



## LPW Independent School

### First Aid & Medicine Policy

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## **FIRST AID**

### **The purpose of the Policy is:**

- To provide effective, safe First Aid cover for students, young people, children, staff, volunteers and visitors.
- To ensure that all people are aware of the system in place.
- To consider and plan for the medical needs of any people involved with LPW activity, including learning, working and playing.

NB. The term **FIRST AIDER** refers to those members of the school community who are in possession of a valid First Aid (FA) certificate or equivalent.

**Our current First Aiders are logged with the Head of Finance and Resources and the HR team and displayed on posters around the company.**

### **FIRST AIDERS will:**

- Always attend a casualty when requested to do so and treat the casualty to the best of their ability in the safest way possible. This includes wearing gloves where any loss of blood or body fluid is evident, calling for help from other First Aiders or Emergency Services. See HSE report on Cleaning up Bodily Fluids. 2011  
<http://www.hse.gov.uk/pubns/guidance/oce23.pdf>
- Ensure that their qualifications are always up to date, informing HR when further training is required.
- Help fellow First Aiders at an incident and provide support during the aftermath.
- Act as a person who can be relied upon to help when the need arises.
- Ensure that their portable first aid kits are adequately stocked and always to hand.
- Insist that **any** casualty who has sustained a significant injury is seen by professionals at the hospital, either by sending them directly to hospital or by asking parents/carers to pick up a child to take them to hospital; ensure that parents/carers are aware of **all** head injuries promptly.
- Ensure that a child who is sent to hospital by ambulance is either:
  - Accompanied in the ambulance at the request of paramedics.
  - Followed to a hospital by a member of staff to act in loco parentis if a relative cannot be contacted.
  - Met at hospital by a relative.
- The First Aider need not be the member of staff to accompany the casualty to hospital, however, an appropriate person should be sent.

- Liaison **must** occur with the staff in charge of cover, to ensure that sessions/lessons/activities are covered in the event of an absent member of staff.
- Keep a record of each person attended to, the nature of the injury and any treatment given, on a incident/accident sheet. In the case of an accident, the Accident Book must be completed by the appropriate person.
- Ensure that everything is cleared away, using gloves, and every dressing etc. be disposed of appropriately. Any bloodstains on the ground must be washed away thoroughly. No contaminated or used items should be left lying around.

#### **Managers will:**

- Ensure that there is always a qualified first aid person available.
- Provide adequate First Aid cover as outlined in the Health & Safety [First Aid] Regulations 1981.
- Monitor and respond to all matters relating to the health and safety of all persons on school premises.
- Ensure all new staff are made aware of First Aid procedures.
- Ensure that relevant insurances are in place.

#### **LPW staff will:**

- Ensure that first aid cover is available throughout the working hours of the working week.
- Ensure that they always obtain the history relating to a student not feeling well, particularly in the cases of headaches, to ensure that no injury has caused the person to feel unwell.
- Ensure that in the event that an injury has caused a problem, the person **must** be referred to a First Aider for examination.
- At the start of each year or activity, provide appropriate staff with a list of those who are known to be asthmatic, anaphylactic, diabetic, epileptic or have any other serious illness.
- Have a file of up to date medical consent forms for every person in your care and ensure that these are readily available for staff responsible for school trips/outings.

#### **All staff will:**

- All staff must report serious incidents and serious injuries to RIDDOR through the Headteacher, CEO and Head of Finance and Operations.

- Familiarise themselves with the first aid procedures in operation. They will also ensure that they know who the current First Aiders are.
- Be aware of specific medical details of individual people when publicised by management.
- Ensure that their people in your care are aware of the procedures in operation.
- Never move a casualty until they have been assessed by a qualified First Aider unless the casualty is in immediate danger.
- Send for help to the first aider as soon as possible either by a person or telephone, ensuring that the messenger knows the precise location of the casualty.
- Reassure, but never treat, a casualty unless staff are in possession of a valid Emergency Aid Certificate or know the correct procedures; such staff can obviously start emergency aid until a First Aider arrives at the scene or instigate simple airway measures if clearly needed.
- Send a person who feels generally 'unwell' to a sickness room or suitable place, unless their deterioration seems uncharacteristic and is causing concern.
- Ensure that they have a current medical consent form (including contact details of each student's own GP) for every person that they take out on a residential trip or activity which indicates any specific conditions or medications of which they should be aware.
- Have regard to personal safety at all times, through effective risk assessing.
- Report all accidents to themselves at work and complete the Health and Safety form.

## **The process**

The process of assessment, treatment, and recording of minor incidents & accidents in the Accident and Incidence Book or on a current and relevant form.

Each LPW site will have a First aid box. All boxes need to be checked regularly and replenished as requested.

The following ailments / injuries are treated as set out below:-

- Minor grazes and cuts are cleaned with water/wipes and where deemed appropriate covered with a plaster. All staff are aware of the need for good hygiene practices when dealing with spillage of bodily fluids.
- Details of person, date, time, injury, treatment and signature of the attending member of staff are recorded in the "*Accident/Incident Book*".

- Bumps to the head are initially looked at by the first aider. Where there is a major bump to the head the parents/carers will be informed.
- Where a suspected broken bone or dislocation has occurred, parents/carers are then contacted. In extreme cases it may be necessary to call for the assistance of an ambulance.
- Where a person presents themselves as unwell, an initial assessment of their condition is made and they may then be monitored for a period of time. If deemed necessary the carer/parent(s) are contacted to collect the person and take them home.
- Where a person is physically sick, the carer/parent(s) are contacted as a matter of course and asked to collect the person. The carer/parent(s) are then asked to keep their person at home for at least 48 hours.
- Where a person presents with a rash this assessed and if deemed necessary the person will be seen by the first aider.
- Where a more serious accident has occurred involving people, staff, carers/parents or other adults, the details of the accident / incident is recorded on a specific form and kept in the accident/incident file in at head office.

### **People with medical conditions**

Young people and adults we work with, who have known medical needs will be identified on induction, arrival, or referral stage, as they start to work with LPW staff. A risk assessment should be completed if necessary and discussed with an appropriate manager to check that needs can be met in the agreed setting. Staff working with that person will be fully informed of any action or treatment that may be needed for that person, with the parents and carers being asked to put that in writing.

The company aims to ensure that all those with medical conditions, both physical and mental health, are properly supported so that they can play a full and active role in company life, remain healthy and achieve their personal, social and academic potential. Arrangements will be put in place that will promote learning, confidence and independence, including self-care, where necessary.

A medical condition is defined as a disease, illness or injury (including both physical and mental health) for which someone is receiving advice from or under the supervision of a health professional. Any medication taken for a medical condition is likely to be prescribed by a doctor and taken for a prolonged period of time.

### **1. Principles**

The company will act in accordance with the Equalities Act (and the Students and Families' Act for school students, which places a duty on schools to make arrangements for students with medical conditions).

The company is committed to ensuring that all staff responsible for the care of people will undertake their duties in a professional manner at all times.

All members of staff will know what to do and respond accordingly when they become aware that a person with a medical condition needs help.

The School recognises that there is a need to treat all people, whatever their age, gender, disability, religion or ethnicity, with dignity and respect.

In the case of schools, students with medical conditions have the same right of admission to school as other students. No student will be denied admission because arrangements for their medical condition have not been made where it is reasonable to do so. An assessment will be made as to the suitability of our offer and this will be fully considered.

## **2. Roles and Responsibilities**

Supporting a person with a medical condition is not the sole responsibility of one person. The company's responsibility to provide effective support will depend upon working cooperatively with healthcare professionals (and where appropriate Social Care professionals), local authorities, parents/carers and young people.

- Parents/Carers are responsible for ensuring that their child is well enough to attend school.
- Parents/Carers must provide sufficient information about their child's medical condition and support and care required. They must keep the company informed of any updates.
- Members of staff will work in close partnership with parents/carers and medical professionals to share information and provide continuity of care.
- Individual Health Care Plans (IHCP's) will be developed and monitored in collaboration with parents/carers and medical professionals and reviewed at least annually or earlier, if evidence is presented that the person's needs have changed.
- People with medical conditions will often be the most appropriate person to provide information about how their condition affects them. They should contribute as much as possible to the development of and comply with their IHCP.
- Where young people refuse to take their medication under supervision as requested by their parent or doctor, the member of staff will not force them to do so by any means; parents/carers will be informed immediately and will take responsibility for their child's medical needs at this point. □ The company staff will, if in any doubt about a student's condition, contact the emergency services, with or without a Parent/Carer's consent.

## **3. Emergencies**

Where a participant in our activities has an IHCP, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant members of staff are aware of emergency symptoms and procedures. Other people in the sessions should know what to do in general terms, such as informing an appropriate adult immediately if they think help is needed.

If a participant needs to be taken to hospital, a member of staff should stay with them until the parent/carer arrives, or accompany them if taken to hospital by ambulance.

#### **4. Trips, Visits and Activities**

The company will make every effort to ensure that young people with medical needs have the opportunity to participate in trips, as long as the safety of the person concerned and that of others is not compromised by their inclusion and where it is reasonable to do so.

Members of staff will complete a risk assessment and take additional measures as reasonable to accommodate the inclusion of the person, consulting with parents/carers and medical professionals as required.

### **ADMINISTERING MEDICINE**

The purpose of this procedure is to put into place effective management systems and arrangements to support children and young people with medical needs in our School and to provide clear guidance for staff and parents/carers on the administration of medicines. This procedure statement must be considered with other relevant policies such as health and safety.

Positive responses by Schools and settings to a child's medical needs will only benefit the child directly, but can also positively influence the attitudes of their peers.

#### **Roles and Responsibilities: School staff**

All members of staff have a duty to maintain professional standards of care and to ensure that children and young people are safe. Our School will monitor and review individual needs and administer medicines in order to meet the all round needs of the child. There is no legal duty requiring staff to administer medication or to supervise a child when taking medicines. This is a voluntary role.

A response to the Disability Discrimination Act (DDA) 1995, we are making reasonable adjustments for disabled children, including those with medical needs, and we are planning strategically to improve access over time. We are also making reasonable adjustments to enable children with medical needs to participate fully in all areas of School life including educational visits and sporting activities.

The Headteacher, in consultation with the Governing Body, staff, parents/carers, health professionals and the Local Authority will decide whether our School can assist a child's medical needs. The Headteacher is responsible for:

- Implementing the procedure on a daily basis;
- Ensuring that the procedures are understood and implemented;
- Ensuring appropriate training is provided;

- Making sure that there is effective communication with parents/carers, students, staff and all relevant health professionals concerning student's health needs.

Staff, including any supply staff will be informed of any students' medical needs where this is relevant any of any changes to their own needs as and when they might arise. All staff, parents and students will be informed of the designated person with responsibility for medical care.

### **Roles and responsibilities: Parents/Carers**

It is the responsibility of parents/carers to:

- Inform the School of the child's medical needs
- Provide and medication in container clearly labelled with the following:
  1. The child's name
  2. Name of the medication
  3. Dose and frequency of the medication
  4. And special storage arrangements
- Collect and dispose of any medications held in the School at the end of the term
- Ensure that medicines have NOT passed their expiry date.

### **Student's information**

When the student starts at LPW Independent School, parents/carers should give the following information about their child's long term medical needs. **THE INFORMATION MUST BE UPDATED AS AND WHEN AND AT LEAST ANNUALLY.**

- Details of students medical needs
- Medication including any side effects
- Allergies
- Name of GP/Consultants
- Special requirements e.g. diary needs, pre-active precautions □ What to do and who to contact in an emergency □ Cultural and religious views regarding medical care.

### **Administering Medication**

We expect parent/carers to administer medication to their child at home. No medication will be administered without prior written permission from parents/carers including written medical authority if the medicine needs to be altered (e.g. crushing of tablets)

'A Parents' Request For Schools to Administer Medication Form' must be completed. Staff members are not legally required to administer medication or to supervise a student when taking medicine. This is a voluntary role.

The Headteacher will determine if medication is to be administered in School, and by whom, following consultation with staff. All medicine will normally be administered during breaks and lunch times. If, for medical reasons, medicine has to be taken during lessons, arrangements will be made for the medicine to be administered at other prescribed times. Students will be told where their medication is kept and who will administer it.

Any member of staff, giving medicine to students, should check on each occasion:

- Name of the student
- Written instructions provided by the parents/careers or doctors
- Prescribed dose
- Expiry date

Written permission from the parents/carer will be required for students to self-administer medicine(s). 'A Parents Request For Self-Administer Medication Form' must be completed.

### **Carrying Medicines**

For safety reasons, students are not allowed to carry medication, other than a maximum of two over the counter pain relief tablets, unless agreed on an individual basis. All other medicines must be handed into the School's Assistant Headteachers and Centre Managers.

### **Storage**

All medicines in the care of the School will be kept locked away. All medicines will be logged on the Schools' file. Inhalers must be labelled with the student's name. Inhalers and other medicines must be labelled with the required dosage and must be returned to parents when they expire.

### **Records**

Each time medication is given to a child, a member of staff will complete a medication log sheet. These sheets record the following:

- Name of student
- Name of medication
- Dose
- Date
- Time given
- With or without food
- Who supervised the administration
- Any other notes including reactions

## **Refusing Medication**

If a child refuses to take their medication, no member of staff will force them to do so. Parents/carers will be informed as soon as possible. Refusal to take medication will be recorded as well as further actions. If a child refuses medication, staff may deem it unsafe for the child to remain on the site and parents/carers may be asked to collect the child.

## **Training**

Training and advice will be accessed from health care professionals for staff involved in the administering of medicines. Training for all staff will be accessed on a range of medical needs, including any resultant learning needs as and when appropriate. Details of training will be recorded.

## **Health Care Plan**

When appropriate, a Personal Health Care Plan will be drawn up in consultation with the School, parents/carers and health professionals. The Health Care Plan will outline the child's needs and the level of support required in School. Health Care Plans will be reviewed at least annually.

## **Intimate or invasive treatment**

Intimate or invasive treatment will only take place at the discretion of the Headteacher with written permission from the parents/carers and only under exceptional circumstances. Two adults, one of the same gender as the child, must be present for the administration of such treatment. Cases will be agreed and reviewed on an annual basis. All such treatments will be recorded. Governors will be informed at least annually of any intimate or invasive treatment carried out by the School staff.

## **Educational visits**

To enable, as far as possible, all students to have access to all activities and areas of School life, a risk assessment will be undertaken to ensure the safety of all participants in educational visits. No decision about a child with medical needs attending/ not attending a School visit will be taken without prior consultation with parents/carers.

## **Residential Visits**

Sufficient essential medicines and appropriate Health Care Plans will be taken and controlled by the member of staff supervising the visit. If additional supervision is required for activities e.g. swimming, we may request the assistance of a parent/carer.

## **Emergency Procedures**

The Headteacher will ensure that all members of staff are aware of the School's planned emergency procedures in the event of medical needs.

## **Pain Relief**

Sometimes students may ask for pain relief (analgesics) at School e.g. paracetamol. Generally, School staff should not give non-prescribed medication to students. However if parents have completed a consent form this may be administered.

Any member of staff giving medicine to students in relation to pain relief, should check the following on each occasion:

- Name of the analgesic
- States the dose to be given
- Gives the circumstances in which it may be given
- Includes checking when previous doses have been taken / given
- Includes obtaining parental permission
- Adheres to the manufacturer's instructions and warnings which accompany the product to be used
- Includes a procedure for informing parents/carers when medication has been given.

Consideration should be given to the choice of analgesia. A child under 16 should never be given aspirin unless prescribed. A parental consent form, renewed annually, must always be completed, and this form should confirm that the child has been given the stated medication without any adverse effect in the past. The parent/carers should always be informed on the same day, when such medication has been given. As with any medication, records must be kept when pain relief has been administered. If a child suffers from pain regularly the parents/carers should be encouraged to seek medical advice.