



'Believe, Excite, Succeed, Together'

FIRST AID AND MEDICINES POLICY

**Reviewed Jan 2025
Next review Jan 2026**

FIRST AID AND MEDICINES POLICY
STATEMENT OF INTENT

WELBOURN C OF E PRIMARY SCHOOL

The Governors and Head Teacher of the School believe that ensuring the health and welfare of staff, pupils and visitors is essential to the success of the school.

We are committed to:

- Providing adequate provision for first aid for pupils, staff and visitors.
- Ensuring that pupils with medical needs are fully supported at school.

Procedures for administering medicines and providing first aid are in place and are reviewed regularly.

Arrangements

The Paediatric First Aid Team

Staff who have Paediatric First Aid at Work Certificates, renewable every 3 years, are K Gadsby and D Francis and their certificates expire March 2027.

Other staff have certificates for ITC Level 3 in Emergency First Aid for Schools and Colleges due for renewal on 31.10.26. They are:-

Teachers: C Puttock, B Hope, L Steer, A Bonsall, C Parry

Teaching Assistants: L Colman

Midday supervisor assistants: S Dame

Senior Administrator: J Dwane

First Aid Boxes

First aid kits are located in each classroom.

Each lunchtime the midday staff take a first aid box out with them. First aid boxes are taken out on all trips and these are located in the staff room where the refill supplies can be found.

Medication

Pupils' medication is stored in:

- The school office cupboard unless it needs to be stored at a cold temperature, in that case it will be stored in the mini fridge located in the school office, clearly labelled.

First Aid

In the case of a pupil accident, the procedures are as follows:

- The member of staff on duty calls for a first aider; or if the child can walk, takes him/her to the staffroom to administer first aid.
- The first aider administers first aid and records on one of our accident forms. A copy of the form goes home with the child and a copy is kept in a file in the school office.
- If the child has had a bump on the head, they must be given a “bump on the head” note and the parent of the child informed by telephone.
- Full details of the accident are recorded on our accident form.
- If the child has to be taken to hospital or the injury is ‘work’ related then the accident is reported through the RIDDOR reporting system via LCC.

School Visits

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. In the case of **day visits** a trained First Aider will carry a travel kit in case of need.

Administering Medicines in School

Prescribed medicines may be administered in the School (by any of the teaching/teaching assistant/admin staff, all of whom have done basic first aid training) where it is deemed essential. Most prescribed medicines can be taken outside of normal school 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.

If a child refuses to take their medication, staff will accept their decision and inform the parents accordingly.

In all cases, we 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 school office.

Staff will ensure that records are kept of any medication given in the medical file kept in the school office.

Non-prescribed medicines may not be taken in school.

Storage/Disposal of Medicines

Medicines must be stored in the school office. The exception to this rule is inhalers, which must be clearly labeled with their name and kept where they can be easily reached where necessary.

It is the responsibility of the parents to collect unused medicines from the school and dispose of them accordingly.

Accidents/illnesses requiring Hospital Treatment

If a child has an incident, which requires urgent hospital treatment, the School will be responsible for calling an ambulance in order for the child to receive urgent medical treatment. When an ambulance has been arranged, parents will then be informed and arrangements can be made where they should meet their child. In the case of non-urgent hospital treatment, parents will be informed immediately and arrangements made for the parents to collect their child. It is vital therefore, that parents provide the school with up-to-date contact names and telephone numbers.

Pupils with Special Medical Needs – Individual Healthcare Plans

Some pupils have medical conditions that, if not properly managed, could limit their access to education.

These children may be:

- Epileptic
- Asthmatic
- Have severe allergies, which may result in anaphylactic shock
- Diabetic
- Peg fed

Such pupils are regarded as having medical needs. Most children with medical needs are able to attend school regularly and, with support from the school, can take part in most school activities. However, School staff may need to take extra care in supervising some activities to make sure that these pupils, and others, are not put at risk.

An individual health care plan can help schools to identify the necessary safety measures to support pupils with medical needs and ensure that they are not put at risk. Parents/guardians have prime responsibility for their child's health and should provide schools with information about their child's medical condition. Parents, and the pupil if they are mature enough, should give details in conjunction with their child's GP and Paediatrician. A school nurse may also provide additional background information and practical training for school staff.

Appendix

Forms

Form 1:	Contacting Emergency Services
Form 2:	Health Care Plan
Form 3:	Parental agreement for school to administer medicine
Form 4:	Record of regular medicine administered to an individual child
Form 5:	Indication for administration of medication during epileptic seizures
Form 5A:	Epileptic seizure chart
Form 6:	https://www.bsaci.org/wp-content/uploads/2024/01/Model-Policy-for-allergy-at-management-at-school-v2.1-090124.pdf
Form 7:	Medication given in school (note to parent/carer)
Form 8:	Record of staff training
Form 9:	Emergency contact numbers

Form 1

Request for an Ambulance

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

- Your telephone number: **01400 272798**
- Give your location as follows:-
Welbourn C of E Primary School
High Street
Welbourn
Lincoln
LN5 0NH
- State that the postcode is:-
01400272798
- Give exact location in the school.
- Give your name.
- Give name of child and a brief description of child's symptoms.
- 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

Form 2

Health Care Plan Form

Name of School

Child's Name

Class

Date of Birth/...../.....

Child's Address

Medical diagnosis or condition

Date

Review Date

Family Contact Information:-

Name

Phone No (work)

Home No

Mobile No

Clinic/Hospital Contact:-

Name

Phone No

G.P.:-

Name

Phone

Describe medical needs and give details of child's symptoms:-

.....

.....

Daily care requirements (e.g. before P.E./at lunchtime):-

.....

.....

.....

Describe what constitutes an emergency for the child, and the action to take if this occurs:-

.....

.....

.....

Follow up care:-

.....

.....

.....

Who is responsible in an emergency (state if different for off-site activities):-

.....

.....

Form copied to:-

.....

Form 3

Parental Agreement for School to Administer Medicine

Request Form for Parent/Guardian to Complete

Teaching staff will endeavor but cannot guarantee to administer prescribed medicines or supervise pupils taking them, though this is purely voluntary. They will not give your child medicine or supervise unless you complete and sign this form.

DETAILS OF PUPIL

Surname

Forename (s)

Address

M / F Date of Birth Class

Condition of Illness

MEDICATION

Name/Type of Medication (as described on the container):-

.....

For how long will your child take this medication:-

.....

Date Dispensed:- Expiry Date:-

FULL DIRECTIONS FOR USE:

Dosage and Method as described by the doctor on the medication:-

.....

Timing:-

Special Precaution/Storage:-

.....

Side Effects:-

Procedures to take in an Emergency:-

.....

I understand that the medicine must be delivered personally to and collected from:

.....

Signed

Date

CARRYING OWN MEDICATION (asthma inhalers/diabetic equipment):-

I would like my son/daughter to keep his/her medication on him/her for use as necessary:-

Signed

Date

SELF ADMINISTRATION

I would like my son/daughter to manage his/her own medication and take the medicine himself/herself with a member of teaching staff present:-

Signed

Date

CONTACT DETAILS

Name

Daytime Telephone number

Address

Relationship to child

Form 4

Record of regular medicine administered to an individual child

DATE	Child's Name & Class	Time	Name of Medicine	Have you checked there is a Doctor's label? What is the expiry date? Dosage information	Dose Given	Signature of 2 staff members	Print Name

Form 5

Indication for administration of medication during epileptic seizures

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 the School will be recorded. The criterion will be reviewed annually unless change of recommendations instructed sooner.

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

Form 7

Medication given in the School (note to parent/carer)

Name of school:

Name of child:

Group/class/form:

Medicine given:-

Date and time given:

Reason:

Signed by:

Print Name:

Designation:

Form 8

Emergency Contact Numbers

Mother:

Father:

Other:

Signed Head teacher:

Print Name:

Signed parent/guardian:

Print Name:

Relationship to child:

Date agreed:

Signed Pediatrician/GP:

Print Name:

Care Plan written by:

Print Name:

Designation:

Date of review:

Useful Contacts:-

Allergy UK

Allergy Help Line: (01322) 619864

Website: www.allergyfoundation.com

The Anaphylaxis Campaign

Helpline: (01252) 542029

Website: www.anaphylaxis.org.uk and www.allergyinschools.co.uk

Association for Spina Bifida and Hydrocephalus

Tel: (01733) 555988 (9am to 5pm)

Website: www.asbah.org

Asthma UK (formerly the National Asthma Campaign)

Adviceline: 08457 01 02 03 (Mon-Fri 9am to 5pm)

Website: www.asthma.org.uk

Cystic Fibrosis Trust

Tel: (020) 8464 7211 (Out of hours: (020) 8464 0623)

Website: www.cftrust.org.uk

Diabetes UK

Careline: 0845 1202960 (Weekdays 9am to 5pm)

Website: www.diabetes.org.uk

Department of Health

Tel: (020) 7210 4850

Website: www.dh.gov.uk

Epilepsy Action

Freephone Helpline: 0808 800 5050

Website: www.epilepsy.org.uk

Health and Safety Executive (HSE)

HSE Infoline: 08701 545500 (Mon-Fri 8am-6pm)

Website: www.hse.gov.uk

National Society for Epilepsy

Helpline: (01494) 601400 (Mon-Fri 10am to 4pm)

Website: www.epilepsynse.org.uk