

First Aid and Administration of Medicines Policy

Document Control Table	
Version no:	I
Date of last revision:	May 2023
Approval Required By: (Adoption and full 5 Year Review)	Board of Trustees
Date approved:	
Policy owner:	Director of Estates
Frequency of revision:	1 Year
Next review date:	May 2024
Revision approval required by:	Board of Trustees
Policy family:	Estates
Policy status:	Approved CEO awaiting BOT approval

Applies to (Mark as appropriate)			
Staff	Pupils / Students / Adult Learners	Parents / Carers / Guardians	Contractors
✓	✓	✓	✓
Volunteers	Students on placement	Trustees / LGC / Members	Visitors
✓	✓	✓	✓
Agency Staff	Other	a	a
✓	✓		

Published Locations				
Trust Website	Academy Website	Aldridge Intranet	Student/Parent planners	On-request
	✓	✓		✓

Consultation (Complete as appropriate in line with master policy document)			
With	Reason for Consultation	Final Consultation Date	Version No

Version History (please note below if a policy has been replaced)					
Version	Reviewer	Revision Date	Nature of Change	Adopted/ Approved by	Approval Date
VI		May 2023	Revised First Aid Policy in New Template		

Contents

1. Statement of Intent.....	6
2. Roles and Responsibilities.....	6
2.1 The Board of Trustees	6
2.2 The Principal	7
2.3 The Senior First Aider / Healthcare Professional	7
2.4 Appointed person(s) and first aiders	7
2.5 Mental Health First Aider	8
2.6 Staff Trained to Administer Medicines	8
2.7 Other Staff.....	8
3. Arrangements	8
3.1 First Aid Boxes	8
3.2 Medication	9
3.3 First Aid Needs Risk Assessment.....	9
3.4 Early Years Requirements	9
3.5 First Aid Provision	9
3.6 Insurance Arrangements.....	10
3.7 Educational Visits	10
3.8 Administering Medicines	10
3.9 Storage and Disposal of Medicines.....	10
3.10 Accidents/Illnesses requiring Hospital Treatment.....	11
3.11 Allergies.....	11
3.12 Defibrillators	11
3.13 Pupils with Special Needs – Individual Healthcare Plans (IHP) and Health and Care (EHC) plans.....	11
3.14 Emergency Procedures.....	12
3.15 Accident Recording and Reporting	12
3.16 Mental Health First Aid	13
4. Conclusions.....	14
5. Links with other Policies and Procedures	14
Appendix 1 - Contacting Emergency Services	15
Appendix 2 - Health Care Plan.....	16
Appendix 3 - Parental agreement for academy to administer medicine.....	18
Appendix 4 - Record of regular medicine administered to an individual child (Parts A and B).....	19
ix 5 - Administration of medication during	21
Appendix 5 – Administration of medication during seizures	22
Appendix 6 – Seizure Medication Chart.....	23
Appendix 7 - EpiPen®: Emergency Instructions	24
Appendix 8 – ANAPEN®: Emergency Instructions	28

Appendix 9 – Note to parent/carer for medication given	30
Appendix 10 - STAFF TRAINING RECORD	31
Appendix 11 - First Aider List	32
Appendix 12 - Location of First Aid Kits	33
Appendix 13 - First Aid Kit Monthly contents check sheet.....	34
6. Further Guidance.....	36
7. Resources for Specific Conditions	36

I. Statement of Intent

The Board of Trustees believe that ensuring the health, safety and welfare of staff, pupils and visitors is essential to the success of our academies.

We are committed to:

- Complete first aid needs risk assessments for every significant activity carried out.
- Providing adequate provision for first aid for pupils, staff and visitors.
- Ensuring that pupils and staff with medical needs are fully supported at their academy and suitable records of assistance required and provided are kept.
- First-aid materials, equipment and facilities are available, according to the findings of the risk assessment.
- Procedures for administering medicines and providing first aid are in place and are reviewed regularly.
- Promoting an open culture around mental health by increasing awareness, challenging stigma, and providing mental health tools and support.

We will ensure all staff (including supply staff) are aware of this policy and that sufficient trained staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.

In the event of illness, a staff member will accompany the pupil to the office/medical room. In order to manage their medical condition effectively, the academy will not prevent pupils from eating, drinking or taking breaks whenever they need to.

Our academies also have a Control of Infections Policy which may also be relevant and all staff should be aware of.

This policy has safety as its highest priority: safety for the pupils and adults receiving first aid or medicines and safety for the adults who administer them.

This policy applies to all relevant academy activities and is written in compliance with all current UK health and safety legislation and has been consulted with staff and their safety representatives (Trade Union and Health and Safety Representatives).

Name: Jenna Harty **Signature:** _____

(Principal)

Date: June 2023

2. Roles and Responsibilities

2.1 The Board of Trustees

- 2.1.1. The Board of Trustees has ultimate responsibility for health and safety matters - including First Aid in the academy.
- 2.1.2. Ensuring that the first aid needs risk assessment and provisions are reviewed annually and/or after any operational changes, to ensure that the provisions remain appropriate for the activities undertaken.
- 2.1.3. Provide first aid materials, equipment and facilities according to the findings of the risk assessment.
- 2.1.4. Ensuring that academy/ college leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are properly understood and effectively supported.

2.2 The Principal

- 2.2.1. To carry out a first aid needs assessment for the school site, review annually and/or after any significant changes. Assessment is available via the Academy's [Judicium portal \(Jedu\)](#).
- 2.2.2. Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are always present in the academy and that their names are prominently displayed throughout the academy.
- 2.2.3. Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role.
- 2.2.4. Ensuring all staff are aware of first aid procedures.
- 2.2.5. Ensuring appropriate risk assessments are completed and appropriate measures are put in place.
- 2.2.6. Undertaking, or ensuring that managers undertake risk assessments, as appropriate, and that appropriate measures are put in place.
- 2.2.7. Ensuring that adequate space is available for catering to the medical needs of pupils.
- 2.2.8. Reporting specified incidents to the Health and Safety Executive (HSE), when necessary the Academy's RIDDOR reporting procedure (refer to Accident and Incident reporting procedure).

2.3 The Senior First Aider / Healthcare Professional

- 2.3.1. Ensuring that pupils with medical conditions are identified and properly supported in the academy, including supporting staff on implementing a pupil's Healthcare Plan. Ensure appropriate records are maintained.
- 2.3.2. Work with the Principal to determine the training needs of academy staff, including administration of medicines.
- 2.3.3. Administer first aid and medicines in line with current training and the requirements of this policy.
- 2.3.4. Periodically (monthly) check the contents of each first aid box and any associated first aid equipment (e.g. Defibrillators and pads) and ensure these meet the minimum requirements, quantity and use by dates and arrange for replacement of any first aid supplies or equipment which has been used or are out of date. Minimum requirements for the contents of the First Aid Box and a checklist can be found in the Appendix 11.
- 2.3.5. Assist with completing accident report forms and investigations as per the Accident Reporting Policy.
- 2.3.6. Notify manager when going on leave to ensure continual cover is provided during absence.

2.4 Appointed person(s) and first aiders

- 2.4.1. The appointed persons are responsible for:
 - a) Taking charge when someone is injured or becomes ill
 - b) Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
 - c) Ensuring that an ambulance or other professional medical help is summoned, when appropriate.
- 2.4.2. First aiders are trained and qualified to carry out the role and are responsible for:
 - a) Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person and provide immediate and appropriate treatment.
 - b) Sending pupils home to recover, where necessary.
 - c) Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident.
 - d) Keeping their contact details up to date.
- e) Keeping the safeguarding team at the academy appropriately informed of incidents requiring first aid intervention with pupils.

2.5 Mental Health First Aider

2.5.1. The appointed persons are responsible for:

- a) Providing mental health first aid as needed, at their level of competence and training.
- b) Providing help to prevent mental health issues from becoming more serious before professional help can be accessed.
- c) Promoting the recovery of good mental health.
- d) Providing comfort to an individual with a mental health issue.
- e) also act as an advocate for mental health in the workplace, helping reduce stigmas and enact positive change.
- f) Escalate and document any matters if required within a suitable timeframe.
- g) Ensuring they maintain confidentiality as appropriate.
- h) Be carried away from their normal duties at short notice
- i) Listen non-judgmentally.
- j) Keeping the safeguarding team at the academy appropriately informed of incidents first aid intervention with pupils.

2.6 Staff Trained to Administer Medicines

2.6.1. Members of staff in the academy who have been trained to administer medicines must ensure that:

- a) Prescribed medicines may be administered by a trained member of staff who is aware of the written parental permission outlining the type of medicine, dosage and the time the medicine needs to be given.
- b) Wherever possible, the pupil will administer their own medicine under the supervision of a trained member of staff. In cases where this is not possible, the trained staff member will administer the medicine.
- c) If a child refuses to take their medication, staff will accept their decision and inform the parents accordingly.
- d) Records are kept of any medication given.
- e) Paracetamol may be administered within the parameters of the 'Administering Non-Prescribed Medicines – Paracetamol Policy'.

2.7 Other Staff

2.7.1. Ensuring they follow first aid procedures.

2.7.2. Ensuring they know who the first aiders in academy are and contact them straight away.

2.7.3. Completing accident reports for all incidents they attend to where a first aider is not called.

2.7.4. Informing the Principal or their manager of any specific health conditions or first aid needs.

3. Arrangements

A list of First Aiders and location of First Aid Boxes are displayed in the Academy Staff room (template in attached Appendices 11 and 12). These are to be made specific to the Academy.

3.1 First Aid Boxes

Use Appendix 12 to list the location of the Academy's First Aid boxes and defibrillator and display this list on the staff notice board and main offices

3.1.1. The first aid posts are located in:

1. Each classroom
2. Breakfast club room
3. KS2 playground
4. KS1 playground

5. Main entrance
6. Principal's office (defibrillator)

3.2 Medication

- 3.2.1. Pupils' medication is stored in:
 1. Inhalers in classroom
 2. Refrigerated medicine stored in the office fridge
 3. Securely stored within classroom in a locked container

3.3 First Aid Needs Risk Assessment

- 3.3.1. The Principal will ensure a first aid needs risk assessment is completed (the draft assessment is accessed via the Academy's [Judicium portal \(Jedu\)](#) to establish if there is adequate and appropriate first aid provisions in place.
- 3.3.2. The academy will ensure this assessment is reviewed when significant changes occur or annually.
- 3.3.3. A sufficient number of staff will be trained in First Aid At Work and/or Emergency First Aid At Work as per the outcome of the first aid risk assessment. Re-fresher training will be provided as required.
- 3.3.4. A sufficient number of staff will receive specialist training as identified with the first aid needs risk assessment (refer to 3.3.1) or as required within pupil's individual health care plans.

3.4 Early Years Requirements

- 3.4.1. The academy ensures first aid requirements set out in the statutory framework for early years foundation stage are in place.
- 3.4.2. The academy will ensure sufficient paediatric first aiders are in place as per the academy's first aid needs risk assessment and early years requirements.
- 3.4.3. The academy will ensure all staff who obtained a level 2 or level 3 qualification on or after 30 June 2016 have either a full PFA or an emergency PFA certificate within 3 months of starting work to be included in the required staff to child ratios at level 2 or level 3 in an early years' setting.
- 3.4.4. The academy will ensure paediatric first aid training is renewed every 3 years.
- 3.4.5. The academy will aim to achieve the Millie's Mark Award (<https://www.milliesmark.com/>). The aim of Millie's Mark is to keep children safe and minimise risk and accidents by:
 - Raising standards in paediatric first aid.
 - Increasing number of paediatric first aid trained staff.
 - Increasing confidence and competencies in applying paediatric first aid – no matter what the situation.
 - Enabling trained staff to respond quickly in emergencies.
 - Raising the quality and skills of the early years' workforce and helping them with day-to-day first aid issues, such as allergies.
 - Providing reassurance to parents.

3.5 First Aid Provision

- 3.5.1. In the case of a pupil accident, the procedures are as follows:
 - a) The member of staff on duty calls for a first aider; or if the child can walk, takes him/her to a first-aid post and calls for a first aider.
 - b) The first aider administers first aid and records details in our treatment book that is kept in each first aid kit.
 - c) If the child has had a bump on the head, they must be given a "bump on the head" note.
 - d) Full details of the accident are recorded in our accident book that is kept with the first aid kit and copies kept centrally at the office. The nature of the accident is recorded on CPOMs.

- e) If the child has to be taken to hospital or the injury is 'work-related' then the accident is reported to the Principal as per the Accident Reporting Policy
- f) If the incident is reportable under RIDDOR (Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 2013), then as the employer the Principal will arrange for this to be done as per the Accident Reporting Policy
- g) Bodily fluids; guidance on the response to and the cleaning up of bodily fluids can be found in the 'Arrangements' section of the 'Control of Infections Policy' (sections 3.10 and 3.11). Available via the Trust's intranet.

3.6 Insurance Arrangements

- 3.6.1. The Academy are part of the Risk Protection Arrangement (RPA) programme. This is not a traditional insurance scheme but it is a mechanism through which the cost of risks that materialise will be covered by government funds, this includes issues that would fall within the public and employers liability. Full details of the RPA can be found via this link [RPA membership rules for academy trusts \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

3.7 Educational Visits

- 3.7.1. In the case of a **residential visit**, the residential first aider will administer First Aid. Reports will be completed in accordance with procedures at the Residential Centre.
- 3.7.2. In the case of **day visits** a trained First Aider will carry a travel kit in case of need.
- 3.7.3. Where identified within an educational visits First Aid Needs Assessment, the First Aider will arrange for additional equipment such as epi-pens, inhalers as relevant to health care plans.

3.8 Administering Medicines

- 3.8.1. Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- 3.8.2. **Prescribed medicines** may be administered (by a staff member appropriately trained by a healthcare professional) where it is deemed essential. Most prescribed medicines can be taken outside of normal academy hours. Wherever possible, the pupil will administer their own medicine, under the supervision of a member of staff. In cases where this is not possible, the staff member will administer the medicine.
- 3.8.3. If a pupil refuses to take their medication, staff will accept their decision and inform the parents accordingly.
- 3.8.4. In all cases, the academy must have written parental permission outlining the type of medicine, dosage and the time the medicine needs to be given. These forms are available in the academy office.
- 3.8.5. Staff will ensure that records are kept of any medication given. Medication, e.g. for pain relief, will never be administered without first checking maximum dosages and when the previous dose was taken.
- 3.8.6. **Non-Prescribed paracetamol** may be provided under the 'Administering Non-Prescribed Medicines Policy - Paracetamol'

3.9 Storage and Disposal of Medicines

- 3.9.1. Medicines are kept securely in a locked area within the classroom or refrigerated medicines in the office fridge. It is the responsibility of the office staff in the academy to return medicines that are no longer required, to the parent for safe disposal.
- 3.9.2. Asthma inhalers / epi-pens will be held by the academy for emergency use, as per the Department of Health's protocol. These are located in a box within each classroom.
- 3.9.3. Expiry dates on medication are to be checked every term This is to be completed by the office staff, along with the First Aider.
- 3.9.4. When medication is no longer required, suitable disposal will be arranged, or medication will be collected by parents. This is to be completed by the office staff.

3.10 Accidents/Illnesses requiring Hospital Treatment

If a pupil has an incident, which requires urgent or non-urgent hospital treatment, The academy will be responsible for calling an ambulance for the pupil to receive treatment. When an ambulance has been arranged, a staff member will stay with the pupil until the parent arrives, or accompany a pupil taken to hospital by ambulance if required. This is to be completed by a trained First Aider. Parents will then be informed, and arrangements made regarding where they should meet their child. It is vital therefore, that parents provide the academy with up-to-date contact names and telephone numbers. This is to be completed by the office staff.

3.11 Allergies

- 3.11.1. Allergy is the response of the body's immune system to normally harmless substances, such as foods, pollen, and house dust mites. Whilst these substances (allergens) may not cause any problems in most people, in allergic individuals their immune system identifies them as a 'threat' and produces an inappropriate response. This can be relatively minor, such as localised itching, but it can be much more severe, causing anaphylaxis which can lead to upper respiratory obstruction and collapse. Common triggers are nuts and other foods, venom (bee and wasp stings), drugs, latex and hair dye. Symptoms often appear quickly and the 'first line' emergency treatment for anaphylaxis is adrenaline which is administered with an Adrenaline Auto-Injector (AAI).
- 3.11.2. Arrangements are in place for whole-school awareness training on allergies.
- 3.11.3. Allergy Awareness is covered in depth in the Allergy Awareness policy that supports this First Aid & Administration of Medicines policy.

3.12 Defibrillators

- 3.12.1 Defibrillators are available within the academy as part of the first aid equipment. First aiders are trained in the use of defibrillators. The Defibrillator(s) is located outside the Principal's office.
- 3.12.2 The local NHS ambulance service has been notified of its location.
- 3.12.3 Procedures are in place to maintain the equipment in accordance with manufacturers' recommendations.
- 3.12.4 The equipment is regularly checked (monthly) by Mrs C Pearson.

3.13 Pupils with Special Needs – Individual Healthcare Plans (IHP) and Health and Care (EHC) plans.

- 3.13.1. Some pupils have medical conditions or special educational needs (SENs) that, if not properly managed, could limit their access to education. A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her. Such pupils are regarded as having special needs. Most pupils with special needs are able to attend the academy regularly and, with support from the academy, can take part in most academy activities unless evidence from a clinician/GP state that this is not possible.
- 3.13.2. The academy will consider what reasonable adjustments they might make to enable pupils with special needs to participate fully and safely on academy visits. A risk assessment will be used to consider any steps needed to ensure that pupils with special needs are included.
- 3.13.3. The academy will not send pupils with special needs home frequently or create unnecessary barriers to pupils participating in any aspect of academy life. However, academy staff may need to take extra care in supervising some activities to make sure that these pupils, and others, are not put at risk.
- 3.13.4. Individual health care plans (IHP) and Education, Health and Care (EHC) plans will help the academy to identify the necessary safety measures to support pupils with special needs and ensure that they are not put at risk. The academy appreciates that pupils with the same medical condition do not necessarily require the same treatment. Not all pupils with special needs will require an IHP or EHC. It will be agreed with a healthcare professional and the parents when an IHP or EHC would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Principal will make the

final decision. Where a pupil has SEN but does not have a statement or EHC plan, their special educational needs should be mentioned in their IHP.

3.13.5. Parents/carers have prime responsibility for their child's health and should provide the academy with information about their child's medical condition or special educational needs. Parents, and the pupil, if they are mature enough, should give details in conjunction with their child's GP and Paediatrician. The Senior First Aider /Healthcare Professional may also provide additional background information and practical training for academy staff.

3.13.6 The procedure that will be followed when the academy is first notified of a pupil's medical condition or special educational needs:

Office staff will confirm with parents the nature of the medical condition with any letter from a medical professional to support the condition and consult with Mrs Pearson (First Aider) and / or Mrs Thomas (SENCO).

This will be in place in time for the start of the relevant term for a new pupil starting at the Sudell Primary School or no longer than two weeks after a new diagnosis or in the case of a new pupil moving to Sudell Primary School mid-term.

3.13.7 The procedure that will be followed annually or when there is a significant change in a pupil's medical condition or special educational needs:

This will be reviewed annually or when the need arises.

3.14 Emergency Procedures

3.14.1. Staff will follow the school's normal emergency procedures (for example, calling 999)

3.14.2. Each pupil's IHP will clearly set out what constitutes an emergency and will explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures.

3.14.3. If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives or accompany the pupil to hospital by ambulance.

3.15 Accident Recording and Reporting

3.15.1. First aid and accident record book is located in the office.

a) An accident form / book will be completed by the relevant member of staff on the same day or as soon as possible after an incident resulting in an injury. A copy will be emailed or printed out and sent to parents.

b) As much detail as possible should be supplied when completing the accident book – which must be completed fully.

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

d) Refer to the 'Accident & Incident Reporting & Investigation Procedure' located on the Trusts intranet / Estates / Polices folder for further information on recording, investigations and reviewing accidents and near misses.

3.15.2. Reporting to the HSE – RIDDOR

a) The Principal will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).

b) The Principal will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 15 days of the incident. Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
 - Fractures, other than to fingers, thumbs and toes
 - Amputations
 - Any injury likely to lead to permanent loss of sight or reduction in sight
 - Any crush injury to the head or torso causing damage to the brain or internal organs
 - Serious burns (including scalding)
 - Any scalping requiring hospital treatment
 - Any loss of consciousness caused by head injury or asphyxia
 - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
 - Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident).
- Where an accident leads to someone being taken to hospital
- Near-miss events that do not result in an injury, but could have been done. Examples of near-miss events include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment.
 - The accidental release of a biological agent likely to cause severe human illness.
 - The accidental release or escape of any substance that may cause a serious injury or damage to health.
 - An electrical short circuit or overload causing a fire or explosion.

c) Information on how to make a RIDDOR report is available here:

<http://www.hse.gov.uk/riddor/report.htm>

3.15.3. Notifying parents

The first aider who has administered the first aid check will inform the parent/carer of any accident or injury sustained by the pupil, and any first aid treatment given or if the pupil refused to have first aid assistance, on the same day.

3.15.4. Reporting to Ofsted and child protection agencies

- a) Registered Early Years Providers will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in their care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.
- b) The Principal will also notify the relevant Local Authority of any serious accident or injury to, or the death of, a pupil while in the academy care.

3.16 Mental Health First Aid

3.16.1. The academy is committed to ensuring mental health first aid is provided to staff. A mental health first aider's role in the academy is to act as the first point of contact for people with mental health issues, providing support and guidance to staff. The academy's mental health first aiders will also act as an advocate for mental health in the workplace, helping reduce stigmas and enact positive change. A list of the Academy's Mental Health First Aiders should be displayed in the staff room.

3.16.2. The academy mental health first aiders are here to support individuals who are struggling with mental health. They have been trained to actively listen without judgment and signpost staff to appropriate services where necessary.

3.16.3. The academy recognises that respecting the privacy of information relating to individuals who have received mental health first aid or may be experiencing a mental health problem or mental health crisis at work is of high importance.

- 3.16.4. All mental health first aiders and human resources representatives are obligated to treat all matters sensitively and privately in accordance with the academy's confidentiality policy.
- 3.16.5. Where a mental health first aider assesses there is a risk of harm to another individual, they must escalate the matter to HR/Line Manager who will advise on the next steps to be taken.
- 3.16.6. All staff are encouraged to speak to a mental health first aider at any time should they feel they may be developing a mental health problem, experiencing a worsening of an existing mental health illness or experiencing a mental health crisis.
- 3.16.7. If at any time a member of staff forms a belief that another colleague may be developing a mental health problem, suffering from a mental illness or experiencing a mental health crisis, they should contact a mental health first aider or HR/Line Manager.
- 3.16.8. The academy ensures all staff have access to support and information. All staff are encouraged to access this information at any time.

4. Conclusions

- 4.1. This First Aid and Medicine policy reflects the academy's serious intent to accept its responsibilities in all matters relating to the management of first aid and the administration of medicines. The clear lines of responsibility and organisation describe the arrangements which are in place to implement all aspects of this policy.
- 4.2. The storage, organisation, and administration of first aid and medicines provision is taken very seriously. The academy carries out regular reviews to check the systems in place meet the objectives of this policy.

5. Links with other Policies and Procedures

This policy is linked with the following policies, copies of which are located on the Trust intranet;

Related AE policies (available on the [Aldridge Education Intranet](#))

- Accident & Incident Reporting & Investigation Procedure
- Administering non prescribed medicines (paracetamol)
- First Aid Risk Assessment
- Risk Assessment Policy
- Health & Safety Policy Part 2 Roles & Responsibilities
- Health & Safety Policy Part 3 Arrangements
- Health & Safety Training Policy
- Infection Control Policy
- Pandemic Policy
- Child Protection and Safeguarding Policy

Appendix I - Contacting Emergency Services

Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information:

1. Your telephone number:

01254 703440

2. Give your location as follows (*insert academy address*)

Ellison Fold Terrace, Darwen

3. State that the postcode is:

BB3 3EB.

4. Give exact location in the academy (*insert brief description*)

5. Give your name: _____

6. Give name of child and a brief description of child's symptoms

7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to the casualty

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

Put a completed copy of this form by the telephone.

Appendix 2 - Health Care Plan

Academy	
Pupil Name & Address	
Date of Birth	
Class	
Medical Diagnosis	
Triggers	
Who needs to know about the pupil condition and what constitutes an emergency?	
Action to be taken in emergency and by whom	
Follow Up Care	
Family Contacts Names Telephone Numbers	
Clinic/Hospital Contacts Name Number	
GP Name Number	
Description of medical needs and signs and symptoms	
Daily Care Requirements	

Who is Responsible for Daily Care	
Transport Arrangements <i>If the pupil has life-threatening condition, specific transport healthcare plans will be carried on vehicles</i>	
Academy Trip Support/Activities outside school Hours (e.g. risk assessments, who is responsible in an emergency)	
Form Distributed To	

Date _____

Review date _____

This will be reviewed at least annually or earlier if the child's needs change

Arrangements that will be made in relation to the child travelling to and from the academy. *If the pupil has life-threatening condition, specific transport healthcare plans will be carried on vehicles*

Appendix 3 - Parental agreement for academy to administer medicine

One form to be completed for each medicine.

The academy will not give your child medicine unless this form is fully completed and signed.

Name of child _____

Date of Birth _____ / _____ / _____

Medical condition or illness _____

Medicine: To be in original container with label as dispensed by pharmacy

Name/type and strength of medicine _____
(as described on the container)

Date commenced _____ / _____ / _____

Dosage and method _____

Time to be given _____

Special precautions _____

Are there any side effects that the academy should know about? _____

Self-administration Yes/No (delete as appropriate)

Procedures to take in an emergency _____

Parent/Carer Contact Details:

Name _____

Daytime telephone no. _____

Relationship to child _____

Address _____

I understand that I must deliver the medicine safely to academy office.

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to appropriately trained academy staff administering medicine in accordance with the academy policy. I will inform the academy immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Parent/Carer's signature _____

Print Name _____

Date _____

Appendix 4 - Record of regular medicine administered to an individual child (Parts A and B)

Part A - Parent/Carer Authorisation

Name of child _____

Date of medicine provided by parent ____ / ____ / ____

Group/class/form _____

Name and strength of medicine _____

Quantity returned home and date _____

Dose and time medicine to be given _____

Staff signature _____

Signature of parent _____

Part B - Records

Name of child _____

Name and strength of medicine _____

Dose and time medicine to be given * _____

Check the medication given coincides with the information stated on Part A.

Date	___/___/___	___/___/___	___/___/___
Time given			
Dose given			
Name of member of staff			
Staff initials			
Observations/comments			

Date	___/___/___	___/___/___	___/___/___
Time given			
Dose given			
Name of member of staff			
Staff initials			
Observations/comments			

Date	___/___/___	___/___/___	___/___/___
Time given			
Dose given			
Name of member of staff			
Staff initials			
Observations/comments			

Date	___/___/___	___/___/___	___/___/___
Time given			
Dose given			
Name of member of staff			
Staff initials			
Observations/comments			

Date	___/___/___	___/___/___	___/___/___
------	-------------	-------------	-------------

Time given			
Dose given			
Name of member of staff			
Staff initials			
Observations/comments			

Date	___/___/___	___/___/___	___/___/___
Time given			
Dose given			
Name of member of staff			
Staff initials			
Observations/comments			

Date	___/___/___	___/___/___	___/___/___
Time given			
Dose given			
Name of member of staff			
Staff initials			
Observations/comments			

Date	___/___/___	___/___/___	___/___/___
Time given			
Dose given			
Name of member of staff			
Staff initials			
Observations/comments			

Appendix 5 – Administration of medication during seizures

INDICATION FOR ADMINISTRATION OF MEDICATION DURING SEIZURES

Location of medicine _____

Name _____ D.O.B. _____

Initial medication prescribed: _____

Route to be given: _____

Usual presentation of seizures: _____

When to give medication: _____

Usual recovery from seizure: _____

Action to be taken if initial dose not effective: _____

This criterion is agreed with parents' consent. Only staff trained to administer seizure medication will perform this procedure. All seizures requiring treatment in academy will be recorded. These criteria will be reviewed annually unless a change of recommendations is instructed sooner.

This information will not be locked away to ensure quick and easy access should it be required.

Appendix 7 - EpiPen®: Emergency Instructions

EpiPen®: EMERGENCY INSTRUCTIONS FOR AN ALLERGIC REACTION

Child's Name: _____

DOB: _____

Allergic to: _____



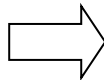
ASSESS THE SITUATION

Send someone to get the emergency kit, which is kept in:

IT IS IMPORTANT TO REALISE THAT THE STAGES DESCRIBED BELOW MAY MERGE INTO EACH OTHER RAPIDLY AS A REACTION DEVELOPS

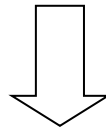
MILD REACTION

- Generalised itching
- Mild swelling of lips or face
- Feeling unwell/Nausea
- Vomiting



SEVERE REACTION

- Difficulty breathing/choking/coughing
- Severe swelling of lips/eyes/face
- Pale/floppy
- Collapsed/unconscious



ACTION

- Give _____ (Antihistamine) immediately
- Monitor child until you are happy he/she has returned to normal.
- If symptoms worsen see –

ACTIONS

1. Get _____ EpiPen® out and send someone to telephone 999 and tell the operator that the child is having an

'ANAPHYLACTIC REACTION'

2. Sit or lay child on floor.
3. Take EpiPen® and remove grey safety cap.
4. Hold EpiPen® approximately 10cm away from outer thigh.
5. Swing and jab black tip of EpiPen® firmly into outer thigh. MAKE SURE A CLICK IS HEARD AND HOLD IN PLACE FOR 10 SECONDS.
6. Remain with the child until the ambulance arrives.
7. Place used EpiPen® into a container without touching the needle.
8. Contact parent/carer as overleaf.

Emergency Contact Numbers

Mother: _____

Father: _____

Other: _____

Signed Principal/Principal: _____ Print Name: _____

Signed parent/guardian: _____ Print Name: _____

Relationship to child: _____ Date agreed: _____

Signed Paediatrician/GP: _____ Print Name: _____

Care Plan written by: _____ Print Name: _____

Designation: _____

Date of review: _____

Date	Time	Given by (print name)	Observation/evaluation of care	Signed/date/time

Check expiry date of EpiPen® every few months

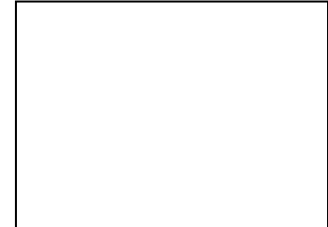
Appendix 8 – ANAPEN®: Emergency Instructions

ANAPEN®: EMERGENCY INSTRUCTIONS FOR AN ALLERGIC REACTION

Child's Name: _____

DOB: _____

Allergic to: _____



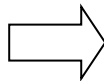
ASSESS THE SITUATION

Send someone to get the emergency kit, which is kept in:

IT IS IMPORTANT TO REALISE THAT THE STAGES DESCRIBED BELOW MAY MERGE INTO EACH OTHER RAPIDLY AS A REACTION DEVELOPS

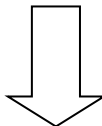
MILD REACTION

- Generalised itching
- Mild swelling of lips or face
- Feeling unwell/Nausea
- Vomiting



SEVERE REACTION

- Difficulty breathing/choking/coughing
- Severe swelling of lips/eyes/face
- Pale/floppy
- Collapsed/unconscious



ACTION

- Give _____ (Antihistamine) immediately
- Monitor child until you are happy he/she has returned to normal.
- If symptoms worsen see –

ACTIONS

1. Get _____ANAPEN® out and send someone to telephone 999 and tell the operator that the child is having an

2.

'ANAPHYLACTIC REACTION'

3. Sit or lay the child on the floor.
4. Get ANAPEN® and remove the black needle cap.
5. Remove the black safety cap from firing button.
6. Hold ANAPEN® against the outer thigh and press the red firing button.
7. Hold ANAPEN® in position for 10 seconds.
8. Remain with the child until an ambulance arrives. Accompany the child to the hospital in an ambulance.
9. Place used ANAPEN® into a container without touching the needle.
10. Contact parent/carer as overleaf.

Appendix 9 – Note to parent/carer for medication given

Note to parent/carer.

Name of academy _____

Name of child _____

Group/class/form _____

Medicine given _____

Date and time given _____

Reason _____

Signed by _____

Print Name _____

Designation _____

Appendix 10 - STAFF TRAINING RECORD

Name	Job Title	Name of Training Course	Date Undertaken	Date Refresher Required	Date Refresher Undertaken

Appendix II - First Aider List

Name	Usual Location	Qualification	Expiry Date

Appendix 12 - Location of First Aid Kits

	Location
Defibrillator	Outside the Principal's Office
First Aid Kit	Each classroom
First Aid Kit	Breakfast club room
First Aid Kit	KS2 playground
First Aid Kit	KS1 playground
First Aid Kit	Main entrance
First Aid Kit	
First Aid Kit	
First Aid Kit	

Appendix 13 - First Aid Kit Monthly contents check sheet

	Tick if correct, cross if not & re-order if required	Name of person completing the monthly check in the top box											
		Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	Jul	Aug
1	Guidance card												
6	Sterile dressings, 6 small, 6 medium and 2 large												
20	Individually wrapped sterile adhesive dressings (blue detectable in food preparation areas)												
2	Sterile eye pads												
4	Triangular bandages												
12	Safety pins												
5	Disposable gloves												
1	300ml bottle of sterile water or normal saline should be supplied where tap water is not available												
	Individually wrapped moist wipes could be supplied where tap water is not available												
1	Pair scissors (First Aid Type – not pointed)												
1	Roll micro pore tape												
1	Resuscitator mouthpiece / shield												
1	First Aid Accident Record Book												
1	First aid kit box accessible & in good order (re-order if damaged)												
1	Defibrillator is in the correct location & easily accessible												
1	Defib battery in date												
2	Defib pads in date												
	Defib passed self-test												
	Date re-ordered:												
	Comments on findings (date comment)												

SECTION	AREA	RESPONSIBLE	DATE ACTION COMPLETED
1. Statement of Intent	Sign & Date First Aid Policy	Principal	
2.3.1 Roles & Responsibilities	Pupil's Healthcare Plan. Ensure appropriate records are maintained	Principal	
2.3.4 Roles & Responsibilities	Implement monthly checks of First Aid equipment using Appendix 13	Senior First Aider	
2.3.5	State where records are kept of any medication given.	Senior First Aider	
2.6.1	Implement the Non-Prescribed medicines procedure	Principal	
3. Arrangements	A list of First Aiders and the location of First Aid Boxes & defibrillator(s) are to be displayed in the Academy Staff room and main offices (template in attached Appendices 11 and 12). These are to be made specific to the Academy.	Principal	
3.2 Medication	Pupils' medication – identify why these are stored & who checks expiry dates	Principal	
3.3 First Aid Needs	The Principal will ensure a first aid needs risk assessment is completed for their Academy (the draft assessment is accessed via the Academy's Judicium portal (Jedu) to establish if there is adequate and appropriate first aid provisions in place.	Principal	
3.5 First Aid Provision	a) Insert where the treatment book is kept b) Insert location of the accident book	Senior First Aider	
3.9 Storage and Disposal of Medicines	Insert location of Asthma inhalers / epi-pens & who is responsible for checking items are in place	Senior First Aider	
3.10 Accidents/Illnesses requiring Hospital Treatment	State who will be responsible for calling an ambulance & informing the Principal of RIDDOR incidents	Principal	
3.6 Defibrillators	State location of Defibrillators & confirm the local NHS ambulance service has been notified of its location	Senior First Aider	
3.13.6	Add the procedure that will be followed when the academy is first notified of a pupil's medical condition or special educational needs	Principal	
3.13.7	Add the procedure that will be followed annually or when there is a significant change in a pupil's medical condition or special educational needs		
3.15 Accident Reporting	State the location of the accident record book	Senior First Aider	
4. Conclusions	Ensure relevant staff are made aware of linked policies	Principal	
Appendices 1 to 13	Ensure relevant appendices, forms & documents are implemented as required locally	Principal	

6. Further Guidance

This policy is written in conjunction with Judicium Education which includes reference to further guidance that can be obtained from organisations such as the Health and Safety Executive (HSE) or Judicium Education. The H&S lead in the academy will keep under review to ensure links are current.

- HSE First Aid at Work
<https://www.hse.gov.uk/>
- The Health and Safety (First-Aid) Regulations 1981
<https://www.legislation.gov.uk/ukssi/1981/917/regulation/3/made>
- [First aid in schools, early years and colleges - GOV.UK \(www.gov.uk\)](#)
- [The Independent School Standards :: Independent Schools Inspectorate \(isi.net\)](#)
- Department for Education and Skills
www.dfes.gov.uk
- Department of Health
www.dh.gov.uk
- Disability Rights Commission (DRC)
www.drc.org.uk
- Health Education Trust
<https://healtheducationtrust.org.uk/>
- Council for Disabled Children
www.ncb.org.uk/cdc
- Contact a Family
www.cafamily.org.uk

7. Resources for Specific Conditions

- Allergy UK
<https://www.allergyuk.org/>
<https://www.allergyuk.org/information-and-advice/for-academys>
- The Anaphylaxis Campaign
www.anaphylaxis.org.uk
- SHINE - Spina Bifida and Hydrocephalus
www.shinecharity.org.uk
- Asthma UK (formerly the National Asthma Campaign)
www.asthma.org.uk
- Cystic Fibrosis Trust
www.cftrust.org.uk
- Diabetes UK
www.diabetes.org.uk
- Epilepsy Action
www.epilepsy.org.uk
- National Society for Epilepsy
www.epilepsysociety.org.uk

- Hyperactive Children's Support Group
www.hacsg.org.uk
- MENCAP
www.mencap.org.uk
- National Eczema Society
www.eczema.org
- Psoriasis Association
www.psoriasis-association.org.uk/