



## First Aid and Medical Conditions Policy

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|-----------------|-----------------|-------------------|-----------|
| Reviewed on     | Sept 2025       | Review frequency  | Annually  |
| Next review due | Sept 2026       | Template Yes / No | No        |
| Owner           | Head of Estates | Approved by       | Executive |



**1. History of Policy Changes**

| Date   | Page | Change  | Origin of Change |
|--------|------|---|------------------|
| Sep 25 |      | Addition of information following legislation updates |                  |

**2. Contents**

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## Sam's Entitlement

### 3. Introduction

Hamwic Education Trust (HET) will undertake to ensure compliance with the relevant legislation with regard to the provision of first aid for all employees and to ensure best practice by extending the arrangements as far as is reasonably practicable to children and others who may also be affected by our activities.

Responsibility for first aid at a school is held by the school leader who is the responsible manager.

All staff have a statutory obligation to follow and co-operate with the requirements of this policy.

### 4. Scope

Our first aid policy requirements will be achieved by:

- Carrying out a First Aid Risk Assessment to determine the first aid provision requirements for our premises.

- It is our policy to ensure that the first aid risk assessment will be reviewed periodically or following any significant changes that may affect first aid provision.
- the first aid risk assessment form will be used to produce the first aid needs assessment for our site.
- ensuring that there are enough trained first aiders on duty and available for the numbers and risks on the premises in accordance with the first aid risk assessment;
- ensuring that there are suitable and sufficient facilities and equipment available to administer first aid/medicines in accordance with the first aid risk assessment;
- ensuring the above provisions are clear and shared with all who may require them.

The responsible manager/designated person will ensure that appropriate numbers of qualified first aiders or appointed persons are nominated as identified by completion of the first aid needs assessment and that they are adequately trained to meet their statutory duties.

## 5. Definitions (delete as appropriate)

- HR' in this policy, means Hamwic Education Trust HR.
- 'Local Governing Committee' in this policy, where reference is made to the Governing Committee, this means the Local Governing Committee of the school, or the Trust in the case of a school where no Local Governing Committee is present. Where a Governing Committee is not present in a school, or numbers are low, Governors from other schools/partnerships may be used.
- 'Manager' in this policy, is anyone as identified in the staffing structure with line management responsibilities.

## 6. First Aid Provision

It is the responsibility of the lead first aider the First Aid at Work (FAW)/first aiders to check the contents of all first aid boxes half termly, or if large amounts of stock have been used. The lead first aiders are responsible for maintaining first aid supplies for the first aid boxes ensuring they are always equipped, along with administering first aid in the school to pupils & adults.

All first aiders to receive the first aid allowance must have an in date first aid certificate and be administering first aid when needed. Lead first aiders are responsible for administering first aid in the school to both pupils and adults.

A lead first aider is an employee who has a completed a three-day First Aid at Work certificate (current) and/ or a 1 or 2 day paediatric trained person (certificate current) who is considered as one of the main first aiders dealing with first aid on a regular daily basis as decided by the school/HET.

*The First Aid allowance is £15 per month*

They must notify the Business Manager/ Operations Manager when supplies need ordering.

Upon being summoned in the event of an accident, the first aider/appointed person is to take charge of the first aid administration/emergency treatment commensurate with their training. Following their assessment of the injured person, they are to administer appropriate first aid and make a balanced judgement as to whether there is a requirement to call an ambulance. If the incident is more serious and they need to call the FAW for support, then they must do so and remain with the injured person



until a complete handover has taken place. The injured person should not be moved if there is any possibility of a spinal or neck injury.

The first aider/appointed person is to always request an ambulance on the following occasions:

- In the event of a severe injury.
- in the event of any significant head injury;
- in the event of a period of unconsciousness;
- whenever there is the possibility of a fracture/dislocation or where this is suspected;
- whenever the first aider is unsure of the severity of the injuries;
- whenever the first aider is unsure of the correct treatment;
- in the event of a severe allergic reaction or following the administration of an EpiPen;
- in the event of the person having difficulty breathing;
- severe seizure if person has not had a seizure before.

In the event of an accident involving a pupil/student, where appropriate, it is policy to always notify parents of their child's accident if it:

- Is considered to be a serious (or more than minor) injury;
- requires first aid treatment for serious (or more than minor) injury;
- requires attendance at hospital;
- if there has been an injury to the head.

Our procedure for notifying parents will be to use all telephone numbers available to contact them and leave a message should the parents not be contactable.

In the event that parents cannot be contacted and a message has been left, our policy will be to continue to attempt to make contact with the parents every hour. In the interim, we will ensure that the qualified first aider, appointed person or another member of staff remains with the pupil/student until the parents can be contacted and arrive (as required).

In the event that the pupil requires hospital treatment and the parents cannot be contacted prior to attendance, the qualified first aider/appointed person/another member of staff will accompany the student to hospital and remain with them until the parents can be contacted and arrive at the hospital.

All accidents requiring first aid treatment are to be recorded on the minor accident form if it involves a pupil. For more serious accidents/incidents use the online form for pupils & for staff, visitors etc.

All accidents requiring hospital treatment will be reported to the head of estates immediately in line with RIDDOR. There will then be an accident investigation by the head of estates and relevant staff.

## **7. Supporting pupils with a medical condition**

All schools will ensure that relevant trained staff will be made aware of a child's condition and all arrangements needed are in place to ensure such children can access and enjoy the same opportunities at school as any other child and that no child shall be discriminated against.



Individual health care plans can help ensure that schools effectively support pupils with medical conditions. Also to ensure they support their social & emotional needs & managing medication. They will be written in partnership with staff, parents, & relevant health care professionals.

The level of detail needs to be suitable to the child's need. It should contain all the relevant medical information, contact details and any emergency procedures specific to that child. All relevant staff will need to be made aware of its content. The plans will need to be reviewed yearly, or as & when changes occur.

Parents should:

- Provide the school with sufficient and up-to-date information about their child's medical needs;
- Be involved in the development and review of their child's Individual Healthcare Plan, and may be involved in its drafting;
- Carry out any action they have agreed to as part of the implementation of their child's Healthcare Plan, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

If they fail to provide sufficient medication, they should be contacted immediately and necessary arrangements made, e.g. provision of medication, returning the child to the parent awaiting provision of the medication, etc.

### **Day Trips, Residential Visits and Sporting Activities**

Arrangements must be clear and unambiguous about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, including physical education lessons and not prevent them from doing so, unless it is otherwise stated in their Individual health Care plan.

Teachers and/or other designated school staff should be aware of how a child's medical condition will impact on their participation, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments.

Schools should make arrangements for the inclusion of pupils in such activities with any reasonable adjustments as required unless evidence from a clinician such as a GP states that this is not possible. Schools should consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits.

It is best practice to carry out a risk assessment so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. This will require consultation with parents and pupils and advice from the relevant healthcare professional to ensure that pupils can participate safely.

## **8. Managing and administration of medicines**

Medicines should only be administered at school where it would be detrimental to a child's health if it were not administered during the day. (It should be noted that wherever feasible parents should

administer medication outside of school hours). Medicines should only be administered at school when it would be detrimental to a child's health or social attendance not to do so.

No child under 16 will be given prescription or non-prescription medicines without their parents/carers written consent. First aid at work does not include giving tablets or medicines. The only exception is when aspirin is used as first aid to a casualty with a suspected heart attack for those over 16. Never give aspirin to a child younger than 16, unless it has been prescribed by a doctor or by advice of the ambulance service.

Where possible medicines should be taken in dose frequencies which enable them to be taken outside school hours.

Schools should only accept prescribed medicines that are in date, labelled, provided in the original container as dispensed by a pharmacist and include the instructions (the exception is insulin which must be in date but may be available in a pen or pump rather than original container) for administration, dosage & storage.

All medicines should be stored safely, and children should know where they are at all times and be able to access them immediately (if relevant).

Whilst some pupils will have long-term and complex medical conditions or carry their own medication (for example, an inhaler for asthma or adrenaline for intramuscular use in anaphylaxis) the only role for a first aider is generally, limited (where appropriate) to helping pupils who need to take their own medication to do so. Medicines and devices such as asthma inhalers, blood glucose testing meters and EpiPen's should always be readily available & not locked away. Pupils are encouraged to administer their own medication where relevant and in line with their health care plan.

Therefore, all schools will, before administering medicine, ensure that the administering medicine form is completed & signed by a parent/carer giving consent. Any member of staff administering medicine must be competent and receive sufficient & suitable training. The form must be completed every time the pupil receives their medication & witnessed. There will always be two members of staff present when administering any form of medicine/medical procedure. Any side effects of the medication should be noted down.

Staff should not dispose of medicines. Parents are responsible for ensuring that date-expired or unused medicines are returned to a pharmacy for safe disposal. They should also collect medicines held at the end of each term. If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal. A written record should be kept and parents informed. Sharps boxes should always be used for the disposal of needles. Sharps boxes can be obtained by parents on prescription from the child's GP or paediatrician.

## **9. Transport to Hospital**

Where the School Leader/SLT considers that hospital treatment is required the school should contact the emergency services for advice and follow it. Parents must be contacted and informed of the situation.



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

If, despite being fully appraised of the situation, the emergency service does not consider it necessary for transport by ambulance, but the school considers that further medical advice is required, the school should contact the pupil's next of kin. If the next of kin cannot be contacted and/or do not have access to own transport, the school can, only in these exceptional circumstances arrange to transport the injured person using their school staff transport.

They must be accompanied by an additional responsible adult to support the injured person. If a child needs to be taken to hospital by ambulance a member of staff should accompany the child and stay with the injured child until their parents/guardians arrive.

Please note: All staff who are likely to use their own vehicles for business travel must have the appropriate business insurance, a valid MOT certificate (if required). It is the responsibility of the Head Teacher/Manager to check these documents together with the individual's driving license making note of any endorsements on an annual basis and maintain appropriate records.

## **10. Monitoring & Review**

This policy will be reviewed annually by the owner

