

First Aid and Administering Medication Policy 2025/26

Policy Number	ED/POL/029	Author/Reviewer	James Madine
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School	Robin's Nest School	Headteacher	Sharon Cliff
Named First Aiders	Sandra Quinn Aliah Jenderko James Cumberbatch Tamika Butler Molly Adams		

1. Introduction

Keys Group is committed to providing timely, compassionate, and effective first aid that recognises the complex medical and emotional needs of our students, 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 students 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 Students) 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 students, staff, visitors, and contractors receive appropriate first aid support both on-site and during off-site activities.
- To support students 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 students 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 student 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 Students 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 students.
- 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 students 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 students 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 CPOMS 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 students 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 student 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 students during the school day, including prescribed and non-prescribed medicines, in accordance with individual healthcare plans (IHPs) and parental/carers consent.
- Medication administration respects students' dignity, confidentiality, and specific medical and emotional needs, particularly for students with SEMH, ASD, or PMLD.
- This policy complies with statutory guidance including the Department for Education's *Supporting Students 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

- o Ensure systems for safe storage, administration, and record-keeping of medication are in place and regularly reviewed.
- o Ensure staff involved in medication administration receive appropriate training and maintain competency.
- o Maintain up-to-date IHPs for students requiring medication, developed in consultation with parents/carers and healthcare professionals.
- o Obtain and record written parental/carers consent for all medication administered in school.

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

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

- **All Staff**

- o Be aware of students with medical needs and medication requirements.
- o Know how to summon trained staff if medication administration is needed.
- o Support students 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 student's identity and follow the IHP and medication label before administration.
- Students capable of self-administering medication may do so under staff supervision, following assessment of their responsibility.

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 Student Involvement

- Parents/carers must provide up-to-date information and consent regarding their child's medication needs.
- Students 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 student 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 students 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 Students 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 student 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 students 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 students and adhering to trauma-informed practices. Consideration of student 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 students are taken off school premises, staff must always carry:-

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

Prior to any educational visit involving students 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 students. 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 student-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	
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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 students 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 student, 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

- Students 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
			Liaison with Keys Group Health and Safety, local authority health needs officers, relevant multi-agency partners.

Appendix 2: First Aider Register

- List of all qualified first aiders, including:-

Name	Role	Qualification type	Date of qualification	Certificate expiry date	Contact details

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

Student Information

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

Medical Condition(s) and Diagnosis

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

Medical Needs and Impact on Education

- Outline how the condition affects the student'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 Student:	
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 student'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 student'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:
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- Specify who is responsible for administering medication, monitoring the student, 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.

Student Agreement (where appropriate)

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

Student 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:	
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Signature:	
Date:	

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

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

Appendix 7: Medication Administration Record Form

Student 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

Student Name:		Date of Birth:		Year Group:	
Parent/Carer Name:		Relationship to Student:		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:

Student Consent (where appropriate)

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

Student Signature:

Date: