



FIRST BRIDGE SCHOOL

# First Aid and Medication Policy

Reviewed: February 2026

Next Review: August 2026

## Introduction

First Bridge School are dedicated to ensuring rigorous and compliant procedures for the health and safety and wellbeing of our staff and pupils.

In order to do this, we ensure the following:

- all staff are made aware of this policy and the procedures within, during induction, before their first day on school premises
- all staff read and agree to the staff Code of Conduct, which outlines appropriate behaviour and clothing in order to keep themselves and others safe
- all classrooms, the staff room and medical room have fully stocked first aid boxes that are checked and replenished at least weekly
- a warm, comfortable and welcoming medical room is always available to staff, visitors and pupils, with a bed, clean running water and the necessary first aid equipment
- staff are trained in basic health and safety procedures e.g. wearing gloves during nappy changing/dealing with bodily fluids, NHS 'washing hands' protocols etc.
- required risk assessments, including individual pupil risk assessments ( are in place, and read and agreed to by all staff.
- incidents and accidents are recorded as soon as feasibly possible, on our Family app, and approved by a leader
- protocols for reporting incidents and accidents to parents, and appropriate bodies (e.g. RIDDOR) are followed
- all staff work together to keep the school premises clean, tidy and safe by clearing up spillages immediately and dealing with/or reporting anything that may pose a risk to an individual in the environment.

## Emergency Procedures in the Event of an Accident, Illness or Injury

- In the event of an accident injury or illness (and the injured person is unable to seek help themselves) 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 present, will assess the injury and decide if further assistance is needed from the emergency services. They will remain on the scene, with the individual until help arrives.
- If in doubt, staff should call 111 for advice or dial 999 in emergencies.
- All accidents and incidents that happen on school premises are recorded in the appropriate recording instrument (Family app for pupils, Accident Book for staff) by either the first aider or the injured staff member.
- Protocols for contacting parents are followed (see information below on 'Incident and Accident' reporting)

This procedure will also be followed in events such as of febrile convulsions or severe allergic reactions.

## Calling an Ambulance

If a first aider deems it necessary to call the emergency services, the following happens:

- the first aider remains with the injured adult or pupil until and including when the ambulance arrives
- they have accurate notes recorded on the time and location of the incident and notes of all symptoms and injuries
- the headteacher or clinical supervisor calls the parents/next of kin immediately (if desired by staff member), ensuring necessary information is cascaded including what hospital they are being taken to
- if in doubt, the first aider always calls 999 for an ambulance

## Head Bumps

In the event that a pupil sustains a head injury, the following procedure will apply.

- the accident procedure is followed, and any wounds are treated using the appropriate first aid
- when a head bump is considered by the first aider as serious, with potential for concussion, a phone call to the parents is made and if necessary, the emergency services.
- if the bump is not considered serious, a member of staff is allocated to monitor the pupil for any changes in their symptoms, such as headache, nausea, dizziness or distressed behaviour etc, and further action will be taken if necessary
- the pupil is monitored for at least one hour before being allowed to sleep
- parents are given a notice of symptoms to watch out for, by the first aider.

## Managing Bodily Fluids

- First Aiders always wear disposable gloves wherever there is contact with bodily fluids.
- Any dressings or materials that are used in the cleaning up, or treatment of an accident involving bodily fluids, are disposed of in the designated yellow bin.
- In a significant event, all staff and pupils other than those responsible for cleaning up the spillages/bodily fluids, are removed from the immediate area to reduce the risk of contamination and spread.
- Parents are informed as soon as reasonably possible.

## Allergies and Anaphylaxis

- Anaphylaxis is a potentially life threatening, severe allergic reaction requiring immediate medical attention.
- Individual Risk Assessments are in place for pupils who have allergies and may be at risk of anaphylaxis.
- For pupils with confirmed anaphylaxis responses to allergens, and Individual Health Care Plan (IHPs) is in place (see below for further information on IHPs)

- Only staff who have been professionally trained in administering Adrenaline Auto-Injectors (AAI's) may use them in an emergency situation.

#### Preventative measures

- First Bridge School is strictly 'Nut Free'. This includes any food items that may contain traces of nuts.
- First Bridge School manages risks for allergies through general hygiene practices, such as regular washing of hands, no sharing of food items and all pupils have their own named water bottles.
- All staff receive specific training annually in understanding allergies and anaphylaxis.
- First Bridge do not keep emergency AAI's other than for pupils or staff who require an AAI. In this instance, parental consent is sought for the use of an emergency AAI purchased by the school.

#### Off-Site Procedures

When taking pupils off school premises, staff always have the following:

- a designated PFA and/or FA
- school mobile phone
- a portable first aid kit

In the event of an accident, injury or illness when off-site, staff follow the standard outlined procedures. In addition to this, they inform the school premises as soon as feasibly possible of the incident.

#### Record Keeping and Reporting

Every accident is recorded on an accident form, within the Family App. Staff accidents are recorded in the Accident book, kept in the staff room.

#### Accident and Incident Recording

- An accident/incident form is completed, on Family, by either the staff member who witnessed the event, or the first aider. All accidents/incidents are recorded as soon as feasibly possible, and no later than by 4:30pm the same school day.
- Accident/incident recording should be detailed, accurate and factual.
- Accidents/incidents for pupils are approved before final submission to families, by the clinical supervisor, clinical lead, clinical director or headteacher.
- Parents must sign and acknowledge the accident/incident form (via the Family App), ideally by the end of the school day. If the parent has not signed the completed form, the Clinical Lead contacts the parent via phone, to ensure they have viewed and acknowledged the accident form.
- Parents will be able to see all accident/incident reports for their child, on the Family app.

## Existing Marks

Pupils often arrive at school with small, everyday marks such as light bruises, grazes, or scratches that occur during normal play and family life. Staff do not record every minor mark or scratch that a pupil arrives with.

Where a mark is clearly explained, consistent with normal play, and causes no safeguarding concern, no formal record is necessary. Staff make a brief note within the 'Existing Marks' daily record book, kept in each classroom, if relevant to the pupil's care (for example, if a bump may need monitoring).

A mark or injury is reported to the DSL if an existing mark is:

- unexplained
- inconsistent with the explanation given
- in unusual location
- If a pattern of frequent marks occur

## Common Health Conditions

Most pupils who attend First Bridge School are likely to fall ill with a common health condition/illness. In the event of a common health condition, please follow the below advice.

- **Diarrhoea:** defined as passing of looser or more frequent stools than is normal for the child, typically three or more liquid or semi-liquid stools within a 24- hour period. If diarrhoea occurs, you must keep your child at home or, if it occurs at the school, you will be notified and asked to make arrangements to collect your child - no exceptions. Your child should be **diarrhoea-free for at least 48 hours** before returning to school.
- **Fever:** defined as a body temperature of **38°C or higher**. You must keep your child at home, even if the fever has been tempered by medication. If the pupil develops fever during the school day, you will be notified and asked to make arrangements to collect your child. Temperatures will be taken at least twice with a minimum of 30 mins in between. Your child can return to school once they are fever free for 24 hours and when they are not depending on medication to regulate their temperature.
- **Vomiting:** You must keep your child at home. Your child should be free of symptoms for **at least 48 hours** before attending school, especially if the vomiting occurs in conjunction with symptoms of influenza or infection. If your child vomits during school, you will be notified and asked to make arrangements to collect them. Please note, that if your child vomits due to anxiety or other behavioural reasons, our clinical team will work with you to address this, so that it does not impact school attendance.
- **Contagious illnesses/Rashes:** If a pupil has a contagious illness such as unexplained rash, scarlet

fever, chickenpox, measles etc., we will follow the NHS recommendations concerning attendance and periods of exclusion from school. If First Bridge school has three confirmations of a contagious illness, this information will be communicated to our families.

- **Head Lice:** If a pupil is seen to have contracted head lice (also known colloquially as ‘nits’) parents are contacted and encouraged to collect their child as soon as is reasonably possible, to reduce the likelihood of transmission to other pupils and staff. Pupils can return to school as soon as the lice are treated, which can be as soon as the following day.
- **Cold/Flu:** Use your best judgment as to whether your child is well enough to attend school. If your child does attend, please let us know that they have cold or flu-like symptoms so that we can monitor them. If symptoms worsen and they are unable to perform at their typical level due to apparent illness, you may be called to pick up your child early from school. If your child’s cough/cold is accompanied by a temperature, please follow advice on temperature above.

## Medication

As part of the pupil referral process, information should be sought to ensure we have clear knowledge as to any health issues that may occur, this may include but is not limited to:

- any allergies the pupil has
- any medication the pupil is taking
- any reactions the pupil has had to medications
- any Individual Health Care Plans (IHPs).

During the admission process, consent is sought from whomever has parental responsibility as to the administration of the identified prescribed medication.

### Non-Prescribed Medication

School staff do not administer non-prescribed medication. We do not hold supplies of, nor administer or provide, any ‘over the counter’ medication.

### Prescribed Medication

Only trained members of staff administer prescribed medication. Prescribed medication are pharmaceutical drugs, dispensed only upon the written or authorised instruction of a licensed healthcare professional.

### Rescue/Functional Medication and Individual Health Care Plans

Functional medication includes Insulin (diabetes), Ventolin (Asthma), Diazepam, Buccal Midazolam (Epilepsy); Adrenaline (Anaphylaxis). Staff administering these medications must hold a valid PFA/FA certificate and specific training e.g. Buccal Midazolam administration certification.

If a pupil has functional or rescue medication, an Individual Health Care Plan (IHP) must be developed with the relevant health professional (usually the GP), the pupil's Clinical Supervisor and subsequently signed off by the headteacher. Care plans should:

- clearly describe the medical condition
- the symptoms
- medication needs (storage and dosage)
- emergency procedures.

Only staff members who have received the appropriate training as a part of the development of the IHP, will administer the rescue/functional medication. For this reason, at least 3 staff members must be included in the training, when delivered. It is the responsibility of the headteacher to commission additional training for staff members, should those trained staff members resign.

Parents are requested to ask their GP/relevant healthcare professional for an annual review of their child's IHP, which is then shared with the school.

## **Storage of Medication**

The headteacher is aware of all medications brought into the school and is responsible for giving overall agreement to its administration. All medicines brought into the school are recorded on the 'Medication Administration Record'.

Medication should only be brought to school when needed. Often medication can be prescribed in dose / frequencies which enable it to be taken outside school operating hours, and this should always be prioritised where possible.

The secure location for all medication in our school is in the Medical Room fridge and cupboard, both of which are secured with a key that is kept in a locked box, also secured by a key, in the medical room. Additional storage information is provided below.

- We do not accept medication that is not in its original container.
- Emergency medication such as inhalers and epi pens are kept in individual medical bags, clearly labelled with the pupil's name, in their classrooms. These are always kept accessible, meaning they leave the school premises with the pupil, including during routine and non-routine fire evacuations and school trips.
- Prescribed medication must have the original dispensing label, as received from the pharmacy. If there are any queries or concerns, the dispensing pharmacist or the pupil's GP is consulted, and their instructions followed.
- All medication must have:

- the full printed name of the pupil
- the dosage required
- the name of the drug
- the frequency and route/method of administration
- the expiry date clearly visible on the prescription label

A record is kept of the minimum/maximum temperature of refrigerators.

Medicines can be potentially harmful to anyone for whom they are not prescribed. First Bridge School ensures that risks to the health of others are properly controlled.

## **Administration of Medication**

At First Bridge School, only staff trained in PFA or FA, may administer medication. All medication is administered in line with the prescribed dosage, or as detailed on an IHP.

All trained staff who agree to administer medication, do so on a voluntary basis.

Trained staff giving medicines to pupils observe the following procedures in cooperation with a colleague:

- confirm the pupil's name agrees with that written on the medication
- checks the written instructions on the leaflet/from the doctor/pharmacist
  - cross references this with the instructions provided by the parents
- confirms the prescribed dose
- checks the expiry date
- checks how often and for how long i.e. 3 times a day for 6 months

## **Refusal to take medication**

If a pupil refuses to take medication, this is recorded, and the pupil's parents are informed. If the medication is essential to the pupil's continued well-being, the headteacher will call the emergency services and inform the parents. If the medication is essential to the pupil being educated, the headteacher contacts parents to discuss actions to be taken.

## **Disposal of Medication**

First Bridge School do NOT dispose of medicines. Out of date medicines or those that are no longer required are returned to parents/ at the end of each term for disposal. Parents are instructed to return these to the pharmacist for safe disposal.

## **Sharps/Needles**

Where pupils require medication which is supplied with a syringe or epi-pen, or where bloods need to be tested, staff dispose of the needles appropriately. The sharps box is kept in the medical room.

## Training

All school staff have a 'Basic First Aid' online training completed (through Flick training platform). This course is valid for three years.

A minimum of five staff in the school have a Paediatric First Aid Training Certification and a minimum of two staff have the Emergency First Aid at Work Certification.

Valid certification for these courses is stored in the staff file (Breathe HR). Posters of school first aiders can be found at Reception, as well as in each classroom.

The school always arranges updated first-aid training before it expires.

## Appendices

# SICKNESS TRAFFIC LIGHT

### **RED** No session today

- Any illness or infection within an exclusion period as specified by Public Health England
- Fever of 38 degrees or higher
- Wheezing or shortness of breath
- Continuous cough
- Constant runny nose with yellow/green tint
- Diarrhea or vomiting within the last 48 hours
- Sore throat or swollen glands
- Undiagnosed rash
- Persistent itching
- Uncovered sores
- Cannot join in daily routine
- Unable to take part in normal nursery activities inside and outside

### **AMBER** Join us if parents can collect within an hour of being contacted

- Minimal green/yellow runny nose
- Lethargy
- Redness or runny eyes

### **GREEN** OK to come in

- Clear runny nose
- Active, playful and rested