

Administration of First Aid and Medication Policy

St. Lawrence CE (VA) Primary School
With
Little Lawrences & Larks 'n' Owls
Napton

September 2026

Publication Date:	September 2026
Review Date:	September 2027
Approved By:	Full governing body

****THIS POLICY SHOULD BE READ IN CONJUNCTION WITH OUR ALLERGY POLICY****

A happy church school that nurtures the unique talents of individuals and brings them
together so that 'they will soar on wings like eagles' (Isaiah 40:31)

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Introduction

St Lawrence Primary School with Little Lawrence Pre-school and Larks n Owls wrap around care, is committed to promoting and safeguarding the welfare of children and young persons in accordance with Safeguarding Children in Education, under the provisions of the Education Act 2002. First Aid provision in school is for everyone present in the school: Children, staff and visitors to the school site. This policy outlines our daily policy, practice and procedures for first aid within our school

Aims

The aims of our first aid policy are to:

- Ensure the health and safety of all staff, children and visitors
- Ensure that staff and governors are aware of their responsibilities with regards to health and safety
- Provide a framework for responding to an incident and recording and reporting the outcome

Legislation and guidance

This policy is based on the Statutory Framework for the Early Years Foundation Stage and advice from the Department for Education on first aid in schools and health and safety in schools and the following legislation:

- The Health and Safety (First-Aid) Regulations 1981, which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- The Management of Health and Safety at Work Regulations 1992, which require employers to make an assessment of the risks to the health and safety of their employees
- The Management of Health and Safety at Work Regulations 1999, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- Social Security (Claims and Payments) Regulations 1979, which set out rules on the retention of accident records
- The School Premises (England) Regulations 2012, which require that suitable space is provided to cater for the medical and therapy needs of children.

Roles and responsibilities

In schools with Early Years Foundation Stage provision, at least 1 person who has a current paediatric first aid (PFA) certificate must be on the premises at all times. Beyond this, in all settings – and dependent upon an assessment of first aid needs – employers must usually have a sufficient number of suitably trained first aiders to care for employees in case they are injured at work. However, the minimum legal requirement is to have an ‘appointed person’ to take charge of first aid arrangements, provided the assessment of need has taken into account the nature of employees’ work, the number of staff, and the layout and location of the school. The appointed person does not need to be a trained first aider.

Appointed person(s) and first aiders

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A list of our First Aiders along with their qualification expiry date can be found in the staffroom, on the school office door and on the walls of the corridor at every first aid station. This list is updated by the school office as needed; particularly when people have updated their training, or when new staff have attended courses and become certified First Aiders.

Continuing Professional Development & Training

All current First Aiders have the option to renew their qualification, prior to its expiration. Other staff in school are also offered the possibility of attending relevant First Aid training on an annual basis, or earlier, should an additional course arise during the course of the academic year. The school programme of INSET days may contain training on specific needs of children, as needs are identified due to children currently in school. This training is currently delivered by external providers. The school will arrange for first aiders to retrain before their first aid certificates expire. In cases where a certificate expires, the school will arrange for staff to retake the full first aid course before being reinstated as a first aider. The PFA certificate will be renewed every 3 years.

Early Years Foundation Stage provision:- At all times, at least 1 staff member will have a current paediatric first aid (PFA) certificate which meets the requirements set out in the Early Years Foundation Stage statutory framework.

Responsibilities

Responsibilities of First Aiders

First Aiders are responsible for:

- Taking charge when someone is injured or becomes ill
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits
- Ensuring that an ambulance or other professional medical help is summoned when appropriate

First aiders are trained and qualified to carry out the role and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment
- Sending children home to recover, where necessary
- Completing a CPOMs record on the same day, or as soon as is reasonably practicable, after an incident

Responsibilities of the Local authority and governing board

Warwickshire County Council has ultimate responsibility for health and safety matters in the school, but delegates responsibility for the strategic management of such matters to the school's governing board.

The governing board delegates operational matters and day-to-day tasks to the headteacher and

Responsibilities of the Headteacher

The headteacher is responsible for the implementation of this policy, including:

- Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are present in the school at all times
- Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role

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- Ensuring all staff are aware of first aid procedures
- Ensuring appropriate risk assessments are completed and appropriate measures are put in place
- Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place
- Ensuring that adequate space is available for catering to the medical needs of children
- Reporting specified incidents to the HSE when necessary

Responsibilities of School Staff

School staff are responsible for:

- Ensuring they follow first aid procedures
- Ensuring they know who the first aiders and/or appointed person(s) in school are
- Completing a report on CPOMs for all incidents they attend to where a [first aider/appointed person] is not called
- Informing the headteacher or their manager of any specific health conditions or first aid needs

What constitutes an emergency?

An emergency is any first aid situation, where the advice from a medical professional is required and/or the medical profession or emergency services are required to take over the situation.

Emergency Procedures

All emergency procedures should be carried out by a qualified First Aider. If a situation is deemed serious or life-threatening, an ambulance/emergency services, 999, must be called immediately.

A telephone call will be made to the priority number listed on the school database. If there is no answer a message will be left if possible and the next priority number will be called until all numbers have been exhausted.

If a child has a serious medical condition, i.e. diabetes, asthma, allergies, the needs of that child are kept in a white folder on top of the medicine cabinets in the school office.

A member of staff, accompanied by another member of staff, should accompany the child/adult to the hospital. Parents/guardians should make their own way to the hospital, if they have not been able to get to school, prior to the departure of the ambulance. The child's details should be collected from the school office to be taken to give to hospital staff, (DOB, address, allergy and other key information). In situations where it is determined that a hospital assessment should be sought, the parent/guardian would be advised to attend the hospital. If the school is unable to contact the parent/guardian, the child will be taken to hospital, via taxi, accompanied by a First Aider and member of the senior leadership team.

The school has a defibrillator for emergency use in the case of cardiac arrest.

First aid procedures

Information about the specific medical needs of children

Parents/guardian's contact details will be accessible at all times. Children with specific needs re medication will be covered under this policy but a separate Risk Assessment for care outside of school will be completed. Also see separate policy for children with Medical conditions.

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Individual Hygiene Plans

If a child requires an individual hygiene plan, this is drawn up by the parent/guardian in conjunction with the school SENDCo. The plan must be adhered to by all staff. The plan will be reviewed on a termly basis, or earlier, if needs dictate.

Contamination / Hygiene

When administering First Aid, the following procedures must be followed:

- Protective gloves must be worn at all times;
- Children and staff should cover their own open wounds;
- Body fluids should be placed in the appropriate bin;
- Gloves and aprons must be worn when cleaning up vomit and other body fluids

In-school procedures - non emergency:

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment.
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services.
- They will remain on the scene until help arrives.
- The first aider will also decide whether the injured person should be moved or placed in a recovery position.
- If the first aider judges that a child is well enough to remain in school, appropriate First Aid will be carried out.
- A second opinion by a qualified First Aider in school may be sought.
- Further checks, if deemed necessary, on an individual's welfare/condition may be made throughout the school day.
- If the first aider judges that a child is too unwell to remain in school, parents/guardians will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents/guardians.
- The First Aider/Headteacher/SLT member will complete a CPOMs report on the same day or as soon as is reasonably practical after an incident resulting in an injury
- A record of an adult injury will be made on an adult first aid record form. These can be found in the school office. Completed forms are securely stored in the Head's office.

Off-site procedures:

There will always be at least 1 first aider with a current paediatric first aid (PFA) certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation stage. The procedure for administering first aid off site will follow, as close as is reasonably practicable, to the emergency and on site non emergency procedure set out above.

It is the responsibility of the teacher leading an offsite activity to ensure that all individual medical items are included in the First Aid bag such as inhalers and epi-pens.

When taking children off the school premises, staff will ensure they always have the following:

- A school mobile phone
- A portable first aid kit including, at minimum:

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- A leaflet giving general advice on first aid
- 6 individually wrapped sterile adhesive dressings
- 1 large sterile unmedicated dressing
- 2 triangular bandages – individually wrapped and preferably sterile
- 2 safety pins
- Individually wrapped moist cleansing wipes
- 2 pairs of disposable gloves

First aid equipment

Our First Aid Boxes are located in the school foyer by the photocopier, on the wall opposite the entrance to Year 2 and on the wall opposite the Year 3 cloakroom. A First Aid bag is kept in the staff room for use by lunch time staff on the playground. There are 2 additional First Aid bags in the staff room which are used for activities such as trips, village walks and swimming lessons.

The contents of each First Aid Box/Bag are checked regularly and contain supplies to comply with current guidelines.

A typical first aid kit in our school will include the following:

- A leaflet giving general advice on first aid
- 20 individually wrapped sterile adhesive dressings (assorted sizes)
- 2 sterile eye pads
- 2 individually wrapped triangular bandages (preferably sterile)
- 6 safety pins
- 6 medium-sized individually wrapped sterile unmedicated wound dressings
- 2 large sterile individually wrapped unmedicated wound dressings
- 3 pairs of disposable gloves No medication is kept in first aid kits

Reporting

An incident will be recorded on CPOMs by the first aider or relevant member of staff on the same day or as soon as possible after an incident resulting in an injury. As much detail as possible should be supplied when reporting an accident, including where the injury occurred in/out of school, date, time, who witnessed, who administered first aid and what was done. Records held will be retained by the school for a minimum of 3 years, in accordance with regulation 25 of the Social Security (Claims and Payments) Regulations 1979.

Reporting to the HSE

The First Aider/SLT member will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7). The relevant member of staff as above will report these to the HSE as soon as is reasonably practicable and in any event within 10 days of the incident.

Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
 - Fractures, other than to fingers, thumbs and toes
 - Amputations
 - Any injury likely to lead to permanent loss of sight or reduction in sight
 - Any crush injury to the head or torso causing damage to the brain or internal organs

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

Reporting to RIDDOR

How to make a RIDDOR report, HSE <http://www.hse.gov.uk/riddor/report.htm>

Reporting to Parents/guardians

If a child has sustained any kind of head injury resulting from a trip, fall or bump into an object where their head made contact with a hard surface, the parent/guardian must be informed as soon as is reasonably practical by telephone. Parents/guardians will be advised to seek medical / hospital advice for head injuries. Where the parent/guardian refuses to attend school, a record will be made on CPOMs and the child monitored closely. If there is further concern, the emergency procedure will be invoked.

Where the injury is not a head injury or an injury that causes concern, the parents/guardians will be informed on the same day or as soon as is reasonably practical by telephone or email. Staff will endeavour to speak to the parent/guardian at the end of the school day face to face but this may not always be possible.

Reporting to Ofsted and child protection agencies

The First Aider/SLT member will notify Ofsted of any serious accident, illness or injury to, or death of, a child while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident. The relevant member of staff will also notify WCC of any serious accident or injury to, or the death of, a child while in the school's care.

Monitoring arrangements

This policy will be reviewed by the Headteacher every year. At every review, the policy will be approved by the Headteacher/Governing board member with responsibility for Health and Safety. This policy is linked to and should be read in conjunction with the:

- Health and safety policy
- Risk assessment policy
- Policy on supporting children with medical conditions ● Allergy Policy

Monitoring Procedures

The Headteacher will monitor incidents in order to ascertain repetition of incidences and to identify possible health and safety risks and, where possible, to initiate remediate action(s).

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Administering medication in school

Prescribed Medicines in School

Any child requiring medication, as advised by the GP, and given clearance to attend school, must have their medicine brought to the school office by their parent/guardian. The medicine should be clearly labelled with the child's name and the dosage clearly identified and communicated to office staff. The parent/guardian must also complete and sign a permission form giving the school office permission to administer the medication.

When administering medication, the school office staff will require a second member of staff to witness the administration of the medication and ensure the correct dosage is being given. Details will then be added to CPOMs stating what was given, when, the dosage, who witnessed and who administered.

Parents/guardians should state an optimum time for administration of medicine. Although every effort will be made to administer medicine at that time, medical emergencies would take priority and medicine would be administered as close as possible to the agreed time.

Any medication to be held in school long term such as epi-pens, inhalers or allergy medication must be accompanied by a care plan completed by a medical professional.

We are unable to apply any creams/lotions directly to a child's skin however, we can guide the child in administering this themselves.

Children must **NOT** keep ANY medication in their school bags or on their person.

Non-prescribed Medicines in School

As of September 2026, the school will **NOT** administer non-prescribed medication such as Calpol, Ibuprofen or Antihistamines on an ad-hoc basis. The school will **NOT** hold its own supply of medication nor keep medication in school for a child on a "just in case" basis. Parents/guardians are welcome to come into school to administer non-prescribed medication themselves if they feel their child needs an additional dose throughout the school day. The **ONLY** exceptions to administering non-prescribed medication is when:

- a child has suffered a broken limb or strain and has been recommended by a health professional to take pain relief for a brief period (days)
- *(a child has a recurring skin rash/skin condition and can administer the cream/lotion themselves)?? Thinking Rishita, Emily G*

If the child requires any other medication during the school day, we would ask parents/guardians to consider whether the child is well enough to be in school. Please also refer to our sickness policy.

Storage of Medication

All medicines are stored safely in the 2 red fronted lockable cabinets in the school office. Any medication that needs to be refrigerated is kept in the fridge in the staff room within a separate, sealed, lidded and labelled box.

Disposal of Medication

The school cannot dispose of medication. Any items no longer required to be held in school or at their expiration date will be returned to the parent/guardian.

Activities off-site

All off-site trips must include a First Aider and this person must be named on the risk assessment documentation, prior to the visit. This risk assessment is then approved by the Headteacher. All children requiring an inhaler, epi-pen or other prescribed medication must have it on the trip. The items must be clearly labelled and will be kept in the First Aid bag.

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Medically identified Food Allergies and Intolerances

Parents/guardians of children with a food allergy/intolerance must complete our caterers form to convey what their allergy/intolerance is. A copy of this will be given to the school kitchen for their records. Details of the allergy/intolerance will also be added to our school database (SIMs) and to our lunch ordering system (School Money)

On occasion, children are sent to school with treats for their class to celebrate birthdays. Please be mindful to consider an alternative for children in the class who may have certain allergies/intolerances. We are a nut free school.

Antihistamines

Antihistamines help stop the production of histamine which causes allergic reactions such as itchiness, watery eyes, runny nose, blocked nose, sneezing or skin rash in people with allergies such as to pollen, animal hair or house dust. Antihistamines help stop this happening if taken **BEFORE** the sufferer comes into contact with the substance they are allergic to. Therefore, for example, if the pollen count is high, the school would expect children to have taken a long lasting antihistamine **BEFORE** arriving at school or to be taking an antihistamine daily **BEFORE** school such as for ongoing seasonal or pet allergies.

Head Lice & Infestation

Should any occurrence of head lice be present in a class, the parents/guardians of the whole class will be emailed informing them of the presence of head lice within a cohort and of the need to check their own child's hair. The parent/guardian of the child with head lice will be informed privately/separately by a member of staff if they were not already aware. We do not administer head lice treatments in school. If a child has visible bites, possibly related to infestation from family pets, the parent/guardian will be contacted and informed that the situation needs to be addressed at home. Should any carpeted areas of the school require attention as a result of infestation, these will be treated out of school hours by the caretaker.

Threadworms

When a parent/guardian advises the school office that their child has threadworms, the parents/guardians of the whole class will be emailed informing them of the presence of threadworms within a cohort and of the need to check their own child. Treatment should be carried out at home as soon as possible. The whole family should be treated and re-treated if necessary. We do not administer threadworm medication in school.

Suncream

Parents/guardians receive regular reminders from school regarding sun protection during periods of hot weather. The school advises parents/guardians to apply SPF50, 24-hour protection suncream prior to the start of the school day. Children are encouraged to wear a sunhat for outdoor play sessions during periods of hot weather. School staff are not permitted to apply/re-apply sun-cream.

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