



PRINCE'S MEAD

FIRST AID AND MEDICINES POLICY

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CONTENTS

Introduction to First Aid Policy

Medical Records

Accident Reporting

Reporting of Injuries, Diseases and Dangerous Occurrences (RIDDOR)

Accident and Near Miss form

First Aid Boxes

Automatic External Defibrillator (AED)

Allergies

Communication

Body fluids and waste disposal

Transfer to hospital

Home Sports Fixtures

Away Sports Fixtures and other off-site activities

Administering of Medicines

Additional information and advice for staff

Annexes: Managing other medical conditions

[Head Injury Protocol.docx](#)

[Additional information and Advice for Staff in Matron's absence.docx](#)

[Supporting Pupils at School with Medical Conditions Policy 2024-2025.docx](#)

Prince's Mead First Aid Policy

This policy has been produced following the DfE (Department for Education) guidance on First Aid. It applies to all children at the school, including those in the Early Years Foundation Stage (EYFS).

First Aid at Prince's Mead is under the control of a full-time School Matron. In Matron's absence an appropriately trained person can administer First Aid if necessary. In addition to Matron, other full-time members of staff have completed a 3-day First Aid at Work (FAW) course or the EFAW (Emergency First Aid at Work) course. All school staff have annual update training. The bus drivers and catering staff have all also received anaphylaxis training including training in the use of EpiPens, Jext and Emerade pens. A First Aid trained member of staff will be present at all on and off-site activities where children are present.

All EYFS staff and bus drivers have also completed a twelve hour Paediatric First Aid training course. A Paediatric First Aid (PFAW) trained member of staff will be present at all times, on and off-site, when children in the EYFS are present. Other members of staff throughout the Prep School are also PFAW trained.

All First Aid training including Paediatric First Aid training is updated every 3 years. Matron maintains the list of FA trained staff. It is stuck on Matron's door and is stored electronically in Matron Medical/Sharepoint/[First Aid in School and Epipen training 2024 2025.docx](#)

All staff including those within the Early Years Foundation Stage, 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 in Matron's room at all times. Please see 13b EYFS policy for specific details.

In addition, no member of staff must be under the influence of alcohol whilst carrying out their duties at school. If this is found to be the case, they will be required to leave the premises.

Medical Records

Parents are required to fill out a Medical Questionnaire when a pupil joins the school, detailing any medical conditions that the child has suffered from or any on-going conditions that need further treatment, as well as normal childhood diseases and immunisations. Matron is responsible for alerting all members of staff to any relevant medical details of pupils in their care. Matron sends a list at the beginning of each academic year to all staff about all pupils with medical, dietary or emotional requirements. Updates are sent throughout the year. A laminated list is also given to each bus driver, each class teacher, the catering team, front reception and sports department.

Accident Reporting

The Day Book, and the School's Isams system are used for confidential recording of:

- Accidents or incidents that have occurred during the school day, giving full details and treatment
- In the case of pupils in EYFS the school will inform parents of any accident or injury sustained by the child and any First Aid treatment given on the same day.
- The Responsible Adult/Carer collecting will be informed of any incident and it will also be written in the child's diary.
- Unwell pupils and treatment given
- Authorised and unauthorised absences
- Medication required with parental consent
- Medication given and by whom
- Messages from parents and changes to collection

Reporting of Injuries, Diseases and Dangerous Occurrences (RIDDOR)

Some injuries or incidents that occur in schools or during educational activities outside school must be reported to the Health and Safety Executive (HSE), under RIDDOR.

It is the responsibility of the Head with the assistance of Matron and the School's Health and Safety Consultant for ensuring that the HSE are informed in accordance with RIDDOR requirements, last updated in October 2013

Reports can be made by telephone (0845 300 9923), or online via the website <http://www.riddor.gov.uk/reportanincident.html>

Accident and Near Miss Form

All accidents, incidents and near miss events that occur around the school site are logged on the Accident and Near Miss form 2022. This does not include any child that is unwell. These forms are easily accessed in the Staff SharePoint folder. The forms are sent directly to the Bursar so that incidents can be tracked as required.

First Aid Boxes

An extensive range of first aid equipment is located in Matron's Room. Playground duty staff also carry a small supply of first aid equipment in addition to a walkie talkie for communication of any illness/injury to Matron. Other First Aid boxes and cabinets are in the sports hall at the entrance to the gym, tennis pavilion, main school reception, staff room, caretaker's office, dining room, Coach House, and DT department. The catering team have a specific HSE regulated first aid kit. All classrooms carry a small supply of dressings. Sports staff also carry first aid bags for sports activities on and off site. The first aid boxes and cabinets can be recognised by a white cross on a green background. A separate first aid kit is in the forest shed for use during Forest School. All staff are made aware of the location of

these boxes and cabinets. All Prince's Mead minibuses are equipped with first aid boxes. First aid equipment is taken on all off-site activities.

The First Aid boxes are always kept stocked up and are checked termly and logged on each box by Matron.

AED (Automated External Defibrillator)

A Phillips Heart Start AED is in Matron's Room and a second Lifepak defibrillator is located within a secured box outside the sports Hall. The box is locked to maintain efficacy of the defibrillator, but the code is on the outside for ease of access. The school has an AED Policy Co-ordinated by Matron, this can be found in the Risk assessment folder on SharePoint.

Allergies

Matron will ensure that all members of staff including the catering team and transport staff are aware of pupils who have allergies, including severe nut, raw egg allergies, and the allergens to be avoided. Matron will also ensure that the procedure to be adopted in the event of anaphylactic shock, where a pupil is susceptible, is clearly understood and that the location and operation of EpiPens/Jext pens is known and understood by the School Staff.

An individual EpiPen/Jext pen Administration Health Care Plan, with photograph, is created for each child suffering from a possible anaphylactic reaction to an allergen. A separate EpiPen/Jext pen Administration Policy can be located on each bus. This is called "Management of EpiPens and Jext Pens on Buses".

Matron will ensure that all School staff regularly update their training in the recognition of anaphylactic shock and the administration of EpiPens/Jext pens. All new staff are trained by Matron.

Managing other medical conditions

Asthma – The following asthma protocol is in place: -

[Emergency Asthma Protocol 2024-2025.docx](#)

The school has a separate Medical Conditions Policy containing information specifically regarding asthma, anaphylaxis, epilepsy, and diabetes this is co-ordinated by Matron.

Communication

Parents are informed of the procedure and action to be taken should a child sustain an injury or fall ill while at school. This is communicated via a letter from Matron at the start of the new academic year.

In the event of a significant injury or incident at break time or during a sports activity, Matron can be contacted via radio. In Matron's absence another appropriately trained person will control radio communication.

Parents are contacted, where relevant, if their child has been involved in an accident. In the event of a child needing non-urgent hospital treatment the parent will be contacted to accompany the child to hospital. If an urgent visit is required to hospital, or where it has not been possible to contact the parent, Matron or an appropriately trained person will accompany the child along with a second adult for medical emergencies, safety and safeguarding purposes. See Transfer to Hospital below.

Ideally if a child is unwell, the parents are contacted, and the child will go home until they are well again. If this course of action is not possible the child will stay in Matron's Room until the end of day.

Body Fluids and Waste Disposal

School staff are made aware of the potential hazards when dealing with body fluids and clinical waste. To minimise the risk to themselves and others, staff dealing with injuries and sick children have access to protective equipment. Clinical waste is disposed of via a specific yellow container in Matron's room and removed from the school fortnightly.

Transfer to Hospital

In cases requiring transport to hospital, where there is any doubt concerning the condition of the child/adult, an ambulance should be called (Dial 999 or 112).

Definite reasons for the use of an ambulance

- When a person is unconscious
- During an asthma attack when first aid measures are not controlling the episode.
- Severe head injury with a loss of consciousness, the person has persistent vomiting or is not behaving normally.
- Any fracture, or suspected fracture, which cannot be fully immobilised
- If there is any chance of neck or spinal injury
- Any injury to the eye, where the jolting of a car could bring on haemorrhage, i.e., object piercing the eyeball
- There is a possibility of poisoning, and the person is not responding normally or has any difficulty in breathing
- The person is having a seizure that lasts more than 5 minutes especially if the person has never had a seizure or is turning blue or having any difficulty breathing
- There is persistent, uncontrolled bleeding
- The person has chest pain, and a cardiac condition is suspected
- If there is any possibility that the person's condition could deteriorate

Home Sports Fixtures

If an ambulance is needed for a child visiting the school for a match and the guest teacher supervising the child is unable to accompany her/him to hospital, then Matron, in the parents' absence, or another member of the Prince's Mead staff will accompany the child to hospital along with a second adult if not in an ambulance taking any relevant medical and personal details.

If it is decided by Matron and the supervising games staff that the condition of the child or staff member, or any visitor to the school, is not serious enough to call an ambulance, but that a visit to hospital is necessary then a private car may be used. For safeguarding and safety reasons, two members of staff, one with appropriate first aid training, or one appropriately trained member of staff and a relative of the person concerned must travel to the hospital together.

Away Sports Fixtures and Other Off-Site Activities

Where a pupil is injured or taken seriously ill while on an off-site activity or away sports fixtures and the accompanying member of staff or the parent is unable to travel by ambulance with the child to hospital, another adult present or, if at an away sports fixture, a member of staff from the host school, would ideally accompany the child, taking any relevant medical and personal details relating to that child. A full list of all emergency contacts and medical information relating to the pupils will be taken to each match as well as first aid equipment (this can be accessed via the sports staff member's iPad).

If an appropriately trained person decides that hospital treatment is needed but the child is safe to travel in a private car then every effort must be made to arrange for the parent or a named relative or friend to accompany the child to hospital. If this is not possible then 2 adults, one ideally with first aid training, should accompany the child. Every effort should be made to contact the parent to obtain verbal permission for this prior to transfer.

Once in hospital, the person or driver accompanying the child, should remain until the parent/guardian has arrived or until completion of treatment.

Administering Medicines

Matron or an appropriately trained member of staff with an online course in 'Administration of Medication' in Matron's absence can administer prescribed medication if needed during school hours. Written consent from parents will be necessary and must include clear guidance on its usage. On occasions it may be necessary for Matron to administer infant or junior analgesia to a pupil. Verbal consent from the parents/guardians will be sought immediately prior to administration.

Children are not permitted to bring any medication into school themselves. Parents are directly responsible for delivering any medication to Matron and collecting it at the end of the school day.

If travelling on the school bus any necessary medication required by a pupil during the school day may be handed to the bus driver and stored safely before being handed to Matron. The only exceptions to this rule are:

- Pupils who are asthma sufferers with prescribed inhalers
- Children with a severe nut or other allergy who carry EpiPens/Jext in their bags – these children have a luminous “glow in the dark” tag on their bags to make finding the bag easy in an emergency situation.
- Other specified emergency medication

All prescribed and OTC (over the counter) medication will be stored in a locked cupboard or locked fridge in Matron’s room. Key staff will be made aware of the location of the keys.

- Individually named spare asthma inhalers for emergency use will be stored in a clearly marked unlocked cupboard in Matron’s room. Self-administration of inhalers is permitted once the child is deemed competent and their technique checked by Matron.
- A small supply of analgesia is kept in a locked cupboard in Matron’s Room for staff use only. A written record is kept of any analgesic medication taken and by whom.
- Parents will be asked to sign ‘Medication Consent Form’ detailing child’s name, medication to be given, dose and time to be given.
- All OTC and prescribed medicine must remain in the original container, preferably childproof and the original dispensing label unaltered.
- General stocks of prescription medicines are not held.
- Parents to be contacted if unexpected analgesia is needed during the day. Ascertain from parents when the last dose was given and whether the child has previously had an allergic reaction.
- Medication must only be issued to the pupil for whom it has been prescribed. Staff with the Administration of Medication course are permitted to issue medication in Matron’s absence.
- Any medication given must be recorded in the Daybook in Matron’s room with date, time, dose given and signature of person administering. A record must also be made of the medication batch number and the expiry date before administration.
- Parents must be informed via the diary of medication given, time and dose. Parents of children in EYFS will be informed by email of any medicines administered in line with the parent’s instructions.
- Parents must be immediately informed of any adverse reactions.

- In the case of drug errors, medical advice must be sought and acted upon immediately and the parents contacted. An incident report must be completed, and action taken to prevent a recurrence.

Administration of Medicines to Save a Life

In extreme emergencies e.g., an anaphylactic reaction, certain medicines can be given or supplied without the direction of a medical practitioner. For example, the administration of adrenaline by auto-injection (EpiPen, Jext or Emerade Pen) and Chlorphenamine are among those drugs listed under Article 7 of the Prescription Only Medicines Order 1997, for the administration by anyone in an emergency, for the purpose of saving life. Staff at Prince's Mead School are trained to administer this medication.

Administration of Medicines on School Trips

Sometimes it is necessary for staff other than Matron to administer medicines on residential or overseas trips. A consent form is completed by the parents a few weeks prior to departure. A table summary is compiled by Matron before the trip listing name of pupil, medication to be given, method of administration, dates, times, and doses. Once given the member of staff responsible for medicine administration must sign that this has been done. Staff in charge of administering medication on trips in the absence of Matron must be first aid trained and have an Administration of Medication Educare course.

Parents must be informed of any adverse reactions.

ADDITIONAL INFORMATION AND ADVICE FOR STAFF

Accident Reporting and Medicine Administration in Matron's Absence

In Matron's absence, any of the first aid trained members of staff listed on Matron's door can treat a child who is injured. Very minor injuries can be treated by any member of staff. More serious injuries must be referred to Mrs Edmunds, Mrs. Kay or any of the other FAW trained staff who have completed the '3 Day First Aid at Work' or '2 day Paediatric First Aid at Work' training.

All accidents, unless very minor, must be recorded in the accident (daybook) on Matron's desk. Please record all details of the accident/incident e.g. time, who was involved, mechanism of injury and treatment or advice given. The member of staff treating must then sign their name beside the report.

Parents are informed of any accident or incident via a telephone call or email from Matron.

In Matron's absence, any available FAW trained member of staff or the sports staff should deal with all head injuries unless very minor bumps. The head injury should be recorded in the daybook, on a head injury form and a phone call made to parents. This alerts the parents to potential problems that might occur later in the evening. With more significant bumps, a head injury traffic light form is sent home to parents with the child. The child must also be given a 'I bumped my head today' wristband to alert other members of staff and the

parents to the fact that the child has had a head injury. If the injury is more serious a 'Head Injury Checklist' must be completed every 5-10 minutes to assess the child for a possible decline in consciousness. The Head Injury Checklists and wristbands can be found in Matron's room (first drawer on right as you enter the office). There are also some head injury forms in the main Reception. Parents must be alerted straight away.

Only Sarah Edmunds and Pippa Kay are permitted to administer medicines in school in Matron's absence unless prior training is given (residential trips). Written permission must be sought from the parent before any prescribed or non-prescribed medication can be given. Occasionally a child needs analgesia while in school and although parents have signed a generic consent when they start at Prince's Mead, verbal permission must always be sought on the day. Printed 'Consent for Medication' forms are also kept in the second drawer on the right as you enter Matron's office and on the school website. Lifesaving medication can be given by anyone with the appropriate training.

The medicine cupboard and fridge must be kept locked when Matron is absent. The keys are kept in Matron's desk drawer. The inhaler cupboard is always unlocked and EpiPens always pinned to the wall above Matron's desk.

Any member of staff in charge of an off-site activity must remember to collect inhalers, EpiPens and a first aid kit from Matron's room. Each staff member is given a new medical list for their class at the beginning of the new academic year and new lists are available from Matron if required. All children in Year 3 and above should carry their own inhalers in their school bags. Those with EpiPens and insulin have been advised to carry these on their person. These children are permitted to have a crossbody bag or bumbag for this purpose. A mobile phone must accompany member of staff off-site.

Use of Auto-injector adrenaline

Schools may administer their "spare" adrenaline auto-injector (AAI) obtained without prescription for use in emergencies, if available, but only to a pupil at risk of anaphylaxis, where both medical authorisation and written parental consent for use of the spare AAI has been provided.

The school's spare AAI can be administered to a pupil whose own prescribed AAI cannot be administered correctly without delay.

There is a pair of generic spare EpiPens located in the main kitchen.

AAIs (Adrenaline Auto Injector) can be used through clothes and should be injected into the upper outer thigh in line with the instructions provided by the manufacturer.

If someone appears to be having a severe allergic reaction (anaphylaxis), you **MUST** call 999 without delay, even if they have already used their own AAI device, or a spare AAI.

In the event of a possible severe allergic reaction in a pupil who does not meet these criteria, emergency services (999) should be contacted, and advice sought from them as to whether administration of the spare emergency AAI is appropriate.

Practical points:

When dialling 999, give clear and precise directions to the emergency operator, including the postcode of your location and say “Anaphylaxis” - this is considered one of the most serious medical emergencies.

If the pupil’s condition deteriorates and a second dose of adrenaline is administered after making the initial 999 call, make a second call to the emergency services to confirm that an ambulance has been dispatched.

Send someone outside to direct the ambulance paramedics when they arrive.

Tell the paramedics:

- If the child is known to have an allergy;
- What might have caused this reaction e.g., recent food;
- The time the AAI was given.

The guidance in this document has been developed in conjunction with representatives of the following organisations:

British Society for Allergy & Clinical Immunology (Paediatric Allergy Group)

British Paediatric Allergy, Immunity, and Infection Group

Royal College of Paediatrics and Child Health

Allergy UK

Anaphylaxis Campaign

Guidance on the Use of Adrenaline Auto-Injectors in Schools

Executive Summary

From 1 October 2017 the Human Medicines (Amendment) Regulations 2017 will allow all schools to buy adrenaline auto-injector (AAI) devices without a prescription, for emergency use in children who are at risk of anaphylaxis, but their own device is not available or not working (e.g., because it is broken, or out-of-date).

The school’s spare AAI should only be used on pupils known to be at risk of anaphylaxis, for whom both medical authorisation and written parental consent for use of the spare AAI has been provided.

The school's spare AAI can be administered to a pupil whose own prescribed AAI cannot be administered correctly without delay.

An anaphylactic reaction always requires an emergency response

Any AAI(s) held by a school should be considered a spare / back-up device and not a replacement for a pupil's own AAI(s). Current guidance from the Medicines and Healthcare Products Regulatory Agency (MHRA) is that anyone prescribed an AAI should always carry two of the devices. This guidance does not supersede this advice from the MHRA,¹ and any spare AAI(s) held by a school should be in addition to those already prescribed to a pupil.

This change applies to all primary and secondary schools (including independent schools) in the UK. Schools are not required to hold AAI(s) – this is a discretionary change enabling schools to do this if they wish. Those facilities choosing to hold a spare AAI(s) should establish a policy or protocol for their use in line with “Supporting pupils at school with medical conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England”² (Supporting Pupils), and with reference to the guidance in this document.

Prince's Mead School has the following measures in place:

- An individual care plan set out for each child with anaphylaxis, signed by their parent - one in Matron's office, others in strategic places around the school.
- In addition to the children's own EpiPens, two spares are kept in a secure box within the Dining Hall kitchen.
- An NHS care plan signed by the medical consultant – kept in Matron's office.
- An allergy alert photo of each child along with their allergen and class name that is placed strategically around the school and in each bus, so all staff are aware who the anaphylactic children are.
- Every bus carries pictures of all anaphylactic pupils, and each driver holds a paediatric first aid certificate and has twice annual training on how to deal with an anaphylactic emergency including the administration of EpiPens/Jext/ Emerade.