BOWBROOK HOUSE SCHOOL

WHOLE SCHOOL FIRST AID & MEDICINES POLICY (INCLUDING EYFS)

Bowbrook School

Approved by the Head Teacher: August 2026

Active from: September 2026

Next review date: August 2027

WHOLE SCHOOL FIRST AID AND MEDICINES POLICY (INCLUDING EYFS)

Including procedures for children who are ill or infectious

Bowbrook House School has a duty to provide adequate and appropriate first aid cover to pupils, staff and visitors. The procedures are in place to meet the responsibilities clearly stated within this policy. This policy also applies to our pupils in EYFS.

- To ensure that there is an adequate provision of appropriate first aid at all times.
- To identify the First Aid needs of the school, both on the premises and for off-site activities, in accordance with the requirements of the Health and Safety Executive.
- To ensure that First Aid cover is available at all times while people are on school premises.
- To provide clarity on how First Aid is administered in a timely and competent manner.
- To ensure that when individuals have been injured there are suitable mechanisms in place to provide remedial treatment.

This policy is written with regard to:

- Health & Safety (First Aid) Regulations 1981
- Reporting of Injuries, Diseases and Dangerous occurrences Regulations (RIDDOR)
- DfE Guidance: First Aid in Schools
- Supporting Pupils at School with Medical Conditions
- Statutory Framework for the Early Years Foundations Stage (EYFS)
- Independent School Standards Regulations
- Health & Safety at Work Act 1974

Objectives

- To appoint the appropriate number of suitably trained people as First Aiders to meet the needs of our school.
- To provide relevant training and to monitor the training the needs of staff, as on-going process.
- To provide and maintain sufficient and appropriate resources and facilities, including a specific room for First Aid treatment.
- To keep staff and parents informed of the First Aid arrangements in place.
- To keep accident records and to report relevant information to the HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).
- Accident records, first aid records and medication administration records will be retained in accordance with the schools Data Protection and Records Retention Policy.

Responsibilities

The Headmaster/Proprietor is the Designated Safety Officer.
He is responsible for:

- ensuring compliance;
- First aid needs assessment
- Staffing levels
- Including the regular inspection and replenishment of first aid equipment in accordance with current Health and Safety Executive (HSE) guidance and the school's first aid needs assessment.
- This duty may be delegated.

Mrs N Adamson is the Designated First Aid Officer
She is responsible for:

- Monitoring supplies
- Maintaining records of all First Aid treatments
- Maintaining records of medicine administered
- Maintaining training records in a central register. This includes, but is not limited to, first aid qualifications, Epipen® training, Diabetes & other specialist medical training,

Staff
They are responsible for:

- Reporting accidents
- Following first aid procedures
- Familiarising themselves with medical plans
- Familiarising themselves with location of first aid equipment

A list of first aiders is displayed in all rooms and with the First Aid Boxes in the school buildings.

EYFS FIRST AID

As required by the EYFS Framework:

- At least one person with a current paediatric First Aid certificate is always on site and available at all time when EYFS children are present.
- A paediatric First Aider always accompanies EYFS pupils on outings.
- All EYFS accidents are recorded and shared with parents on the day they occur.
- Ofsted will be notified of any serious accident, illness, injury or death of an EYFS child and any action taken within the required statutory timeframe.

BOWBROOK HOUSE SCHOOL
FIRST AID
STAFF TRAINED

Appointed Person		Mrs N Adamson			
First Aid at Work & Level 3 Paediatric (Full Course incl Defib Training)					
Mrs H Hodgson	exp June 28				
Mrs N Adamson	exp May 28	Mrs L Mao	exp May 27		
Level 3 Paediatric First Aid - (Full Course incl Defib and Epi Pen Training)					
Miss K Brookes	exp April 29	Mrs P Geisler	exp April 29	Mrs C Heaume	exp April 29
Mr A Draper	exp April 29	Mr J Swain	exp April 29	Miss F Edwards	exp April 29
Miss S White	exp April 29	Mr R Mills	exp Nov 26	Mr A Bury	exp Apr 28
Ms K Birch	exp Mar 28	Mrs M Gill	exp April 29	Mrs P Harding	exp April 29
Miss I Lewis	exp April 29	Mrs C Heaume	exp April 29	Mrs K Thorneywork	exp April 29
16 Hour Outdoor First Aid Course					
Mr D Bell	exp June 27	Mrs M Ford	exp Nov 27		
Administration of Medicines in School					
Mrs H Hodgson		Mrs J Ironside		Mrs N Adamson	
Ms K Brookes		Mrs R Hunt		Mr D Bell	
Ms K Birch		Mrs M Ford		Mr R Mills	
Mr A Draper		Mrs L Mao		Mrs W Amess	
Miss F Edwards		Miss I Lewis		Mrs P Harding	
Mrs K Thorneywork		Miss S White		Mr J Swain	
Mrs C Heaume					
Awareness of Diabetes Type 1 in School					
Mrs H Hodgson		Mrs J Ironside		Mrs W Amess	
Mrs N Adamson		Mrs C Heaume		Mr D Bell	
Type 1 Diabetes Awareness		All staff September 2026			
Child Specific Awareness of Diabetes - Autumn 2024					
Miss S White		Mr A Bury		Mrs S Adamson	
Mrs H Hodgson		Mrs J Ironside		Mrs L Mao	
Mr A Draper					
Certificate in Concussion & Brain Injury/Awareness					
Mrs H Hodgson		Mrs J Ironside		Mr J Swain	
Mrs N Adamson					
Certificate in Asthma Awareness					
Mrs H Hodgson		Mrs J Ironside		Mr A Draper	
Mrs N Adamson					
Allergy & Anaphylaxis Awareness	All staff September 2026				
Whole School Epi-Pen Training	January 2022 - Refresher booked January 2027				

BOWBROOK HOUSE SCHOOL
FIRST AID
STAFF TRAINED

LifeVac Training - Autumn 2025			
Mrs N Adamson	Miss F Edwards	Mrs E Kimberlee	Mr M Shearman
Mrs S Adamson	Miss S White	Miss I Lewis	Mrs J Taylor
Miss S Aftab	Mrs M Gill	Mrs C Mason	Mr M White
Mr C Allen	Mrs P McGain Harding	Mrs C Mills	
Mrs W Amess	Mrs C Heaume	Mr R Mills	
Ms K Birch	Mrs H Hodgson	Miss L Morris	
Miss K Brooks	Mr M Hunt	Mrs S Morris	
Mr A Bury	Mrs J Ironside	Mrs J Robinson	
Dr M Butt	Mrs H Izod	Mrs S Rush	
Mr A Draper			
Mental Health Training			
Mrs W Amess	Mr A Draper	Mrs H Hodgson	Ms J Stephenson
Miss K Brookes	Mrs A Farr	Mrs L Mao	Miss S White

BOWBROOK HOUSE SCHOOL
FIRST AID BOXES
LOCATIONS

Main Building Ground Floor	**Maintenance**
School Office - Silver Case	1 in office
School Office - Bleed Control Kit	
School Office - Emergency Grab Bag	
Kitchen - Back Wall in 2nd room	
Kitchen - Burns Kit	**Pavillion**
Lab 1 - Cabinet behind door	Left of Door
Medical Room	
Medical Room - Trip bags	
Infants Dept	**Byland Block**
N/R - 1 Near Sink	1 Main Corridor
Yr 1/2 - 1 Near Sink	
Cabin - 1 Near sink	
Quads	**Schofield Block**
Yr 7 Block - 1 in office	Lab 2 - 1 Near Sink
Yr 8 Block - 1 in office	Maths Office - 1 on Desk
PE Office	**Swimming Pool**
1 on Filing Cabinet	1 in Changing Room
Hall	**Pottery Room**
by RHS entrance door	1 on Worktop
Art Block	**Bolton Block**
Art Room - 1 on Cupboard near door	1 in Office
Geography Room - 1 on Windowsill	
On-Pitch Grab Bags	**DofE Outdoor Kits**
2 in School Office	2 in Medical Room Cupboard
Bum-Bags	**Mini Buses**
P/ground Duties x 2 Infants & Juniors	1 in each bus

Defibrillator - Main Reception Area outside School Office

Lifevac-Anti Choking Devices - Dining Room, Quads, Schofield, Byland & Infants & 2 portable Life Vacs in Office

First Aid Cupboard School Office contains prescribed medication for pupils with Care Plans, school inhalers and Epi Pens

First Aid Cupboard in Kitchen - contains Bodily Fluid Clean Up Equipment

First Aid Store Cupboard - Medical Room

Clinical Waste Bin is in the Boiler Room **Sharps Bin** is in the Medical Room

Ongoing Serious Medical Conditions

Staff will be informed if a pupil, due to an underlying condition, may require specialist emergency treatment. Details of this treatment will be given to all staff and will be displayed on the staff room notice board.

Additional training will be organised from a qualified health professional if required.

Pupils with long term medical conditions will have a Careplan kept in the school office.

Asthma

Pupil records on Engage identify those who suffer from asthma & this is available to all staff. Lists of children who may require treatments are displayed in the staffroom and all staff are updated on the medical status of all pupils at the start of each term and if any changes occur.

Pupils in year 5 and above are responsible for their own inhalers. The school maintains emergency salbutamol inhalers in accordance with the Human Medicines (Amendment) Regulations, supported by parental consent and an asthma register.

If a pupil starts to suffer with symptoms such as wheezing, coughing and chest tightness they should be encouraged to use their inhaler or to attend the school office to obtain an inhaler from the medical cabinet.

Pupils should be given treatment as directed in line with their care plan, they should be kept calm & encouraged to breathe deeply. A First Aider will monitor, re-assess and re-administer inhaler if necessary. If symptoms persist or get worse then medical advice will be sought (999) and parents contacted.

Allergies
Also used in conjunction with the Allergy Policy

Where allergies are known, these are recorded on Engage and details are available for all staff. Lists of children who may require treatments are displayed in the staffroom and all staff are updated on the medical status of all pupils at the start of each term or when changes/updates are received from parents.
This may be respiratory allergies such as hay fever or asthma, intestinal allergies, or skin allergies such as rashes.
The most severe allergic reactions, Anaphylaxis are dangerous and need urgent medical attention, usually Epipen® and medical advice from 999.
Pupil Specific Named Epipen® are stored in the School Office. An Epipen® should be with the pupil at all times. Each Epipen® is labelled and contains specific doses for each child.
Each pupil will have a Careplan and copies are held in the school office.

There are a number of staff who have been trained to administer Epipen® (See full list at the start of this policy)

For emergency use the School does have a 2 spare Adult and 2 spare Child Epipen® which are stored in locations which allow immediate access in an emergency and all staff are aware of their location in the school office

Parents will be informed immediately and an ambulance will always be called following the administrations of adrenaline

Epilepsy

Pupil records on Engage identify those who are known to suffer from epilepsy and this is available to all staff. Lists of children who may require treatments are displayed in the staffroom and all staff are updated on the medical status of all pupils at the start of each term and as a result of any changes. Each child will have a Careplan. Copies are held by the First Aid Officer in the school office.

Treatment: If first fit (undiagnosed as epileptic) call a First Aider who will call an ambulance immediately and make contact with parents. Clear the area around the patient (to avoid injury). DO NOT restrain. If possible, make a note of start and finish time of seizure.
If diagnosed as epileptic clear area round the patient (to avoid injury) and call for an appointed person. DO NOT restrain. If possible, make a note of start and finish time of seizure. Follow the pupils Careplan and inform parents. Medical advice will be sought where necessary.

Diabetes

Pupil records on Engage identify those who are known to suffer from diabetes and this is available to all staff. Lists of children who may require treatments are displayed in the staffroom and all staff are updated on the medical status of all pupils at the start of each term and as a result of any changes. All staff are encouraged to familiarise themselves with the pupils careplan.
Regular contact is maintained between parents, the First Aid Officer, and form teachers to ensure full awareness of pupils needs. Where appropriate, pupils are encouraged to carry their own monitoring equipment and emergency supplies.

The most likely problems to arise in school is hypoglycaemia (too little sugar) or hyperglycaemia(too much sugar). Staff and in particular PE Staff will monitor for signs, e.g., tiredness, feeling shaky, headaches, aggressive behaviour, disorientation, clammy, pale and faint.
Treatment as defined in the careplan (available from the school office) . In accordance with the pupils Careplan emergency supplies are kept in the school office and in the medical fridge. If pupil is unresponsive call 999

Following any significant fluctuations in levels contact will be made with parents.

Hyperventilation

This is a condition of over breathing and is often a manifestation of acute anxiety, it may accompany hysteria or a panic attack.
If at all possible, pupils should make their way to the school office, but if this is impractical then a First Aider should be called.
Treatment: talk firmly and calmly to the casualty, encouraging slow steady breathing. Often an accompanied walk in the fresh air and distraction techniques will help to release pent up adrenaline, i.e., counting back from 100, listing animals from the alphabet, massaging hands. Continue to monitor until breathing has returned to normal and pupil is calm.

First Aid

All staff providing First Aid cover must hold a valid certificate of competence, issued by an organisation approved by the HSE. All training is updated every three years.

Any member of staff may deal with minor treatment. More serious incidents, including injuries to the head, must be reported to a recognised first aider, who will act accordingly and report the incident to a member of the SLT.

Should the situation require it, responsibility for calling an ambulance and informing parents rests with the Headmaster, Deputy Head or the First Aid Officer.

However, in the case of an extreme emergency the summoning of an ambulance is left to the discretion of any member of the school staff. When in doubt, an ambulance must always be called; using a 112-telephone call and the Parents and Headmaster must be immediately informed. Parents should be asked to go to the Accident Unit at the Hospital. A member of staff will accompany the child with their medicine and/or contact details.

IN THE EVENT OF A LIFE-THREATENING SITUATION, AN AMBULANCE SHOULD BE REQUESTED IMMEDIATELY BY THE FIRST RESPONSIBLE PERSON TO ARRIVE ON THE SCENE. FURTHER ASSISTANCE SHOULD THEN BE SOUGHT.

The school phone number is: 01905 841242
The school postcode is: WR10 2EE
Ordnance Survey Grid Ref:
E 393626
N 250481

WHAT3WORDS – GREAT.TICKETS.JOINED

A Defibrillator is located in the reception area. It is available for use by any person following guidance from the emergency operator or device prompts. The Defibrillator is checked in line with manufacturers guidance every half term. Checks are recorded.

Reporting Accidents to Parents

- In the event of a serious accident or injury parents will be informed immediately by phone.
- Minor injuries and accidents will be reported by form teachers at the end of the school day.
- Parents of children leaving school must always be made aware if the child has received an injury to the head during the school day. They should be advised of the action taken at the time and any further action that may be required. A head bump letter will be given and School Secretary to follow this up.

Reporting Accidents to the HSE (RIDDOR)

In accordance with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (2013) major injuries and reportable diseases must be reported to the Health and Safety Executive. Mr Allen holds a list of reportable injuries and diseases and the contact details of the Health and Safety Executive.

Members of staff have a duty to alert Mr Allen (Headmaster) to such incidents and must complete an Accident Form. A record of any First Aid given by a first aider should be kept including the following:

- The date, time and place of the incident.
- The name of the injured person.
- Details of their injury and what First Aid was given.
- What happened to the person immediately afterwards
- The name of First Aider or person dealing with the incident.
- Completed Forms are filed in the School Office.

If a pupil is unconscious (or experiences difficulty in moving):

- Ring for Ambulance and send for Defibrillator
- DO NOT move the injured pupil
- They should be kept warm. Put a coat etc. over the shoulders and upper body and another over the legs
- Reassure the injured person that all is well and that help is on the way
- Stay until instructions are given by a first aider and obey them immediately.

Headaches

First suggest some water to drink; some fresh air or short walk outside; cold flannel to forehead. If these fail, then some acceptable pain relief can be given (once consent has been given by a parent/guardian). Any medication given in school is recorded.

Fainting/Concussion

If a child suffers a blow to the head and subsequently loses consciousness (for however short a period of time), appears dazed or confused or suffers any disturbance of vision:
They should be taken to the Medical Room, accompanied by someone who saw the incident and can give some account of it to the First Aid Officer. An ambulance will be summoned, if necessary, responsibility for calling an ambulance and informing parents rests with the Headmaster, Deputy Head or First Aid Officer and details will be passed to the medical staff who attend. In the event of a pupil taken to hospital in an ambulance, a member of staff would stay with the pupil until the parents arrived.

Collapsed children should be left on the floor with legs raised and made comfortable and warm. A sweet drink or a biscuit can help to restore blood sugar levels. Feeling of fainting can be reduced by putting the head down between the knees, and breathing slowly and deeply.

Head Injuries

All head injuries will be assessed by a qualified first aider. Parents will be informed on the same day and written head injury advice will be provided.
Emergency services will be contacted immediately where red flag symptoms are observed e.g.

- Loss of consciousness
- Repeated vomiting
- Confusion
- Unequal pupils
- Drowsiness
- Seizure
- Worsening headache
- Neck pain
- Deterioration of condition

Cuts and Bruises

Cuts and bruises are inspected for severity. If stitches are required, parents are called to gain permission for hospital treatment. 'Butterfly or 'Steristrips' can be used for deeper cuts that need pulling together. A simple cut should be cleaned with saline solution or lint free cloth and, as long as the bleeding has stopped, left open where possible. If protection is necessary a covering of Elastoplast, or non-allergic plaster, with advice to remove it that evening and bathe again in warm water. Bruises are treated with ice/cool packs.

Suspected Broken Bones

First, ascertain as much information about the accident in order to make a reasonable judgement. A designated First Aider will need to examine the limb and look for obvious signs of misalignment, swelling, possible bruising. Avoid unnecessary movement. Access for pain, swelling deformity and loss of function. Seek the advice of a qualified First Aider and medical assessment where appropriate. Apply ice/cool packs. Be aware of possible green stick fractures. A sling can be used, if appropriate, but as a short-term measure only. Keep the child under observation and consult with parents and Mr Allen.

An ambulance will be summoned, if necessary, responsibility for calling an ambulance and informing parents rests with the Headmaster, Deputy Head or First Aid Officer and details will be passed to the Medical Staff who attend. In the event of a pupil taken to hospital in an ambulance, a member of staff would stay with the pupil until the parents arrived.

Sprains

Apply ice/cool packs and encourage normal movement. Bandage with crepe bandage if support is necessary, but only as a short-term measure.

Spinal Injuries

If a fracture of the neck or back is suspected (one common symptom being pains or 'pins and needles' in the arms and legs), the child must on no account be moved until they have been seen by a paramedic or doctor, who may wish to apply a cervical collar to immobilise the neck. Should the child become unconscious and the airway in risk of obstruction, they should be placed in a modified recovery position, protecting the neck and back. Professional help/ambulance must be called immediately.

Eye Injuries

If a child is hit in the eye and experiences pain or mistiness of vision, even if only temporary, they should be referred to a doctor that same day, since any delay in treatment may seriously endanger recovery. Children playing football should not wear glasses; contact lenses are permissible.

Mental Health/Emotional Distress

Pupils presenting with emotional distress, panic attacks, suicidal ideation, self-harm concerns or other mental health crises will be supported in accordance with the school's Safeguarding Policy, Mental Health and Wellbring procedures and Keeping Children Safe in Education.

Bleeding - All equipment required for dealing with blood is kept in the First Aid Cupboard in the Front Kitchen.

If a child suffers a nose-bleed or any other form of bleeding, they should not continue with any game or other activity in which they might have been engaged until the bleeding has stopped and the wound has been covered.

- Always wear gloves when dealing with body fluids/soiled clothes and bedding
- Always wash hands thoroughly after dealings with the child or 'cleaning up'

Note: Bleeding from the ears or a clear discharge from the ear indicates the possibility of spinal injury and the child must not be moved until the arrival of the emergency services.

All waste should be sealed in a yellow bag and disposed of in the Clinical Waste bin located in the Boiler Room.

How we treat common injuries

We always reassure the child calmly and sympathetically throughout the treatment.

Parents are expected to keep us informed of any notable medical conditions. E.g., asthma, allergies, use of Epipen® ®, and they will have completed a careplan, which are kept in the School Office. If a child becomes unwell during the school day, the school office will always ring parents for permission to administer Calpol or paracetamol depending on the age of the child. A record of all medicine administered is kept in the school office.

All members of staff are required to have knowledge of the uses and application of equipment in First Aid bags. Questions or problems should be addressed to the First Aid Officer.

- A kitbag (with icepacks and vomit bags) is taken on all fixtures and school trips.
- The visit leader should request this is advance of trips. It contains a good selection of basic necessities for both children and adults, and is regularly checked and replenished, as are the minibus kits.
- Before school trips and Away Fixtures staff should check Engage to make sure they are aware of any medication is needed to be taken from the school. The trip leader or teacher in charge of the team should do a double check with the Appointed Person and ensure that the correct medication is taken off site and is signed both out and back in on their return. For any pupil who has an allergy leaders/teachers must ensure that both Epipen® s are taken off site with the trip or fixture.
- A medical box is kept in the back kitchen, with burn kit and necessary blue plasters etc.
- Mobile First Aid bags are available for sporting fixtures, including icepacks for home matches and lessons.
- First Aid bags should be returned to the School Office and injuries reported.

Process for School Trips, Visits and Fixtures

Arrangements for first aid provision for school trips, visits and fixtures is the responsibility of the trip leader in conjunction with the school office.

- Once a risk assessment has been completed, this should highlight a pupil's specific medical need based on information held on Engage and pupils careplan if appropriate.
- Any specific medication which is held in school should be collected from the Appointed Person in the school office by the visit leader/PE teacher immediately prior to departure. This should be signed out and back in.
- There is specific medical paperwork completed by parents for any residential trips.

Recording an Incident

First aiders administering treatment to children, staff or visitors are required to complete the First Aid book (Copies are located in the P.E Office, Kitchen and School Office stating treatment given and the name of the person reporting the injury. In the EYFS and Infant department all minor injuries should be recorded in the 'Minor Incident' folders on display in the Nursery/Reception classroom.

Parents should be advised of all significant injuries at the end of the school day. All head bumps, no matter the severity, will be reported to parents via a letter or phone call.

More serious cases will require the school to make immediate contact with the child's parents (or staff members contact person.) If this or another emergency contact is unavailable then the school will act 'in loco parentis' and take appropriate action.

Near Misses will are also reported and reviewed to identify hazards and prevent future incidents.

Medication

Medicines with dosage instructions should be handed to the school office. A 'parental agreement for schools to administer medicine' form *must* be completed by the parent. Medicines will be stored in accordance with product instructions and in the original container in which they were dispensed. A fridge is available in the front kitchen to store medicines if refrigeration is necessary. Medicines will be administered in accordance with dosage instructions. Any administration of medicines will be recorded.

If a child refuses to take their medication, the school cannot use force. The parents should be informed so that alternative options can be considered. When no longer required, the prescription medication should be returned to the parent to arrange for safe disposal.

Medicines should not usually be administered unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist (and medicines and containing aspirin must have been prescribed by a doctor). Non-prescription medicines (For example Calpol, paracetamol and antihistamine) should only be administered with the prior written/verbal consent of a parent and this must be recorded.

Ongoing medical conditions (e.g., hay fever and other allergic reactions) are discussed with parents individually. As with any other medicines, those brought into school must be handed in to the School Office in their **original packaging** and a medical pro forma should be completed. All medicines must be appropriately named and expiry dates must be clearly marked.

If the administration of prescription medicines requires technical/medical knowledge individual training will be provided for staff from a qualified health professional. Training will be specific to the child or individual concerned.

For every administration of medicine, the following will be recorded:

- Child's name
- Medicine name
- Dose
- Date/time
- Administrator
- Witness if applicable
- Parent notification

Controlled Drugs

If pupils need controlled drugs to be administered during the school day, these needs will be supported by a Careplan. Drugs will be received by the First Aid Officer and locked securely in the Medicine Cabinet. Details records are kept, to include

- Child's name
- Medicine Name
- Quantity Received
- Dose Administered
- Date/Time
- Administrator
- Witness
- Quantity Remaining
- Records will be independently audited periodically by another member of staff

Epipen®

Epipen® may be required due to severe allergic reactions, Epipen® are stored in the School Office. Pupils who have been prescribed an Epipen® are encouraged to keep one Epipen® on their person (if appropriate) and one in the School Office, which is readily accessible and not locked away where rapid access may be delayed. Each is labelled and contains specific doses for each child. Lists of children who may require emergency treatments are displayed in the staffroom and all staff are updated on the medical status of all pupils at the start of each term and
as a result of any changes.

Each pupil will have a Careplan in the School Office.

There are a number of staff who have been trained to administer Epipen® (See full list at the start of this policy)

For emergency use the School does have a spare Adult and Child Epipen® which are readily available, kept in the school office.

Parents will be informed immediately and an ambulance will always be called following the administration of adrenaline

Asthma/Inhalers

1. Pupils with Asthma are encouraged to take a full part in all activities at school.
2. A record of all pupils with asthma will be maintained and available to all staff.
3. Inhaler: The children should have immediate access to their reliever inhaler at all times. Children should retain asthma inhalers on their person (from Year 5 onwards) or in the classroom where they are readily available for immediate use. Each pupil is encouraged to also have their own labelled inhaler in the first aid cabinet in the school office. All inhaler should be clearly named.
4. For emergency use the school does have spare reliever inhalers, these are kept in the School Office and all inhalers in the school office are checked every half term.

Procedures for children/staff/visitors that are ill or infectious

Basic good hygiene procedures should be followed by all staff, at all times. Disposable gloves should be worn when treatment involves blood all other body fluids. Dressings and contaminated equipment should be disposed of in an appropriate manner. There is a Clinical Waste bin located in the Boiler Room. All staff are encouraged to sanitise their hands regularly.

Any pupil who feels unwell between or during lessons should be sent by the class teacher to the office in the company of another pupil if necessary.
The accompanying pupil's role is that of informing the office staff and fetching personal possessions, etc. Office Staff will attend to make a first assessment of the situation. If it is determined that a child should be sent home, they will seek the confirmation of the Class Teacher before contacting the child's parents/contact persons.

A bed in the medical room is available for children, staff or visitors if their illness warrants it and in cases of infectious illnesses where isolation is required. The room also offers handwashing facilities. If a number of children present with the same symptoms and are in need of isolation, a larger room will be taken out of general use and designated a temporary medical area until the children can be collected by their parents.

The school follows current

- UK Health Security Agency (UKHSA) guidance regarding health protection in education and childcare settings.
- Public Health Advise
- Communicable disease exclusion periods

The school will act on any advice given by UKHSA, Public Health authorities and other relevant agencies including Ofsted (in the case of the EYFS) of any action taken.

Staff Taking Medication

Staff must seek medical advice if they are taking medication which may affect their ability to care for children, and any staff medication **must be** securely stored at all times.

Cleaning up of body fluids (vomit, diarrhoea, blood and urine)

All of the equipment required is stored in the First Aid Supply Cupboard in the Front Kitchen.

- Staff member to wear disposable gloves
- Absorbing dust to be used on fluid
- Sweep up and bag in plastic bin liner.
- Seal bags and dispose immediately via nearest exit in Clinical Waste bin. (Boiler Room)

Please refer to the Clean Up and Disinfecting Procedure which is attached to the First Aid Cupboard in the Front Kitchen.

Lone Working/Out of hours Working

Lone workers and out of hours workers must:

- Carry a mobile phone
- Be aware of emergency contact procedures
- Know how to access first aid equipment and assistance
- Report injuries immediately
- Ensure accidents and near misses are reported in accordance with school procedures

Monitoring

Accident trends will be reviewed termly by the Bursar to identify patterns and implement preventative measures.

Policy last reviewed: RJH: August 2026 (Next Review:) August 2027

In conjunction with:

- BHS First Aid Needs Assessment – This is undertaken annually and whenever operational changes occur.
- Allergy Policy
- Health & Safety Policy.
- Educational School Visits Policy
- Data Protection and Records Retention Policy
- Lone Working Policy