



St Michael's
C.E. Primary School

First Aid and Medicines in School Policy

Last reviewed: September 2026
Next review due: September 2027



"Courage to Flourish in the Love of God"

Our Theologically Rooted Christian Vision



Courage to Flourish in the Love of God

"I have come that [you] may have life, and have it to the full" (John 10:10)



*"Be strong and courageous... the Lord your God will be with you
wherever you go." (Joshua 1:9)*

These biblical texts underpin our vision summary, 'Courage to Flourish in the Love of God'. Jesus' words from the New Testament describe his desire for everyone to be a full and flourishing version of their created selves, experiencing life in all its vibrant fullness, individually and in community. Our ambition is for everyone to encounter this fullness through the life and work of the school, whatever their background, beliefs or circumstances. God's words to Joshua from the Old Testament illustrate how life, and learning, can be challenging, bringing setbacks and discouragement. These words inspire us to keep on going in those circumstances, confident that God watches over us and walks beside us.

The joining of these biblical texts is meaningful for the particular circumstances of our school community. It gives coherence to our aspirational vision that will grow courage and resilience as enablers of 'life in all its fullness' for everyone. To support our vision, we have seven overarching Christian values:

COURAGE



Phillippians 4:13

"I can do all things through him who strengthens me."

HOPE



John 1:5

"The light shines in the darkness, and the darkness has not overcome it."

LOVE



1 Corinthians 13:4-8

"Love is patient and kind... it does not rejoice at wrongdoing but rejoices with the truth."

FORGIVENESS



1 John 1:9

"If we confess our sins, he is faithful and just and will forgive us"

TRUST



Proverbs 3:5-6

"Trust in the Lord with all your heart and lean not on your own understanding; in all your ways submit to him, and he will make your paths straight."

COMMUNITY



Hebrews 10:24

"Let us be concerned for one another, to help one another to show love and to do good."

THANKFULNESS



1 Thessalonians 5:18

"Be thankful in all circumstances, for this is God's will for you"

First Aid Information

The school is committed to providing appropriate first aid provision to deal with injuries that arise at work or because of school activities.

The school will complete and review a first aid needs assessment at least annually, or sooner where there are significant changes to staffing, pupil numbers, site arrangements, pupil medical needs or school activities. This assessment will inform the number of trained first aiders required, the location and contents of first aid kits, and any additional training or equipment needed to keep pupils, staff and visitors safe.

To achieve this objective the school will:

- Appoint and train a suitable number of first aid personnel.
- Display first aid notices with details of first aid provision.
- Provide and maintain suitable and sufficient first aid facilities including first aid boxes.
- Provide any additional first aid training that may be required to deal with specific first aid hazards

First Aiders

A First Aider is a person who has a valid certificate in paediatric first aid, first aid at work or emergency first aid at work training.

The First Aiders are: (Paediatric)	Melissa Davies Wendy Steele Patricia Walsh Wendy Burke Tina Wiggin Lorna Chatfield Stephanie Kemp Lynda Titley Rebecca Evans Kelly Thompson Rajan Bhatti Sally-Ann Roberts Katie Humphries Amy Sturdy Tia Hayden Scarlett Slattery
First Aid at Work	Sarah Hook Graham Jones
First Aid Boxes can be found at:	• Both halls • Classrooms

	• Outside main office • The Hub • Site Manager's Office • Kitchen • Spare Epi-pens and inhalers – in main first aid cupboard. • Antihistamines – in main first aid cupboard.
Allergy Response Kit:	Kept with the child or in the agreed accessible location identified in the pupil's allergy care plan. Emergency medication must be accessible at all times.
Defibrillator:	Main office – It will be checked regularly to ensure it is accessible, operational and that pads/batteries are in date. Checks will be recorded by the designated member of staff.
The Accident Book is located:	Electronic – recorded on Evolve
The person responsible for RIDDOR notifications is:	Sally-Ann Roberts

First aid provision will always be available whilst people are present on school premises, including out of hours' activities.

First Aid Kits and Boxes

- All inhalers will be stored in the class first aid box in a wallet with the original medicine form and a log form to show when the child is given the inhaler. All inhalers must have a prescription label visible. If it does not, the parent should be asked to get one as soon as possible and a label with the child's name should be put on to the inhaler.
- The class first aid box should be taken out onto the playground at playtime and lunchtime as well as after school activities and PE
- Epi-pens are stored in the bum bags and kept on the first aid hook in each classroom and these need to go out at break/lunchtimes too or if the class is working elsewhere within the school.
- First aid kits, clearly marked, will be provided in readily accessible locations, and be made known to all staff and pupils.
- First aid kits will contain enough suitable first aid materials and nothing else.
- First aid does not include the administration of medicines and thus first aid boxes should NOT contain drugs of any kind including aspirin, paracetamol, antiseptic creams etc.

- All first aid kits will be checked regularly and maintained by the teaching assistants; items should not be used after expiry date shown on packaging. Extra stock will be kept in the school (classroom first aid boxes by TA in the classroom and other boxes by VC).
- Suitable protective clothing and equipment such as disposable gloves (e.g. vinyl or powder free, low protein latex CE marked) will be kept in the first aid box and aprons will be available from the main first aid cupboard.
- Additional travel first aid kits will be provided for offsite visits.
- During all off-site visits, it is the responsibility of the person in charge of the visit to ensure that first aid equipment is taken.
- Pupils who are able to manage their own asthma medication may carry their inhaler where this has been agreed with parents/carers and school staff. For pupils who require adult support, inhalers will be stored safely but remain readily accessible. Inhalers must never be locked away or inaccessible during the school day, PE, playtimes, lunchtime, educational visits or after-school activities.
- When children are younger, this is the responsibility of their group leader.
- If a child requires emergency medication (e.g. epi-pens/antihistamines) these must also be taken with the class when they leave site.
- Blunt-ended stainless-steel scissors (minimum length 12.7 cm) will be kept where there is a possibility that clothing might have to be cut away. These should be kept along with items of protective clothing and equipment. These will be in the main first aid cupboard.
- Small quantities of contaminated waste (soiled or used first aid dressings) can be safely disposed of in the bio hazard sick bags. Waste to be double bagged in plastic and sealed by knotting.

Allergy and Anaphylaxis Arrangements

- The school maintains clear procedures for supporting pupils with allergies and those at risk of anaphylaxis. Pupils with known allergies will have an individual healthcare plan or allergy care plan, which is shared with relevant staff. Emergency medication, including prescribed adrenaline auto-injectors, must be accessible at all times, including during lunchtime, playtimes, PE, educational visits and after-school activities.
- The school will ensure that relevant staff receive appropriate allergy awareness training, including recognising the symptoms of an allergic reaction, responding to anaphylaxis and using adrenaline auto-injectors. Spare adrenaline auto-injectors held by school will be stored securely but accessibly, checked regularly for expiry dates, and used in line with current guidance.
- Where a pupil has been prescribed adrenaline auto-injectors, parents/carers are responsible for ensuring that the school has in-date medication and that the pupil's allergy care plan is kept up to date. Emergency medication must be taken whenever the pupil leaves the classroom or school site, including for playtimes, lunchtimes, PE, clubs and educational visits.

First Aid Records -

The school ensures that the following records are available:

- Certification of training for all first aiders and refresher periods.
- Any specialised instruction received by first-aiders or staff (e.g., Epi-pens);
- First aid cases treated (see accident / incident reporting).
- For more serious injuries, or if an ambulance has to be called, information is recorded on Evolve and reported to RIDDOR.
- This is a legal document and needs to be kept until the child entered reaches the age of 25 years old.
- Every entry needs to be accurate, e.g., the spelling of child's name, class, name of person who has administered First aid.
- Accidents involving staff should be recorded on Evolve.
- Details of injury should be recorded as accurately as possible, e.g. details of what finger cut, grazed, bruised etc.
- Any medical intervention must be recorded accurately.

*As stated in the BDMAT Health and Safety Policy, Evolve Accident book will be used to log all incidents that require first aid to be administered. A notification will then be sent home to the parent/guardian.

Minor Injuries

The following injuries are considered minor and capable of being dealt with by a first aider in school: grazes, small scratches, bumps, minor bruising, minor scalding, or burns resulting in slight redness to the skin.

Injuries requiring medical attention:

- deep cut
- long cuts. Long cuts are approximately 1 inch when on the hand or foot and 2 inches when elsewhere on the body
- the cut is jagged
- the injury involved a pet, especially a cat
- the injury involved a wild animal
- the injury is due to a bite, either human or animal
- the wound has debris stuck in it after cleansing
- the wound is bleeding heavily
- the wound will not stop bleeding after applying direct pressure for 10 minutes
- the injury is a puncture wound

Head Injuries

Injuries to the head need to be treated with particular care. Any evidence of following symptoms may indicate serious injury and an ambulance must be called.

- unconsciousness, or lack of full consciousness (i.e., difficulty keeping eyes open);
- confusion

- strange or unusual behaviour – such as sudden aggression
- any problems with memory.
- persistent headache.
- disorientation, double vision, slurred speech, or another malfunction of the senses.
- nausea and vomiting.
- unequal pupil size.
- pale yellow fluid or watery blood coming from ears or nose.
- bleeding from scalp that cannot quickly be stopped.
- loss of balance.
- loss of feeling in any part of body.
- general weakness.
- seizure or fit

Hospital Admission

- Where a pupil is required to attend hospital using an ambulance it is not necessary to accompany a pupil to hospital. If parents are unable to attend hospital promptly, a member of staff should go to the hospital. In the exceptional circumstance of parental permission being required, the Head Teacher can act in loco parentis.
- If a child is taken directly to hospital, they will be accompanied by a member of staff who will stay with the pupil until discharged or until a handover can be made to a parent or guardian.
- The member of staff at the hospital must update the Head teacher on the condition of the injured pupil as and when information is made available
- The parent/guardian of a pupil attending hospital must be advised at the earliest opportunity.
- Support for the injured pupil and their parents will be provided as determined by the individual circumstances of the incident.

Blood and Body Fluid Spillages

Staff will follow school infection prevention and control procedures when responding to blood, vomit, faeces or other bodily fluids. Where there are concerns about infectious illness, the school will follow current UKHSA health protection guidance and seek advice where necessary. It is important that spillages of blood, faeces, vomit or other body fluids are dealt with immediately as they pose a risk of transmission of infection and disease, e.g. Blood borne viruses and diarrhoeal and vomiting illnesses, such as norovirus.

- A spillage kit is available in school to deal with blood and body fluid spillages.
- The kit is located in the Dining Hall.
- The person responsible for checking and replenishing the kit regularly is the First Aid Co-ordinator (VC).
- Body fluid spillages should be dealt with as soon as possible with ventilation of the area. Anyone not involved with the cleaning of the spillage should be kept away from the area and protective clothing should be worn when dealing with the spillage such as gloves and aprons.

Spillage Procedure

- Cordon off the area where the spillage has occurred.
- Cuts and abrasions on any areas of the skin should be covered with a waterproof dressing.
- Use personal protective equipment and clothing to protect body and clothes: disposable gloves and apron must be worn.

Hard Surfaces e.g. floor tiles, impervious tabletops

Small spills or splashes of blood: Clean with neutral detergent and hot water.

Large spills:

- Remove spillage as much as possible using absorbent paper towels
- Flush these down toilet or dispose of carefully in waste bag
- Cover remaining with paper towels soaked in diluted bleach solution (1:10 dilution with cold water)
- Leave for up to 30 minutes, and then clear away

Soft Surfaces and Fabrics e.g. carpets and chairs

- Remove the spillage as far as possible using absorbent paper towels
- Then clean with a fresh solution of neutral detergent and water
- Carpets and upholstery can then be cleaned using cleaner of choice
- Steam cleaning may be considered
- Contaminated gloves, aprons, paper towels, etc should be carefully disposed of into a biohazard sick bag, securely tied and placed immediately into the normal external school waste container.
- Large quantities of contaminated waste should be disposed of in consultation with the local waste authority.
- Wash hands after procedure.
- As with all other hazardous substances used in school, bleach and disinfectants should be stored, handled, and used in accordance with COSHH (Control of Substances Hazardous to Health, 2002) Regulations and the manufacturer's instructions. Product data sheets and safe use instructions should be accessible, along with risk assessments and details of actions required in the event of accidental ingestion, inhalation or contact with skin or eyes.
- All chemicals must be stored in their original containers, in a cool, dry, well ventilated place that is inaccessible to children, visitors and the public.
- Appropriate protective clothing (e.g. gloves and aprons) should be worn when handling bleach and other chemical disinfectants. Contact with skin, eyes and mouth should be avoided
- Proper administration of first aid by a trained first aider should be seen as paramount in safeguarding children. The procedures outlined below give advice and consistency to our administration of first aid and should be read as a minimum level of administration.

- In an emergency, staff should call 999 immediately. Where an external line is required from a school phone, staff should follow the school's internal telephone procedure. An adult must remain with the pupil or adult requiring assistance until help arrives.

Spare Supplies

If any supplies are taken, staff must inform Vicky Cockell. This ensures that new supplies are ordered on time.

Ice Packs

- If an ice pack is used on a swelling, then the child injured needs constant supervision.
- Ice packs are stored in the fridge located in the staffroom, in the Hub, in Reception classrooms and in the Nursery classroom.
- If an icepack is given then the parents need to be informed with a bump note.

Children with Injuries

If a child is in school with an injury, e.g., broken arm, a member of SLT will complete a risk assessment with the child and parent/carer to ensure that adjustments are made to keep the child safe. This risk assessment will be shared with all staff who have contact with the child.

Individual Healthcare Plans

Where a pupil has a medical condition that requires ongoing support, the school will work with parents/carers, healthcare professionals and relevant staff to agree an Individual Healthcare Plan. This will outline the pupil's needs, medication, triggers, emergency procedures, staff responsibilities and arrangements for educational visits and wider school activities.

Individual Healthcare Plans will be reviewed at least annually, or sooner if the pupil's needs change. Relevant staff will be made aware of the plan and their responsibilities in supporting the pupil safely in school.

Where medication is required as part of the plan, this will be stored, administered and recorded in line with the school's medication administration procedures.

First Aid Administered to Staff and Visitors

- Should an adult require first aid, in the case of a minor injury, this can be self-administered.
- In the case of a more serious injury, advice should be sought from a trained first aider who can administer the first aid.
- A decision will then be made by the Headteacher, or in the case of their absence, by the Deputy or Assistant Headteacher, in conjunction with the staff member and the first aider, as to their fitness to continue to work. This may lead to a temporary covering of their duties to allow them time to recover, or to their releasing from duties for a period.
- In all cases, a record of the injury and how it was sustained will be made and any actions required under Health and Safety at work 1974 will be carried out.

- Advice will be taken from BDMAT as to whether a RIDDOR notification would need to be made.
- In the case of a serious medical emergency, a trained first aider would administer any treatment that is within their training and the emergency services would be called (as in procedure outlined above)

Mental Health First Aid

The school recognises the importance of mental health and emotional wellbeing. While not all staff are trained Mental Health First Aiders, staff are encouraged to be aware of signs of mental distress and to signpost pupils and colleagues to appropriate support. Where available, Mental Health First Aid training will be offered to staff. Pupils will be supported through pastoral care and external referrals where necessary.

Inclusion and Accessibility

First aid procedures are designed to be inclusive and accessible to all pupils, including those with disabilities or communication needs. Staff are trained to adapt their approach to ensure all children receive appropriate care and support.

Kitchen

- The kitchen has a first aid folder where they are able to log any minor injuries that occur during working hours e.g. burns. If they have a serious injury that may result in medical attention needed or time off work, they must inform the school office immediately and appropriate action will be taken.
- The kitchen has a purple first aid ring binder that has photos of all children in school who have an allergy or special dietary requirement and allows staff to quickly identify children when they come in for lunch to be mindful of what they are served and limit the risk of error.
- Children who have a severe food allergy that requires a care plan wear a purple wristband during lunchtime as another identifier to ensure their safety.
- This is updated by VC yearly or when a change happens.

Educational Visits

- There must be a First Aider on every trip and a complete first aid kit.
- Parents need to advise the school if additional medication is needed for the trip, e.g., travel sickness
- First aid arrangements for educational visits will be considered as part of the visit risk assessment on Evolve.
- The visit leader must ensure that appropriate first aid equipment, emergency medication, allergy plans, inhalers and pupil medical information are taken on the visit.
- Medication must remain accessible throughout the visit, including during travel.

Sending a Child Home

Always follow school procedures when sending a child home and check with the Main First Aider, Headteacher or a senior member of the leadership team (in the Headteacher's absence) in the first instance.

Medication Administration Procedures

- Medication will only be administered where written parental consent has been provided and the medication is in the original container, clearly labelled with the pupil's name, dosage and administration instructions.
- Prescribed medication will be administered by designated staff in line with the instructions provided by parents/carers and medical professionals. The school will not usually administer non-prescribed medication unless this has been agreed by the Headteacher or designated senior member of staff.
- A written record will be kept of all medication administered, including the date, time, dose and member of staff administering it. Where a pupil refuses medication, this will be recorded and parents/carers will be informed as soon as possible.
- Controlled drugs will be stored securely and administered in accordance with statutory guidance. Emergency medication, such as inhalers and adrenaline auto-injectors, must remain readily accessible and must not be locked away.
- Parents/carers are responsible for ensuring that medication held in school is in date. Expired medication will be returned to parents/carers for safe disposal.

Digital Record Keeping via Evolve

Evolve is used to log all incidents requiring first aid. Access is restricted to designated staff to ensure confidentiality. Parents are notified of incidents via standard communication channels. Records are retained in accordance with statutory requirements and reviewed periodically for safeguarding and health and safety compliance.

Internal Audits of First Aid Kits

First aid kits will be subject to internal audits at least once per term. The First Aid Co-ordinator will ensure that kits are fully stocked, in-date, and compliant with school policy. A checklist will be maintained to track inspections and replenishments.

Training and Competency Tracking

A training log will be maintained listing all qualified first aiders and their certification expiry dates. Staff will be reminded in advance of renewal deadlines. Online refresher courses may be used where appropriate to maintain competency.

Annual Medical Needs Training

St Michael's CE Primary School has named first aiders who have their training renewed every 3 years. In EYFS we have staff that are paediatric first aid trained. These are also renewed when

required. This is done in order for staff to feel confident in their ability to support a child with medical needs.

Monitoring

This policy will be reviewed by the SLT annually and reviews shared with the Local Academy Board.

Related Policies

- Child Protection and Safeguarding Policy
- Health and Safety Policy
- BDMAT Supporting Pupils with Medical Conditions Policy
- BDMAT Policy for Children with Health Needs who Cannot Attend School
- UKHSA Health Protection in Education and Childcare Settings Guidance