



KING'S HOUSE SCHOOL

RICHMOND



FIRST AID & MEDICINES AND MEDICAL CONDITIONS MANAGEMENT POLICY

Member of staff responsible: Estates Manager/ School Nurse

Date of policy review: January 2026

Date of next review: January 2027

Approved by Governors: January 2026



This policy applies to all pupils at the school, including those in the EYFS.

OVERALL STATEMENT OF POLICY

Our policy is to ensure that Kings House School (“the School”) has sufficient trained personnel and adequate and appropriate facilities to be able to deal promptly and correctly with the accidents and sudden illnesses that inevitably occur in schools.

This policy details the School’s arrangements for:

- The provision of first aid within and outside the School environment
- The administration, storage and disposal of medicines
- Supporting pupils with medical conditions so they may have full access to all aspects of the education provided and the same opportunities as other pupils, including access to school trips and physical education.

This policy is in accordance with Health & Safety (First-Aid) Regulations 1981 and DfE Guidance on First Aid and Supporting Pupils at School with Medical Conditions.

GENERAL

All new pupils and staff are given information on where to go for help in the event of an accident, as part of their induction into the School. The School will ensure that there are sufficient first aid trained staff to meet the statutory requirements and assessed needs of the school.

There is a qualified School Nurse based in the Junior Department Medical Room who is available to administer first aid, deal with any accidents or emergencies, or to help if someone is taken ill. In addition to the School Nurse, the School also has a number of designated trained staff who are capable of giving first aid (“First Aiders”). The appropriate number of First Aiders are identified after all the relevant factors have been taken into account, including the split School site, foreseeable absences of first aid personnel and the numbers taking part in activities.

In an emergency, the School’s defibrillators may be used by any member of staff if a First Aider is not readily available.

First Aid training

First Aid training is provided by recognised competent providers. The School holds a register of all first aid trained personnel and training is refreshed as determined by the qualification.

Regular staff training on the use of epipens, inhalers and defibrillators is delivered by the School Nurse.

A list of all those trained in first aid is attached at Appendix A.



DEFINITIONS OF FIRST AIDERS

First Aider at Work

This is an individual who has completed 'First Aid at Work' training in accordance with the standards set out by the Health and Safety Executive and all are certified. This is a three day course and training is renewed every three years. At least one First Aider at Work is based in each of the Senior Department, Junior Department and Nursery. All PE teachers are trained in first aid and hold the First Aider at Work certificate.

Emergency First Aider

This is an individual who has completed 'Emergency First Aid at Work' or 'Emergency First Aid for Schools' training and is competent to give emergency aid until further help arrives. This is a one-day course and training is renewed every three years. This training is provided for an additional number of staff depending on the needs of the School. There is no legal requirement to have any personnel with this qualification.

Paediatric First Aider:

This is an individual who has completed 'Paediatric First Aid' training and is competent to give first aid, specifically but not exclusively, in the EYFS setting. This is a two-day course and training is repeated every three years.

Emergency Paediatric First Aider:

This is an individual who has completed 'Emergency Paediatric First Aid' training and is competent to give emergency aid, specifically but not exclusively, in the EYFS setting until further help arrives. This is a one-day course and training is repeated every three years. This training is provided for those members of staff working in the EYFS setting who do not hold the Paediatric First Aid qualification.

EYFS requirements

Full Paediatric first aid qualified staff are a requirement for the EYFS setting. All staff working in the Nursery and in the two reception classes of the Junior Department are trained in either 'Full Paediatric First Aid' or 'Emergency Paediatric First Aid' depending on the needs of the School.

At both our sites where the Early Years pupils are located, at least one person with a Full Paediatric First Aid qualification will always be present and at least one Full Paediatric-trained member of staff must be on all outings.

FIRST AID FACILITIES

The Junior and Senior Departments each have a separate first aid area adjacent to the front office and the Nursery uses its staff room as required. First aid equipment is kept in these areas and is administered by the School Nurse or other qualified first aid staff.



First aid containers of equipment, marked with a white cross on a green background, are located within the first aid and staff rooms in the Junior and Senior Departments, in the Staff Room at the Nursery, in the School's minibus and in the Office at the Sports Ground. Additional first aid containers are located in key areas of the School as set out in Appendix B.

First aid containers will always be taken when groups of pupils go out of School on organised trips or to participate in sporting events. These are obtained from, and returned to, the School office. Containers are personalised to take account of specific needs of those travelling when necessary.

All containers in the Junior and Senior Departments are checked and replenished on a regular basis by the School Nurse. Containers in the Nursery department and at the Sports Grounds are monitored by staff that work in those areas.

Defibrillators are located in the Nursery, Junior and Senior Departments and the Sports Ground as set out in Appendix B.

KITT Medical anaphylaxis kits are located at each of the four school sites.

FIRST AID PROCEDURES

If a pupil (or adult) is taken ill or has an accident on school premises, the School Nurse or, in her absence, a qualified First Aider, will make a decision on the seriousness of the event and the appropriate course of action. If there is any doubt about the safety of moving a casualty, the School Nurse or, in her absence, a qualified First Aider, should be called to the scene.

Any treatment needed will be given as deemed necessary to keep the casualty comfortable and to prevent any possible spread of infection. Basic hygiene procedures should be followed by staff. Single-use disposable gloves should be used at all times and staff should take care when dealing with blood or other bodily fluids and disposing of dressings or equipment. The appropriate clinical bin should be used for disposing of waste where there has been any contact with bodily fluids.

Children who are ill and need to lie down whilst waiting for parents will be supervised at all times.

Intimate Care

Where first aid treatment may involve intimate care i.e. carrying out a procedure that requires direct or indirect contact to an intimate personal area, the dignity of the casualty will be respected and where appropriate, they will be allowed to make a decision on how they would like to be assisted. Where the casualty is a pupil, depending on the age of the pupil, this may mean that the child is asked to check for injury in the privacy of the toilet; the parents may be asked to check for injury at home; or that two adults are in attendance if the School Nurse considers it necessary to check for injury immediately.



Calling an Ambulance

If an ambulance needs to be called, 999 should be rung immediately by a competent adult and Head informed. Where the casualty is a pupil, the parents should be informed as soon as possible. The condition, the treatment and the location of the casualty should be clearly stated and the instructions given by the ambulance service followed.

A member of staff should be sent to wait outside the School gates to direct the ambulance staff. If the casualty is a pupil, the School Nurse or an appropriate adult will accompany the pupil to hospital and will remain with them until the arrival of a parent or guardian.

All injuries requiring hospitalisation, including those occurring off site and over weekends, must be reported to the School Nurse. The Head, Form Teacher, Key Worker and relevant members of SMT must also be informed.

Hygiene procedures for dealing with the spillage of bodily fluids

If any spillage of bodily fluids occurs, maintenance staff should be called immediately. A medical spillage product is used to absorb the fluid and the residue is then swept up and flushed down the toilet or securely bagged and placed in the yellow clinical waste bin. Areas such as the floor and other items e.g. chairs are cleaned with appropriate disinfectant solutions. Protective gloves must be worn.

RECORDS AND REPORTING

First Aid Records

Any first aid treatment given by the School Nurse or first aiders must be documented in the pupils' first aid book kept in the medical areas of each department and include:

- Date and time of incident.
- Name and form of the injured or ill person.
- Details of the injury /illness and what first aid was given.
- Outcome of visit i.e. returned to class, sent home, hospital etc.
- Name of the School Nurse or First Aider who administered treatment.

Parents or guardians will be contacted by the School Nurse or School office if a pupil suffers anything more than a trivial injury, or if they become unwell, or if the school has any worries or concerns about their health. In the case of an injury to the head which causes concern and/or requires treatment, head injury, parents will always be informed.

Parents of children in the EYFS will be informed of any accident or injury sustained by the child on the same day or as soon as reasonably practicable, and any first aid treatment given.



Infectious illness

If an infectious illness is suspected, we will ask the parent to consult a doctor before their child returns to School. Parents are advised that if an infectious condition is confirmed, the school will adhere to exclusion guidelines as set out in the document entitled 'Guidance on infection control in schools and other childcare settings', published by Public Health England.

Head Lice

Where live head lice have been detected or the School has been notified of a case of head lice in a number of pupils, the School will inform parents of the situation. It is recommended that following the detection of live head lice, treatment is carried out before returning to School, however there is no requirement for those pupils to stay at home.

Accident Reporting

The Estates Manager must be informed if an accident occurs as a result of unsafe or faulty equipment.

All accidents that happen during any school activity, other than minor bumps and scrapes, must be reported to the Estates Manager and an accident / near miss form completed online, in the form set out Appendix C.

The member of staff in charge of the activity will report the incident as soon as possible to the School Nurse (preferably the same day). The School Nurse will be the person who completes the accident/near-miss form in the first instance. The School Nurse will inform other members of staff as relevant according to the nature and severity of the injury and/or accident.

If the injury occurs when a pupil is unsupervised, the report should be started by the first person to give treatment to the injured person.

A minor sports injury that is a standard risk of the game and does not require attention need not be reported.

In line with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR), any serious accidents that have arisen because of poor organisation, supervision, equipment or premises condition, must be reported to the Health & Safety Executive. A record will be kept of any reportable injury, disease or dangerous occurrence.

All incidents will be reviewed by the School's Health and Safety Committee in order, where possible, to minimise the likelihood of recurrence.



Injuries/Illness occurring at home

Any injury or illness occurring outside school hours (under parental care) requiring hospitalisation should be reported to the School Nurse as soon as possible, ideally before the pupil's return. This is particularly important where ongoing assessment may be required e.g. concussion.

EMERGENCY MEDICAL TREATMENT

The current Terms and Conditions for Parents allow the School to take any necessary action or provide any medical permission to a hospital if the parents/guardians cannot be contacted. In this event, due consideration would be given to any ethical or religious concerns notified by the parents to the School in advance.

PUPILS RETURNING TO SCHOOL AFTER SERIOUS INJURY OR ILLNESS

Where a pupil is returning to the School after a serious injury or illness where their mobility or health has been compromised eg they are on crutches, they are required to have a risk assessment completed before they can return to the School.

Prior to that pupil returning to the School the parent/guardian will be required to contact the School Nurse to enable the following to be discussed/explained:

- Movement between lessons
- Leaving lessons early
- Medication (particularly analgesia)
- Arrival at/Collecting from school arrangements can be discussed
- Timetable and location of lessons.
- Extent to which the pupil can join in with the practical activities in certain subjects eg PE, Science, DT.

INDEMNITY AND INSURANCE

Where an employee, acting in the course of their employment, administers first aid assistance to another employee or other person in the charge of the school, such as a pupil, they will be indemnified by the school's liability insurance for a claim of negligence relating to injury or loss caused by their action provided that:

- They are a School officially designated First Aider with a current valid first aid qualification as set out above and have attended relevant refresher training where required.
- The relevant protective equipment (PPE) is used.
- The First Aider is adhering to protocols and acting within the limitations of their training.
- The First Aider is acting in good faith.



SUPPORTING PUPILS WITH MEDICAL CONDITIONS

Most pupils will at some time have a medical condition that may affect their participation in school activities; often this will be short term. Other pupils will have longer term or permanent medical conditions that, if not properly managed, could limit their access to what the School has to offer.

Any pupil with a medical condition will be fully supported by the School. They will be afforded the same opportunities to participate in school life that all pupils enjoy.

All parents are required to complete a medical questionnaire before their child joins the School. Parents are requested to inform the school if their child's circumstances change.

Children who have serious medical needs will be highlighted to their Head, Form Teacher, Key Worker, relevant members of SMT and, where necessary, other members of staff.

Complex or long-term medical conditions

Where a child has a more complex or long-term medical condition, an Individual Health-Care Plan (IHCP) will be drawn up by the school in consultation with the parent, the child (where appropriate), and any relevant health-care professional, such as the child's GP or specialist.

An IHCP enables the school to help support any pupils with medical needs, ensuring that they are able to participate in all activities and play a full and active role in school life.

The content of an IHCP will vary according to the child's level of need-and each condition will be assessed and managed on an individual basis. Any factors that may give cause for concern regarding the child's needs, such as school routine/activities/equipment/facilities will be identified. The IHCP will include any issues surrounding the management of medication in the school setting and any measures that would need to be taken in the event of an emergency.

The IHCP will be shared with staff members as appropriate. The plan will be reviewed annually or sooner in the event of a change to any aspect of the child's care.

All medical records will be stored for the appropriate timescale, after which they will be securely destroyed.

Pupils with asthma and allergies

Parents of children with asthma are asked to complete and sign a School Asthma Card in order to obtain details about medicines, triggers and individual symptoms. Parents are asked to provide a spare inhaler to be kept in the medical room. Parents of children in the Nursery should inform staff, at the start of the school day, if their child has received any reliever medication for their asthma prior to arriving at school.



Parents of children who suffer from allergies are asked to complete and sign a care plan at the beginning of the academic year enabling the School to gain a better understanding of how a child's allergies affect them and outlining the specific steps that staff would be required to take in the event of an emergency. For those children who are prescribed Epi-pens, parents are asked to supply two Epi-pens to be kept in the medical room.

Copies of asthma and allergy care plans will be kept with the child's medication.

School staff will receive training in the management of anaphylaxis and asthma attacks during first aid training. The School Nurse can refresh staff on how to use inhalers and Epi-pens at any time during the school term and particularly before residential school trips. Written guidelines can be found in the medical areas of all Departments. Printed guidance is supplied to staff in charge of pupils on residential and day trips.

ADMINISTRATION OF MEDICINES

Parents are primarily responsible for their child's health and have a duty to provide the School with information about medical conditions.

Teaching staff are not responsible for the routine administration of medicines. Those who volunteer to administer medicine as part of their role, do so as long as they are trained where necessary.

The School Nurse and Head of Nursery are responsible for ensuring that any medication administered by authorised staff within the school setting is done so safely and appropriately.

No medicines will be administered by staff unless a 'Parental Agreement for School to Administer Prescribed Medication' form is fully completed and signed by the child's parent. The only exceptions to this relate to (i) Calpol and Anthisan (see below) and (ii); Epi-pens and asthma inhalers where parental permission will be obtained by way of signature on the child's health care plan. Copies of the parental agreement form are kept in the reception areas of the Junior and Senior Departments, the Nursery office and are also available on the School website.

Parents of children in the EYFS (Nursery and Junior Departments) who receive any medication during the day will be given a 'Record of Administered Medication' slip, which details the time/name/dose and reason for giving medicine, the same day. We will endeavour to contact parents of children in the EYFS prior to administering any non-prescribed medication.

Pupils in the Senior Department are given a 'Record of Administered Medication' slip which details the time/name/dose and reason for giving medicine, which should be handed to the parent upon returning home.

The school reserves the right to refuse to administer any medication.



Prescribed medicines

The school will only accept medicines which have been prescribed by a doctor, nurse prescriber, pharmacist prescriber or dentist. Any medicine supplied to the school must be provided in the original container as dispensed by the pharmacist and must include:

- The child's name
- The prescriber's instructions for administration
- Dosage
- Any specific storage requirements.

In the Senior Department, the onus will be on the pupil to remember to attend the medical room when their medicine is due.

Over the Counter (OTC) Medicines

In the interest of safety of both pupils and staff, the school discourages parents from bringing in OTC medicines. OTC medicines will only be given in school at the discretion of the School Nurse on the advice or direction of a suitably qualified professional, such as a doctor or pharmacist.

Any OTC medicine must be in date, supplied in its original packaging and clearly labelled with the child's name.

Non-prescription medicines will not normally be administered to children in the EYFS.

Analgesics (painkiller)

The School will supply and administer the first dose of Calpol (paracetamol) in the event of fever or aches and pains which are not resolved by simple appropriate measures, such as a drink of water/rest/ice or heat pad. Further doses will only be administered after discussion with the child's parent.

Consent for administration of the first dose is obtained by way of tick box and signature on the pupil's medical card, which parents complete at the beginning of each school year.

In the Junior Department and Nursery we will endeavour to contact the parent prior to administering any Calpol.

Aspirin will not be administered in school, unless it is prescribed by a doctor.

Anthisan (antihistamine)

The School will supply and administer the first application of Anthisan (antihistamine) in the event of a bite or sting which is not resolved by simple appropriate measures, such as splashing with water. Further doses will only be administered after discussion with the child's parent.



Consent for administration of the first application is obtained by way of tick box and signature on the pupil's medical card, which parents complete at the beginning of each School year.

STORAGE AND DISPOSAL OF MEDICINES

All medicines supplied to the School will be stored either in a locked cabinet or refrigerator in the medical room. Epipens and spare asthma inhalers are kept out of reach of pupils in the medical areas of each Department. They are not locked away in case immediate access is required.

All Epipens and asthma inhalers are stored in sealed bags which are clearly labelled with the name and form of the child for whom they have been prescribed.

The school will inform parents when a prescribed asthma medicine, antihistamine or Epipen is due to expire. The School Nurse will dispose of any out of date medication kept at School. If any medicines are not removed by the end of each term, then they will be taken to a local pharmacy to be destroyed.

STAFF MEDICATION

If staff are using medication which may affect their performance or behaviour at work then they must inform their line-manager. All staff medicines should be stored away from access to children. In the EYFS, staff must also seek medical advice if they are taking medication which may affect their ability to care for children.

SUPPORTING STAFF WITH MEDICAL CONDITIONS

Any staff member with a medical condition will be supported by the School in accordance with the procedures set out in the Employee Handbook.

SCHOOL TRIPS

For an international trip, the Trip Organiser will take a supply of Calpol, which will be administered according to this Policy. Calpol will only be administered by staff if parental consent has been given on the Trip Permission Slip signed by the pupil's parent.

All staff in charge of pupils on residential or day trips will be fully informed of any relevant medical needs of pupils prior to the trip. The School's supply of emergency medicine may be taken for those pupils for whom they have been prescribed and returned to the medical room immediately upon return.

Any additional medicines that parents wish to supply for pupils on residential trips (e.g. antihistamines, travel sickness tablets) must be provided in the original packaging, in a sealed plastic



bag clearly labelled with their child's name. Parents are also required to provide a signed note giving permission for their child to receive the medicine, indicating the circumstances under which it may be given. These medicines will be looked after by the teacher in charge and given to children to self-administer under supervision, if necessary. A record will be kept in the event of any medicine being administered.



APPENDIX A – KING’S HOUSE SCHOOL – FIRST AIDERS

A comprehensive list of First Aiders and their qualifications is available from HR or the Estates Manager



APPENDIX B – KING’S HOUSE SCHOOL – LOCATION OF FIRST AID BOXES AND DEFIBRILLATORS

SENIOR DEPARTMENT

MEDICAL ROOM
HALL
GYM
DT/ART ROOM
SCIENCE LAB 1
SCIENCE LAB 2
STAFF ROOM
KITCHEN
DINING ROOM
MINI BUSES

JUNIOR DEPARTMENT

STAFF ROOM
HALL
INSIDE PLAYGROUND DOOR
KITCHEN
LIBRARY
MEDICAL ROOM

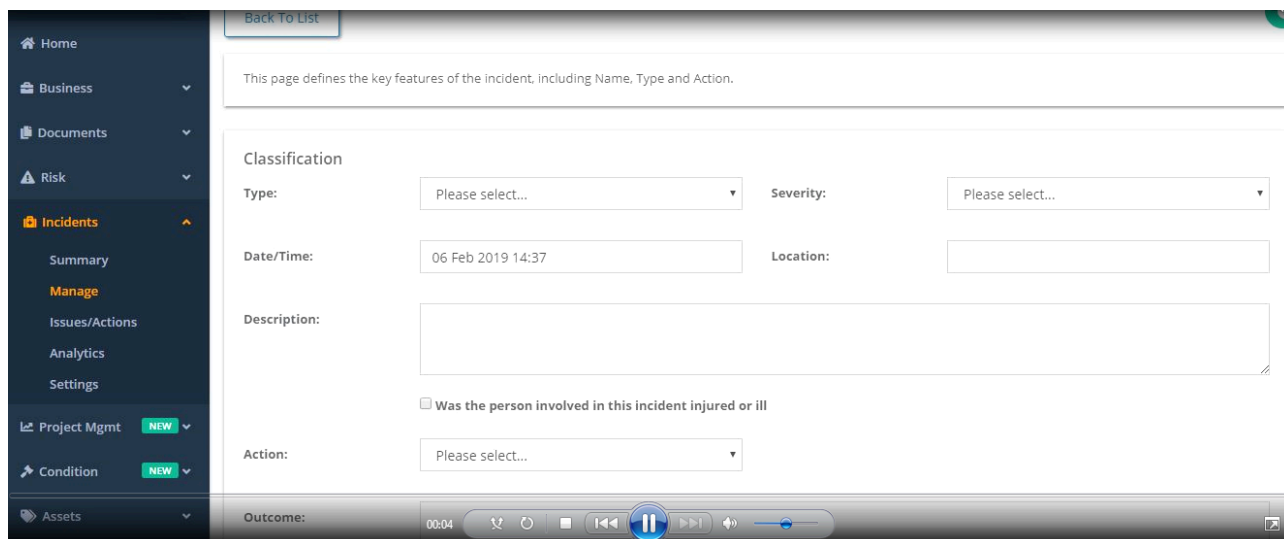
NURSERY

DOWNSTAIRS CHANGING AREA/TOILETS
UPSTAIRS CHANGING AREA/TOILETS

DEFIBRILLATORS

NURSERY - NURSERY OFFICE
JD - LOBBY/MAIN ENTRANCE
SD - LOBBY OUTSIDE DINING HALL
SPORTS GROUND - MAIN LOBBY OF CLUBHOUSE

APPENDIX C – SAMPLE ACCIDENT FORM (EXTRACT FROM ONLINE REPORTING TOOL)



The screenshot displays a web application interface for reporting incidents. On the left is a dark sidebar with navigation links: Home, Business, Documents, Risk, Incidents (highlighted), Summary, Manage, Issues/Actions, Analytics, Settings, Project Mgmt (NEW), Condition (NEW), and Assets. The main content area has a 'Back To List' button at the top left. Below it is a text box stating: 'This page defines the key features of the incident, including Name, Type and Action.' The 'Classification' section contains several fields: 'Type' and 'Severity' are dropdown menus with 'Please select...' as the placeholder; 'Date/Time' is a text box containing '06 Feb 2019 14:37'; 'Location' is an empty text box; 'Description' is a large text area; and 'Action' is a dropdown menu with 'Please select...'. There is a checkbox labeled 'Was the person involved in this incident injured or ill' which is currently unchecked. At the bottom, there is an 'Outcome:' label and a video player interface showing a progress bar at 00:04 with standard playback controls.