus paper stated that the total number of cardiac arrests in England is unknown. It further stated that before quoting any figure it is important to define what is meant by ‘cardiac arrest’ given that the heart stopping will always be part of the process of dying and in many cases attempting CPR would be of no benefit.

A figure of 60,000 OHCAs is often quoted, which the consensus paper states probably derives from a 2006 report by the Ambulance Services Association, “which identified 57,345 OHCAs in 2006, of which 25,143 received attempted CPR by the EMS [emergency medical services] and 32,202 who did not”. It is not certain how many of the 32,202 people would have been given CPR if the emergency services were called earlier or if bystanders had administered CPR.

The consensus paper stated that the most important figure is “the total number of cardiac arrests from which the person may have a chance of surviving if someone starts a resuscitation attempt immediately”. This is uncertain but is likely to be higher than the number of cardiac arrests in which the emergency medical services attempted resuscitation in 2013 (28,000).

The paper stated that when an individual has a cardiac arrest, every minute without cardiopulmonary resuscitation (CPR) and defibrillation reduces their chances of survival by 7-10%.\(^{26}\) It further stated that countries with the highest rates of OHCA survival are those which have strengthened all four links of the chain of survival:

- Early recognition and call for help
- Early CPR
- Early defibrillation
- Post resuscitation care


\(^{25}\) Ibid, p2

\(^{26}\) Ibid, pp2-3.
The rate of initial bystander CPR in England was reported in the paper as 43%, but this figure included situations where CPR was initiated following an instruction from a medical dispatcher after a 999 call. The paper noted that such situations “may result in a delay of up to several minutes before the victim receives CPR”.27

The paper stated that a number of factors contributed to the “low” level of bystander CPR and public access defibrillator use in England:

- Failure to recognise cardiac arrest
- Lack of knowledge of what to do
- Fear of causing harm (such as breaking the victim’s ribs) or being harmed (acquiring infection from a stranger when giving rescue breaths)
- Fear of being sued
- Lack of knowledge of the location of PADs
- No access to a PAD at the time of the cardiac arrest.28

It argued that:

…more immediate 999 calls and immediate CPR given by bystanders could increase the number of people who receive CPR by the EMS [emergency medical services]. This will increase the number of people who are given a chance of surviving, and ultimately increase the number of people who do survive when they are given CPR.29

3.2 Cardiovascular Disease Outcomes Strategy

The Department of Health’s Cardiovascular Disease Outcomes Strategy, published in March 2013, stated that there is variability between ambulance services in the survival to hospital discharge following an OHCA:

It is estimated that about 50,000 out of hospital cardiac arrests (OHCA) occur each year in England. Resuscitation may be inappropriate (due to a variety of reasons such as co-morbidity) and so attempted resuscitation by ambulance services occurs in less than 50% of cases. However, there is significant variability between ambulance services in rates of successful initial resuscitation (13-27%) and survival to hospital discharge (2-12%) following an OHCA.30

The strategy paper stated that, “if survival rates were increased from the overall average (around 7%) to that of the best reported (12%), it is estimated that an additional 1,000 lives could be saved each year”. The paper further stated that there is a case for basic life support skills to be more widely taught:

Many more lives could be saved with improved and earlier cardiopulmonary resuscitation (CPR), and the public could be

28  Ibid, p2.
29  Ibid, p2.
better informed and trained about what to do when they witness a cardiac arrest or someone with symptoms suggesting a heart attack. Bystander CPR doubles survival rates and yet is attempted in only 20-30% of cases. There is scope for all emergency service personnel to be trained in CPR, and for basic life support skills to be more widely taught, perhaps as part of volunteering programmes in schools and in the workplace. Wider availability of automatic external defibrillators (AEDs) could also save additional lives.\textsuperscript{31}

The strategy stated that the NHS England would:

\ldots work with the Resuscitation Council, the British Heart Foundation and others to promote automatic external defibrillators (AED) site mapping/registration and first responder programmes by ambulance services and consider ways of increasing the numbers trained in cardiopulmonary resuscitation (CPR) and using AEDs.\textsuperscript{32}

\textsuperscript{31} Ibid, pp31-2.
\textsuperscript{32} Ibid, p7.
4. Previous calls for compulsory first aid education

Summary

- There have been a number of parliamentary proceedings since 2010 concerning making emergency first aid a compulsory part of the curriculum.
- The Coalition Government, while expressing support for raising the profile of emergency first aid in schools, did not favour making it a compulsory part of the curriculum.
- A number of organisations, including St John Ambulance, the British Red Cross and the British Heart Foundation, have campaigned for emergency first aid to be made a compulsory part of the curriculum.

4.1 Developments inside Parliament

There have been a number of attempts since 2010 to make EFAE a compulsory part of the National Curriculum in England.

**National Curriculum (Emergency Life Support) Skills Bill 2010-12**

On 26 October 2011, Julie Hilling introduced the National Curriculum (Emergency Life Support Skills) Bill 2010-12 under the Ten Minute Rule. The Bill provided for amendments to be made to the Education Act 2002 to make emergency life support skills a compulsory part of the National Curriculum. Introducing the Bill, Julie Hilling stated:

> Every year, 150,000 people die when first aid could have made a difference. Thirty thousand people have a cardiac arrest outside a hospital environment, but fewer than 10% survive to be discharged from hospital. Emergency life support skills are a set of actions needed to keep someone alive until professional help arrives. They include cardiopulmonary resuscitation—CPR—putting an unconscious person into the recovery position, dealing with choking and serious bleeding, and helping someone who may be having a heart attack.

> Those skills are crucial at the time of a cardiac arrest when every second counts. For every minute that passes, the chance of survival falls by 10%. If CPR is started immediately, the time that someone remains in a shockable and hence reversible condition will be prolonged. It also means that more brain function will remain, and more of them will be left if they are resuscitated. It is not often that any Government have the opportunity simply, cheaply and immediately to save lives, but my Bill would allow them to do just that. Teaching these crucial life-saving skills to every school pupil would make a tangible difference to civil life in this country.

Nobody spoke against the Bill and it received a First Reading. However, it did not progress any further before falling at the end of the 2010-12 parliamentary session.

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33 HC Deb 26 October 2011 c319
Background to the Compulsory Emergency First Aid Education (State-funded Secondary Schools) Bill

Education Bill 2010-12

During Committee Stage of the Education Bill 2010-12, Julie Hilling moved an amendment that sought to make provision for teaching emergency life support skills in the National Curriculum. The Minister, Nick Gibb, noted the positive impact that life support skills could have but questioned whether making them a compulsory part of the National Curriculum was the right approach:

I agree that emergency life support skills can have an immensely positive impact on pupils’ families as well as schools and the wider community. It is encouraging to hear about the excellent work in schools, particularly those that have written to the Committee…

I am also aware of the invaluable support that organisations such as the British Heart Foundation and St John Ambulance offer individual schools or groups of schools to enrich curriculum work. I applaud them for their important work, but I do not agree that making emergency life support skills a statutory part of the curriculum is the right approach. Our aim, as set out in the White Paper, is to reduce unnecessary prescription throughout the education system. That means taking a new approach towards the curriculum that affirms the importance of teaching and creates scope for teachers to inspire students. That will give teachers and head teachers the freedom and flexibility to incorporate initiatives such as Heartstart in their school programmes.

We are clear that the national curriculum should set out the essential knowledge and understanding that all children should be expected to acquire in the course of their school lives. It is for teachers to design the wider curriculum in the way that meets the needs of their pupils, taking account of the views of parents, the wider community and local circumstances. I therefore urge the hon. Lady to withdraw the new clause.

The amendment was negatived without a division.34

Personal, Social, Health and Economic Education (Statutory Requirement) Bill 2015-16

On 15 July 2015, Caroline Lucas introduced a Ten-Minute Rule Bill that would require the Secretary of State to provide that PSHE be a statutory requirement for all state-funded schools. The Bill also provided for the topics that PSHE should comprise, one of which was “education about physical health (including emergency life-saving skills)”.35 The Bill received a first reading following a division and is scheduled to have its Second Reading on 22 January 2016.

Debates

There were a number of debates during the 2010-15 Parliament on making emergency first aid a compulsory part of the National Curriculum.36 This included a debate in the main chamber on 22 November 2011, following which the House resolved that “every child

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34 Education Bill Deb 5 April 2011 c988-90
35 Personal, Social, Health and Economic Education (Statutory Requirement) Bill (HC Bill 59), clause 13(2)
36 For example, there were debates in Westminster Hall on 7 June 2011 and 10 March 2015 and in the main chamber on 22 November 2012.
should leave school knowing how to save a life”. There were also debates in Westminster Hall.

During these debates, some speakers did express reservations about making emergency first aid a compulsory part of the curriculum (see also section 4.2 below). However, the majority of speakers put forward similar arguments in favour of EFAE being compulsory in schools. The arguments presented included (but were not limited to):

- Only a small proportion of the population have the confidence to carry out emergency first aid.
- EFAE is as important as many subjects currently part of the National Curriculum and only takes a short amount of time to teach.
- Free packs from the British Heart Foundation means that there would be minimal cost to the exchequer and staff would not need extensive training.
- There can be a lack of consistency in current provision as it can be affected by teachers leaving a school etc.

4.2 Government position

Position of the Coalition Government

The position of the Coalition Government to making EFAE a compulsory part of the National Curriculum was outlined in response to parliamentary questions, petitions and debates. While Ministers expressed support for raising the profile of emergency first aid in schools, they did not support making the subject compulsory for fear of producing an “over-prescribed school curriculum”.

This position was set out by the then Parliamentary Under-Secretary of State for Children and Families, Tim Loughton, in response to a Westminster Hall debate in 2011:

There can be no more important training than that which allows someone to save the life of another who is injured, ill or otherwise in danger, and we must do all we can to ensure that children learn the basic skills that they might need in case of emergency. We all agree on that, but the best way is not through the academic base of knowledge that the national curriculum contains, but through the broader curriculum. Just because the skills are not specified in the national curriculum does not mean they will not and should not be taught, or that the Government are downplaying or undervaluing them. The reverse is true. I implore all schools to ensure that their pupils develop the personal and social skills they need to become responsible citizens, and to lead healthy and safe lives, and that includes being able to encourage and enable others to lead healthy and safe lives.

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37 HC Deb 22 November 2012 c794
38 For example, HC Deb 22 November 2012 c777
39 For example, HC Deb 10 March 2015 c28WH
40 For example, HC Deb 22 November 2012 c775, and HC Deb 7 June 2011 c51WH.
41 For example, HC Deb 10 March 2015 c31WH
42 For example, HC Deb 10 March 2015 c33WH
43 HC Deb 19 January 2015 c21
44 HC Deb 7 June 2011 c58-9WH
Similarly, in response a Westminster Hall debate in March 2015, the Schools Minister, Nick Gibb, said:

The new national curriculum, which came into force in September 2014, represents a clear step forward for schools. It will ensure that all children have the opportunity to acquire the essential knowledge in key academic and non-academic subjects. However, I am afraid that it has now become somewhat routine for Education Ministers to come to such debates to make the case against the inclusion of a particular new requirement in the national curriculum. Proposals such as this are often supported by a persuasive argument, but their sheer number means that we need to start from a position of caution when addressing them.

The national curriculum creates a minimum expectation for the content of curriculums in maintained schools. Quite deliberately, it does not represent everything that a school should teach. Also, schools do not have a monopoly on the provision of education to children; parents and voluntary groups outside school also play an important role.

Many schools choose to include CPR and defibrillator awareness as part of their PSHE teaching. In the introduction to the new national curriculum, we have highlighted the expectation that PSHE should be taught, and improving the quality of PSHE teaching is a priority of this Government. However, we do not want to prescribe exactly which issues schools should have to cover in PSHE or other related parts of what we would call the school curriculum, as opposed to the national curriculum.

Prescribing a long list of specific content to be covered could be unproductive, leading to a tick-box approach that did not properly address the most important issues. Nor would it ensure that schools addressed those matters that were most relevant to their pupils. Indeed, we should trust schools to provide the right education for their pupils, within the overall framework of the national curriculum.

[...]

I am not arguing against the inclusion of CPR in a school’s teaching curriculum; I am arguing about whether teaching these things should be statutory. There is more than one way to achieve an objective.45

Position of the current Government

A parliamentary question in October 2015 asked what the Government was doing to encourage first aid training in secondary schools. In response, the Parliamentary Under-Secretary of State for Schools, Lord Nash, said:

All schools are required to teach a balanced and broadly based curriculum that promotes the spiritual, moral, cultural, mental and physical development of pupils, and prepares them for adult life. The new national curriculum focuses on the essential knowledge so that teachers can design a wider school curriculum that best meets the needs of their pupils.

Schools have the freedom to teach subjects or topics such as First Aid training beyond the prescribed curriculum to ensure that children receive a rounded education.

45 HC Deb 10 March 2015 c46-7WH
The Government welcomes the work of expert organisations such as the British Red Cross, St John Ambulance and the British Heart Foundation to support schools in this aspect of teaching and are currently working with the sector to provide information to young people about first aid, CPR and how to deal with medical emergencies.46

On 9 September 2015, Teresa Pearce raised the subject of her Private Member’s Bill at Prime Minister’s Questions:

Teresa Pearce (Erith and Thamesmead) (Lab): Every year, thousands of people have medical emergencies outside of hospitals. When it is a cardiac arrest, every minute without CPR—cardiopulmonary resuscitation—or defibrillation reduces survival chances by 7% to 10%. First aid is a true life skill. The majority of teachers and parents support the teaching of emergency first aid in schools. Will the Prime Minister look closely at my private Member’s Bill, which aims to do that and make every child a lifesaver?

The Prime Minister: I will certainly look closely at the hon. Lady’s private Member’s Bill, because this is a real lifesaver. The availability of CPR equipment, whether in village halls, pubs, schools or sports clubs, can save many, many lives. That is why there was £1 million in the Budget for buying defibrillators for public spaces and schools and for training. I am sure that many schools will want to take advantage of this.47

4.3 Other Stakeholders
A number of stakeholders have made calls for first aid training to be a mandatory part of the school curriculum.

St John Ambulance
In a September 2014 website article accompanying its submission to the Social Action, Responsibility and Heroism Public Bill Committee, St John Ambulance called on the Government “to commit to putting first aid on the national curriculum, to ensure the next generation have the confidence to save lives.”48 The submission cited research based on a survey of 2,035 adults, which found that the “primary reason why people are deterred from intervening in any situation requiring first aid is not concerns about legal repercussions (34%), but lack of confidence of their first aid knowledge (63%).”49 In its “first aid manifesto” for the 2015 general election, St John Ambulance called on the next government to “Give children the best start in life by putting first aid on the national curriculum.”50

British Red Cross
In written evidence to the Education Committee’s 2014-15 inquiry into PSHE, the British Red Cross argued that first aid should be included in

46 PQHL2721, 27 October 2015.
47 HC Deb 9 September 2015 c403
48 “New research shows people unlikely to help in an emergency without first aid skills”, St John Ambulance, September 2014.
49 St John Ambulance, Social Action, Responsibility and Heroism Bill: St John Ambulance submission to the Public Bill Committee, September 2014, p3.
50 St John Ambulance launches first aid manifesto, St John Ambulance, March 2015.
PSHE or elsewhere in the school curriculum. It recommended to the Committee that the PSHE curriculum should include:

First aid so that children know what to do when they, or those they are with, are injured. This builds the resilience of individuals and communities. It reduces pain, injury, may save lives and could reduce the pressure on A&E departments. A person’s life could be saved in the first few minutes after injury or incident, before the emergency services are on the scene if first aid is administered. It is therefore crucial to build a society of life-savers: people with the skills, willingness and confidence to administer first aid in an emergency.

We recommend that the eight first aid essential skills are included within the curriculum. These are:

• dealing with accidents
• unconsciousness and resuscitation
• choking
• bleeding and shock
• burns and scalds
• specific injuries (such as broken bones)
• specific illnesses (such as diabetes, meningitis, asthma) and
• emotional and social support.51

Further detail on the position of the Red Cross in included in the executive summary to its Life. Live it campaign, published in 2011.52

British Heart Foundation

In February 2015, the British Heart Foundation delivered a petition to the DfE calling for CPR to be a mandatory part of secondary education. Regarding the petition, Simon Gillespie, Chief Executive of the British Heart Foundation, said:

Too many lives are lost needlessly every day simply because people don’t know how to perform CPR. By making sure every young person is taught this life-saving skill, we can help more people survive a cardiac arrest and go home to their families.

We urge the governments and education authorities across the UK to act on the public’s clear call and help create a Nation of Lifesavers. By ensuring all school leavers are trained in CPR, we could help save 5,000 lives every year.

More than 30,000 people have a cardiac arrest outside of hospital every year in the UK, but less than one in ten survive.

We want to dramatically improve survival rates by creating a Nation of Lifesavers and making sure every young person leaves secondary school knowing how to perform CPR.

51 Written evidence submitted by the British Red Cross, SRE0247.
Survival rates in the UK are much lower than other countries. In parts of Norway, where children learn CPR in schools, up to 25% people survive a cardiac arrest.53

Further detail on the position of the British Heart Foundation is included its 2012 briefing on the campaign for life saving skills to be taught in schools.54

British Youth Council
In its manifesto for the 2015 general election, the British Youth Council stated that it wanted Parliament to “ensure that quality first aid is a compulsory subject for all children in schools”. The manifesto stated:

We believe that the compulsory teaching of First Aid skills as part of primary and secondary education would equip children and young people with a knowledge of life saving procedures, potentially saving thousands of lives. We also believe that First aid teaching should be given enough time and support to be taught to a high standard for all school pupils at a level appropriate to their ability.55

53 “Thousands back BHF campaign to get CPR taught in schools”, British Heart Foundation, 23 February 2015.
54 British Heart Foundation and Resuscitation Council UK, Briefing on campaign for life-saving skills to be taught in schools, October 2012.
55 British Youth Council, Our Parliament Our Vision 2015-2020, p14
5. Reaction to the Bill

5.1 Every Child a Lifesaver Campaign

Teresa Pearce, St John Ambulance, the British Red Cross and the British Heart Foundation jointly launched the Every Child A Lifesaver campaign in support of the Bill. The campaign encourages members of the public to request that their MP votes in favour of the Bill. Its website states that:

> The Emergency First Aid Education Bill will ensure that all young people are given the skills and confidence to know what to do in a medical emergency by teaching them first aid at school.\(^{56}\)

Launching the campaign, Teresa Pearce said:

> What the Bill aims to do is simple, straightforward and common-sense.

> At the moment only a quarter of secondary school teachers surveyed said their school taught CPR; 15% said their school taught defibrillator awareness; and just 10% both.

> If we want to save lives, these numbers have to be higher.

> The Bill doesn’t expect the impossible to suddenly become possible. Every one of us knows that not everybody can survive a serious accident or a medical emergency.

> But we can give people the absolute best chance of surviving by equipping people with the skills to keep them alive while the ambulance gets to them and transform the next generation into potential lifesavers.\(^{57}\)

**Mail on Sunday support**

The Mail on Sunday has expressed support for the Bill and has published a number of articles reporting comments in support of it.\(^{58}\) One of these, published in July 2015, quoted Sir Bruce Keogh, NHS England’s Medical Director, as saying that: “This autumn, Parliament will look again at the issue of putting first aid on the curriculum, and we must do everything we can to urge them to help us build a nation of lifesavers.”\(^{59}\)

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56. [Ask your MP to vote for first aid in schools](#), last accessed 6 October 2015.
57. [Teresa Launches Campaign for Emergency First Aid Education in Schools](#), website of Teresa Pearce, 21 September 2015.
58. For example, see [Lifesaving teenager says ‘I’m proof all pupils MUST learn first aid’](#); [Heroic Alisha backs our campaign - and calls on MPs to make it law](#), Mail Online, 19 September 2015.
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