Hummersea Primary School

Administering Medicines &

First Aid Policy

September 2026

1. Purpose and Audience

This policy is for school staff, parents and carers, pupils and governors. It sets out Hummersea Primary School's arrangements for supporting pupils with medical conditions, administering medicines and providing first aid. The school's statutory allergy safety arrangements are set out in the separate Hummersea Allergy Safety Policy.

The school aims to ensure that pupils with medical conditions are properly supported so that they can access education, school visits, physical education, enrichment and wider school life as fully and safely as possible.

2. Legal Framework and Guidance

This policy has regard to current legislation and national guidance, including:

- Section 100 of the Children and Families Act 2014.
- DfE statutory guidance: Supporting pupils at school with medical conditions (current statutory guidance until replaced).
- Health and Safety at Work etc. Act 1974 and the Health and Safety (First-Aid) Regulations 1981.
- School Premises (England) Regulations 2012.
- Human Medicines Regulations 2012, as amended, including provisions for emergency salbutamol inhalers and spare adrenaline auto-injectors in schools.
- Equality Act 2010 and the SEND Code of Practice: 0 to 25 years.
- Early Years Foundation Stage statutory framework, including paediatric first aid requirements for Reception-age children.
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR), where applicable.
- DfE guidance: First aid in schools, early years and further education; Emergency asthma inhalers for use in schools; and Automated External Defibrillators (AEDs) guidance for schools.
- Keeping Children Safe in Education 2026.
- For statutory allergy safety legislation and guidance, see the separate Hummersea Allergy Safety Policy.

The school will review this policy at least annually and sooner following significant changes to guidance or a serious medical incident.

3. Values and Principles

Hummersea Primary School will support pupils in a way that promotes safety, dignity, inclusion and independence. Reasonable adjustments will be made where required and pupils will not be disadvantaged because of a medical condition or allergy.

Equality	Pupils are treated fairly and reasonable adjustments are made where required.
Respect	Pupils are treated with dignity and their views are listened to.
Needs-focused	Support is based on the individual pupil's needs and available clinical advice.
Inclusion	Medical conditions and allergies should not create unnecessary barriers to learning, trips, clubs or wider school life.
Safety	Emergency medicines and first aid equipment are accessible, checked and ready for use.

4. Roles and Responsibilities

4.1 Governing Body

- Ensure arrangements are in place to support pupils with medical conditions and that this policy is implemented effectively. Allergy safety is governed by the separate Hummersea Allergy Safety Policy.
- Ensure sufficient staff are suitably trained and competent for the responsibilities they undertake.
- Ensure written records are kept of medicines administered and that appropriate insurance or risk cover is in place.
- Monitor medical support and first aid as part of the school's wider safeguarding, health and safety and inclusion responsibilities.

4.2 Headteacher

- Has overall responsibility for implementation of this policy. The Headteacher's allergy safety responsibilities are set out separately in the Hummersea Allergy Safety Policy.
- Ensures staff are aware of pupils' medical needs on a need-to-know basis and that appropriate cover arrangements are in place.

- Ensures Individual Healthcare Plans (IHPs) are developed, implemented and reviewed.
- Ensures appropriate first aid and medicines training is available and training records are maintained. Allergy training is addressed in the separate Allergy Safety Policy.
- Ensures serious medical incidents are recorded, reported, reviewed and used to improve practice.

4.3 Medical and First Aid Equipment Leads - Miss K Rose and Mrs E Muscroft

Miss K Rose and Mrs E Muscroft have joint operational responsibility for checking and maintaining the school's first aid and emergency medical equipment. Either member of staff may complete a scheduled check, with the other providing cover during absence.

- First aid supplies: check first aid stations and travelling kits regularly and at least monthly, and after significant use; replace used, damaged or expired items promptly and ensure supplies remain appropriate to the school's first aid needs assessment.
- Pupil inhalers and adrenaline devices: check at least monthly and at the start of each term that medicines held by school are present, clearly labelled where appropriate, accessible and in date; notify parents in good time where replacement prescribed medicines or devices are needed. Adrenaline device arrangements must also follow the separate Hummersea Allergy Safety Policy.
- Emergency salbutamol inhaler and spare adrenaline auto-injectors (AAIs): check at least monthly that emergency devices are present, in date, stored correctly and accompanied by required spacers/instructions and any relevant consent arrangements. Detailed spare AAI requirements are set out in the separate Hummersea Allergy Safety Policy.
- Defibrillator (AED): carry out and record a visual readiness check every two weeks, including the device status indicator, cabinet/access, pad and battery expiry and any manufacturer alerts. Additional monthly or annual checks will be completed where required by the manufacturer's instructions.
- Maintain a simple written or electronic checking record showing the date, item checked, any action required and who completed the check.
- Escalate shortages, expired items, faults or inaccessible equipment immediately to the Headteacher and arrange prompt replacement.

4.4 School Staff

- Know how to obtain first aid help and how to respond when a pupil with a medical condition needs assistance. Staff must also follow the separate Allergy Safety Policy where relevant.
- Follow relevant Individual Healthcare Plans (IHPs) and Asthma Action Plans for pupils they supervise. Allergy Action Plans are addressed through the separate Allergy Safety Policy.
- Undertake required training and only carry out healthcare procedures for which they have appropriate training and competence.
- Ensure emergency medicines such as inhalers and adrenaline devices remain rapidly accessible and are not locked away.
- Record medicines administered and report medical and first aid incidents in accordance with school procedures. Allergy incidents are reported in line with the separate Allergy Safety Policy.
- Take account of pupils' medical needs in teaching, physical activity, food-related activities, trips and enrichment.

4.5 Parents and Carers

- Provide accurate, current information about their child's medical needs, medicines and emergency contacts. Allergy information should be provided in accordance with the separate Allergy Safety Policy.
- Provide prescribed medicines/devices in date and as agreed with the school and notify school promptly of changes.
- Participate in the development and review of IHPs and provide current Asthma Action Plans where available. Allergy Action Plans are covered by the separate Allergy Safety Policy.
- Provide written consent for routine administration of medicines and, where relevant, use of the school's emergency salbutamol inhaler.

4.6 Pupils

Pupils will be involved in decisions about their medical support according to age, maturity and understanding. Pupils who are competent to self-manage medicines or devices will be encouraged to do so, with suitable supervision and safeguards.

5. Notification of Medical Conditions and Individual Healthcare Plans

Parents or healthcare professionals should notify the school of a new diagnosis, a change in need, planned admission, transfer or return following a period of illness. The school will make every effort to put suitable

arrangements in place by the start of the relevant term or within two weeks of notification where a need arises during term.

An IHP will be used where a pupil's medical condition requires arrangements that are additional to or different from those generally available. Plans will be developed with the pupil and parent/carer and will take account of relevant healthcare advice. Allergy-specific IHP arrangements are set out in the separate Allergy Safety Policy.

- The condition, triggers, signs, symptoms and treatment.
- Medication, dose, storage and access arrangements.
- Educational, social and emotional support and reasonable adjustments.
- Emergency procedures and who is responsible.
- Staff training and competency requirements.
- Arrangements for trips, sport and off-site activities.

IHPs will be reviewed at least annually and sooner when a pupil's needs change or following a relevant serious medical incident.

6. Training

- All new staff will be made aware of this policy and emergency arrangements through induction.
- Staff undertaking specific healthcare procedures will receive appropriate training and, where required, confirmation of competence from a relevant healthcare professional.
- Allergy awareness and emergency response training requirements for staff are set out in the separate Hummersea Allergy Safety Policy.
- First aid qualifications will be monitored so that sufficient trained staff are available at all times. At least one person with a current full paediatric first aid certificate will be available when EYFS children are present and will accompany EYFS children on outings.
- Annual first aid refresher training is encouraged for designated first aiders, with formal requalification completed before certificates expire.

7. Administering and Managing Medicines

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

- Written parental consent is required before prescription or non-prescription medicine is administered to a pupil under 16, except in the limited exceptional circumstances recognised in statutory guidance.
- The school will only accept prescribed medicines that are in date, labelled, in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. Insulin may be supplied in a pen or pump.
- Where clinically possible, medicines should be prescribed in dose frequencies that allow them to be taken outside school hours.
- Non-prescription pain relief (for example paracetamol) will be administered where the school has written parental consent and has checked the maximum dose and time of the previous dose. Aspirin will never be given to a pupil under 16 unless prescribed by a doctor.
- All medicines will be stored safely. Emergency medicines and devices, including inhalers, glucose testing equipment and adrenaline devices, will remain immediately accessible and will not be locked away.
- Controlled drugs will be stored securely in the medicine cabinet in the school office or locked box in the fridge, with access limited to named staff, while remaining accessible in an emergency. A record of quantities and doses will be maintained.
- Medicines no longer required or expired will be returned to parents/carers for safe disposal. Sharps will be disposed of in an appropriate sharps container.
- If a pupil refuses medicine or a healthcare procedure, staff will not force them. The agreed IHP procedure will be followed and parents/carers informed.

7.1 Records of Medicines Administered

A written record will be kept of all medicines administered, including the pupil's name, medicine, dose, method, date/time and member of staff administering or supervising it. Any refusal, error, side effect or concern will also be recorded and escalated as appropriate.

8. First Aid Arrangements

The school's first aid provision will be informed by a first aid needs assessment covering employees, pupils, visitors, the premises, activities and off-site provision.

- Suitable first aid equipment will be available and accessible at all times, including during off-site school activities.
- The school will maintain sufficient appropriately trained first aiders and contingency cover.
- Staff, pupils and visitors will be informed how to obtain first aid assistance and where equipment is located.
- All incidents requiring first aid attendance will be recorded. Records will include the date, time and place, name of the injured/ill person, injury or illness, first aid given, outcome and the name/signature of the person dealing with the incident.
- Parents/carers will be informed promptly where an injury or illness is more than very minor, where further monitoring is needed, or where emergency or medical assessment is recommended.
- Head injuries will be recorded and parents/carers informed with clear advice about monitoring and seeking medical help where required.
- Reportable incidents will be notified under RIDDOR where the statutory criteria are met.

8.1 Defibrillator (AED)

The school has an automated external defibrillator as part of its emergency first aid equipment. The AED must remain readily accessible. In a suspected cardiac arrest, staff should call 999, begin CPR and use the AED as soon as it is available, following the device and emergency service instructions. No formal AED training is required to use a modern device, although CPR/AED awareness forms part of the school's emergency preparedness.

Miss K Rose and Mrs E Muscroft will ensure the AED is visually checked and recorded every two weeks and that pads, battery/Pad-Pak and other consumables are replaced in accordance with manufacturer instructions and expiry dates.

9. Allergy Safety

Hummersea Primary School has a separate Allergy Safety Policy which contains the school's statutory allergy safety arrangements, including identification and individual plans, allergen risk reduction, staff training, prescribed and spare adrenaline devices, emergency response to anaphylaxis, trips and visits, and the recording and review of serious incidents and near misses. Staff must follow that policy alongside any relevant IHP or Allergy Action Plan.

10. Asthma

- Pupils with asthma should have a current Asthma Action Plan/Care Plan and their own reliever inhaler available at school.
- Pupils who are able to self-manage should be supported to carry their inhaler; otherwise it must be immediately accessible in the clearly designated area within the classroom and not locked away.
- The school's emergency salbutamol inhaler may only be used in accordance with national guidance, including for a pupil who has been prescribed a reliever inhaler and where the pupil's own inhaler is unavailable, and where written parental consent has been obtained.
- In an asthma attack, follow the pupil's action plan and current emergency asthma guidance. Call 999 where symptoms are severe, the pupil is exhausted/collapsing/blue, there is no effective relief, or there is any doubt about the severity.
- Where sudden breathing difficulty may be linked to allergy or anaphylaxis, staff must follow the separate Hummersea Allergy Safety Policy without delay.

11. Epilepsy and Seizures

Pupils with epilepsy or another seizure condition will have an IHP where required. Staff will follow the pupil's plan and emergency medication protocol.

- Protect the pupil from injury, cushion the head, do not restrain them and do not put anything in their mouth.
- Time the seizure and monitor breathing.
- Place the pupil in the recovery position once the seizure has stopped if appropriate.
- Call 999 for a first seizure, a seizure lasting five minutes or longer (unless the pupil's emergency plan states otherwise), repeated seizures without recovery, breathing difficulty, serious injury, or where staff are otherwise concerned.
- Parents/carers will be informed. Whether the pupil goes home will depend on the pupil's recovery, IHP and clinical advice rather than an automatic requirement to leave school.

12. School Trips, Residential Visits and Sporting Activities

- Pupils with medical conditions will be supported to participate as fully as possible, with reasonable adjustments where needed. Allergy-specific arrangements are set out in the separate Allergy Safety Policy.

- The visit risk assessment will consider the pupil's medical needs, emergency arrangements, trained staff, access to medicines/devices and emergency services.
- Suitable first aid provision will accompany off-site activities.

13. Monitoring

Any concerns around this policy should normally be raised with the Headteacher in the first instance and may be pursued through the school's Complaints Policy.

This policy will be reviewed annually by the Headteacher and governing body, and sooner where guidance changes or learning from incidents indicates that arrangements should be improved.

Appendix 1 - Individual Healthcare Plan Template

Child's Information

Child's name	
Class/year group	
Date of birth	
Address	
Medical diagnosis/condition	
Date plan agreed	
Review date	

Family Contact Information

Name	
Relationship to child	
Phone number	
Alternative contact	
Alternative phone number	

Clinic / Hospital / GP Contact

Clinic/hospital contact	
Phone number	
GP name	
Phone number	

Describe medical needs and give details of symptoms, triggers, signs, treatments, facilities, equipment/devices and environmental issues.

Medication: name, dose, method, timing, side effects, contraindications, storage and self-administration arrangements.

Daily care requirements.

Specific support for educational, social and emotional needs and any reasonable adjustments.

Where allergy is relevant, cross-reference the pupil's current Allergy Action Plan and the separate Hummersea Allergy Safety Policy.

Arrangements for school visits/trips/sport.

What constitutes an emergency and the action to take.

Who is responsible in an emergency (including off-site activities).

Plan developed with.

Staff training needed/undertaken - who, what, when.

Who the plan is shared with.

Appendix 2 - Asthma Care Plan

Where a healthcare professional has provided an Asthma Action Plan, the school should use or attach that plan. This school form may be used to record practical school arrangements.

Child's name	
Date of birth	
Class	
Parent/carer contact	
Alternative contact	
Type/name of reliever inhaler	
Usual dose in an attack	
Spacer required?	
Can pupil self-administer?	
Exercise/pre-exercise arrangements	
Other asthma medication relevant to school	
Known triggers	
Location of pupil's own inhaler	
Expiry date of inhaler	
Written consent for emergency school inhaler (Yes/No)	

Parent/carer signature: _____ Date: _____

Review date: _____

Appendix 3 - Parental Agreement for School to Administer Medicine

Name of child	
Date of birth	
Class	
Medical condition/illness	
Name/type of medicine	
Date dispensed	
Expiry date	
Dosage and method	
Times required	
Special precautions/storage	
Side effects school needs to know about	
Self-administration arrangements	
Emergency procedure	
Emergency contact name	
Relationship	
Telephone number	

I understand that the school will administer medicine in accordance with its policy and the information provided above. I will notify the school in writing of any change.

Parent/carer signature: _____ Date: _____

Appendix 4 - Emergency Procedures

Anaphylaxis

- For recognition and emergency response to allergic reactions and anaphylaxis, staff must follow the separate Hummersea Allergy Safety Policy and the pupil's current IHP/Allergy Action Plan. In a suspected anaphylactic emergency, call 999 and follow the school's allergy emergency procedure without delay.

Asthma Attack

- Keep the pupil calm and sitting upright.
- Help the pupil use their reliever inhaler and spacer in accordance with their Asthma Action Plan/current emergency asthma guidance.
- Call 999 if symptoms are severe, the pupil is exhausted/collapsing/turning blue, there is no effective relief, or there is any doubt.
- If sudden breathing difficulty may be related to allergy/anaphylaxis, follow the separate Hummersea Allergy Safety Policy immediately.

Seizure

- Protect from injury, cushion the head and remove nearby hazards.
- Do not restrain and do not put anything in the mouth.
- Time the seizure and monitor breathing.
- Follow the pupil's IHP/emergency medication plan.
- Call 999 where the seizure lasts five minutes or longer (unless the individual plan directs otherwise), seizures repeat without recovery, it is the first seizure, there is breathing difficulty or significant injury, or staff are concerned.
- Place in the recovery position after the seizure if appropriate and remain with the pupil.

Appendix 5 - Procedure when notified of a pupil's medical condition