The Golden Thread Alliance

First Aid and Administering Medicines Policy

Date Reviewed	*Summer 2026*
Next Review Date	*Summer 2027*

This policy has been adopted by all schools within The Golden Thread Alliance

The Golden Thread Alliance

As united as we are different.

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Statement of Intent

The Board of Trustees believe that ensuring the health, safety and welfare of colleagues, pupils and visitors is essential to the success of The Golden Thread Alliance.

We are committed to:

- Completing a First Aid needs risk assessment for significant activities, which generally include those that:
    - Carry a higher inherent risk of injury or illness.
    - Involve a large number of participants.
    - Take place outside the usual school environment.
    - Involve the use of potentially hazardous equipment or materials.
- Providing adequate provision for first aid for pupils, colleagues and visitors.
- Ensuring that pupils and colleagues with medical needs are fully supported at The Golden Thread Alliance and suitable records of assistance required and provided are kept.
- First-aid materials, equipment and facilities are available, according to the findings of the risk assessment.
- Procedures for administering medicines and providing first aid are in place and are reviewed regularly.
- Promoting an open culture around mental health by increasing awareness, challenging stigma, and providing mental health tools and support.

We will ensure all colleagues (including supply staff) are aware of this policy and that sufficient trained colleagues are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.

We will also make sure that the Trust is appropriately insured and that colleagues are aware that they are insured to support pupils in this way.

In the event of illness, a colleague will accompany the pupil to the school office/medical room. In order to manage their medical condition effectively, the Golden Thread Alliance schools will not prevent pupils from eating, drinking or taking breaks whenever they need to.

The Trust also has a Control of Infections Policy which may also be relevant and all colleagues should be aware of.

This policy has safety as its highest priority: safety for the pupils and adults receiving first aid or medicines and safety for the adults who administer them.

This policy applies to all relevant Trust activities and is written in compliance with all current UK health and safety legislation and has been consulted with colleagues and their safety representatives (Trade Union and Health and Safety Representatives).

The Golden Thread Alliance

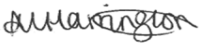
Name: _____Signature: _____
(Chair of Trustees)

Date:

Culverstone Green Primary School Headteacher

Name: Charlotte Casey Signed: C. Casey
Date: September 2026

Fleetdown Primary Academy Headteacher

Name: Alice Harrington Signed: 
Date: September 2026

Meopham Community Academy Headteacher

Name: Thomas Waterman Signed: T. Waterman
Date: September 2026

Oakfield Primary Academy Headteacher

Name: Jill Gosbee Signed: J Gosbee
Date: September 2026

The Riverview Academy Headteacher

Name: Jack Keen Signed: J. Keen
Date: September 2026

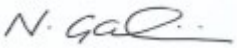
Temple Hill Primary Academy Headteacher

Name: Leon Dawson Signed: L Dawson
Date: September 2026

West Hill Primary Academy Headteacher

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Wrotham Road Primary School Headteacher

Name:_ Nicole Galinis Signed: 
Date: September 2026

Distribution of copies
Copies of the policy and any amendments will be distributed to: the Headteacher; Health and Safety Representatives; All Colleagues; Trustees and Local Governing Committee and Administration office.

2 Roles and Responsibilities

2.1 The Board of Trustees

2.1.1 The Board of Trustees has ultimate responsibility for health and safety matters - including First Aid in the Trust.

2.1.2 Provide first aid materials, equipment and facilities according to the findings of the risk assessment.

2.2 School Business Manager

2.2.1 To carry out First Aid needs assessment for the school site, review annually and/or after any significant changes.

2.2.2 Carry out an assessment of first aid needs appropriate to the circumstances of the workplace, review annually and/or after any significant changes.

2.2.3 Ensuring that an appropriate number of appointed persons and/or trained first aid personnel are present in school at all times and that their names are prominently displayed throughout the school.

2.2.4 Ensuring that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role.

2.2.5 Ensuring all colleagues are aware of first aid procedures., including supply staff and third party agencies.

2.2.6 Ensuring appropriate risk assessments are completed and appropriate measures are put in place.

2.2.7 Undertaking, or ensuring that managers undertake, risk assessments, as appropriate, and that appropriate measures are put in place.

2.2.8 Ensuring that adequate space is available for catering to the medical needs of pupils.

2.2.9 Reporting specified incidents to the Health and Safety Executive (HSE), when necessary.

2.2.10 Assist with completing accident report forms and investigations

2.3 Senior Leadership Team and First Aiders

2.3.1 The Senior Leadership Team and first aiders are responsible for:

a) Taking charge when someone is injured or becomes ill
b) Ensuring that an ambulance or other professional medical help is summoned, when appropriate
c) Assist with completing accident forms and investigations.
d) Work with the Headteacher and/or School Business Manager to determine the training needs of colleagues, including the administration of medicines.
e) Office Staff and first aider to administer first aid and medicines in line with current training and the requirements of this policy.
f) Site/Office colleague/ first aider and/or any other appointed colleagues regularly check the contents of each first aid box and any associated first aid equipment (e.g. Defibrillators, epi-pens) and ensure these meet the minimum requirements, quantity and use by dates and arrange for replacement of any first aid supplies or equipment which has been used or are out of date.
g) Notify Headteacher when going on any leave to ensure continual cover is provided during absence
h) Ensure medicine is in the right place and readily available for pupils.

2.3.2 First aiders are trained and qualified to carry out the role and are responsible for:

a) Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person and provide immediate and appropriate treatment.
b) Sending pupils home to recover, where necessary
c) Completing an accident report on the same day, or as soon as is reasonably practicable, after an incident and communicating relevant information to parents and carers through the appropriate channels e.g. Medical Tracker)
d) Escalating incidents to the School Business Manager if an incident needs an investigation.
e) Keeping their contact details up to date.

2.4 Colleagues Trained to Administer Medicines

2.4.1 Colleagues in The Golden Thread Alliance who have been trained to administer medicines must ensure that:

a) Prescribed and non-prescribed medicines are administered and the trained colleague is aware of the written parental permission outlining the type of medicine, dosage and the time the medicine needs to be given.
b) Should the school not have written consent to administer non-prescribed medication, verbal consent will be obtained over the phone from parents or carers and recorded.
c) Wherever possible, the pupil will administer their own medicine, under the supervision of a trained colleague. In cases where this is not possible, the trained colleague will administer the medicine.
d) If a child refuses to take their medication, colleagues will accept their decision and inform the parents or carers as soon as practicable.
e) Records are kept of any medication given including date, time, dose and who administered via Medical Tracker.

2.5 Other Colleagues

2.5.1 Ensuring they follow first aid procedures.

2.5.2 Ensuring they know who the first aiders in the Trust/School are and contact them straight away.

2.5.3 Completing accident reports for all incidents they attend to where a first aider is not called.

2.5.4 Informing the Headteacher/School Business Manager or their manager of any specific health conditions or first aid needs.

3 Arrangements

3.1 Employee Responsibilities and Legal Duties

3.1.1 All employees have a legal duty under Sections 7 and 8 of the Health and Safety at Work etc. Act 1974 to take reasonable care for their own health and safety and that of others who may be affected by their actions or omissions.

3.1.2 In relation to first aid, this includes a duty to:

- Act in accordance with this policy and the school's first aid procedures
- Cooperate with the school on health and safety matters, including first aid arrangements
- Use first aid equipment and facilities appropriately
- Not intentionally or recklessly interfere with or misuse first aid equipment or supplies
- Promptly report all accidents, incidents, injuries, near misses, and cases of ill health involving pupils, colleagues, or visitors, in line with school reporting procedures

Failure to comply with these requirements may result in action being taken in accordance with the school's disciplinary procedures.

3.2 First Aid Boxes

3.2.1 The first aid posts are located in:

CGPS	School Office and the playground entrance
FD	All classrooms, KS1 staffroom, main office, Nurture Room, Shellfish and KS2 Hall.
MCA	School Office and First Aid room in Pupil Support (Mobile Building)
OAK	Every classroom, hall, canteen, Care Suite and playground
RVA KS1	First aid area in the printer room, based in the office area, with an additional first aid area on playground during lunchtimes. Classrooms also have a basic first aid box.

RVA KS2	Located in the Medical Room, next to the school office. An additional first aid area is on the playground during lunchtimes. Classrooms also have a basic first aid box.
TH	First Aid boxes are in every classroom, staff room, canteen/kitchen, nursery kitchen and both halls.
WH	In the school office and canteen. There are also medical kits in every classroom.
WRPS	First Aid room, Reception, Nursery, Rainbow Room, outside Staff Room, PPA Room, Hall, First Aid Cupboard in the playground, Sunshine Hut

3.3 Medication

3.3.1 Pupils' medication is stored in:

CGPS	School office and classrooms
FD	In the office in either the medical fridge or locked cabinet
MCA	School Office and First Aid room in Pupil Support (Mobile building) and classrooms
OAK	Locked fridge and locked cupboard in the staffroom or Locked classroom furniture (where applicable) Classrooms also have a basic First Aid box
RVA	In the school office in KS2, in a locked cupboard. Classrooms also have a basic first aid box
TH	Medications such as antibiotics and paracetamol are locked in medical cupboard in main school office. Medication is also stored in a locked fridge in the main office, if it needs to be refrigerated.
WH	In the fridge in the school office or a locked drawer in the school office.
WRPS	Medications such as antibiotics and paracetamol are In the First Aid room either in a locked fridge or locked cupboard.

3.3.2 First aid equipment and emergency medication are accessible at all times during breaks, PE and off-site activities.

3.4 First Aid Needs Risk Assessment

3.4.1 Academies will ensure a first aid needs risk assessment is completed to establish if there are adequate and appropriate first aid provisions in place.

3.4.2 Academies will ensure this assessment is reviewed at least annually or when significant changes occur.

3.4.3 A sufficient number of colleagues will be trained in First Aid at Work, Emergency First Aid at Work and/or Paediatric First Aid as per the outcome of the first aid risk assessment. Refresher training will be provided as required.

3.4.4 A sufficient number of colleagues will receive specialist training as identified with the first aid needs risk assessment or as required within pupil's individual health care plans.

3.5 Early Years Requirements

3.5.1 The academy ensures first aid requirements set out in the statutory framework for early years foundation stage are in place.

3.5.2 The academy ensures enough paediatric first aiders are in place as per the academy's first aid needs risk assessment and early years requirements.

3.5.3 The academy will ensure all colleagues who obtained a level 2 or level 3 qualification on or after 30 June 2016 have either a full PFA or an emergency PFA certificate within three months of starting work to be included in the required staff to child ratios at level 2 or level 3 in an early years' setting.

3.5.4 The academy will ensure paediatric first aid training is renewed every three years.

3.6 First Aid Provision

3.6.1 In the case of a pupil accident, the procedures are as follows:

a) The colleague on duty calls for a first aider; or if the child can walk, takes them to a first aid post and calls for a first aider.
b) The first aider administers first aid and details will be recorded on Medical Tracker.
c) If the child has had a bump on the head, they must be given a "bump on the head" note, and/or a wrist band and their parents are informed by telephone or via email through Medical Tracker.
d) Full details of the accident are recorded on Medical Tracker.
e) If the child has to be taken to hospital or the injury is `work' related, then the accident is reported to the School Business Manager for a full investigation to take place.
f) If the incident is reportable under RIDDOR (Reporting of Injuries, Diseases & Dangerous Occurrences Regulations 2013), the School Business Manager will arrange for this to be done in conjunction with the Operations Director.

3.7 Life-Threatening Bleeding

3.7.1 The Trust recognises that severe bleeding can be life threatening and requires immediate and effective intervention. All designated First Aiders receive training that includes the recognition and initial management of life-threatening bleeding.

3.7.2 In the event of an accident or injury resulting in life threatening bleeding, colleagues should:

- Immediately recognise the severity of the bleeding (e.g., spurting blood, pooling blood, blood not clotting, or a limb that has been severed).
- Prioritise immediate action to control the bleeding.
- Apply direct pressure to the wound using a clean cloth or sterile dressing.
- Elevate the injured part above the heart if possible (unless contraindicated by other injuries).

- Apply a tourniquet above the wound if direct pressure and elevation are insufficient and the bleeding is from a limb, or apply a haemostatic dressing if available and trained to do so.
- Call for emergency medical services (999/112) immediately.
- Monitor the casualty's condition closely until paramedics arrive.
- Reassure the casualty and keep them warm.

3.7.3 Regular First Aid refresher training will be provided to ensure colleagues maintain the necessary expertise to confidently and effectively treat such wounds.

3.8 Injuries Caused by Chemicals and Corrosive Substances

3.8.1 Exposure to chemicals or corrosive substances can cause serious injury, particularly to the eyes, skin and respiratory system. Colleagues must be vigilant and follow established safety protocols when handling or supervising activities involving such substances.

3.8.2 In the event of an injury caused by chemicals or corrosive substances, colleagues should:

- Prioritise safety:
  - Ensure the scene is safe for both the casualty and the First Aider. If possible and safe, remove the casualty from the source of the chemical.
- Call for emergency medical services (999/112) immediately for serious exposures.

3.8.2.1 For Skin Contact:

- Immediately flush the affected area with copious amounts of cool, running water for at least 15-20 minutes.
- Remove any contaminated clothing or jewellery while flushing, taking care not to spread the chemical.
- Do not attempt to neutralise the chemical unless specifically instructed by emergency services or a qualified professional.

3.8.2.2 For Eye Contact:

- Immediately flush the eye(s) with cool, running water for at least 15-20 minutes. Hold the eyelid open to ensure water reaches all parts of the eye.
- Ensure the water flows away from the other eye if only one is affected.
- Seek immediate medical attention, even if symptoms appear mild.

3.8.2.3 For Inhalation:

- Move the casualty to fresh air immediately.
- Loosen any tight clothing around the neck and chest.
- Monitor breathing and be prepared to perform CPR if necessary and trained to do so.
- Seek immediate medical attention.

3.8.2.4 For Ingestion:

- Do NOT induce vomiting unless specifically instructed by emergency services or poison control.

- Give a small amount of water to rinse the mouth, but do not allow them to drink large amounts.
- Seek immediate medical attention.

3.8.2.5 Identify the substance:

- If safe to do so, try to identify the chemical or corrosive substance involved and provide this information to emergency services.

3.8.3 All colleagues who may come into contact with chemicals (e.g., cleaning colleagues) will receive specific training on safe handling, storage, and emergency response procedures for these substances.

3.9 Insurance Arrangements

3.9.1 The Trust and it's schools have insurance cover in place through the Risk Protection Arrangement (RPA) for Schools, which provides indemnity for claims arising from our activities, including the provision of first aid.

3.9.2 The Trust's insurance arrangements provide indemnity for employees who provide first aid or administer emergency treatment in the course of their duties, provided they act in accordance with this policy, their training, and within the scope of their role.

3.9.3 No colleague will be personally liable for the consequences of providing first aid, unless they act negligently, recklessly, or outside the limits of their training or this policy.

3.10 Educational Visits and Offsite Procedures

3.10.1 In the case of a residential visit, the residential first aider will administer First Aid. Reports will be completed in accordance with procedures at the Residential Centre.

3.10.2 In the case of day visits a trained First Aider will carry a travel kit in case of need.

3.10.3 When taking pupils off the school premises, colleagues will ensure they always have the following:

- A mobile phone
- A portable first aid kit including, minimum:
- A leaflet giving general advice on first aid
- Six individually wrapped sterile adhesive dressings
- One large sterile unmedicated dressing
- Two triangular bandages individually wrapped and preferably sterile
- Two safety pins
- Individually wrapped moist cleansing wipes
- Two pairs of disposable gloves
- Information about the specific medical needs of pupils
- Parents contact details

3.10.4 When transporting pupils using a minibus or other large vehicle, the school will make sure that the vehicle is equipped with a clearly marked first aid box containing, at a minimum:

- Ten antiseptic wipes, foil packed
- One conforming disposable bandage (not less than 7.5cm wide)
- Two triangular bandages
- One packet of 24 assorted adhesive dressings
- Three large sterile unmedicated ambulance dressings (not less than 15cm x 20cm
- Two sterile eye pads, with attachments
- 12 assorted safety pins
- One pair of rustproof blunt-ended scissors

3.10.5 The driver of the minibus will regularly check the minibus ensuring the first aid kits are fully equipped.

3.10.5 Risk assessments will be completed by the Educational Visits Co-Ordinator prior to any educational visit that necessitates taking pupils off school premises.

3.10.6 For schools with Early Years, there will always be at least one first aider with a current paediatric first aid (PFA) certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

3.10.7 For all other year groups, there will always be at least one first aider on school trips and visits.

3.11 Administering Medicines

3.11.1 Please refer to our Supporting Pupils with Medical Conditions policy.

3.11.2 Medicines will only be administered at school when it would be detrimental to a pupil's health or school attendance, not to do so.

3.11.3 Prescribed and non-prescribed medicines may be administered in school (by a colleague appropriately trained) where it is deemed essential. Most medicines can be taken outside of normal school hours. Wherever possible, the pupil will administer their own medicine, under the supervision of a colleague. In cases where this is not possible, a colleague will administer the medicine.

3.11.4 If a child refuses to take their medication, colleagues will accept their decision and inform the parents as soon as practicable.

3.11.5 In all cases, we must have written parental permission outlining the type of medicine, dosage and the time the medicine needs to be given. These forms are available in the school office.

3.11.6 Should the school not have written consent to administer non-prescribed medication, verbal consent will be obtained over the phone from parents or carers and recorded.

3.11.6 Colleagues will ensure that records are kept of any medication given. Medication, e.g for pain relief will never be administered without first checking maximum dosages and when the previous dose was taken.

3.11.7 Colleagues may bring prescribed or non-prescribed medication into the workplace for personal use and are responsible for its safe management, administration, secure storage and removal from site; all medication must be kept in its original, clearly labelled container, stored so it is not accessible to pupils, and colleagues must inform their Line Manager in confidence where a medical condition, emergency medication or foreseeable need for assistance may require a risk assessment, health plan, emergency arrangements or reasonable adjustments.

3.12 Pain Relief Protocol for the Administration of Paracetamol

3.12.1 If a request for non-prescribed pain relief is made by a pupil or colleague (advocate for a non-verbal/non-communicating pupil) then the school will ensure that the correct parental permission has been completed. In some instances (requests made before Midday), a telephone call to parents will be made to confirm that a dose of pain relief (paracetamol) was not administered before school. If a dose of pain relief has not been administered in the past four hours, the school will, with parental consent, administer one dose.

3.12.2 If the school cannot contact the parent or carer and therefore cannot confirm if pain relief was administered before school, then the school will refuse to administer pain relief.

3.13 Allergy/Hayfever Relief Protocol for the Administration of Piriton

3.13.1 If a request for piriton is made by a pupil or colleague (advocate for a non- verbal/non-communicating pupil) then the school will ensure that the correct parental permission has been completed. In some Instances (requests made before Midday), a telephone call to parents will be made to confirm that a dose of Piriton was not administered before school and ensure that the consent form on Arbor has been completed. If a dose of Piriton has not been administered in the past four hours, the school will, with parental consent, administer one dose.

3.13.2 If the school cannot contact the parent or carer and therefore cannot confirm if Piriton was administered before school, then the school will refuse to administer the medication.

3.14 Storage and Disposal of Medicines

3.14.1 Wherever possible, pupils will be allowed to carry their own medicines/ relevant devices or will be able to access their medicines in the school office for self- medication, quickly and easily. Pupils' medication such as Asthma pumps and epi- pens are kept with the child and will not be locked away out of the pupil's access; this is especially important on school trips. It is the responsibility of the school to return medicines that are no longer required, to the parent or carer for safe disposal.

3.14.2 Additional asthma inhalers/Epi-pens will be held by the school for emergency use, as per the Department of Health's protocol.

3.14.3 Medicines will be returned to parents and carers to arrange for safe disposal when no longer required.

3.15 Accidents/Illnesses requiring Hospital Treatment

3.15.1 If a pupil has an incident, which requires urgent or non-urgent hospital treatment, the school will be responsible for calling an ambulance in order for the pupil to receive treatment. When an ambulance has been arranged, a colleague will stay with the pupil until the parent arrives, or accompany a child taken to hospital by ambulance, if required.

3.15.2 Parents will then be informed and arrangements made regarding where they should meet their child. It is vital therefore, that parents provide the school with up-to-date contact names and telephone numbers.

3.16 Allergies

3.16.1 Allergy is the response of the body's immune system to normally harmless substances, such as foods, pollen, and house dust mites. Whilst these substances (allergens) may not cause any problems in most people, in allergic individuals their immune system identifies them as a 'threat' and produces an inappropriate response. This can be relatively minor, such as localised itching, but it can be much more severe causing anaphylaxis which can lead to upper respiratory obstruction and collapse. Common triggers are nuts and other foods, venom (bee and wasp stings), drugs, latex and hair dye. Symptoms often appear quickly and the 'first line' emergency treatment for anaphylaxis is adrenaline which is administered with an Adrenaline Auto-Injector (AAI).

3.16.2 Arrangements are in place for whole-school awareness training on allergies.

3.16.3 Allergy Awareness is covered in depth in the Allergy Awareness policy that supports this First Aid & Administration of Medicines policy.

3.16.4 In the event of suspected anaphylaxis, the emergency procedures with within this policy apply in conjunction with the Allergy Awareness Policy and the pupil's Individual Healthcare Plan.

3.16.5 A review of allergy related first aid incident and near misses are carried out via investigations on Medical Tracker and within the Health and Safety reports which are provided to Local Governing Committees, three times a year.

3.16.6 Schools will ensure that emergency allergy medication, including Adrenaline Auto-Injectors (AAIs), is readily available during the school day and that arrangements for storage, accessibility and administration are detailed within the Allergy Awareness Policy.

3.17 Defibrillators

3.17.1 Defibrillators are available within the school as part of the first aid equipment. First aiders are trained in the use of defibrillators.

3.17.2 The local NHS ambulance service have been notified of their location.

3.17.3 Procedures are in place to maintain the equipment in accordance with manufacturers recommendations.

3.17.4 The equipment is regularly checked by School Business Manager/Site Manager on their termly walks.

3.18 Pupils with Special Medical Needs – Individual Healthcare Plans (IHP) and Health and Care (EHC) Plans

3.18.1 Please refer to our Supporting Pupils with Medical Conditions Policy.

3.19 Emergency Procedures

3.19.1 Colleagues will follow the school's normal emergency procedures (for example, calling 999)

3.19.2 Each pupil's IHP will clearly set out what constitutes an emergency and will explain what to do, including ensuring that all relevant colleagues are aware of emergency symptoms and procedures.

3.19.3 If a pupil needs to be taken to hospital, colleagues will stay with the pupil until the parent arrives or accompany the pupil to hospital by ambulance.

3.20 Accident Recording and Reporting

3.20.1 First aid and accident records:

a) A Medical Tracker entry will be completed by the relevant colleague on the same day or as soon as possible after an incident resulting in an injury. An email will be sent to parents notifying them.
b) As much detail as possible should be supplied when completing the accident form – which must be completed fully.
c) A copy of the accident report form will remain on the pupil's Medical Tracker profile.
d) Records held in the first aid and accident book will be retained by the school until the pupil reaches the age of 21, in line with our Data Retention Policy.

3.20.2 Reporting to the HSE (Health and Safety Executive):

a) The Operations Director will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).
b) The School Business Manager will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 15 days of the incident. Reportable injuries, diseases or dangerous occurrences include:
    - Death
    - Specified injuries, which are:
        - Fractures, other than to fingers, thumbs and toes
        - Amputations
        - Any injury likely to lead to permanent loss of sight or reduction in sight

    - Any crush injury to the head or torso causing damage to the brain or internal organs
    - Serious burns (including scalding)
    - Any scalping requiring hospital treatment
    - Any loss of consciousness caused by head injury or asphyxia
    - Any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness, or requires resuscitation or admittance to hospital for more than 24 hours
    - Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident).
- Where an accident leads to someone being taken to hospital
- Near-miss events that do not result in an injury, but could have done. Examples of near-miss events include, but are not limited to:
    - The collapse or failure of load-bearing parts of lifts and lifting equipment.
    - The accidental release of a biological agent likely to cause severe human illness.
    - The accidental release or escape of any substance that may cause a serious injury or damage to health.
    - An electrical short circuit or overload causing a fire or explosion.

c) Information on how to make a RIDDOR report is available here: http://www.hse.gov.uk/riddor/report.htm

3.20.3 Notifying parents and carers:

The first aider who has administered the first aid check will inform parents and carers of any accident or injury sustained by the pupil via Medical Tracker notifications, and any first aid treatment given, or if the pupil refused to have first aid assistance, the same day.

3.20.4 Reporting to Ofsted and child protection agencies

a) The Headteacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care within the nursery setting. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident. These will include the following incidents:

- anything that requires resuscitation
- admittance to hospital for more than 24 hours
- a broken bone or fracture
- dislocation of any major joint, such as the shoulder, knee, hip or elbow
- any loss of consciousness
- severe breathing difficulties, including asphyxia
- anything leading to hypothermia or heat-induced illness

3.20.5 The Headteacher will also notify the Chief Executive Officer and the Board of Trustees of any serious accident or injury to, or the death of, a pupil while in the school's care.

4 Conclusions

4.1 This First Aid and Medicine policy reflects The Golden Thread Alliance's serious intent to accept its responsibilities in all matters relating to management of first aid and the administration of medicines. The clear lines of responsibility and organisation describe the arrangements which are in place to implement all aspects of this policy.

4.2 The storage, organisation and administration of first aid and medicines provision is taken very seriously. The Golden Thread Alliance carries out regular reviews to check the systems in place meet the objectives of this policy.

Appendix 1 - Contacting Emergency Services

Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information:

1. Your telephone number:

   _____

2. Give your location as follows *(insert academy address)*

   _____

   _____

   _____

3. State that the postcode is:

   _____

4. Give exact location in the academy (insert brief description)

   _____

   _____

   _____

5. Give your name: _____

6. Give name of child and a brief description of child's symptoms

   _____

   _____

   _____

7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to the casualty

Speak clearly and slowly and be ready to repeat information if asked

Put a completed copy of this form by the telephone.

Appendix 2 – Parental and Carer Agreement for Academy to Administer Medicine

The school will not give your child medicine unless you complete and sign this form.

Date for review to be initiated by	
Name of school	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine *(as described on the container)*	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – Y/N	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	[agreed colleague]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) Date

Appendix 3 – Record of regular medicine administered to an individual child

The Golden Thread Alliance

Parent or Carer Authorisation

Name of child _____

Date of medicine provided by parent _____/_____/_____

Group/class/form _____

Name and strength of medicine _____

Quantity returned home and date _____

Dose and time medicine to be given_____

Colleague signature _____

Signature of parent _____

Further Guidance

Further guidance can be obtained from organisations such as the Health and Safety Executive (HSE) or Judicium Education. The H&S lead in the school/academy will keep under review to ensure links are current.

- HSE
  https://www.hse.gov.uk/
- The Health and Safety (First-Aid) Regulations 1981
  https://www.legislation.gov.uk/uksi/1981/917/regulation/3/made
- Department for Education and Skills www.dfes.gov.uk
- Department of Health www.dh.gov.uk
- Disability Rights Commission (DRC) www.drc.org.uk
- Health Education Trust https://healtheducationtrust.org.uk/
- Council for Disabled Children www.ncb.org.uk/cdc
- Contact a Family www.cafamily.org.uk

Resources for Specific Conditions

- Allergy UK https://www.allergyuk.org/
- https://www.allergyuk.org/information-and-advice/for-school/academys
- The Anaphylaxis Campaign www.anaphylaxis.org.uk
- SHINE - Spina Bifida and Hydrocephalus www.shinecharity.org.uk
- Asthma UK (formerly the National Asthma Campaign) www.asthma.org.uk
- Cystic Fibrosis Trust www.cftrust.org.uk
- Diabetes UK www.diabetes.org.uk
- Epilepsy Action www.epilepsy.org.uk
- National Society for Epilepsy www.epilepsysociety.org.uk
- Hyperactive Children's Support Group www.hacsg.org.uk
- MENCAP www.mencap.org.uk
- National Eczema Society www.eczema.org
- Psoriasis Association www.psoriasis-association.org.uk/

The Golden Thread Alliance

As united as we are different.

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