

First Aid and Administering Medication Policy 2025/26

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1. Introduction

Keys Group is committed to providing timely, compassionate, and effective first aid that recognises the complex medical and emotional needs of our pupils, many of whom have SEMH difficulties, ASD, or PMLD. This policy ensures compliance with statutory requirements including the Health and Safety (First Aid) Regulations 1981, RIDDOR 2013, and DfE guidance, while embedding trauma-informed and SEND-sensitive practice.

This policy outlines the responsibilities for each school within Keys Group. The appendixes provide details on how this school implements the policy in its specific context.

This policy is based on the advice from the Department for Education on first aid in schools and health and safety in schools, and the following legislation:-

- The Health and Safety (First Aid) Regulations 1981 (Revised 2013), which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel.
- The Management of Health and Safety at Work Regulations 1999 (Revised 2006), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training.

- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept.
- Social Security (Claims and Payments) Regulations 1987, which set out rules on the retention of accident records

2. Supporting Documents

This policy must be read in conjunction with:-

- Personal Protective Equipment Including Natural Rubber Latex Policy
- Infection Control and Prevention Policy
- Risk assessment policy
- RIDDOR Guidance
- Emergency First Aid policy (Keys)
- Department for Education Guidance - Supporting pupils at school with medical conditions (Dec 2015)
- Department for Education Guidance - First aid in schools, early years and further education (Feb 2022)
- Independent School Standards Part 3 (Welfare, Health and Safety of Pupils) and Part 5 (Premises and Accommodation).

3. Scope and Aims

This policy aims to:-

- To provide clear guidance on first aid responsibilities, procedures, and record-keeping across all Keys Group schools.
- To ensure all pupils, staff, visitors, and contractors receive appropriate first aid support both on-site and during off-site activities.
- To support pupils with Individual Healthcare Plans (IHPs) and emergency medication needs.
- To provide a consistent division-wide framework with appendices allowing site-specific adaptations.
- Ensure that staff and governors are aware of their responsibilities with regards to health and safety.
- Provide a framework for responding to an incident and recording and reporting the outcomes.

This policy is supported by detailed appendices which provide school-specific implementation details, templates, and procedural guidance. Staff should refer to these appendices for further information.

4. Statutory Framework

This policy draws on:-

- The Health and Safety (First Aid) Regulations 1981

- Management of Health and Safety at Work Regulations 1999
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
- DfE guidance: Supporting pupils at school with medical conditions (Dec 2015) and First aid in schools, early years and further education (Feb 2022).

5. Roles and Responsibilities

5.1 Keys Group

Keys Group has ultimate responsibility for health and safety matters in the school, but delegate's responsibility for the strategic management of such matters to the Headteacher of the schools and its leadership team, and delegates operational matters and day-to-day tasks to the leadership team and staff members.

5.2 Headteacher and the school's leadership team

- Ensure adequate first aid provision at all times. Ensure the school holds an up to date Emergency First Aid Policy and Appendix 1 – First Aid Provision Record - (HS/FORM/004A)
- Notify parents/carers of any serious injury or emergency treatment.
- Ensure sufficient numbers of qualified first aid personnel are available at all times, including during off-site visits.
- Maintain up-to-date records of first aiders' qualifications and training.
- Oversee risk assessments that inform first aid provision and equipment needs, including site-specific hazards and pupil needs.
- Ensure emergency medication and individual health plans (IHPs) are accessible, correctly stored, and regularly reviewed. The Headteacher must store medicines like inhalers or epi pens appropriately and make them available in emergencies, following DfE guidance and a completed IHP (see template in appendix 2 of the Supporting Pupils at School with Medical Conditions Policy).
- Notify parents/carers promptly of any serious injuries or treatments administered.
- Liaise with Keys Group Health and Safety Team regarding serious incidents and RIDDOR reporting.
- Ensure staff are aware of first aid procedures and trained appropriately.
- Ensuring that adequate space is available for catering to the medical needs of pupils.
- Reporting specified incidents on CPOMS.

See Appendix 2 for the current First Aider Register and Appendix 6 for Training and Competency Logs.

5.3 Appointed First Aider(s) and Appointed Person(s)

- Hold a current First Aid at Work or Emergency First Aid at Work certificate.
- Provide immediate first aid response and assess whether further medical assistance is required.

- Ensure all first aid or medication-related incidents are recorded appropriately on RADAR and accident log books where applicable.
- Establish and maintain a system for routine checks of first aid equipment to ensure items remain within expiry, are serviceable, and fit for use; ensure prompt replacement or restocking as necessary. Utilize the designated form available on RADAR HS/FORM/004C Emergency First Aid Policy Appendix 4 – Monthly First Aid Box Checks.
- Take charge when someone is injured or becomes ill.
- Maintain an adequate supply of medical materials in first aid kits, replenishing contents as needed.
- Ensure that an ambulance or other professional medical assistance is summoned when appropriate.
- Act as trained and qualified first responders to any incidents, assessing situations involving injury or illness and providing immediate and appropriate treatment.
- Send pupils home to recover, if necessary.
- Complete accident reports and CPOMS entries on the same day, or as soon as reasonably practicable, following an incident.
- Keep personal contact details up to date.
- Respond promptly to first aid incidents, provide suitable treatment, and determine if further medical support is required.
- Maintain accurate and timely records of all first aid incidents on RADAR.
- Restock and monitor first aid kits and equipment, paying close attention to expiry dates.
- Support pupils with Individual Healthcare Plans (IHPs), recognising their specific medical and emotional needs.
- Participate in refresher training annually or as required.
- Ensure first aid rooms and kits are accessible and maintained.

5.4 All Staff

School staff are responsible for:-

- Ensuring they follow first aid procedures.
- Ensuring they know who the first aiders in school are.
- Completing accident reports via RADAR and/or Arbor as a medical note - for all incidents they attend to where a first aider is not called.
- Informing the Head teacher or their manager of any specific health conditions or first aid needs.
- Be familiar with first aid procedures and know how to summon a first aider.
- Report all injuries or illnesses promptly and complete accident reports when required.
- Inform leadership of any known medical conditions or first aid needs of pupils or themselves.
- Complete an accident report via RADAR when attending a minor incident without first aider involvement. Inform the Headteacher of any health conditions or first aid needs.

6. First Aid Provision

6.1 First Aid Personnel

- A minimum of two qualified first aiders are on duty at all times.
- First aiders' names and locations are displayed prominently in reception and staffrooms.

6.2 First Aid Kits

- Main first aid kit located in the medical room. The school must have an up to date First Aid Provision Record and as a minimum there are kits available in school office, first aid rooms, kitchens, workshops/laboratories and school vehicles.
- Kits contain an inventory list that contains at least gloves, aprons, sterile dressings, bandages, plasters, antiseptic wipes, cold packs and bio-hazard bags.
- No medications (e.g., paracetamol) are stored in first aid kits; prescription medication is only administered in line with the Administration of Medication Policy.

Refer to Appendix 3 for the standard First Aid Kit Inventory and site-specific kit locations.

6.3 First Aid Room

- A dedicated medical room is available on the ground floor with washing facilities and a rest area. A same-gender member of staff must be present if a first aider treats a pupil of the opposite sex.

7. Administering Medication in School

- 7.1 Keys Group is committed to the safe, timely, and appropriate administration of medication to pupils during the school day, including prescribed and non-prescribed medicines, in accordance with individual healthcare plans (IHPs) and parental/carers consent.
- Medication administration respects pupils' dignity, confidentiality, and specific medical and emotional needs, particularly for pupils with SEMH, ASD, or PMLD.
- This policy complies with statutory guidance including the Department for Education's *Supporting Pupils at School with Medical Conditions* (Dec 2015), the Health and Safety (First Aid) Regulations 1981, and British Schools Overseas standards (August 2023).
- Administration policies reflect relevant guidance of the host country where applicable.

7.2 Roles and Responsibilities

- **Headteacher and Leadership Team**

- Ensure systems for safe storage, administration, and record-keeping of medication are in place and regularly reviewed.
- Ensure staff involved in medication administration receive appropriate training and maintain competency.
- Maintain up-to-date IHPs for pupils requiring medication, developed in consultation with parents/carers and healthcare professionals.
- Obtain and record written parent/carer consent for all medication administered in school.
- A record will be signed and dated of each weekly medication inventory check, by both the school nurse and a member of the senior leadership team, and stored securely with the medication administration records.

• **Designated Staff (First Aiders and Named Personnel)**

- Administer medication only when trained, authorised, and following the pupil's IHP and medication instructions.
- Verify pupil identity, medication details, dosage, and expiry date before administration.
- Record every instance of medication administered accurately on the school's medication record system (e.g., RADAR).
- Report any adverse reactions, errors, or concerns immediately to the Headteacher and parents/carers.

• **All Staff**

- Be aware of pupils with medical needs and medication requirements.
- Know how to summon trained staff if medication administration is needed.
- Support pupils in managing their medication responsibly where appropriate.

7.3 Storage and Security

- Medication must be stored securely in locked cabinets or fridges as required, accessible only to authorised staff.
- Emergency medication such as inhalers and epi-pens must be readily available and carried during off-site activities or trips.

- Medication must never be stored in general first aid kits.

7.4 Administration Procedures

- Medication will only be administered with clear, written consent from parents/carers and in accordance with prescriber instructions.
- Staff must confirm the pupil's identity and follow the IHP and medication label before administration. Photographs of students who require medication are stored in the medication school file to allow for clear identification alongside allergy status and emergency protocol in the event of an adverse reaction.
- Pupils capable of self-administering medication may do so, under staff supervision, following assessment of their responsibility.
- Prior to the administration of non-prescribed PRN (Pro Re Nata) medication (such as an over the counter pain relief) parents or carers must be contacted prior and consent must be obtained confirming the dose, time of last dose and any advisories.

7.5 Record Keeping

- All medication administered must be recorded on the same day, including date, time, dosage, and administering staff member.
- Records are securely stored and regularly reviewed for accuracy and compliance.
- Any missed doses or errors must be documented and reported immediately.

See Appendices 7 and 8

7.6 Training

- Staff administering medication must receive appropriate training relevant to the medication and condition, including emergency responses.
- Training records are maintained and refresher training scheduled as necessary.

7.7 Parental and Pupil Involvement

- Parents/carers must provide up-to-date information and consent regarding their child's medication needs.
- Pupils should be involved in discussions about their medication management, appropriate to their age and understanding, to encourage engagement and responsibility.

8. In-School First Aid Procedures

In the event of an emergency or accident resulting in injury:-

- The nearest available staff member will evaluate the severity of any injury and, if necessary, request assistance from a qualified first aider, who will administer appropriate first aid treatment. The first aider, upon arrival, will further assess the situation and determine whether additional support from colleagues or emergency services is required, remaining on site until help has arrived. The decision regarding movement of the injured individual or placement in the recovery position rests with the first aider.
- Should the first aider determine that a pupil is insufficiently well to remain at school, parents will be contacted and asked to collect their child; upon their arrival, the first aider will advise on recommended subsequent steps. In cases where emergency services are involved, the Headteacher—or, in their absence, the School Administrator team—will notify parents without delay.
- An accident report form will be completed by the responsible staff member on the day of the incident or as soon as reasonably practicable thereafter. For pupils requiring emergency medication, such as inhalers or epi-pens, the Headteacher will ensure proper storage and accessibility in accordance with DfE guidance, and confirm that an individual health plan (IHP) template (Appendix 2, Supporting Pupils at School with Medical Conditions Policy) is in place.
- Staff members assess injuries and, when necessary, promptly summon a first aider.
- The first aider provides care and determines whether to contact emergency services.
- In cases requiring hospitalisation, parents/carers are informed; a staff member remains with the pupil until parents arrive.
- All first aid incidents are documented on RADAR and the accident/near-miss form, saved in the shared school folder per established naming conventions.
- Serious incidents are reported to the Headteacher, who ensures compliance with RIDDOR requirements as needed.
- A minimum of two certified first aiders will be present during school operating hours. A further certified first aider will be present for every 10 pupils on site at the same time. First aid kits, maintained in accordance with statutory regulations (see Appendix 3), will be available in the medical room and all classrooms. A dedicated first aid room featuring washing facilities and a rest area will be provided.
- First aid procedures will be administered with sensitivity, upholding the dignity of pupils and adhering to trauma-informed practices. Consideration of pupil behaviour will be in alignment with SEND and Equality Act guidance throughout the provision and follow-up of first aid interventions.

9. Off-site and Educational Visits

- All off-site activities are accompanied by a qualified first aider.
- A portable first aid kit, along with essential medical information such as inhalers and epi-pens, is brought on every trip.
- Staff members ensure they have a mobile phone and access to parents' contact details at all times.

- The visit leader conducts a comprehensive risk assessment that includes all necessary first aid provisions.

When pupils are taken off school premises, staff must always carry:-

- A mobile phone.
- A portable first aid kit.
- Documentation regarding pupils' specific medical needs.
- Required emergency medications (inhalers, Epi Pens).
- Contact information for parents.

Prior to any educational visit involving pupils leaving the school grounds, the designated lead staff member will complete a risk assessment, incorporating all relevant first aid arrangements and considerations specific to individual pupils. A certified first aider will be present during all off-site trips, and portable first aid kits and required emergency medication will be available at all times. Risk assessments will also include provisions for first aid and pupil-specific requirements, ensuring staff maintain access to mobile phones and emergency contact details throughout the visit.

Refer to Appendix 6 for the Off-site First Aid Checklist and Risk Assessment Template.

10. Contents of the First Aid Kit:-

A typical first aid kit in our school will include the following:

- A leaflet with general first aid advice.
- Regular and large bandages.
- Eye pad bandages.
- Triangular bandages.
- Adhesive tape.
- Safety pins.
- Disposable gloves.
- Antiseptic wipes
- Plasters of assorted sizes.
- Scissors.
- Cold compresses.
- Burns dressings.

No medication is kept in first aid kits.

Location(s) of the First Aid Kit	Nurse's office, main office, reception, one in each area of the school.
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11. Record Keeping and Reporting

- All medical events, accidents, and near-miss incidents must be documented in RADAR on the day of occurrence.
- Physical forms related to accidents or near-misses are to be filed in the designated folder and retained for a period of no less than five years.
- Each record should include: date, time, location, description of injury, treatment administered, as well as the names of the first aider and any witnesses.
- Accidents and first aid treatment for pupils are recorded in RADAR along with incidents involving staff or visitors.
- Comprehensive details should be provided when reporting any accident.
- All first aid occurrences must be entered into RADAR on the same day they take place.
- Records must specify the date, time, location, nature of injury, treatment administered, and the names of all parties involved.

Parents or carers will be notified of all injuries and treatments without delay.

12. RIDDOR Reporting

The Headteacher will mark any potential RIDDOR reportable incident as "Potentially RIDDOR" on RADAR and notify the Health and Safety Team (Keys Group). The Headteacher must not submit the RIDDOR themselves directly to the Health and Safety Executive. Please refer to Keys RIDDOR guidance document on RADAR for further information.

Reportable injuries, diseases, or dangerous occurrences include:

- Death
- Specified injuries such as:-
 - Fractures (excluding fingers, thumbs, toes)
 - Amputations
 - Permanent or reduced loss of sight
 - Serious head or torso crush injuries
 - Serious burns or scalds
 - Scalpings needing hospital care
 - Loss of consciousness from head injury or asphyxia
 - Injuries from enclosed spaces causing hypothermia, heat illness, or requiring resuscitation/hospital stay over 24 hours
 - Absence from work for more than 7 consecutive days (excluding day of incident)
 - Non-employees taken directly to hospital from school for treatment (not including scans or diagnostic tests).

Near-miss events are incidents that do not result in injury but have the potential to do so. Examples of near-miss occurrences pertinent to educational environments include, but are not limited to:-

- The collapse or malfunction of load-bearing components in lifts and lifting equipment.
- The unintentional release of a biological agent that could cause serious illness.

- The accidental discharge or escape of substances that may lead to significant injury or health hazards.
- An electrical short circuit or overload resulting in fire or explosion.

13. Notifying Parents

The class teacher or teaching assistant will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

14. Training Requirements

- First aiders must complete an HSE-compliant course and refresh their training annually to stay qualified.
- The Headteacher schedules refresher training before certificates expire.
- All staff receive basic first aid familiarisation at induction and may choose to undertake full training.
- Familiarisation with this policy is included in staff probation.
- The school maintains a central register of trained first aiders and the validity of their certification.
- Retraining is arranged before certificates expire; if expired, the full course must be retaken before reinstatement.
- Training records are centrally managed and monitored by school leadership and Keys Group Health and Safety.

15. Supporting Children with SEND and Complex Needs

- Pupils with ongoing medical conditions have an Individual Healthcare Plan (IHP) completed in consultation with parents, medical professionals, and the Designated Safeguarding Lead (DSL).
- IHPs outline emergency medication protocols, list designated first aiders, and specify any required reasonable adjustments.
- First aiders and staff receive training on trauma-informed practices and Special Educational Needs and Disabilities (SEND) awareness.
- Adjustments are made to first aid procedures and behaviour-related sanctions in accordance with the Equality Act 2010 and SEND Code of Practice.
- Individual Healthcare Plans (IHPs) specify medical conditions, emergency procedures, and necessary adjustments.
- Collaboration among parents, healthcare professionals, and safeguarding leads is conducted to provide comprehensive support.

Individual Healthcare Plans should be completed and maintained as per the template in Appendix 4.

16. Equality Impact Statement

All relevant individuals are expected to comply with this policy and demonstrate awareness and competence regarding diversity related to race, faith, age, gender, disability, and sexual orientation. Should you or any group feel disadvantaged by this policy, please contact your line manager. Keys Group will review and address all enquiries accordingly.

17. Review

This policy is reviewed annually by the Education Director or Regional Director, or sooner, if legislation or school circumstances change.

Schools may add site-specific appendices to reflect local arrangements and contextual needs.

Appendices will be reviewed and updated as needed to reflect changes in practice or legislation.

Appendix 1: Named First Aid Coordinator and Contact Details

- Name, role, contact information of the designated first aid coordinator for the school.

Name	Role	Contact Information	Liaison Responsibilities
Catherine Smith	School nurse	nurse.lps@keys-group.co.uk	Liaison with Keys Group Health and Safety, local authority health needs officers, relevant multi-agency partners.
Michael Smyth	Site Manager	mikesmyth@keys-group.co.uk	
Anthony Saleh	Head Teacher	Anthony.saleh@keyseducation.ac.uk	
Alexandra Harvey	SENDCo	Alexandra.harvey@keyseducation.ac.uk	

Appendix 2: First Aider Register

- List of all qualified first aiders, including:-

Name	Role	Qualification type	Date of qualification	Certificate expiry date	Contact details
Sarah Jones	Assistant Head Teacher	Emergency First aid at Work	3/1/2025	3/01/2028	Sarah.jones@keyseducation.ac.uk
Michael Hussey	Deputy Head Teacher	Emergency First aid at Work	18/11/2024	18/11/2027	Michael.hussey@keyseducation.ac.uk
Janet Bower	High Level Teaching Assistant	Emergency First aid at Work	3/1/2025	03/01/2028	Janet.bower@keyseducation.ac.uk
Neil Adamson	High Level Teaching Assistant	Emergency First aid at Work	3/12/2024	03/12/2027	Neil.adamson@keyseducation.ac.uk
Lisa Bawley	High Level Teaching Assistant	Emergency First aid at Work	3/1/2025	03/01/2028	Lisa.bawley@keyseducation.ac.uk
Antoinette Ireland	High Level Teaching Assistant	Emergency First aid at Work	3/1/2025	03/01/2028	Antoinette.ireland@keyseducation.ac.uk
Irene Duffy	High Level Teaching Assistant	Emergency First aid at Work	3/1/2025	03/01/2028	Irene.duffy@keyseducation.ac.uk
Georgina Elliott	High Level Teaching Assistant	Emergency First aid at Work	30/05/2024	30/05/2027	Georgina.elliott@keyseducation.ac.uk
Alexandra Harvey	SEND Co	Emergency First aid at Work	8/10/2024	08/10/2027	Alexandra.harvey@keyseducation.ac.uk
Peter Byrne	Teaching Assistant			12/06/2027	Peter.byrne@keyseducation.ac.uk
Andrew Kirby	Teaching Assistant	Emergency First aid at Work	30/05/2024	30/05/2027	Andrew.kirby@keyseducation.ac.uk

Tracy Reynolds	Teaching Assistant			12/06/2026	Tracy.reynolds@keyseducation.ac.uk
Peter O'Neill	Teaching Assistant	Emergency First aid at Work	3/12/2024	03/12/2027	Peter.oneill@keyseducation.ac.uk
Barry McLauchlan	Teaching Assistant			12/06/2027	Barry.mclauchlan@keyseducation.ac.uk
Jennet Wooding	Teaching Assistant			12/06/2027	Jennet.wooding@keyseducation.ac.uk
Alan Parry	Teaching Assistant	Emergency First aid at Work	30/05/2024	30/05/2027	Alan.parry@keyseducation.ac.uk
Sakinah Hamid	Teaching Assistant			12/06/2026	Sakinah.hamid@keyseducation.ac.uk
Daniel Byrne	Teaching Assistant			12/06/2026	Daniel.byrne@keyseducation.ac.uk
Liam Devitt	Teaching Assistant	Emergency First aid at Work	30/05/2024	30/05/2027	Liam.devitt@keyseducation.ac.uk
Laura Ingegneri-Albrecht	Teaching Assistant	Emergency First aid at Work	3/1/2025	03/01/2028	Laura.IngegneriAlbrecht@keyseducation.ac.uk
Megan Proctor	Tutor	Emergency First aid at Work	18/11/2024	18/11/2027	Megan.proctor@keyseducation.ac.uk

Appendix 3: First Aid Kit Inventory and Locations

Detailed inventory checklist for standard first aid kits (including minimum contents).

Item	Description
Leaflet	General first aid advice
Bandages	Regular and large
Eye pad bandages	
Triangular bandages	
Adhesive tape	
Safety pins	
Disposable gloves	
Antiseptic wipes	
Plasters	Assorted sizes
Scissors	
Cold compresses	
Burns dressings	

Map or list of kit locations on site (e.g., medical room, classrooms, kitchens, vehicles):-

Procedures for monthly checks and restocking:-

Appendix 4: Individual Healthcare Plan (IHP) Example Template

Pupil Information

Pupil Name:	
Date of Birth:	
Year Group / Tutor Group:	
School:	
Date of Plan:	
Review Date:	

Medical Condition(s) and Diagnosis

- Describe the pupil's medical condition(s) and any diagnosis relevant to their healthcare needs.

Medical Needs and Impact on Education

- Outline how the condition affects the pupil's daily activities, learning, behaviour, and participation.
- Include any known triggers or factors that may exacerbate the condition.

Emergency Contact Information

Parent/Carer Name:	
Relationship to Pupil:	
Phone Number(s):	
Alternative Emergency Contact:	
Phone Number(s):	

Healthcare Professionals Involved

Name:	Role:	Contact Details:

Medication Details

Medication Name:	
Form (e.g., tablet, inhaler):	
Dosage and Frequency:	
Administration Route:	
Storage Requirements:	
Side Effects and What to Do:	
Expiry Date:	

Emergency Protocols

- Step-by-step instructions on what to do in an emergency related to the pupil's condition.
- Include signs and symptoms to watch for.
- Specify who to contact and immediate actions to take.

Reasonable Adjustments and Support

- List any adjustments needed to support the pupil's health and learning (e.g., rest breaks, access to quiet space, modified physical activity).
- Describe any adaptations to curriculum or environment.
- Include strategies for managing behaviour related to the condition, if applicable.

Roles and Responsibilities of Staff

Staff Member:	Role/Responsibility:	Contact Details:

- Specify who is responsible for administering medication, monitoring the pupil, and implementing adjustments.
- Include arrangements for training staff if necessary.

Parental Consent and Agreement

I confirm that I have provided the school with accurate information regarding my child's health needs and consent to the school administering medication and implementing this healthcare plan.

Parent/Carer Name:	
Signature:	
Date:	

I agree to inform the school immediately of any changes to my child's condition or medication.

Pupil Agreement (where appropriate)

I understand my healthcare plan and agree to follow it to help manage my health at school.

Pupil Name:	
Signature:	
Date:	

School Agreement

The school agrees to implement this Individual Healthcare Plan and ensure all relevant staff are informed and trained as necessary.

Headteacher / SENCO Name:	
Signature:	
Date:	

Appendix 5: Off-Site First Aid Checklist and Risk Assessment Template

- Pre-visit checklist including first aid staffing, kit contents, pupil medical information, emergency contacts.
- Risk assessment template covering health and safety considerations for trips.

Risk assessment

Event / activity name:		Date of activity:		Expected departure / return times:	
Staff members involved:		Student(s) involved:		Venue / location of activity:	

Activity / Area of concern i.e. what is taking place as part of this event?	Hazard(s) identified i.e. what can cause harm?	Person(s) at risk i.e. who could be harmed by the hazard?	Current risk factor rating? (high, medium, or low) i.e. determine the level of risk	Action(s) to be taken to minimise risk i.e. what action(s) can you take to lower the level of risk?	New risk factor (high, medium, or low) i.e. risk factor after action taken to minimise the risk
Medical needs / first aid required	Minor injuries – general accidents Allergic reactions (environmental, insect bites, food)	Student / staff	Medium	First aiders identified - *names to be inserted* Staff members to have completed essential first aid module training - Educare Staff members to ensure they have school mobile phone and contingency plan if there's no phone signal. First aid kit to be checked prior to departure and taken on the trip. Consider 101/999 depending on situation and inform Head Teacher / Safeguarding Lead. Staff to follow first aid and medication policy for school. Only appropriately trained and approved staff to administer specialised medication. Medical information to be checked prior to trip and any medication to be carried by appropriate	low

				<p>staff member - *identified names to be inserted with details of medical need/medication*</p> <p>Avoid known allergens where possible</p> <p>*On-site first aid provision to be identified and details provided here*</p>	
Unsteady ground / worn paths	<p>Injury /death</p> <p>Slips, trips, falls from uneven ground, mud, roots</p>	Student / staff	Medium	<p>Individual student risk assessment to be reviewed.</p> <p>Correct staff to student ratio to be put in place</p> <p>Staff to continually check surrounding area and warn student if there are any bits of equipment or area that are unsafe</p> <p>Appropriate footwear/clothing to be worn. Staff to check this prior to departure.</p> <p>Accessible route(s) to be chosen.</p> <p>Avoid unsafe terrain</p> <p>First aid provision identified.</p>	Low
Toileting/personal care needs	<p>Risk of allegations, indecent exposure</p>	Student/staff/public	Medium	<p>Personal care training undertaken by staff – via Educare module.</p> <p>Personal care plans to be followed.</p> <p>No staff member/student to be left unsupervised or alone.</p> <p>Staff to use accessible toilets, to be identified and all staff to be aware.</p> <p>PPE to be used.</p> <p>Safeguarding policy to be understood and followed.</p>	Low
Management of pupil needs / behaviours	<p>Over-stimulation / dysregulation /</p>	Student / staff	High	<p>Individual pupil risk assessment to be reviewed for student(s) involved.</p> <p>Staff to monitor student behaviours and provide early intervention to distract / redirect attention</p> <p>Staff members to speak with home for update on student wellbeing and behaviours</p> <p>Staff to ensure contingency plan is in place if student refuses to engage / return to vehicle</p>	Low/Medium – dependent on student mood

				<p>or home. Contingency plan should also consider a more safe/local venue if student is heightened – or consider cancelling trip if too heightened.</p> <p>Staff members to have school mobile phone to contact DSL/DHT/HT to provide regular updates and if student demonstrated negative behaviours or safeguarding concerns. School system to be used to record behaviours – RADAR, CPOMs, Arbor.</p> <p>Student to be prepared for trip, in advanced to be able to process the trip – including use of visuals, if necessary</p> <p>Student will be supported by staff members, who are known to them. Staff to regularly review student behaviours with regular check-ins, provide appropriate intervention as necessary to help regulate student.</p> <p>Identify suitable location for quiet place to minimise exposure to large groups and for student to retreat to if becoming overwhelmed.</p> <p>Staff trained in Team Teach to be present</p> <p>Appropriate tools (such as weighted blankets, fidget toys, etc.) to be considered and provided to support pupil emotional wellbeing and regulation.</p> <p>*Student specific information to be inserted here*</p>	
Pupil absconding	Safeguarding of young people, increased risk of injury or road traffic incident	Student	High	<p>Individual pupil risk assessment to be reviewed.</p> <p>Correct staff to pupil ratio to be in place.</p> <p>Follow school policy</p> <p>Staff to have number of Head Teacher / Deputy Head Teacher to phone as soon as they are aware of student missing</p>	Low - Medium

				Staff to ensure they take a school mobile phone and have a contingency plan for limited/no signal	
Safeguarding linked to attendance	Knowing where pupils are and whether or not they have gone home	Student	Medium	School to ensure correct attendance recorded. Staff to use sign-in app to sign in/out from school Parent/carer consent to be obtained for activity – recorded on school ARBOR system	Low
Interaction with members of the public	People without a confirmed DBS – poses a safeguarding risk. Abduction, kidnapping, safeguarding related risks	Students	High	Correct staff to student ratio to be in place. No unsupervised access given with students. Staff to make contact with school / emergency services, if necessary. Contact Head Teacher / Designated Safeguarding Lead No student/staff member left alone. Safeguarding policy to be followed	Low
Exposure to weather	Cold injury, heat injury, over exposure to weather elements	Students / staff	Medium	Weather to be checked prior to undertaking activity. Preparations to be made to ensure correct clothing equipment for the weather. Staff to consider change of venue/activity if weather is not suitable. Staff are not to undertake activity if weather / clothing is not appropriate or suitable.	Low
Pupil lost or separated from adult /group	Injury / death /anxiety / emotional dysregulation	Student	Medium	Individual pupil risk assessment to be reviewed. Correct staff to pupil ratio to be in place. Follow school policy Staff to have number of Head Teacher / Deputy Head Teacher to phone as soon as they are aware of student missing. Staff to ensure they have school mobile and back up plan in case of no/limited signal. Suitable location should be identified and known to students as a meeting location should separation happen	low

				Regular headcounts to be taken. Clear groupings – agreed before departure. Student kept away from edges.	
Road traffic accident	Injury /death	Student / staff / other road users	High	Individual pupil risk assessment to be reviewed. Correct staff to pupil ratio to be in place. Prepare student beforehand to identify risk and correct procedure for walking near road / crossing road. Cross road using appropriate pedestrian crossing. Contact emergency services, if appropriate. Ensure communication with Head Teacher / Designated Safeguarding Lead	Medium
On foot / uneven ground / water hazards	Injury / death / separated from group Drowning	Student / staff	High	Work on pre-determined foot route, avoiding major roads where possible. Supervision on pavements, roads and especially crossing of any fast roads is pre-planned Pupils briefed about hazards and behaviour required Individual pupil risk assessment to be reviewed. Correct staff to pupil ratio to be in place. Staff to risk assess any uneven or work away ground and ensure safe paths are taken. Staff to provide assistance, as necessary. Identify and plan appropriate routes to avoid dangerous sections. No planned activities near water	Medium
Location	Injury / death / separated from group	Student / staff / members of the public	High	Clear instructions to be given around safety precautions, and to not engage in climbing or physical activities; at least not without supervision and appropriate dynamic risk assessment taking place.	Low-medium

				<p>*location specific risks to be identified here, with actions to minimise risks*</p> <p>Where possible, copies of location risk assessments and public liability documents should be obtained and reviewed, prior to undertaken activity. These should be collated with school risk assessment.</p>	
School vehicle (minibus / car)	Injury / death / separated from group	Student / staff	High	<p>Individual pupil risk assessment to be reviewed.</p> <p>Correct staff to pupil ratio to be in place.</p> <p>Use of Keys Group vehicle policy to be reviewed by staff</p> <p>Vehicle to meet roadworthy standards</p> <p>Appropriate driver who has been approved as a minibus driver for the school</p> <p>Driver, supported by staff, to ensure seatbelts are used</p> <p>Care always taken in parking in suitable place for disembarkation</p> <p>Close supervision and headcounts during any breaks in journey and getting on/off minibus</p> <p>Vehicle to stop safely if behaviour escalates.</p>	Medium
External provider responsible for elements of activity	Staffing, malfunction of equipment	Students / staff	Medium	<p>Valid certification from external provider to be produced. External provider asked to produce risk assessment(s) for activity. Where appropriate, a copy of public liability from external provider to be sought and produced.</p>	Low
Programme does not meet needs of group	Injury, death, illness	Students / staff / external provider staff	Medium	<p>School to give any necessary information to external provider about age, ability, and any special needs in group.</p> <p>Programme is agreed with provider before visit, risk assessed appropriately</p>	Low
Lack of clarity – split of responsibilities between school	Illness, injury	Students / staff / external provider staff	Medium	<p>Ensure clear programme agreed and separate responsibilities for school and external provider</p>	Low

and external provider				<p>clear and that all aspects of visit, travel and activities are properly planned and risk assessed by school and external provider.</p> <p>Where school is undertaking responsibility for activities, these are to be planned and risk assessed.</p> <p>Where external provider is taking responsibility for activities, these are to be planned and risk assessed; and shared with the school for viewing.</p>	
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Pre-departure checks:

Please tick to indicate that the following actions have been completed:

- ☐ Student risk assessment has been reviewed, understood, and information shared with all staff members attending
- ☐ Student emergency form has been reviewed and is with a staff member, if required
- ☐ Weather checks completed
- ☐ Activity risk assessment details have been shared and understood by all staff members attending
- ☐ Staff members have a form of communication (e.g. mobile phone) on their person
- ☐ Staff members have school number to make contact, if needed
- ☐ School have contact number for all staff attending, if contact is needed
- ☐ Parent/carer consent gained for activity
- ☐ Public liability from external provider received and reviewed
- ☐ Risk assessments from external provider received and reviewed by all staff involved in activity
- ☐ Suitable checks of DBS for external provider received and reviewed

Name of person completing risk assessment / Trip leader:		Date/time of risk assessment completion:		Name/date of manager approving risk assessment:	
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Risk assessment review:

Date of review:	Reviewed by / trip leader identified:	Areas to review:				Have all pre-departure check been completed? (Y/N)	Risk assessment approved by:
		Changes to weather?	Changes to pupil behaviour?	Changes to route / times?	Any actions needed to minimise new risk (s)?		

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Appendix 7: Medication Administration Record Form

Pupil Name:		Date of Birth:		Year Group:	
Medication Name:		Dose:		Form:	
Prescribed By:		Start Date:		Expiry Date:	

Date	Time	Dose Given	Administered By (Name & Signature)	Notes (e.g., refusal, side effects)

- Ensure all entries are made contemporaneously and signed by the staff administering the medication.
- Report and record any incidents or adverse reactions immediately.

Appendix 8: Parental Consent for Medication Form

Pupil Name:		Date of Birth:		Year Group:	
Parent/Carer Name:		Relationship to Pupil:		Contact Number:	

Medication Details

- Name of Medication:
- Dose and Frequency:
- Administration Route:
- Special Storage Instructions (if any):
- Expiry Date:

Consent

I confirm that I have provided the school with accurate information regarding my child's medication and health needs. I consent to the administration of the above medication by trained school staff in accordance with the school's policy and Individual Healthcare Plan. I will inform the school immediately of any changes to the medication or health condition.

Parent/Carer Signature:

Date:

Pupil Consent (where appropriate)

I understand my medication needs and agree to follow the healthcare plan to manage my health at school.

Pupil Signature:

Date: