BUCKINGHAM PREPARATORY SCHOOL

'Together we nurture, we inspire, we achieve'

First Aid Policy & Administering of Medicines

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BUCKINGHAM PREPARATORY SCHOOL AND EYFS

FIRST AID POLICY &ADMINISTERING OF MEDICINES

Revised: September 2026 (to be reviewed in September 2027)
This policy applies to all staff working within the school, including EYFS.

BUCKINGHAM PREPARATORY SCHOOL POLICIES

This policy should be read and adhered to in conjunction with the following Buckingham Preparatory School policies:

- Health and Safety Policy
- Accident reporting Policy
- Risk Assessment Policy
- Safeguarding and Child Protection Policy

1. INTRODUCTION

The school is under a general duty to provide a safe working environment for staff, pupils and visitors, with suitable arrangements, including welfare, Section 2 of the *Health and Safety at Work Act 1974*. Provision for First Aid is a requirement under the *Health And Safety (First Aid) Regulations 1981*.

The school must ensure that there is adequate first aid provision for persons who may become ill or are injured, as part of their undertaking for the school.

1.1 SAFEGUARDING CONSIDERATIONS

All first aid incidents must be considered in line with the School's Safeguarding and Child Protection Policy. Where there is any concern that an injury may be non-accidental, or where patterns of injury raise concern, the Designated Safeguarding Lead (DSL) must be informed immediately.

2. POLICY STATEMENT

The school is committed to providing sufficient numbers of first aid personnel to deal with accidents and injuries occurring at work.

To this end, the school will provide information and training to staff to ensure that they can meet the statutory requirements and the needs of the school are met.

Should persons have concerns about the provision of first aid within the organisation, they should inform:

- Head and/or the Deputy Head
- First Aid Co-ordinator – Ed Arghebant

These concerns will be investigated and an assessment will conclude if any rectification is required.

3. ARRANGEMENTS FOR SECURING FIRST AID PROVISION

3.1 First Aiders

First Aiders Mr Bryn Evans, Ed Arghebant and Abi Elven are employees who have been assessed by the Head as being suitable for training and appointment as nominated First Aiders.

First Aiders are qualified personnel who have received training and passed an examination in accordance with Health and Safety Executive requirements. Incorporated into this will be refresher training every year or requalification every three years and an examination to ensure that their skills are maintained.

It is the intention of the school that all staff should become trained Paediatric Level One first aiders and we are working towards this with a rolling program of training.

As a school, we will ensure all level 2 and level 3 staff members hold a valid paediatric first aid (PFA) certificate, otherwise they cannot be included in any ratio for trips or otherwise.

All EYFS full time staff hold Paediatric First Aid Qualification. The School will make reasonable arrangements to ensure that a suitably qualified First Aider is available on site during the school day and during school-led activities.

3.2 Legal Indemnity of First Aiders

It is unlikely that first aid personnel rendering assistance will become subject to legal action because of deterioration in the injured person's condition. However, the school has arranged to guard against this possibility by providing, through its insurance policies, indemnification for any member of staff who assists a person who becomes ill/injured either on or off the school's premises but in association with school business.

3.3 First Aid Boxes

First Aid boxes are provided by the school as an integral part of the building. They are located in all the classrooms and the Staffroom and are marked with a white cross on a green background. There are also a range of plasters and gloves kept in the downstairs cloakroom area to deal with minor cuts and scrapes during playtimes. The policing and up-keep is the responsibility of all staff.

If a person requires the use of any provisions held within a first aid box, then they should contact their nearest First Aider.

All boxes will contain the minimum provision of supplies. There is no mandatory list of items for a first aid container.

3.4 First Aid Co-ordinators

The current information regarding the location of first aid boxes and the First Aider responsible for their up-keep will be kept by the school's First Aid Co-ordinator.

Re-stocking of the first aid boxes will be overseen by a designated First Aider.

3.5 Field-Trip or Portable First Aid Kits

Field-trip or portable first aid kits are to be made available for those persons who are required to be undertaking their work/study away from their normal place of work/study, external to the school, where an assessment has highlighted that access to such facilities may be restricted.

Examples of these circumstances include (but are not exhaustive):

- Persons travelling abroad;
- Persons travelling in vehicles on a regular basis, away from the school locations;
- Sporting or social events arranged or supported by the school.

However, if attending the premises of a third party i.e. external premises to the school, where first aid arrangements have been assessed to be suitable and the third party can cover the school's needs, then persons in attendance should be provided with relevant information of the first aid arrangements prior to attending and then made familiar of the arrangements again on their arrival to the third party premises.

3.6 First Aid/Recovery Area

This is currently the School Library, on the ground floor of the school. This area is fitted with a small basin and running water, medical supplies, sickness equipment and there is also access to a portable bed if needed. Children with less serious illness waiting to be taken home can sit outside the secretary's office and be monitored by the secretary or a member of staff.

Medical information relating to pupils and staff is treated as confidential and managed in accordance with UK GDPR and Data Protection legislation.

Medical records and healthcare information are stored securely and shared only with staff who need access in order to safeguard and support pupils appropriately.

4. ACCIDENT/ILLNESS

- All users of the school will be able to contact a First aider via a member of staff or the secretary's Office.

- A qualified First aider should be on site and available during the school day.
  Once informed of an injury the First aider will go to the casualty/ies without delay and provide care.

- Secondary aid will be sought if necessary and at the same time the parent/guardian or other appropriate adult will be informed.

- If a parent/guardian cannot accompany a casualty to hospital a member of staff will accompany him/her if this is deemed necessary/appropriate. Emergency details for the pupil should be obtained from the Secretary's Office before departing for the hospital.

- All appropriate precautions will be taken by support staff when clearing up an incident involving blood, vomit etc.

- A list of First Aiders is to be found in the school office, staff-room, the downstairs toilet lobby area and in Pre-school.

- In the event of a child feeling unwell during a lesson they should, if possible, be accompanied to the Secretary's Office with a message/note of explanation.

- Any staff member who deems it necessary/appropriate to take a casualty to the First Aid area should seek advice from a designated First aider.

Guidance on when to call an ambulance

Always call 999 (112 if outside of the UK and in Europe) if someone is seriously ill or injured, and their life is at risk.

Examples of medical emergencies include (but are not limited to):

- chest pain
- difficulty in breathing
- unconsciousness
- severe loss of blood
- severe burns or scalds
- choking
- fitting or concussion
- drowning
- severe allergic reactions

5. Recording of accidents

All accidents must be recorded, however minor, in line with the school's Accident Reporting Policy and RIDDOR. Accident and medical records are retained securely in accordance with the School's data retention procedures and UK GDPR requirements.

It is the responsibility of employees and visitors to complete an entry in the accident book as soon as possible after the incident to a pupil, visitor or staff member has occurred. Where the injured person is

unable to complete their own details of the accident, then the First Aider in attendance and/or witness (where relevant) should enter details on the injured person's behalf.

In the event of a head injury occurring to anyone on the school premises, a yellow head injury card must be completed in addition to the Accident Recording Form. Staff supervising the injury should contact a First Aider to check the patient. A staff member will complete a yellow head injury card. A First Aider will check accuracy and initial the card.

Where an accident results in a person being taken to hospital, or inability to continue to attend or subsequently becomes absent from work as a result of the accident then the following should be notified immediately by the quickest method:

- Head teacher/Deputy Head
- Health and Safety Officer
- Parents
- Emergency Services

Any person who suffers an injury as a result of an accident that occurred off the school's sites whilst undertaking their role for the school should also report in accordance with the aforementioned procedure. In addition, accidents occurring on a third party's site should be reported with the arrangements applying at that site.

6. REPORTING SERIOUS ACCIDENTS/INCIDENTS

- The Head or most senior teacher on site will be informed of any serious injury occurring in a day.
- All incidents, injuries, head injuries and treatments are to be reported in the Red Accident Folders kept in the playground foyer.
- Parents are to be informed of a head injury with the standard 'Yellow Card' head injury notification.
- Staff should also complete the accident reporting form for employees if they sustain an injury at work in the red folder in the staffroom named Serious Accident and Incident Folder for Staff).
- Serious Incidents involving children should be recorded in the Serious Accident and Incident Folder for Children.

Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR), certain incidents must be reported to the Health and Safety Executive (HSE).

1. Involving employees or self-employed people working on the premises.
2. Involving pupils and visitors

We ensure that we follow the RIDDOR Guidelines from Incident Reporting in Schools (accidents, Diseases and Dangerous Occurrences) http://www.hse.gov.uk/pubns/edis1.pdf

The Head is responsible for ensuring that procedure is followed.

7. SPECIFIC MEDICAL NEEDS

Pupils with specific allergies are listed inside the medical cupboard in the staffroom. In normal circumstances, these pupils would be treated by their Form Tutor. However, in his/her absence, a qualified First Aider would take over the responsibility (see Administering Medicines Policy - Below. However, it is important that every member of staff is familiar with the symptoms of these allergies and their treatments. For example, staff have attended an in-house course on the use of an auto-injectors, such as Epi-pen.

Children with Asthma are treated in line with their parents' written wishes. Their personal inhalers and, if required, spacers are available in their form rooms and in grab bags in the staffroom for activities off site. The School may hold emergency salbutamol inhalers and spare adrenaline auto-injectors (AAIs) for emergency use in accordance with current Department for Education guidance and parental consent arrangements.

Children may require an auto injector or the equivalent due to serious allergies. Their grab bags will have labels denoting the seriousness of their allergy. All staff have regular and specific auto injector training. Relevant staff training also includes awareness of safeguarding indicators, including recognising possible non-accidental injuries and appropriate reporting procedures.

Information regarding pupils with specific medical needs and allergies is securely stored within the restricted-access medical files in the staffroom. This list is kept updated by the First Aid Coordinator, who also ensures that medication is in date and staff are aware of the needs of all children.

8. HYGIENE PROCEDURES FOR SPILLAGE OF BODILY FLUIDS

The spillage of bodily fluids would have to be treated in a specific manner. This may include blood, vomit, urine and faeces. Staff would attend to the child in an appropriate manner and wear gloves to protect themselves. These are located in the staffroom.

If for example the pupil was bleeding: after the wound had been dressed by a member of staff in the appropriate manner the wipe would be discarded in the small yellow bin located in the Playground Foyer. This bin is specific to this purpose as it will be emptied by a specialist firm. Wipes should not be disposed of in the normal waste bin.

The caretaker is informed of any bodily spillages and cleanses the area thoroughly. All appropriate precautions will be taken.

9. SAFE SYSTEM OF WORK

The following arrangements should be followed in order to ensure that suitable and sufficient provision of first aid personnel and equipment is available within the school:

1) Training records are kept and HR staff inform the First Aid Officer/Head teacher when training certification periods are nearing (6 months minimum) expiry.
2) The First Aid Coordinator must ensure that persons are familiar with the identity and location of their nearest First Aider and first aid box.
3) The name/s and location/s of First Aiders and equipment must be displayed adequately throughout the School. Ensure that this information is updated to reflect any changes that may take place.
4) Ensure that First Aiders are nominated to maintain first aid boxes within their area and to ensure that the contents have not expired.

5) Maintain easy access to a First Aider and first aid box.
6) Ensure that all persons are familiar with requirements of this Policy through information, instruction and training. Similarly, staff should be aware of the hazards in subject teaching and should be familiar with the relevant Risk Assessments.

10. ADMINISTRATION OF MEDICAL TREATMENT

All teaching staff at the Preparatory School and Preschool are able to administer basic medical treatment involving the cleaning of scratches, grazes and cuts and the application of dressings.

If the injury is deemed to be relatively serious, then a member of staff with a First Aid qualification will be called and he/she will then take the most appropriate action. This may involve calling the emergency services on 999/112 (See above When to Call an Ambulance). The School will contact the child's parents at the earliest opportunity, informing them of the action which has been taken. A member of staff may be required to accompany the child if he is taken to hospital.

The member of staff will remain at the hospital until he/she is confident that the child has come to terms with the accident and is settled and comfortable. They will obviously relinquish responsibility when the boy's parents arrive.

The member of staff who treated the child should complete an accident form which is kept in a file adjacent to the playground. At the end of each week, these forms are transferred to a 'holding' file which is kept in the First Aid cupboard in the staffroom. An 'incident' form should be completed, where applicable.

In the event of a head injury occurring to anyone on the school premises, a yellow head injury card must be completed in addition to the Accident Recording Form. Staff supervising the injury should contact a First Aider to check the patient. A staff member will complete a head injury card. A First Aider will check accuracy and initial the card.

Parents who require staff to administer medication on a regular basis should advise the staff accordingly, in writing. A copy should be kept in the pupil's file. Similarly, pupils who require care of a more specialized nature should also offer their consent in writing. Again, a copy should be filed.

Mr Evans or Mr Arghebant should be the first one contacted as they have prime responsibility for the administration of first aid in the school. It is also a designated First Aider's responsibility to make certain that first aid boxes are well stocked and readily available. For residential or day visits the party-leader should make certain that a first aid box is transported on every trip involving a coach or minibus.

11. MANAGING SPECIFIC INFECTIOUS DISEASES IN SCHOOL

When your child develops an infectious disease, there is a set period of time during which they must not return to School. This is both for your child's benefit, as well as for the protection of their fellow pupils and staff. For current exclusion guidance regarding infectious diseases, the School follows UK Health Security Agency (UKHSA) guidance:

https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases

Children with rashes should be considered infectious and be assessed by their GP. If the GP suspects a notifiable disease, the local Health Protection Team will be informed and a Notification Form will be completed. It is important to notify the School if your child is diagnosed with such a disease and especially *before they return to School*. (There may be pupils or staff undergoing medical treatment whose immunity may be compromised).

The latest Government guidelines (updated March 2025) for some of the most common childhood illnesses:

- **Vomiting and Diarrhoea**: The exclusion time is **48 hours** from the **last** episode of diarrhoea and/or vomiting.
  For some infections, longer periods of exclusion are required and there may be a need to get microbiological clearance before returning to School.
- **Mumps**: The exclusion time is 5 days after the onset of swelling.
- **Chickenpox**: The exclusion time is 5 days from when the lesions appeared and until all the lesions have crusted over.
- **Shingles**: A decision to exclude a pupil will vary for each case of Shingles. It will be dependent on whether the rash is weeping, whether it can be covered and whether there are other pupils or staff whose immunity is severely compromised (and who could therefore be vulnerable if they come into contact with this infection).
- **Measles**: The exclusion time is 4 days from the appearance of the rash.
- **Rubella**: The exclusion time is 6 days from the appearance of the rash.
- **Scarlet Fever**: The pupil may return to school 24 hours after commencing antibiotic treatment. (Without antibiotic treatment, the pupil may be infectious for up to 3 weeks and will not be able to return to school during that period).
- **Glandular Fever**: No exclusion time.
- **Conjunctivitis**: Pupils may return to School as soon as treatment is commenced.
- **Verrucae**: Should be covered when in the swimming pool, gym and changing room areas.
- **Influenza (Flu):** Pupils should remain at home until well enough to return to School.
- **Impetigo**: Exclusion is necessary until the lesions have crusted over, or 48 hours after commencing antibiotic treatment.
- **Head Lice**: No exclusion necessary, but treatment should be commenced immediately.
- **Hand, Foot and Mouth** : No exclusion necessary, but treatment should be commenced immediately.
- **Covid 19** : As per DfE guidance and the latest Government guidance

First Aid notice

First Aid Coordinator: Ed Arghebant

Designated First aiders: Bryn Evans, Ed Arghebant, Abi Elven.

Access to First Aid boxes:
These are located in the staffroom and each form room. All staff are responsible for keeping them stocked.

BPS has a clear Administering Medicines policy and this must be referred to if a member of staff is asked to administer medicines at school. It can be found on the Staff Shared Area.

12. SUNSCREEN

Parents are advised to apply sunscreen prior to school. Pupils may bring their own named bottle of sunscreen to apply themselves during the day.

ADMINISTRATION OF MEDICINES AT SCHOOL

POLICY STATEMENT

While it is not our policy to care for sick children, we will agree to administer medication as part of maintaining their health and well-being when they are recovering from an illness. However, parents are aware of the fact that children should remain at home until they are well enough to return to school.

In many cases it is possible for children's GP's to prescribe medicine that can be taken at home in the morning and evening. As far as possible, we will only administer medicines where it would be detrimental to the child's health not to receive it during the school day. It is advisable that a child be kept at home for the first 48 hours to ensure that there are no adverse effects and to give time for the medicine to take effect.

These procedures are written in line with current guidance in 'Supporting Pupils at School with Medical Conditions 2014" and The EYFS Framework 2024. Supporting Pupils at School with Medical Conditions (Department for Education)

Form teachers or Preschool Manager/Deputy Manager/Early Years practitioners are responsible for administering medicines to children in their class/Preschool. Parental consent in writing will be required, medicines should be correctly stored and records kept of the administration. If the Form teacher/Preschool Manager is absent then a First Aider should take their place.

PROCEDURES

- Children taking medicine should be well enough to attend school.
- Prescription medicines can only be administered if they have been prescribed for the child by a doctor, dentist, nurse or pharmacist.
- All medicines need written confirmation of parents. (see below). In an emergency verbal confirmation over the phone will be accepted and the parents will be asked to confirm by e mail. The school office has a list of parents who have consented for school to administer medicines and the individual medicines are specified.
- Medicines containing aspirin can only be given if prescribed by a doctor and in no other circumstances.
- Only medication given by the parents will be administered and it must be in date and for the current condition. (Pre-School – Y6)
- Medicines will be stored in their original containers, clearly labelled and out of the reach of children or in the fridge as appropriate.
- Parents should give prior written permission for the medicine to be given. This must be signed. Letters are sent to parents stating that should their child require medication; written authorisation must be given stating the following:
    - Full name of child and date of birth
    - Name of medication and strength
    - Who prescribed it and **why it is being prescribed**
    - Dosage to be given at school
    - How medicine should be stored and the expiry date
    - Any possible side effects that may be effected
    - Signature, printed name of parent and date.

- The administration is recorded accurately each time medicine is given and is signed by staff. The medicine record states:
    - Name of child
    - Name and strength of medication if appropriate
    - The date and time of dose
    - Dose given
    - Signature of administrator
- The parents are then informed of any administration of medicine that has taken place either on the same day or as soon as is reasonably practical.

Storage of medicines

- All medication is stored safely out of the reach of children or in the fridge.
- The form teacher/Preschool staff (or First Aider if the form teacher is absent) are responsible for handing back the medicine at the end of the day.
- For some conditions medications may be kept at school. Form tutors/Preschool Manager/Deputy Manager check that any medicines held on an 'as and when' basis or on a regular basis are in date and return any out of date medicines to the parent.
- If the administration of prescribed medicines requires medical knowledge, individual training is provided for the relevant members of staff by a health professional (e.g. auto-injector training)
- Pupils may carry and self-administer medication such as asthma inhalers where this has been agreed with parents and the School and documented within the pupil's Individual Healthcare Plan (IHP). Staff should be informed where pupils are authorised to carry medication.

Children who have long term medical conditions and who may require on-going medication

- A risk assessment is carried out for each child with a long term medical condition that requires on going medication or medical intervention. This is the responsibility of the First Aiders/ Manager/Deputy Manager Other medical or social care personnel may need to be involved in a risk assessment.
- Parents may also contribute to a risk assessment. They should be shown around the school/Preschool, understand the routines and activities and point out anything that they think may be a risk factor to their child.
- For some medical conditions staff may need training in a basic understanding of the condition as well as how the medication is to be administered correctly. Training needs for staff should be part of the risk assessment.
- The risk assessment includes vigorous activities and any other school activity that may give cause for concern regarding individual health needs.
- The risk assessment includes arrangements for taking medicines on outings and the child's GP's advice is sought if necessary where there are concerns.
- A health care plan for the child is drawn up with the parent; outlining the teacher's/Preschool staff's role and what information must be shared with other staff who care for the child.
- The health care plan should include measures to be taken in an emergency.
- The health care plan should be reviewed as necessary. This includes reviewing the medication (e.g. changes to the dosage or any side effects noted etc.)
- Parents receive a copy of the health care plan and each contributor, including the parent, signs it.

Managing medicines on trips and outings

- If children with a risk assessment are going on outings, staff accompanying the children should include the form teacher/the child's key person or another member of staff who is fully informed about the child's needs and other medication.
- Medication for a child is taken on the trip and is clearly labelled with name and medication. A consent form should also be included.
- On return to the school/Preschool, these details are added to the medicine record book.
- If a child on medication has to be taken to hospital, the child's medication is taken clearly labelled with child's name and name of medication, also a consent form from parents.
- Ensure each trip has an adequate and appropriate number of first aid trained staff attending.
- Ensure each trip or outing with EYFS aged children includes a member of staff with full PFA training.

Staff Medicines at School

Staff must not be under any medication which may affect their ability to work with children. If staff are taking medication which may affect their ability to care for children, it is the responsibility of that staff member to seek medical advice and inform the Head Teacher.

It is also the responsibility of the member of staff to provide medical confirmation that the medication is unlikely to impair the staff ability to look after children. The Head teacher is then responsible to make the final decision.

Medical information is treated as **sensitive personal data under UK GDPR** and is stored securely with restricted access. Information is shared only on a need-to-know basis for safeguarding and care purposes.

Any staff medication on the premises must be kept and stored safely out of the reach of children.