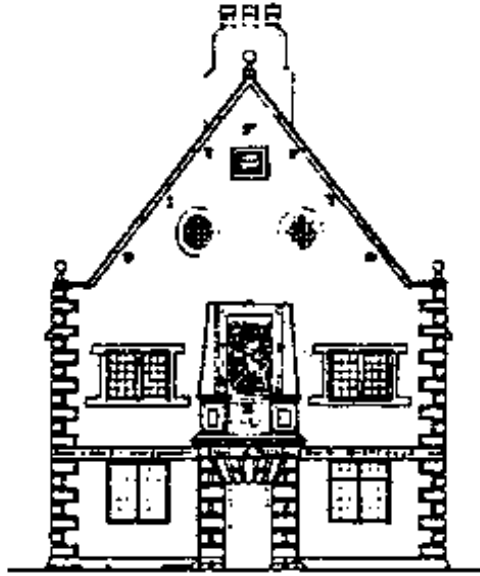




Bunny C of E Primary

First Aid and Medicines Policy

Summer 2026

Submitted for approval: January 2023

Reviewed: Spring 2023, Spring 2024, Spring 2025, Updated Summer 2025, Summer 2026

Next review: Summer 2026, Summer 2027

First Aid and Medicines Policy

The First Aid Team

The first aiders in school are:

All class teachers / Support Staff / Headteacher –

- Combination of Emergency First Aid in the workplace / Paediatric First Aid / Emergency First Aid

Mid-day Supervisors –

- Emergency First Aid

Paediatric first aiders are: V.White, J.Shelton, S.Hughes and E.Barrowcliffe.

Paediatric first aiders in EYFS are: S.Hughes and E.Barrowcliffe.

First Aid Stations

The first aid stations are located:

- In each classroom
- Staffroom
- Ice packs are located in the first aid fridge in the school office
- A playground first aid bag when children are outside.
- Refer to individual care plans for children with significant illness / allergy and the storage / location of their medication.

Accident Reports

In the case of a pupil accident that requires first aid treatment, the procedures are as follows:

The member of staff on duty ensures a qualified first aider treats the child; or if the person can walk, takes him/her to a first aid station and calls for a first aider.

The first aider administers first aid and the details are recorded in our First Aid Recording Books (one in each classroom, one in Burrows and one in the green first aid bag kept in the staff room).

Staff should complete the log book in the accident recording book (green bag for playtime and lunchtime, class log books in teaching sessions) and complete an injury note / head bump note. The injury note / head bump note is sent home with the child for the parents to see. The log book is kept in school for the purpose of retaining an accurate record of the accident.

If the child has had a bump on the head, they must also be given a 'bumped head' sticker as a visual reminder for staff that the child needs regular monitoring. In the case of a bumped head, staff should always verbally communicate to parents / carers at the

point of transition so that parents can continue to monitor the injury.

If the injury is an injury such as:

- fracture (finger, thumbs, toes)
- bruising
- strain/sprain
- minor burn/scald
- foreign body in eye
- assault
- minor electric shock/burn

or a major injury such as:

- fracture
- amputation
- dislocation
- loss of sight
- eye injury
- electric shock/burn
- hypothermia
- needing resuscitation
- loss of consciousness
- harmful substance
- acute illness

then the incident will be recorded in the accident book, then reported to the Headteacher who will complete a referral form for the Health and safety executive via RIDDOR within 10 days. Please consult with the Office Manager / Head Teacher to complete this process.

Staff must consider each case on an individual basis and decide if parents need to be contacted at home about the accident. If the child has a serious injury or visible, significant mark that would concern a parent, contact must be made via the telephone to inform the parent.

School Visits

In the case of a **residential visit**, the residential first aider will administer First Aid. Reports will be completed in accordance with procedures at the Residential Centre and be passed to parents upon return.

In the case of **day visits**, we will seek permission from the pupils' parent/guardian to administer first-aid wherever necessary and inform parents upon return to school.

Administering Medicines in School

Non-Prescribed Medicines

Under the new '*Medicines for Self Care – Guidance for Prescribers*' the NHS Clinical Commissioning Groups and local GPs (2018) seek to support and encourage people to buy medicines / products and access advice from local pharmacies for the treatment of

minor illnesses and ailments. This also applies to parents buying medicines for their children, including medicines which may need to be taken whilst their child is at school. Once medication is bought there will be no requirements for GPs to provide an authorisation letter.

Parents should label the medication with the child's name and staff at Bunny Primary can then follow the age-related instructions when administering to the child. Medicines to be given during the school day must be in their original container. Bunny Primary School keep a clear record of all medications that are administered, in particular the time and dose administered to ensure that the recommended daily dose is not exceeded.

The school must receive a written permission slip from parents before any medicine is administered. The Head Teacher holds an 'emergency' bottle of paracetamol for children who may fall ill during the day. The school office will always get verbal consent over the phone from the child's parent before administering the medicine. Two members of staff will then sign the medicine log book to record that verbal consent has been agreed. Parents are then notified of the dosage and time given.

Children under the age of 16 should never be given medicine containing aspirin unless prescribed by a doctor.

Prescribed Medicines

Prescribed medicines may be administered in school by a member of the Office or Head Teacher where it is deemed essential. Most prescribed medicines can be taken outside of normal school hours. Wherever possible, the pupil will administer their own medicine, under the supervision of a member of staff. In cases where this is not possible, the staff member will administer the medicine. All prescribed medicines given by staff will be logged in the medicines log in the staffroom.

If a child refuses to take their medication, staff will accept their decision and inform the parents accordingly.

In all cases, we must have written parental permission outlining the type of medicine, dosage and the time the medicine needs to be given. These forms are available in the School Office. Staff will ensure that records must be kept, detailing the background of any medicine, which has been given.

All inhalers held in school must be of the blue type. Children self-administering asthma inhalers do not need to be recorded.

Storage/Disposal of Medicines

Medicines must be stored in the medical fridge in the school office, depending on the storage instructions. The exception to this rule is inhalers and epipens (see separate section) which must be clearly labelled with their name and kept in the child's classroom; where they can be easily reached where necessary. It is the responsibility of the parents to collect unused medicines from the school and dispose of them accordingly.

Storage/Disposal of Epipens

Epipens will be stored in the child's classroom to ensure that immediate action can be taken if necessary if a child suffers from anaphylaxis following exposure to an allergen. Where a second set of epipens is provided for a child, these will be stored in the outside

playground bag to ensure that immediate action can be taken if necessary when the child is outdoors. A spare set of epipens will be stored in the staffroom medicine cabinet.

All staff will be trained to use the epipens in the case of emergencies through their first aid at work and paediatric first aid training. A list of trained staff is available in the school office and in the staffroom.

It is the responsibility of the parents to collect unused epipens from the school and dispose of them accordingly.

Accidents/Illnesses requiring Hospital Treatment

If a child has an incident, which requires urgent hospital treatment, the school will be responsible for calling an ambulance in order for the child to receive urgent medical treatment. When an ambulance has been arranged, parents will then be informed and arrangements can be made where they should meet their child. In the case of non-urgent hospital treatment, parents will be informed immediately and arrangements made for the parents to collect their child.

It is vital therefore, that parents provide the school with up-to-date contact names and telephone numbers.

The school has a school mobile phone that can be used on school trips or residential in the case of emergency.

Pupils with Special Medical Needs – Individual Healthcare Plans

Some pupils have medical conditions that, if not properly managed, could limit their access to education.

These children may be:

Epileptic

Asthmatic

Severely allergic, which may result in anaphylactic shock

Diabetic

Such pupils are regarded as having medical needs. Most children with medical needs are able to attend school regularly and, with support from the school, can take part in most school activities. However, school staff may need to take extra care in supervising some activities to make sure that these pupils, and others, are not put at risk.

An individual health care plan (written by the school and parents) can help schools to identify the necessary safety measures to support pupils with medical needs and ensure that they are not put at risk. Parents/guardians have prime responsibility for their child's health and should provide schools with information about their child's medical condition. Parents should give details in conjunction with their child's GP and Paediatrician. A school nurse may also provide additional background information and practical training for school staff.

For specific children with medical care plans, these plans will be taken with the lead member of staff on any out of school trips. These plans will be shared with all staff so everyone is aware of the content and actions required. All external providers will be

made aware of any children with medical care plans and/or severe allergies.

Asthma

The school recognises that asthma now affects many children. The school has clear policy guidelines for all staff to follow in a separate Asthma policy.

Staff Medicines

All staff medicines must be kept out of the reach of children and stored in the medical fridge in the school office, dependent upon storage instructions.