

Thames View Junior School

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First Aid & Supporting Pupils with Medical Needs Policy

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Section 1: Policy Statement

Thames View Junior School is committed to providing a safe, caring and inclusive environment where the health, safety and welfare of every pupil, member of staff and visitor is paramount. The school recognises that prompt, effective first aid and appropriate support for pupils with medical conditions are essential in ensuring that all members of the school community can participate fully in school life and achieve their full potential.

The school acknowledges its statutory responsibilities under health and safety legislation and the Children and Families Act 2014 to make suitable arrangements for pupils with medical conditions. We are committed to ensuring that no pupil is disadvantaged because of a medical need and that appropriate support is provided to enable them to access education safely and successfully.

This policy outlines the arrangements in place for:

- Providing appropriate first aid to pupils, staff and visitors.
- Supporting pupils with short-term and long-term medical conditions.
- Administering medicines safely and appropriately.
- Responding effectively to accidents, injuries and medical emergencies.
- Developing Individual Healthcare Plans (IHCPs) where required.
- Ensuring all staff understand their roles and responsibilities.
- Maintaining accurate records of first aid treatment and medication administration.
- Promoting partnership working with parents, carers and healthcare professionals.

Thames View Junior School strives to ensure that pupils with medical conditions are properly supported so that they can attend school regularly, participate in all aspects of school life, including educational visits and extracurricular activities, and receive the same opportunities as their peers wherever reasonably practicable.

The school will make reasonable adjustments where required under the Equality Act 2010 and will work collaboratively with families and external agencies to ensure that support is personalised, proportionate and responsive to individual needs.

First aid arrangements are based upon recognised best practice, regular risk assessment and the needs of the school community. Qualified first aiders, trained staff and designated medical personnel are available throughout the school day to provide immediate assistance when required.

The school is committed to maintaining high standards of training, equipment, communication and record keeping to ensure that all medical incidents are managed consistently, professionally and in the best interests of the individual.

Section 2: Aims

The aims of this policy are to ensure that Thames View Junior School:

- Provides effective first aid arrangements that safeguard the health, safety and welfare of pupils, staff, volunteers and visitors.
- Meets all statutory duties relating to first aid, health and safety and supporting pupils with medical conditions.
- Ensures pupils with medical conditions are able to access a full and inclusive education without unnecessary barriers.
- Promotes a consistent, whole-school approach to managing medical needs through clear procedures and defined responsibilities.
- Ensures suitably trained staff are available to provide first aid and administer medication where required.
- Enables staff to respond confidently and effectively to accidents, injuries, illnesses and medical emergencies.
- Maintains accurate records of accidents, injuries, first aid treatment and medication administration using the school's agreed recording systems.
- Works in partnership with parents, carers, healthcare professionals and external agencies to develop appropriate support arrangements for individual pupils.

- Ensures Individual Healthcare Plans are developed, implemented and reviewed where necessary.
- Promotes pupils' independence by supporting them to manage their own medical conditions safely where appropriate.
- Provides appropriate resources, equipment and facilities for the delivery of first aid and medical care.
- Ensures medicines are stored, administered and disposed of safely in accordance with current guidance.
- Reduces risks through effective planning, risk assessment and preventative measures.
- Supports staff through appropriate training and regular updates to maintain confidence and competence.
- Promotes a culture where the wellbeing, dignity and individual needs of every pupil are respected and protected.

The school believes that effective first aid provision and high-quality medical support contribute significantly to safeguarding, pupil wellbeing, attendance, inclusion and positive educational outcomes.

Section 3: Legislation and Statutory Guidance

This policy has been developed in accordance with current legislation and statutory guidance relating to first aid, health and safety, safeguarding and the support of pupils with medical conditions.

Thames View Junior School will ensure that all first aid provision and arrangements for supporting pupils with medical needs comply with relevant legal requirements and reflect recognised best practice.

This policy should be read alongside the Department for Education's statutory guidance **Supporting Pupils at School with Medical Conditions** and is underpinned by the school's safeguarding responsibilities.

Relevant Legislation

This policy has due regard to, but is not limited to, the following legislation:

- Health and Safety at Work etc. Act 1974
- The Health and Safety (First Aid) Regulations 1981
- Management of Health and Safety at Work Regulations 1999
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
- Children and Families Act 2014
- Equality Act 2010
- Children Act 1989
- Children Act 2004
- Education Act 2002
- Data Protection Act 2018
- UK General Data Protection Regulation (UK GDPR)
- Social Security (Claims and Payments) Regulations 1979
- Human Medicines Regulations 2012

Statutory Guidance

This policy has been informed by the following government guidance:

- Department for Education – *Supporting Pupils at School with Medical Conditions* (Statutory Guidance)
- Department for Education – *Keeping Children Safe in Education* (current edition)
- Department for Education – *Health and Safety: Responsibilities and Duties for Schools*

- Department for Education – *Guidance on the Use of Emergency Salbutamol Inhalers in Schools*
- Department of Health – *Guidance on the Use of Adrenaline Auto-Injectors in Schools*
- Health and Safety Executive (HSE) guidance on First Aid at Work
- NHS guidance relating to childhood illnesses, emergency first aid and infection prevention

Equality and Inclusion

In accordance with the Equality Act 2010, Thames View Junior School will make reasonable adjustments to ensure that pupils with disabilities or long-term medical conditions are not placed at a substantial disadvantage compared with their peers.

Medical conditions will never be used as a reason to deny a pupil access to education, school activities or educational visits unless this is supported by an appropriate risk assessment and professional medical advice.

Safeguarding

The health, safety and wellbeing of pupils is central to the school's safeguarding responsibilities.

Where a medical concern raises safeguarding concerns, staff will follow the school's Child Protection and Safeguarding Policy and report concerns immediately to the Designated Safeguarding Lead (DSL) or Deputy DSL.

Medical information will be shared only with those staff who need the information in order to safeguard and appropriately support the pupil.

Section 4: Scope

This policy applies to all members of the Thames View Junior School community, including:

- All pupils.
- Teaching staff.
- Support staff.
- Senior leaders.
- Governors.
- Volunteers.
- Students on placement.
- Contractors working on the school site.
- Visitors attending the school.
- External providers delivering activities on behalf of the school.

The policy applies:

- During the normal school day.
- Before and after school activities organised by the school.
- Educational visits.
- Residential visits.
- Sporting events.
- Extra-curricular clubs.
- Holiday provision where organised by the school.
- Any off-site activity where the school retains responsibility for pupils.

The policy covers:

- The provision of first aid.
- Management of accidents and injuries.
- Illness occurring during the school day.
- Emergency medical situations.
- Administration of medicines.

- Support for pupils with temporary or long-term medical conditions.
- Development and implementation of Individual Healthcare Plans (IHCPs).
- Storage, administration and disposal of medication.
- Staff training and competency.
- Accident reporting and record keeping.
- Communication with parents, carers and healthcare professionals.

This policy complements, and should be read alongside, other school policies relating to safeguarding, health and safety, educational visits, administration of medicines, intimate care, SEND, attendance and behaviour.

Section 5: Roles and Responsibilities

Providing effective first aid and supporting pupils with medical needs is a shared responsibility. All members of the school community have an important role in ensuring that pupils remain safe, healthy and fully included in school life.

5.1 The Governing Body

The Governing Body is responsible for ensuring that:

- Appropriate arrangements are in place to meet statutory first aid and medical needs requirements.
- Suitable numbers of trained first aiders are available.
- Appropriate policies and procedures are implemented and regularly reviewed.
- Resources are made available to maintain effective first aid provision.
- Appropriate insurance arrangements are maintained.
- Staff receive suitable training and ongoing professional development.
- The school fulfils its duties under the Equality Act 2010 and Children and Families Act 2014.
- Pupils with medical conditions are able to access all aspects of school life safely.

5.2 Executive Headteacher and Head of School

The Executive Headteacher and Head of School have overall responsibility for implementing this policy and ensuring effective first aid arrangements throughout the school.

This includes:

- Ensuring adequate numbers of trained first aid staff are available at all times.
- Ensuring appropriate risk assessments are undertaken.
- Ensuring staff understand their responsibilities.
- Supporting the implementation of Individual Healthcare Plans.
- Ensuring first aid equipment is available and maintained.
- Ensuring statutory reporting requirements are met.
- Liaising with governors regarding health and safety matters.
- Promoting a culture where health, wellbeing and safeguarding remain priorities.

5.3 Medical Lead

The designated Medical Lead has day-to-day responsibility for coordinating medical provision within the school.

This includes:

- Coordinating first aid provision.
- Maintaining first aid supplies and medical equipment.
- Overseeing Medical Tracker records.
- Supporting staff in responding to medical incidents.
- Liaising with healthcare professionals.
- Supporting the completion and review of Individual Healthcare Plans.
- Monitoring pupils with ongoing medical conditions.

- Coordinating communication with parents where required.
- Ensuring emergency medication is readily available.
- Supporting educational visits by ensuring appropriate medical arrangements are in place.

5.4 Qualified First Aiders

Qualified First Aiders are responsible for:

- Responding promptly to accidents and medical emergencies.
- Assessing injuries and illnesses.
- Administering appropriate first aid within the limits of their training.
- Calling emergency services where necessary.
- Remaining with the casualty until appropriate care is available.
- Recording all treatment on Medical Tracker as soon as reasonably practicable.
- Informing parents where appropriate.
- Reporting concerns to senior leaders.
- Maintaining confidentiality.

5.5 All Staff

Every member of staff has a responsibility to:

- Take reasonable care of their own health and safety and that of others.
- Respond appropriately to accidents and emergencies.
- Know how to summon assistance from a qualified first aider.
- Follow this policy and associated procedures.
- Complete Medical Tracker records where required.
- Report hazards or concerns immediately.
- Attend relevant training.
- Be aware of pupils with Individual Healthcare Plans where appropriate.

- Maintain confidentiality regarding pupils' medical information.

No member of staff will be expected to administer medication or undertake medical procedures unless they have received appropriate training and have agreed to undertake those responsibilities.

5.6 Parents and Carers

Parents and carers are expected to:

- Inform the school promptly of any medical condition affecting their child.
- Provide accurate and up-to-date medical information.
- Supply prescribed medication in its original labelled packaging.
- Complete all required consent forms.
- Ensure medication remains in date.
- Replace emergency medication before its expiry date.
- Attend review meetings where appropriate.
- Inform the school immediately of any changes to medical needs.
- Ensure emergency contact details remain current.

5.7 Pupils

Where appropriate for their age and understanding, pupils are encouraged to:

- Inform an adult immediately if they feel unwell.
- Follow agreed healthcare arrangements.
- Develop independence in managing their medical condition where appropriate.
- Respect medication belonging to themselves and others.
- Report concerns regarding another pupil who appears unwell or injured.

5.8 Healthcare Professionals

Healthcare professionals, including School Nurses, General Practitioners (GPs), consultants and specialist nurses, may support the school by:

- Providing medical advice.
- Assisting with Individual Healthcare Plans.
- Delivering staff training where appropriate.
- Advising on medication and emergency procedures.
- Supporting reviews of pupils' medical needs.
- Liaising with the school to promote effective medical care.

Section 6: First Aid Arrangements

Thames View Junior School is committed to providing effective first aid arrangements that enable immediate and appropriate treatment to be given following an accident, injury or sudden illness.

The school has undertaken an assessment of its first aid needs, taking into account:

- The size and layout of the school site.
- The number and age of pupils.
- The needs of pupils with identified medical conditions or disabilities.
- The number of staff and visitors typically on site.
- Curriculum activities, including physical education and practical lessons.
- Educational visits and residential visits.
- The findings of health and safety risk assessments.

These arrangements are reviewed regularly to ensure they continue to meet the needs of the school community.

6.1 Qualified First Aiders

The school maintains an appropriate number of trained first aiders to ensure that suitably qualified staff are available throughout the school day, including during lunchtimes, before and after-school activities and educational visits.

A list of qualified first aiders is displayed prominently throughout the school and included within Appendix A of this policy.

The school will ensure:

- Appropriate first aid cover is available at all times.
- Additional cover is provided during educational visits where required.
- Newly appointed staff receive appropriate induction.
- First aid qualifications remain valid through regular refresher training.

6.2 Medical Room

The school maintains a designated medical room that provides a clean, safe and appropriate environment for:

- Assessing injuries.
- Administering first aid.
- Supporting pupils who become unwell during the school day.
- Administering medication where appropriate.
- Storing medicines safely.

The medical room is equipped with suitable first aid supplies, hygiene equipment and emergency contact information.

6.3 First Aid Equipment

First aid kits are strategically located throughout the school and are regularly checked to ensure that equipment remains complete, sterile and within expiry dates.

First aid kits are located in:

- The Medical Room.
- The School Office.
- Classrooms.
- The Hall.
- Outdoor play areas where appropriate.
- Educational visit bags.
- School vehicles where applicable.

Portable first aid kits are taken on all educational visits and off-site activities.

The Medical Lead is responsible for ensuring that supplies are monitored, replenished and replaced when necessary.

6.4 Automated External Defibrillator (AED)

Where an Automated External Defibrillator (AED) is available on the school site, its location will be clearly signposted and known by staff.

Appropriately trained members of staff will be familiar with its operation; however, modern AEDs provide verbal instructions and are designed to be used safely by members of the public during a cardiac emergency.

Emergency services should always be contacted immediately when an AED is required.

6.5 Calling Emergency Services

Staff must dial **999** immediately whenever there is concern that an individual may have sustained a life-threatening injury or illness.

Examples include, but are not limited to:

- Unconsciousness.
- Difficulty breathing.
- Suspected cardiac arrest.
- Severe allergic reaction (anaphylaxis).
- Seizures lasting longer than expected.
- Serious head injuries.
- Suspected spinal injuries.
- Severe bleeding that cannot be controlled.
- Suspected fractures requiring urgent medical attention.
- Serious burns.
- Any situation where a first aider believes emergency medical assistance is required.

Where an ambulance is called:

- A member of the Senior Leadership Team or Medical Lead will be informed immediately.
- Parents or carers will be contacted without delay.
- A member of staff will remain with the casualty until emergency services arrive.
- If a pupil requires hospital treatment and a parent or carer has not arrived, an appropriate member of staff will accompany the pupil until a responsible adult takes over, where appropriate.

6.6 Access to Emergency Medication

Emergency medication, including prescribed inhalers, adrenaline auto-injectors and other life-saving medication, will be readily accessible at all times.

Staff responsible for pupils with Individual Healthcare Plans will know:

- The location of emergency medication.
- When it should be administered.
- Who is trained to administer it.
- The emergency procedures to follow.

Medication will never be locked away if immediate access is required during an emergency.

6.7 Communication During Medical Incidents

Effective communication is essential during any medical incident.

Staff will ensure that:

- The Medical Lead or designated first aider is informed immediately.
- Senior leaders are notified of serious incidents.
- Parents or carers are informed as soon as practicable.
- Relevant staff receive any information necessary to support the pupil following treatment.
- Confidentiality is maintained at all times.

6.8 Infection Prevention and Control

To minimise the risk of infection, all staff will follow recognised infection prevention procedures.

This includes:

- Washing hands before and after administering first aid.
- Wearing disposable gloves when dealing with blood or bodily fluids.

- Using appropriate protective equipment where necessary.
- Safely disposing of contaminated waste.
- Cleaning and disinfecting affected areas promptly.
- Reporting any concerns regarding infectious illnesses.

Staff will follow current NHS and UK Health Security Agency guidance where infectious diseases or outbreaks occur.

6.9 Mental Health First Aid

Staff recognise that not all first aid needs relate to physical injury.

Where a pupil experiences emotional distress, anxiety or a mental health crisis, staff will:

- Remain calm and reassuring.
- Ensure the pupil is supervised appropriately.
- Seek assistance from senior leaders where required.
- Inform parents or carers where appropriate.
- Follow the school's Safeguarding and Child Protection Policy where concerns indicate a risk of harm.

Section 7: First Aid Procedures

All first aid incidents will be managed calmly, promptly and professionally to ensure the safety and wellbeing of the injured or unwell person.

Staff should always prioritise preserving life, preventing further harm and promoting recovery.

No member of staff should attempt treatment beyond the level of their training or competence.

7.1 Responding to an Incident

When an accident or illness occurs:

1. Ensure the area is safe for everyone.
2. Assess the casualty without placing yourself or others at risk.
3. Summon a qualified first aider where appropriate.
4. Administer appropriate first aid within the limits of training.
5. Call emergency services where necessary.
6. Inform the Medical Lead or a member of the Senior Leadership Team.
7. Record the incident using Medical Tracker as soon as reasonably practicable.
8. Inform parents or carers where appropriate.

Staff should remain calm throughout the incident and provide reassurance to the injured person and those around them.

7.2 Minor Injuries

Minor injuries may include:

- Small cuts.
- Grazes.
- Minor bruising.
- Nosebleeds.
- Small splinters.
- Minor bumps.

These injuries may be dealt with by appropriately trained members of staff or class teachers where suitable.

Treatment may include:

- Cleaning the wound.
- Applying a plaster or dressing.
- Applying a cold compress.
- Monitoring the pupil for any deterioration.

Parents will be informed where appropriate through Medical Tracker or other agreed communication systems.

7.3 Serious Injuries

A qualified first aider must attend immediately where a serious injury is suspected.

Examples include:

- Suspected fractures.
- Significant bleeding.
- Loss of consciousness.
- Serious burns.
- Head injuries causing concerning symptoms.
- Difficulty breathing.
- Severe allergic reactions.
- Seizures.
- Suspected spinal injuries.

Staff must never move an injured person unnecessarily unless there is an immediate danger.

Emergency services will be contacted without delay whenever required.

7.4 Head Injuries

Head injuries must always be treated with caution, regardless of their apparent severity.

Where a pupil receives a blow to the head or face, staff will:

- Ensure the pupil is assessed promptly by a qualified first aider.
- Monitor the pupil carefully for any signs of deterioration.
- Apply a cold compress where appropriate.
- Ensure the pupil is supervised for the remainder of the school day.
- Record the incident on Medical Tracker as soon as reasonably practicable.
- Notify parents or carers on the same day using Medical Tracker and/or by telephone, depending on the nature of the injury.
- Provide parents with information regarding signs and symptoms that may develop following a head injury.

A "Bumped Head" sticker or equivalent identifier may be used to alert staff that the pupil has sustained a head injury and requires ongoing observation.

Emergency medical assistance will be sought immediately if a pupil displays any concerning symptoms, including but not limited to:

- Loss of consciousness.
- Repeated vomiting.
- Severe or worsening headache.
- Confusion or unusual behaviour.
- Drowsiness or difficulty waking.
- Seizures.
- Unequal pupil size.
- Difficulty walking or speaking.
- Bleeding or fluid from the ears or nose.
- Any suspected skull fracture.

Where there is any uncertainty regarding the severity of a head injury, the school will always err on the side of caution and seek professional medical advice.

7.5 Illness During the School Day

If a pupil becomes unwell during the school day, they will be assessed by an appropriate member of staff or a qualified first aider.

The pupil may:

- Return to class if they are well enough.
- Be monitored in the Medical Room.
- Receive appropriate first aid.
- Be collected by a parent or carer if they are unable to remain in school safely.

The decision for a pupil to be sent home due to illness will normally be made by:

- The Medical Lead; or
- A member of the Senior Leadership Team.

Parents or carers will be contacted as soon as possible where collection is required.

Where symptoms indicate a medical emergency, emergency services will be contacted immediately.

7.6 Vomiting and Diarrhoea

Pupils displaying symptoms of vomiting or diarrhoea will not normally remain in school due to the risk of infection.

Where a pupil becomes unwell:

- The pupil will be supervised in an appropriate location away from other pupils where practicable.
- The Medical Lead or a member of the Senior Leadership Team will be informed.
- Parents or carers will be contacted promptly to collect their child.
- The incident will be recorded on Medical Tracker where appropriate.
- Areas contaminated by bodily fluids will be cleaned using appropriate infection control procedures.

In line with current public health guidance, pupils should not return to school until **48 hours** after the last episode of vomiting or diarrhoea, unless alternative medical advice has been provided.

7.7 Nosebleeds

Most nosebleeds are minor and can be managed safely within school.

Staff will:

- Reassure the pupil.
- Encourage them to sit upright.
- Ask the pupil to lean forward slightly.
- Apply pressure to the soft part of the nose for approximately 10–15 minutes.
- Monitor the pupil until the bleeding has stopped.

Parents will be informed where appropriate.

Emergency medical advice will be sought if:

- Bleeding continues beyond 20 minutes.
- The nosebleed follows a significant head injury.
- The pupil becomes unwell or loses consciousness.

7.8 Asthma Attacks

Staff will respond immediately if a pupil experiences symptoms of an asthma attack.

These may include:

- Persistent coughing.
- Wheezing.
- Difficulty breathing.
- Chest tightness.
- Difficulty speaking in full sentences.
- Blue lips or fingertips.

Staff will:

- Help the pupil to sit upright.
- Reassure the pupil and remain calm.
- Assist the pupil in using their prescribed inhaler.
- Follow the pupil's Individual Healthcare Plan where one exists.
- Administer the school's emergency salbutamol inhaler where appropriate and in accordance with Department for Education guidance.
- Contact parents as appropriate.

Emergency services will be called immediately if:

- Symptoms do not improve.
- The inhaler has little or no effect.
- The pupil becomes exhausted.
- The pupil loses consciousness.
- Staff are concerned at any point.

7.9 Allergic Reactions and Anaphylaxis

Staff will respond immediately to any suspected allergic reaction.

Symptoms may include:

- Swelling of the lips, tongue or throat.
- Difficulty breathing.
- Wheezing.
- Rash or hives.
- Sudden collapse.
- Loss of consciousness.

Where anaphylaxis is suspected:

- An adrenaline auto-injector (AAI) will be administered immediately by trained staff.
- Emergency services will be called without delay.
- Parents or carers will be informed immediately.
- A second AAI will be administered if required and available, following medical guidance.
- The pupil will remain under continuous supervision until emergency services arrive.

No pupil who has received an adrenaline auto-injector will remain in school without being medically assessed.

7.10 Diabetes and Other Medical Emergencies

Where pupils have diabetes or another long-term medical condition, staff will follow the procedures contained within the pupil's Individual Healthcare Plan.

Staff will:

- Recognise signs of hypoglycaemia and hyperglycaemia.

- Administer treatment only where appropriately trained.
- Contact parents where appropriate.
- Call emergency services if symptoms become severe or the pupil becomes unconscious.

7.11 Seizures

Where a pupil experiences a seizure, staff will:

- Stay calm.
- Protect the pupil from injury.
- Remove nearby hazards where safe to do so.
- Cushion the head.
- Time the seizure.
- Avoid restraining the pupil.
- Never place anything into the pupil's mouth.
- Place the pupil into the recovery position once the seizure has ended if appropriate.
- Monitor breathing until recovery.

Emergency services will be called if:

- The seizure lasts longer than five minutes.
- The pupil has repeated seizures.
- The pupil is injured.
- The pupil has difficulty breathing afterwards.
- This is the pupil's first known seizure.
- Staff have any concerns.

7.12 Intimate Care and Toileting Accidents

Occasionally, pupils may require support following toileting accidents or episodes of incontinence.

Where this occurs:

- The dignity, privacy and wellbeing of the pupil will be maintained at all times.
- Staff will follow the school's Intimate Care Policy.
- Appropriate PPE will be worn.
- Spare clothing will be provided where available.
- Parents or carers will be informed.
- Significant incidents will be recorded on Medical Tracker and, where appropriate, CPOMS.

Repeated toileting incidents may indicate an underlying medical, emotional or safeguarding concern and will be monitored appropriately.

7.13 Cleaning Following Medical Incidents

Where blood or other bodily fluids are present, staff will ensure that:

- Appropriate PPE is worn.
- The affected area is isolated where necessary.
- Cleaning is undertaken using approved cleaning materials.
- Contaminated waste is disposed of safely.
- Spillages are reported to the Site Manager or Caretaker where specialist cleaning is required.

Staff should never place themselves at unnecessary risk when dealing with bodily fluids.

7.14 Recording and Communication

Following every significant first aid incident:

- Appropriate first aid records will be completed using Medical Tracker.
- Parents or carers will be informed in accordance with school procedures.
- Serious incidents will be reported immediately to senior leaders.
- Any safeguarding concerns arising from the incident will be referred to the Designated Safeguarding Lead.

Accurate and timely record keeping is essential for safeguarding, monitoring and statutory reporting purposes.

Section 8: Supporting Pupils with Medical Conditions

Thames View Junior School is committed to ensuring that pupils with medical conditions are fully supported to enable them to attend school regularly, access a broad and balanced curriculum and participate in all aspects of school life.

The school recognises that pupils' medical needs can be short-term, long-term, fluctuating or complex, and that effective support relies upon strong partnerships between the school, parents and carers, healthcare professionals and, where appropriate, the pupils themselves.

No pupil will be denied admission to, or prevented from participating fully in, school activities solely because of a medical condition, unless this is supported by appropriate medical advice or a robust risk assessment.

The school will make reasonable adjustments, where appropriate, to ensure that pupils with disabilities or long-term medical conditions are not disadvantaged.

8.1 Principles

The school's approach is based upon the following principles:

- Every pupil is entitled to a safe, inclusive and supportive education.
- Medical conditions should be managed in a way that minimises disruption to learning.
- Pupils should be supported to develop increasing independence in managing their own health where appropriate.
- Decisions will always place the safety and wellbeing of the pupil at the centre.
- Confidential medical information will be handled sensitively and shared only on a need-to-know basis.
- Staff will work collaboratively with families and healthcare professionals to provide consistent support.

8.2 Identifying Medical Needs

Parents and carers are responsible for informing the school of any medical condition affecting their child.

This information should be provided:

- Before a pupil starts at the school.
- Immediately following a diagnosis.
- Whenever there is a significant change in a medical condition.
- Following discharge from hospital where relevant.
- When medication changes.

The school may also receive information from:

- School Nursing Services.
- Hospital Consultants.
- General Practitioners (GPs).
- Local Authority services.
- Previous schools.
- Other healthcare professionals.

Medical information will be reviewed promptly to determine what support arrangements are required.

8.3 Admission to School

The school will not refuse admission to a pupil because of a medical condition.

Where a pupil has significant medical needs, the school will work with parents, healthcare professionals and any previous educational setting to ensure that appropriate arrangements are established before the pupil starts wherever reasonably practicable.

This may include:

- Staff training.
- Risk assessments.
- Individual Healthcare Plans.
- Emergency procedures.
- Medication storage arrangements.
- Adaptations to routines where appropriate.

8.4 Ongoing Support

Support arrangements will reflect the individual needs of each pupil and may include:

- Administration of medication.
- Monitoring medical conditions.
- Support during lessons.
- Adjustments to physical activities.
- Supervision during lunchtimes.
- Access to quiet areas.
- Personal care arrangements.
- Emotional wellbeing support.
- Additional adult supervision where required.
- Emergency response procedures.

Support arrangements will always aim to maximise independence while ensuring appropriate levels of safety.

Access to toilet facilities

Pupils who require additional, frequent or unrestricted access to toilet facilities because of a medical condition will be supported to access the toilet when required. Staff must not prevent or unnecessarily delay a pupil from using the toilet where this is necessary to manage their medical condition.

These arrangements must be agreed and recorded within the pupil's Individual Healthcare Plan (IHCP) or other agreed medical support arrangements and shared with relevant staff.

Where a pupil misses learning as a result of using the toilet during lesson time, the school will make appropriate arrangements to support them in completing or catching up on essential learning. This may include providing additional learning time during break or lunchtime, where appropriate, to ensure that the pupil has sufficient opportunity and support to access the learning they have missed and does not fall behind their peers.

This additional time will be considered a supportive educational arrangement and not a sanction or consequence for accessing the toilet.

Any arrangements will take account of the pupil's individual medical needs and wellbeing, including their need for appropriate rest, movement, food, drink and social time during the school day. Where the frequency or duration of toilet visits is having a significant impact on the pupil's access to learning, the school will work with the pupil, parents/carers and, where appropriate, healthcare professionals to review the support arrangements.

8.5 Attendance

The school recognises that some pupils with medical conditions may experience periods of absence due to illness, treatment or recovery.

Where absence occurs, the school will work with families to:

- Maintain communication.
- Support reintegration following absence.
- Provide appropriate learning where possible.
- Liaise with external professionals where appropriate.

The school will not penalise pupils whose attendance is affected by genuine medical needs.

8.6 Inclusion

Pupils with medical conditions will, wherever reasonably practicable, be encouraged and supported to participate fully in:

- Classroom learning.
- Educational visits.

- Residential visits.
- Physical Education.
- Swimming.
- Clubs.
- Sports teams.
- School performances.
- Enrichment activities.

Where additional arrangements are required, these will be identified through appropriate risk assessments and Individual Healthcare Plans.

8.7 Unacceptable Practice

The school will never:

- Prevent pupils from accessing prescribed medication.
- Assume that every pupil with the same condition requires identical support.
- Ignore medical advice.
- Send a pupil with a medical condition home routinely unless this is clinically appropriate.
- Prevent participation in activities without an evidence-based risk assessment.
- Require parents to attend school to administer medication where this forms part of agreed school responsibilities.
- Penalise pupils because of medical appointments or treatment.
- Leave pupils unattended because of a medical condition.
- Prevent or unnecessarily delay a pupil from accessing the toilet where this is necessary to manage an identified medical condition. Any arrangements to support the pupil in catching up on learning missed as a result of medically necessary toilet breaks will be supportive and educational in nature and will not be used as a sanction for accessing the toilet.

Section 9: Individual Healthcare Plans (IHCPs)

Some pupils require an Individual Healthcare Plan (IHCP) to ensure that their medical needs are consistently and safely managed whilst at school.

An IHCP provides clear guidance for staff and helps ensure that appropriate arrangements are in place to support the pupil throughout the school day.

Not every pupil with a medical condition will require an IHCP.

The need for an Individual Healthcare Plan will be determined through discussion with parents, healthcare professionals and the school.

9.1 When an IHCP is Required

An Individual Healthcare Plan will normally be considered where a pupil:

- Has a long-term medical condition.
- Requires regular medication during school hours.
- Has complex healthcare needs.
- Requires emergency medication.
- Has frequent hospital appointments.
- May require emergency intervention.
- Needs adjustments to enable full participation in school life.

9.2 Developing an IHCP

The Individual Healthcare Plan will normally be developed collaboratively between:

- Parents or carers.
- The pupil (where appropriate).
- The Medical Lead.
- The SENDCo.
- Relevant school staff.
- Healthcare professionals.
- School Nursing Service where appropriate.

The school aims to complete an Individual Healthcare Plan as soon as reasonably practicable following notification of a medical need.

9.3 Contents of an IHCP

An Individual Healthcare Plan may include:

- Details of the medical condition.
- Signs, symptoms and triggers.
- Medication requirements.
- Dosage and administration arrangements.
- Storage requirements.
- Emergency procedures.
- Contact details.
- Required staff training.
- Educational adjustments.
- Arrangements for educational visits.
- Physical activity guidance.
- Dietary requirements.

- Personal care arrangements.
- Review dates.

9.4 Sharing Information

Information contained within an Individual Healthcare Plan will only be shared with staff who need the information in order to support the pupil safely.

Appropriate staff may include:

- Class teachers.
- Teaching assistants.
- Lunchtime supervisors.
- Office staff.
- Senior leaders.
- First aiders.
- Educational visit leaders.

Medical information will be treated confidentially and managed in accordance with the Data Protection Act 2018 and UK GDPR.

9.5 Reviewing an IHCP

Individual Healthcare Plans will be reviewed:

- At least annually.
- Following any significant change in medical needs.
- Following hospital admission.
- Following a medical emergency.
- At the request of parents or healthcare professionals.

Reviews will ensure that support remains appropriate, effective and responsive to the pupil's changing needs.

9.6 Medical Emergencies

Where a pupil has an Individual Healthcare Plan, all relevant staff will be familiar with:

- Emergency symptoms.
- Required medication.
- Emergency contact procedures.
- When to call emergency services.
- Actions to take while waiting for medical assistance.

The safety of the pupil will always take precedence over all other considerations.

Section 10: Administration of Medicines

Thames View Junior School recognises that some pupils will need to take medication during the school day to enable them to attend school regularly, remain healthy and participate fully in education.

The school will only administer medicines where it would be detrimental to a pupil's health or attendance not to do so.

Medicines will always be administered safely, appropriately and in accordance with written parental consent, healthcare advice and this policy.

Wherever possible, parents and carers are encouraged to ask prescribing clinicians whether medication can be administered outside school hours.

The school reserves the right to decline to administer medication where it has not been supplied in accordance with this policy or where safe administration cannot be assured.

10.1 Parental Responsibilities

Parents and carers are responsible for ensuring that:

- The school is informed of any medication their child requires.
- Written consent is provided before medication is administered.
- Medicines are supplied in accordance with school procedures.
- Prescribed medication is clearly labelled and in date.
- Medication is collected once no longer required.
- Expired medication is replaced promptly.
- The school is informed immediately of any changes to dosage or treatment.

Parents should hand all medication directly to the School Office or Medical Lead. Pupils should not routinely carry medication unless this has been agreed as part of an Individual Healthcare Plan.

10.2 Prescription Medicines

Prescription medicines will only be administered when:

- They have been prescribed by a registered medical practitioner or other appropriately qualified healthcare professional.
- Written parental consent has been received.
- The medicine is required during the school day.
- The medication is provided in the original pharmacy container.
- The label clearly states:
 - the pupil's name;

- the name of the medication;
- the prescribed dosage;
- the frequency of administration;
- any storage instructions; and
- the expiry date.

The school will not administer medication that:

- is out of date;
- has been transferred into another container;
- has altered or unclear dosage instructions;
- cannot be safely identified.

Medication will only be administered in accordance with the pharmacist's dispensing label or written medical advice.

10.3 Non-Prescription Medicines

The school may not routinely administer non-prescription medication.

However, there may be circumstances where this is appropriate.

Where parents request the administration of non-prescription medication (such as Calpol or similar pain relief), the following conditions must all be met:

- Written parental consent has been obtained.
- The medication is supplied in its original manufacturer's unopened packaging.
- The medication is clearly labelled.
- The medication is within its expiry date.
- The dosage instructions are clearly visible.

The school will **not** administer non-prescription medication that:

- has previously been opened;
- has been transferred into another bottle or container;
- is out of date;
- has damaged or missing packaging;
- cannot be clearly identified.

This approach ensures that dosage guidance, expiry dates and safety information remain accurate and visible at all times.

10.4 Administering Medication

Only appropriately authorised members of staff who have received suitable training will administer medication.

Before administering any medicine, staff will check:

- The identity of the pupil.
- The medication name.
- The prescribed dosage.
- The time the medication is due.
- The expiry date.
- Written parental consent.
- Any instructions contained within the Individual Healthcare Plan.

Where there is any uncertainty, medication will **not** be administered until clarification has been obtained.

Where appropriate and practicable, a second adult may witness the administration of medication, particularly where controlled drugs, intimate care or invasive procedures are involved.

10.5 Recording Administration

Every administration of medication will be recorded on **Medical Tracker**.

The record will include:

- Name of the pupil.
- Name of the medication.
- Dosage administered.
- Date and time.
- Name of the member of staff administering the medication.
- Any observed side effects.
- Any refusal to take medication.
- Any additional comments or actions taken.

Parents will be informed where appropriate, particularly following the administration of emergency medication or where a pupil has become unwell.

Accurate record keeping supports safeguarding, continuity of care and compliance with statutory requirements.

10.6 Refusal of Medication

Pupils will never be forced to take medication.

If a pupil refuses medication:

- Staff will remain calm and reassuring.
- The pupil will be encouraged, but not forced, to take the medication.
- The refusal will be recorded on Medical Tracker.
- Parents or carers will be informed as soon as possible.
- Advice will be sought from healthcare professionals where necessary.

Where refusal places a pupil at immediate risk, emergency procedures will be followed.

10.7 Self-Administration

Where appropriate, pupils may be supported to manage their own medication.

This decision will only be made following discussion between:

- Parents or carers;
- Healthcare professionals;
- The school; and
- The pupil, where appropriate.

Factors considered include:

- Age.
- Maturity.
- Understanding of their medical condition.
- Ability to administer medication safely.
- Ability to recognise when help is needed.

Even where pupils self-administer medication, staff will continue to provide appropriate supervision.

10.8 Storage of Medicines

The school will ensure that all medicines are stored safely and securely while remaining readily accessible where required.

Medicines will be stored:

- in accordance with the manufacturer's instructions;

- in a secure location;
- at the correct temperature;
- out of reach of pupils unless authorised;
- separately where necessary.

Medicines requiring refrigeration will be stored in a designated medical refrigerator where appropriate.

Emergency medication, including inhalers and adrenaline auto-injectors, will always remain immediately accessible.

Staff responsible for supporting pupils with medical conditions will know where emergency medication is located at all times.

10.9 Emergency Medication

The school recognises that some medications must be available immediately in an emergency.

These may include:

- Salbutamol inhalers.
- Adrenaline auto-injectors (AAs).
- Emergency diabetes medication.
- Buccal Midazolam where appropriate.
- Other medication identified within an Individual Healthcare Plan.

Emergency medication will:

- remain readily accessible;
- accompany pupils on educational visits;
- never be locked away where immediate access is required;
- be checked regularly for expiry dates.

Staff will receive appropriate training before administering specialist emergency medication.

10.10 Controlled Drugs

Controlled drugs will be managed in accordance with current legislation and healthcare guidance.

They will:

- be stored securely in a locked cabinet;
- be accessible only to authorised staff;
- have a record maintained of quantities received and administered;
- only be administered to the pupil for whom they have been prescribed.

Whenever possible, administration should be witnessed by a second appropriately authorised member of staff.

10.11 Disposal of Medicines

Medicines which are:

- expired;
- damaged;
- discontinued; or
- no longer required

will be returned to parents or carers for safe disposal.

The school will not dispose of medicines in general waste.

Sharps (such as needles or lancets) will be disposed of immediately in approved sharps containers and collected through appropriate clinical waste arrangements.

10.12 Medication on Educational Visits

Where medication is required during an educational visit or residential visit:

- A named member of staff will be responsible for transporting and administering the medication.
- Medication will accompany the pupil at all times.
- Copies of relevant Individual Healthcare Plans will be available.
- Emergency medication will remain immediately accessible.
- Medication administered during the visit will be recorded and transferred to Medical Tracker upon return to school.

Appropriate risk assessments will be completed before every educational visit involving pupils with medical needs.

Section 11: Educational Visits, Physical Activity and Off-Site Provision

Thames View Junior School believes that pupils with medical conditions should, wherever reasonably practicable, be able to participate fully in educational visits, residential experiences, sporting activities and extracurricular provision.

The school is committed to ensuring that pupils are not unnecessarily excluded from activities because of a medical condition or disability.

Appropriate planning, communication and risk assessment will ensure that activities remain safe, inclusive and accessible.

11.1 Educational Visits

Educational visits form an important part of the curriculum, and every reasonable effort will be made to enable pupils with medical conditions to participate.

Prior to any visit, the Visit Leader will:

- Review the medical needs of all participating pupils.
- Ensure relevant Individual Healthcare Plans are available.
- Consult with parents or carers where necessary.
- Liaise with the Medical Lead regarding medication requirements.
- Complete an appropriate educational visit risk assessment.
- Ensure sufficient trained staff accompany the visit.

Parents may be asked to provide additional information where a pupil's medical needs have changed since the last review.

11.2 Medication on Visits

Where medication is required during an educational visit:

- Medication will accompany the pupil throughout the visit.
- A named member of staff will be responsible for its safe storage and administration.
- Medication will never be left unattended.
- Emergency medication will remain immediately accessible.
- Medication administration will be recorded and transferred to Medical Tracker upon return to school.

Staff will check medication before departure to ensure:

- It is in date.
- It is correctly labelled.
- Sufficient quantities are available.
- Emergency contact information accompanies the medication.

11.3 Portable First Aid Equipment

Every educational visit will be accompanied by an appropriately stocked portable first aid kit.

Where appropriate, the kit will include:

- Assorted sterile dressings.
- Adhesive plasters.
- Disposable gloves.
- Antiseptic wipes.
- Eye dressings.
- Triangular bandages.
- Instant cold packs.
- Resuscitation face shield.
- Emergency contact information.
- Accident recording forms or notebook.

The contents of first aid kits will be checked before each visit.

11.4 Staffing

The number of accompanying adults will reflect:

- The age of the pupils.

- The nature of the activity.
- The location.
- Identified medical needs.
- Behavioural considerations.
- Risk assessment outcomes.

Where specialist medical support is required, the school will ensure that an appropriately trained member of staff accompanies the visit.

11.5 Residential Visits

Residential visits require additional planning to ensure pupils with medical conditions receive appropriate support throughout their stay.

Planning will include consideration of:

- Medication storage.
- Overnight medication.
- Emergency procedures.
- Access to healthcare facilities.
- Dietary requirements.
- Personal care needs.
- Staff training.
- Emergency contact arrangements.

Parents will be involved in planning where appropriate.

11.6 Physical Education and Sporting Activities

Physical activity plays an important role in promoting pupils' physical and emotional wellbeing.

Pupils with medical conditions will be encouraged to participate safely in Physical Education and sporting activities wherever reasonably practicable.

Reasonable adjustments may include:

- Additional rest breaks.
- Access to medication.
- Modified activities.
- Increased supervision.
- Adapted equipment.
- Flexible participation.

Staff supervising sporting activities will be informed of relevant medical conditions and any emergency procedures.

11.7 Swimming Activities

Where swimming forms part of the curriculum:

- Relevant medical information will be shared with supervising staff.
- Appropriate medication will accompany the pupil.
- Individual risk assessments will be completed where necessary.
- Staff will follow Individual Healthcare Plans where applicable.

11.8 After-School Clubs and Extended Provision

The school will ensure that pupils attending breakfast clubs, after-school clubs or other extended provision continue to receive appropriate medical support.

Relevant staff supervising these activities will be informed of:

- Medical conditions.

- Emergency procedures.
- Medication requirements.
- Emergency contacts.

Section 12: Accident Reporting, Record Keeping and RIDDOR

Accurate and timely recording of accidents, injuries and medical treatment is an essential part of safeguarding and effective health and safety management.

Records enable the school to:

- Monitor patterns of accidents.
- Identify emerging risks.
- Inform future risk assessments.
- Meet statutory reporting requirements.
- Provide accurate information to parents and external agencies where required.

12.1 Recording Accidents

All significant accidents, injuries and first aid treatment will be recorded using the school's electronic recording system, **Medical Tracker**, as soon as reasonably practicable following the incident.

Records should include:

- Name of the injured person.
- Date and time.
- Location.
- Nature of the incident.

- Details of the injury.
- Treatment administered.
- Name of the first aider.
- Whether parents were informed.
- Any follow-up actions.

Staff should ensure records are factual, accurate and completed promptly.

12.2 Notification to Parents and Carers

Parents or carers will normally be informed when:

- A pupil sustains a head injury.
- A pupil receives significant first aid.
- Medication has been administered.
- A pupil becomes too unwell to remain in school.
- Emergency services have been called.
- A pupil has suffered an injury requiring medical assessment.

Communication may be by:

- Medical Tracker notification.
- Telephone.
- Face-to-face discussion at collection.

The method of communication will reflect the seriousness of the incident.

12.3 Monitoring Accident Trends

The Medical Lead and Senior Leadership Team will regularly review accident records to identify:

- Recurring accidents.
- Hazardous locations.
- Patterns involving particular activities.
- Trends involving specific groups of pupils.

Where appropriate, findings will inform:

- Risk assessments.
- Site improvements.
- Staff training.
- Curriculum planning.
- Health and safety procedures.

12.4 Reporting under RIDDOR

The school will comply with the **Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013**.

Where an incident meets the reporting threshold, the School Business Manager (or another designated senior leader) will ensure that the incident is reported to the Health and Safety Executive (HSE) within the required timescales.

Reportable incidents include, but are not limited to:

- Death.
- Specified serious injuries.
- Injuries resulting in over seven consecutive days' absence from work.
- Dangerous occurrences.
- Certain occupational diseases.
- Reportable incidents involving pupils where required under current legislation.

All RIDDOR reports will be retained in accordance with statutory requirements.

12.5 Reporting to External Agencies

Where required, the school will notify relevant agencies, including:

- The Health and Safety Executive.
- Ofsted.
- The Local Authority.
- Children's Social Care.
- Other agencies as appropriate.

This will occur where legislation, safeguarding requirements or statutory guidance require notification.

12.6 Record Retention

Accident records, medication records and first aid documentation will be retained securely in accordance with the school's Records Management Policy and current data retention requirements.

Medical records will be treated as confidential and stored securely in accordance with the Data Protection Act 2018 and UK GDPR.

Section 13: Training and Competency

Thames View Junior School recognises that effective first aid and medical support depend upon staff having the appropriate knowledge, skills and confidence.

The school is committed to ensuring that staff receive appropriate training and ongoing professional development.

13.1 First Aid Training

The school will ensure that:

- A sufficient number of staff hold recognised First Aid at Work or Emergency First Aid at Work qualifications.
- Appropriate numbers of staff hold Paediatric First Aid qualifications where required.
- Training is renewed before certification expires.
- Records of qualifications are maintained.

13.2 Medical Training

Where pupils require specific medical procedures or medication, relevant staff will receive appropriate training from suitably qualified healthcare professionals.

This may include training relating to:

- Asthma.
- Anaphylaxis.
- Diabetes.
- Epilepsy.
- Administration of adrenaline auto-injectors.
- Administration of emergency inhalers.
- Blood glucose monitoring.
- Other condition-specific procedures.

A general first aid qualification does not automatically qualify staff to undertake specialist medical procedures.

13.3 Induction

New members of staff will receive appropriate induction, including information relating to:

- First aid procedures.
- Medical emergencies.
- Individual Healthcare Plans relevant to their role.
- Medical Tracker.
- Safeguarding responsibilities.

13.4 Refresher Training

Training needs will be reviewed regularly.

Additional refresher sessions may be provided following:

- Changes in legislation.
- New medical conditions within school.
- Updates to statutory guidance.
- Following significant incidents.
- Recommendations arising from monitoring activities.

The school will maintain a record of all training completed by staff.

Section 14: Confidentiality, Information Sharing and Data Protection

Thames View Junior School recognises that information relating to a pupil's health is confidential and sensitive personal data. The school is committed to ensuring that medical information is handled appropriately, lawfully and with respect for the dignity and privacy of pupils and their families.

Information relating to a pupil's medical condition will only be shared where it is necessary to safeguard the pupil, enable staff to fulfil their duties or comply with legal obligations.

14.1 Confidentiality

All staff have a responsibility to maintain confidentiality regarding pupils' medical conditions.

Medical information will only be shared with staff who require the information in order to:

- Support the pupil safely.
- Administer medication.
- Respond to medical emergencies.
- Supervise educational visits.
- Meet safeguarding responsibilities.

Information will not be shared unnecessarily with other pupils, parents or members of the public.

Where appropriate, pupils will be involved in decisions about how information relating to their medical condition is shared.

14.2 Information Sharing

Relevant medical information may be shared with:

- Parents and carers.
- Healthcare professionals.
- School Nursing Services.
- Emergency services.
- The Local Authority where appropriate.

- Staff responsible for the pupil's care.

Information will only be shared:

- With consent where appropriate.
- Where there is a legal requirement.
- Where it is necessary to safeguard the pupil.
- During a medical emergency.

The school will always seek to balance confidentiality with the need to protect pupils' health and wellbeing.

14.3 Data Protection

Medical records are processed in accordance with:

- UK General Data Protection Regulation (UK GDPR).
- Data Protection Act 2018.
- The school's Data Protection Policy.

The school will ensure that:

- Medical records are accurate and up to date.
- Records are stored securely.
- Access is restricted to authorised personnel.
- Records are retained only for the appropriate period.
- Information is disposed of securely when no longer required.

Electronic records maintained through Medical Tracker will be protected through appropriate security arrangements.

14.4 Safeguarding

Occasionally, information relating to a medical condition may raise safeguarding concerns.

Where staff believe that a pupil may be at risk of harm, they will follow the school's Child Protection and Safeguarding Policy immediately.

The safety and welfare of the pupil will always take precedence over confidentiality where safeguarding concerns exist.

Section 15: Monitoring, Review and Quality Assurance

Thames View Junior School is committed to continually reviewing and improving its first aid and medical procedures to ensure they remain effective, compliant with legislation and responsive to the needs of the school community.

Monitoring helps ensure that:

- Pupils receive appropriate care.
- Staff remain confident and competent.
- Equipment remains suitable.
- Procedures continue to reflect current best practice.

15.1 Monitoring

The implementation of this policy will be monitored through:

- Review of Medical Tracker records.

- Accident trend analysis.
- Monitoring of medication administration records.
- Audits of first aid equipment.
- Monitoring of Individual Healthcare Plans.
- Staff feedback.
- Pupil and parent feedback where appropriate.
- Educational visit evaluations.
- Health and Safety inspections.

Any emerging concerns or recurring themes will be addressed promptly through revised procedures, additional training or further risk assessment.

15.2 Review of Individual Healthcare Plans

Individual Healthcare Plans will be reviewed:

- At least annually.
- Following significant medical changes.
- Following hospital admission.
- Following a medical emergency.
- At the request of parents or healthcare professionals.

Reviews will ensure that arrangements remain appropriate and effective.

15.3 Review of First Aid Provision

The Medical Lead will regularly review:

- Numbers of qualified first aiders.
- First aid equipment.
- Staff training requirements.

- Emergency procedures.
- Accident statistics.
- Compliance with statutory guidance.

Recommendations for improvement will be shared with the Senior Leadership Team.

15.4 Policy Review

This policy will be reviewed every **two years**, or sooner if:

- Legislation changes.
- Statutory guidance is updated.
- Local Authority procedures change.
- Significant incidents identify a need for revision.
- The Governing Body requests an earlier review.

The policy will be approved by the Governing Body following each review.

Section 16: Linked Policies

This policy should be read alongside the following Thames View Junior School policies:

- Health and Safety Policy
- Safeguarding and Child Protection Policy
- Behaviour Policy
- Special Educational Needs and Disabilities (SEND) Policy
- Accessibility Plan
- Educational Visits Policy
- Intimate Care Policy
- Administration of Medicines Procedures

- Asthma, Allergy and Anaphylaxis Policy
- Infection Prevention and Control Procedures
- Equality Policy and Equality Objectives
- Data Protection Policy
- Complaints Policy
- Attendance Policy
- Risk Assessment Policy

Appendices

Appendix A – Qualified First Aiders

The Medical Lead is responsible for ensuring this information remains current.

Appendix B – First Aid Equipment

Each classroom first aid kit should contain, as appropriate:

- Assorted adhesive plasters
- Sterile dressings
- Disposable gloves
- Triangular bandages
- Microporous tape
- Antiseptic wipes
- Eye dressings
- Resuscitation face shield
- Instant cold pack
- Scissors (where appropriate)

The Medical Room should additionally contain larger dressings, specialist equipment and emergency supplies.

Equipment will be checked regularly and replenished as required.

Appendix C – Head Injury Procedure

Whenever a pupil receives a head injury:

1. Assess immediately.
2. Call a qualified First Aider if required.
3. Apply a cold compress where appropriate.
4. Monitor the pupil throughout the day.
5. Record the incident on Medical Tracker.
6. Inform parents or carers the same day.
7. Seek emergency medical assistance immediately if red flag symptoms develop.

Red flag symptoms include:

- Loss of consciousness
- Repeated vomiting
- Severe headache
- Confusion
- Seizures
- Increasing drowsiness
- Unequal pupils
- Difficulty speaking or walking
- Bleeding or fluid from ears or nose

Appendix D – Accident Reporting Procedure

Following every significant accident:

- Administer first aid.
- Inform the Medical Lead where appropriate.
- Complete Medical Tracker.
- Inform parents.
- Review whether further action is required.
- Report under RIDDOR where applicable.

Appendix E – Individual Healthcare Plans

Individual Healthcare Plans should include:

- Medical diagnosis
- Signs and symptoms
- Medication
- Emergency procedures
- Contact details
- Staff training requirements
- Educational adjustments
- Review date

Appendix F – Medication Consent Form

The school's Medication Consent Form should record:

- Pupil details
- Medication name

- Dosage
- Administration times
- Storage instructions
- Parent/carer consent
- Healthcare professional instructions where applicable

Appendix G – Staff Training Record

The school should maintain a record of:

- Staff member
- Qualification
- Training provider
- Date completed
- Renewal date

This should be reviewed regularly by the Medical Lead.

Appendix H – Medical Emergency Flowchart

Medical Emergency Identified ↓

Assess the situation and make the area safe ↓

Call a qualified First Aider ↓

Provide appropriate first aid ↓

Life-threatening? ↓

- **Yes** → Call **999**, administer emergency medication if trained, contact parents, inform Senior Leadership Team.

- **No** → Continue treatment, monitor pupil, complete Medical Tracker, inform parents as appropriate.

Review incident and determine whether any follow-up action or amendments to risk assessments or healthcare plans are required.

Appendix I – Record Retention

The school will retain medical records in accordance with:

- Data Protection Act 2018
- UK GDPR
- Department for Education guidance
- Information and Records Management Society (IRMS) Schools Toolkit
- Local Authority retention schedules

Medical records will be securely stored and disposed of confidentially when their retention period has expired.

Appendix 1 - Identifying the need for Health Care Plan



Appendix 2 - Staff Training Record - Administration of medicines

All staff have a log-in for Medical Tracker in which they are to update with any administration of medicines.

The list of staff and their qualifications can be found on this website:

www.medicaltracker.com

Thames View Junior S...

[Students](#) [Staff](#) [Medication Use](#) [Medication](#)

STAFF

Overview

Reports ▾

Add staff profile

Manage use

Source	Name	Job Title
All		
Manual	James Smith	Headteacher
Manual	Sandy Sanghera	Deputy Head Teacher
Manual	James Hall	SENDco

Appendix 3: Medication Consent Form



THAMES VIEW JUNIOR SCHOOL - MEDICATION FORM



In order to keep the administering of medication to a minimum, the Head or Medical Officer should consider requesting parents to administer the daily dosages out of school hours. However, if this is not possible, it will be necessary for the school and parents to make a formal agreement to enable First Aiders to supervise the administering of medication to pupils during the school day by completing the form below.

NOTE: If prescribed, medicines must be kept in original packaging, as dispensed by the pharmacy. Any other medication, such as; Calpol, pain relief, should be brought into school in their original packaging, unopened. School will not accept any medication that has already been opened.

TO BE COMPLETED BY THE PARENT/CARER	
To the Head Teacher: Mr Smith	School: Thames View Junior School
My child (name) _____ in Class: _____	
Has the following medical condition(s)/illness _____ _____	
Self-administered medication: I wish for my child to be supervised while they self-administer medication, as indicated below.	Tick here:
Medication to be administered by a First Aid trained adult in school: I give my consent for a First Aid trained adult to administer medication in school.	Tick here:
Name/Type of Medication (As described on packaging): _____	
Dosage: _____ Time to be administered: _____	
Duration of medication: _____	
Special precautions/side effects: _____	
Emergency Contact 1 Name: _____ Relationship: _____ Contact NO: _____ Address: _____ _____	Emergency Contact 2 Name: _____ Relationship: _____ Contact NO: _____ Address: _____ _____

I agree to ensure that the medication provided for my child, is in date, suitable and if prescribed includes my child's name.
I also agree to inform the school immediately of any change of treatment/medication that has been prescribed or my child needs.

Name: _____ Relationship to child: _____

Signed: _____ Date: _____

[illegible][illegible]

