

EASTGATE ACADEMYFirst Aid Annexe

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Appendix 1: local first aid procedures

These procedures for First Aid and Medical treatment at Eastgate Academy form part of the Eastern Multi-Academy Trust First Aid and Medical Policy

1. First Aid Procedure

- 1.1 This procedure forms part of, and should be read in conjunction with, the First Aid Policy. It is designed to confirm how the Trust will address the responsibilities regarding the administration of first aid to staff, pupils and visitors.
- 1.2 All organisations, including educational establishments, should ensure their procedures and arrangements reflect an assessment of the need. The procedures should cover first aid personnel, equipment and practices and be designed in accord with the legal standards and good practice.
- 1.3 The First Aid Coordinator in conjunction with the Principal is responsible for determining the actual provision required at their respective establishments, with the appropriate manager responsible where additional needs relevant to their specific operation exist.
- 1.4 The Trust has determined that each Academy will have at least one trained Mental Health First Aider to support students. The name of the Mental Health First Aider will be added to the list of first aiders.

2. Assessment of Need

- 2.1 The First Aid Coordinator in conjunction with the Principal has undertaken an assessment of the first aid need to determine a provision which is suitable and sufficient in line with the Policy.
- 2.2 Following the assessment, it has been determined that the Academy needs a minimum of 6 full first aid qualified staff and additionally a number of appointed persons.
- 2.3 Departmental managers should determine any additional personnel, equipment and facilities required using the same approach, for example, specific first aid provision should form part of the arrangements for offsite work and educational visits.

3. First Aid Provision

3.1 The First Aid Co-ordinator is the Operations Officer and is located in the School Office. A First Aid treatment room is site in the Toilet Corridor and is available for person who require such a facility.

4. First Aid Rooms

- 4.1 The site has a room available for first aid, which will;
- be adequately stocked with first aid equipment
- · be accessible to stretchers
- · be clearly sign-posted
- be provided with a chair, a desk and necessary equipment and a telephone
- have washable surfaces and adequate heating, ventilation and lighting
- · be kept clean, tidy, accessible and available for use at all times when staff and students are on site
- be positioned as near as possible to the point of access for transport to hospital
- display a notice in the room advising of the names, locations, and, if appropriate telephone extensions
 of first aiders and how to contact them

The designated person must check all first aid equipment is in date and stocks replenished.

- 4.2 The first aid room will be provided with or have ready access to the following;
- · a sink with hot and cold running water
- toilet facilities
- · drinking water and disposable cups
- · soap and paper towels
- foot operated refuse containers lined with disposable yellow clinical waste bags, or a container suitable for the safe disposal of clinical waste
- blankets.

5. Equipment

- 5.1 Suitable and sufficient equipment will be provided, based on an assessment of the need, the minimum stock of first aid items at each location will be:
- A leaflet giving general guidance on first aid (for example HSE leaflet Basic Advice on First Aid at Work)
- 20 individually wrapped sterile adhesive dressings (assorted sizes) appropriate to the type of work (dressings may be of a detectable type for food handlers)
- Two sterile eye pads
- Four individually wrapped triangular bandages (preferably sterile)
- Six safety pins
- Six medium sized individually wrapped sterile unmedicated wound dressings, approximately 12cm x 18cm
- · One pair of disposable gloves
- 5.2 These additional materials are also available:
- Aprons
- Gloves
- Resuscitate
- Wipes
- Sterile water/saline (where mains water is not available)
- Clinical waste bins/bags
 Bio hazard disposal pack.
- Eye wash stations (where assessed as needed)
- 5.3 Tablets and medication of any description will not be kept as part of the first aid provision. If medication is needed for pupils it will be kept in a locked cupboard or fridge as appropriate and accessed only by designated staff.

5.4 Current Locations:

- First Aid Room
- Kitchen
- · Reception classroom
- 5.5 All first aiders are also issued with a grab bag containing an appropriate selection of first aid equipment
- 5.6A centralised stock is also available to enable the first aiders to restock the first aid boxes, as and when necessary. The stock will be held by the First Aid Coordinator to whom requests for additional supplies should be made. The Departmental Technicians will check and refill their First Aid boxes on a regular basis and must request supplies from the First Aid Coordinator.
- 5.7 The First Aid Coordinator also holds a grab bag containing an appropriate selection of first aid equipment for use by educational visits leaders.
- 5.8 The location of the first aid boxes, rooms and the boxes themselves will be clearly marked by a white cross on a green background.

5.9 Managers who identify a need for specific additional equipment should seek approval from the First Aid Coordinator prior to purchase to ensure it is in accord with the standards and appropriate for use at the site.

6, Travelling first aid kits

- 6.1 Where departmental activities necessitate the need for travelling, staff should to be provided with first aid equipment. The following items are considered suitable provisions;
- A leaflet giving general guidance on first aid (for example, HSE leaflet Basic Advice on First Aid at Work)
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- 6.2A properly stocked first aid kit will always be carried in the mini buses.
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7. Defibrillator

- 7.1 The academy has acquired an automated external defibrillator (AED). It is located Photocopier Room near the school office
- 7.2 No specific training is needed to use a defibrillator the instructions are clear and must be followed carefully.

8. Illness and Minor Injury

- 8.1 Parents become responsible for their child if the pupil is unwell or injured. In order to contact parents quickly, it is essential that changes of address or phone number are passed to the School Office as soon as these are known.
- 8.2 Students must not leave lessons for first aid treatment other than in cases of emergency. Any member of staff who becomes aware that a student is injured, or needs immediate treatment, must accompany the pupil to the medical room and obtain a First Aider for assessment and care. If the injury is serious and the student cannot walk, the teacher must contact a First Aider or send another adult to alert a First Aider. Office staff may contact other available First Aiders. A First Aid rota is in operation from 8.00a.m. to 4.15pm.
- 8.3 All injuries will be attended to in the First Aid treatment room. If necessary, having first informed a member of the Senior Management/Leadership Team, the First Aiders will arrange for the parents to take the student home or to hospital. No-one else should send an ill student home.
- 8.4 Parent consent will be obtained before Calpol is administered.

9. Emergency and Serious Injury

9.1 Normally only the First Aiders will have the responsibility to call an ambulance after being called to an accident or illness, however, a member of the senior leadership team or any member of staff attending a serious injury may call an ambulance if required. The First Aid Co-ordinator or a member of the administrative or pastoral team will contact the parents to tell them of their child's injury and whereabouts

- so that the parents can go to the hospital. The hospital staff will decide whether to treat the child before the parents arrive.
- 9.2 In the case of a very serious accident or injury, the Emergency Policy's procedures will be carried out. The Trust must also be informed in these circumstances.

10 Head Injuries

- 10.1 Accidents involving a pupil's head can be problematic because the injury may not be evident and the effects only become noticeable after a period of time.
- 10.2 If the injury is minor, all head injuries should be monitored closely and parents made aware by a telephone call. Serious head injuries should always be referred for hospital treatment (please follow the section for Emergency Arrangements).
- 10.3 A telephone call to the parent to advise of all head injuries should be made, so parents are informed and can make a decision whether to collect their child to monitor themselves at home, rather than remain at school for monitoring.

11. Record keeping

- 11.1 The First Aiders will log all visits to First Aid by students on the First Aid department google spreadsheet. For accidents/injuries, the First Aider on duty will also make an entry in the Accident Book. The Accident book containing blank forms is held in the School Office and may be accessed by any member of staff at any time of day or night. The First Aid log sheets and completed Accident Book sheets for the current academic year are held in files the School Office. Records from previous years' files will be filed appropriately.
- 11.2 Staff must make an official record of any injury, minor or major, in the Accident Book which is kept in the School Office. Any serious injuries such as broken limbs, dislocations and lacerations by contaminated material, must be reported to Operations Officer Any such injuries must be reported on a RIDDOR form by Operations Officer and will be followed by an in-depth Health and Safety investigative report.

12. Reporting an Accident

- 12.1 Any first aid treatment given on the Academy's premises or as part of a school related activity should be reported to and recorded on an incident report form.
- 12.2 First Aid treatment given by first aiders should be recorded in line with the Policy.
- 12.3 Any accident occurring on the Academy premises or as part of a school related activity must be reported by the member of staff attending the accident and an Incident report form filled in.
- 12.4 Incident Report forms are available from School Office and should be filled in with precise detail containing all the required information.

13 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

- 13.1 Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), some accidents must be reported to the HSE. Please refer to the Accidents and Incident Reporting Policy for more detail.
- 13.2 RIDDOR reports must be carried out by the Operations Officer with the member of staff concerned. The Principal is responsible for reporting serious accidents to the Trust's governing body. Accidents are discussed at Health and Safety Committee and Academy Council meetings.

- 13.3 The First Aid Co-ordinator will provide the Principal with an analysis of the term's incidents to see if there are any problem areas. This information will also be given to the relevant Head(s) of Department.
- 13.4 Any report under RIDDOR must be communicated to the Trust as a matter of urgency.

14. Information about Students' Medical Conditions

- 14.1 It is the responsibility of the parents to inform the Academy about their child's medical conditions. Each year, during the first half of the Autumn term, all parents will be issued with a blank Data Check Sheet. They will be asked to complete and return it to the Academy.
- 14.2 Information from parents may be received by the Academy in a number of ways, such as via the admission form, via letters from parents, via conversations subsequently recorded in writing with tutors. This information should be passed immediately to the School Office to add to the database. A medical register will be produced at the start of every term by the Operations Officer in the form of a completed medical data sheet for each student (it is the responsibility of parents to ensure that the Operations Officer has a completed sheet for their child).
- 14.3 The DSL must be informed if a pupil becomes pregnant. Individual teachers will then be told in confidence.
 - 14.4 The School Office will issue detailed information on medical conditions and emergency contacts to leaders of residential visits. Parents will be required to complete a declaration agreeing to emergency treatment and confirming that information held by the Academy is up to date. Leaders can obtain copies of the declarations from the School Office.

15. Students with Medical Needs

- 15.1 Many students will at some time have a short-term medical condition that may affect their participation in activities. Other students have medical conditions that, if not properly managed, could limit their access to education. These medical conditions include diabetes, asthma, epilepsy and anaphylaxis (extreme allergic reaction). Such students are regarded as having medical needs and will be more at risk than their classmates. In a few cases, individual health care plans may be needed.
- 15.2 It is the parents' responsibility to inform the Academy about the child's medical condition and requirements. If information is withheld from staff they should not generally be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith. The Teacher must alert the First Aid Co-ordinator when a student is discovered to have medical needs. The First Aid Co-ordinator will liaise specifically with the parent to obtain as much information as possible and ensure the School Office has the information for the MIS database.
- 15.3 With particularly serious medical conditions, each case must be treated individually, in relation to the illness and its requirements, to the parents' possible wish for confidentiality and to the child's knowledge of their own condition. The School Office will talk in confidence to each of the child's regular teachers at the start of each academic year about serious medical conditions and requirements, alerting them to the child's knowledge of their own condition.
- 15.4 When the student goes out of the Academy, for example on work experience, the placement must be informed.
- 15.5 Information on students' medical conditions must be made available to first aiders in the event of an incident and to emergency medical practitioners if called.
- 15.6 Records will be kept on file of student medical needs, parental permissions, individual health care plans and medication given as required.

16. Emergency Procedure for Major Incidents

- 16.1 In the event of an emergency or if an at risk student/person falls ill then member of staff at the incident must;
- Call 999.
- · Summon a First Aider/Pastoral Support.
- · Emergency treatment should be delivered.
- 16.2 If 999 is called the following information must be given;
- The Academy's telephone number 01553 773088
- The Academy's address; Littleport Terrace, King's Lynn PE30 1QA
- Give your name.
- Name of casualty and symptoms/any known medical condition.
- Inform ambulance control of the best entrance e.g. main reception entrance.
- If an ambulance is called to the main reception, School Office should be informed and a member of staff should go to the entrance to give directions to the ambulance crew.
- If the emergency services are called the parent of the casualty will be telephoned by School Office as soon as is practicable.

17. Hygiene

- 17.1 All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should use disposable gloves (non latex) when administering first aid, these can be found in every first aid box. Any spillages must be notified to a site maintenance assistant who will follow the correct procedure.
- 17.2 Hands must always be washed before and after giving first aid.
- 17.3 Single-use disposable gloves must be worn if treatment involves blood or other body fluids. Any soiled dressings must be put in a yellow clinical waste bag and disposed of in a clinical waste box.
- 17.4 Any body fluids on the floor should have absorbent granules sprinkled on to them, then swept up with the designated dustpan and brush (in medical room). This should also go in a yellow bag and disposed of in a clinical waste box. If possible areas should be cleaned up with absorbent powder specifically for body fluids.
- 17.5 Body fluid spillages on hard surfaces should be cleaned up with absorbent powder specifically for body fluids.
- 17.6 Exposed cuts or abrasions should always be covered.
- 17.7 In the event of wide spread viral/bacterial infections across the Academy the following actions will be taken:
- The Academy will report the situation to parents via the website, newsletters and text messages with guidance regarding avoidance, recognition, treatment and guidance on attendance.
- The guidance materials will also be used to communicate the information to students, as well as displaying posters around the Academy site.

Appendix 2 - list of appointed person(s) for first aid and/or trained first aiders

Name	Location	Expiry Date	
Justina Snow	Outdoor Learning / Eagles	06.03.27	
Viv Gosling	Upper KS2	17.5.25	
Amy Hall – Paediatric	KS1	30.9.24	
Donna Hubbard	Lower KS2	17.5.25	
Sue Burton	Doves	06.03.27	
Emma Brown - Paediatric	KS1 Corridor	17.1.26	
Emma Claridge - Paediatric	KS1/EYFS	17.1.26	
1 Day First Aid Training			
Daniel Callaby	PE Instructor	10.1.26	
Lisa Hanks	Lower KS2	10.1.26	
Nicola Lipscombe	School Office	10.1.26	
Rebecca Smith-Ames	Reception	7.7.26	
Jo Callum	Lower KS2	7.7.26	
Keri Garrod	Upper KS2	25.3.25	
Sean Walker	School Office	25.3.25	

Mental Health First Aider (specify for pupils or adults)

Alison Williamson	Lower KS2	Feb 2026
Leanne Collison	KS1	Feb 2026
Kerensa Healy – Senior Mental Health	KS1 Corridor	May 2025

- 1. Training for First Aiders/Appointed persons should be provided by a HSE accredited provider.
- 2. A register of First Aiders/Appointed persons and their training history should be maintained by Line Managers and refresher training should be offered before certification expires.
- 3. Training for Paediatric First Aid is not approved by the HSE but may be included if first aid assessment identifies this and/or this meets OFSTED requirements.
- 4. Mental Health First Aiders should be appropriately trained and certificated and attend refreshers as necessary. Records of certificates should also be maintained at the academy.

Appendix 3: accident report form template (to be used if no other form is in place)

NAME OF INJURED PERSON		ROLE/CLASS	
DATE AND TIME OF INCIDENT		LOCATION OF INCIDENT	
INCIDENT DETAILS			
Describe in detail what ha	ppened, how it happened and	I what injuries the	person incurred
ACTION TAKEN			
Describe the steps taken the injured person imm		ncluding any first	aid treatment, and what happened to
FOLLOW-UP ACTION RE	EQUIRED		
Outline what steps the sch the risk of the incident		heck on the injure	d person, and what it will do to reduce
NAME OF PERSON ATTENDING THE INCIDENT			
SIGNATURE		DATE	

Appendix 4: Model process for developing individual healthcare plans

Annex A: Model process for developing individual healthcare plans

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed Headteacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them) Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professional must be provided School staff training needs identified Healthcare professional commissions/delivers training and staff signed-off as competent - review date agreed IHCP implemented and circulated to all relevant staff IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate

Source:

Supporting Pupils at School with Medical Conditions Statutory Guidance April 2014

Appendix 5: Individual Healthcare Plan template

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Olivia (Haranita) Orașta d	
Clinic/Hospital Contact	
Name	
Phone no. G.P.	
Name	
Phone no.	
Who is responsible for providing support in school	

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc
Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision
Daily care requirements
Specific support for the pupil's educational, social and emotional needs
Arrangements for school visits/trips etc
Arrangements for school visits/trips etc
Other information
Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (state if different for off-site activities)	
	-
Discoulant Local Control of the Cont	
Plan developed with	_
Staff training needed/undertaken – who, what, when	
The state of the s	-
Form copied to	
·	

Appendix 6: Parental Agreement for Setting to Administer Medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by Name of	
school/setting	
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 member of staff]
The above information is, to the best of my knowledg consent to school/setting staff administering medi policy. I will inform the school/setting immediately frequency of the medication or if the medicine is s	cine in accordance with the school/setting , in writing, if there is any change in dosage or
Signature(s)	Date
(Parent/Carer/Guardian/Person with parental response	sibility)

Appendix 7: Record of Medicine Administered to an Individual Child

Name of school/setting		
Name of child		
Date medicine provided by parent Group/class/form		
Quantity received		
Name and strength of medicine		
Expiry date		
Quantity returned		
Dose and frequency of medicine		
Staff signature		
Signature of parent		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Stati lititiais		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Record of medicine		

administered to an individual child (Continued)

Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Date		
Time given Dose given		
Name of member of staff Staff initials		
Stail illidais		
- .		
Date		
Time given Dose given		
Name of member of staff Staff initials		
otali lilitais		
- .	 	
Date		
Time given Dose given		
_		
Name of member of staff		
Staff initials		

Appendix 8: Record of Medicine Administered to All Children

Name of school/setting								
Date	Child's n	ame	Time	Name of	Dose given	Any reactions	Signature	Print name
				medicine			of staff	

Appendix 9: Model Letter Inviting Parents to Contribute to Individual Healthcare Plan Development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the academy's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the academy, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely



EASTGATE ACADEMYFirst Aid Annexe

Head Teacher L Hothersall	Sign and Date	Md Hothersell
Author Elaine Oldroyd	Sign and Date	Elaine Oldroyd 5.1.23

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- 8.2 Students must not leave lessons for first aid treatment other than in cases of emergency. Any member of staff who becomes aware that a student is injured, or needs immediate treatment, must accompany the pupil to the medical room and obtain a First Aider for assessment and care. If the injury is serious and the student cannot walk, the teacher must contact a First Aider or send another adult to alert a First Aider. Office staff may contact other available First Aiders. A First Aid rota is in operation from 8.00a.m. to 4.15pm.
- 8.3 All injuries will be attended to in the First Aid treatment room. If necessary, having first informed a member of the Senior Management/Leadership Team, the First Aiders will arrange for the parents to take the student home or to hospital. No-one else should send an ill student home.
- 8.4 Parent consent will be obtained before Calpol is administered.

9. Emergency and Serious Injury

9.1 Normally only the First Aiders will have the responsibility to call an ambulance after being called to an accident or illness, however, a member of the senior leadership team or any member of staff attending a serious injury may call an ambulance if required. The First Aid Co-ordinator or a member of the administrative or pastoral team will contact the parents to tell them of their child's injury and whereabouts

- so that the parents can go to the hospital. The hospital staff will decide whether to treat the child before the parents arrive.
- 9.2 In the case of a very serious accident or injury, the Emergency Policy's procedures will be carried out. The Trust must also be informed in these circumstances.

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- 10.1 Accidents involving a pupil's head can be problematic because the injury may not be evident and the effects only become noticeable after a period of time.
- 10.2 If the injury is minor, all head injuries should be monitored closely and parents made aware by a telephone call. Serious head injuries should always be referred for hospital treatment (please follow the section for Emergency Arrangements).
- 10.3 A telephone call to the parent to advise of all head injuries should be made, so parents are informed and can make a decision whether to collect their child to monitor themselves at home, rather than remain at school for monitoring.

11. Record keeping

- 11.1 The First Aiders will log all visits to First Aid by students on the First Aid department google spreadsheet. For accidents/injuries, the First Aider on duty will also make an entry in the Accident Book. The Accident book containing blank forms is held in the School Office and may be accessed by any member of staff at any time of day or night. The First Aid log sheets and completed Accident Book sheets for the current academic year are held in files the School Office. Records from previous years' files will be filed appropriately.
- 11.2 Staff must make an official record of any injury, minor or major, in the Accident Book which is kept in the School Office. Any serious injuries such as broken limbs, dislocations and lacerations by contaminated material, must be reported to Operations Officer Any such injuries must be reported on a RIDDOR form by Operations Officer and will be followed by an in-depth Health and Safety investigative report.

12. Reporting an Accident

- 12.1 Any first aid treatment given on the Academy's premises or as part of a school related activity should be reported to and recorded on an incident report form.
- 12.2 First Aid treatment given by first aiders should be recorded in line with the Policy.
- 12.3 Any accident occurring on the Academy premises or as part of a school related activity must be reported by the member of staff attending the accident and an Incident report form filled in.
- 12.4 Incident Report forms are available from School Office and should be filled in with precise detail containing all the required information.

13 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

- 13.1 Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), some accidents must be reported to the HSE. Please refer to the Accidents and Incident Reporting Policy for more detail.
- 13.2 RIDDOR reports must be carried out by the Operations Officer with the member of staff concerned. The Principal is responsible for reporting serious accidents to the Trust's governing body. Accidents are discussed at Health and Safety Committee and Academy Council meetings.

- 13.3 The First Aid Co-ordinator will provide the Principal with an analysis of the term's incidents to see if there are any problem areas. This information will also be given to the relevant Head(s) of Department.
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- 14.2 Information from parents may be received by the Academy in a number of ways, such as via the admission form, via letters from parents, via conversations subsequently recorded in writing with tutors. This information should be passed immediately to the School Office to add to the database. A medical register will be produced at the start of every term by the Operations Officer in the form of a completed medical data sheet for each student (it is the responsibility of parents to ensure that the Operations Officer has a completed sheet for their child).
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- 15.4 When the student goes out of the Academy, for example on work experience, the placement must be informed.
- 15.5 Information on students' medical conditions must be made available to first aiders in the event of an incident and to emergency medical practitioners if called.
- 15.6 Records will be kept on file of student medical needs, parental permissions, individual health care plans and medication given as required.

16. Emergency Procedure for Major Incidents

- 16.1 In the event of an emergency or if an at risk student/person falls ill then member of staff at the incident must;
- Call 999.
- · Summon a First Aider/Pastoral Support.
- · Emergency treatment should be delivered.
- 16.2 If 999 is called the following information must be given;
- The Academy's telephone number 01553 773088
- The Academy's address; Littleport Terrace, King's Lynn PE30 1QA
- Give your name.
- Name of casualty and symptoms/any known medical condition.
- Inform ambulance control of the best entrance e.g. main reception entrance.
- If an ambulance is called to the main reception, School Office should be informed and a member of staff should go to the entrance to give directions to the ambulance crew.
- If the emergency services are called the parent of the casualty will be telephoned by School Office as soon as is practicable.

17. Hygiene

- 17.1 All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should use disposable gloves (non latex) when administering first aid, these can be found in every first aid box. Any spillages must be notified to a site maintenance assistant who will follow the correct procedure.
- 17.2 Hands must always be washed before and after giving first aid.
- 17.3 Single-use disposable gloves must be worn if treatment involves blood or other body fluids. Any soiled dressings must be put in a yellow clinical waste bag and disposed of in a clinical waste box.
- 17.4 Any body fluids on the floor should have absorbent granules sprinkled on to them, then swept up with the designated dustpan and brush (in medical room). This should also go in a yellow bag and disposed of in a clinical waste box. If possible areas should be cleaned up with absorbent powder specifically for body fluids.
- 17.5 Body fluid spillages on hard surfaces should be cleaned up with absorbent powder specifically for body fluids.
- 17.6 Exposed cuts or abrasions should always be covered.
- 17.7 In the event of wide spread viral/bacterial infections across the Academy the following actions will be taken:
- The Academy will report the situation to parents via the website, newsletters and text messages with guidance regarding avoidance, recognition, treatment and guidance on attendance.
- The guidance materials will also be used to communicate the information to students, as well as displaying posters around the Academy site.

Appendix 2 - list of appointed person(s) for first aid and/or trained first aiders

Name	Location	Expiry Date	
Justina Snow	Outdoor Learning / Eagles	06.03.27	
Viv Gosling	Upper KS2	17.5.25	
Amy Hall – Paediatric	KS1	30.9.24	
Donna Hubbard	Lower KS2	17.5.25	
Sue Burton	Doves	06.03.27	
Emma Brown - Paediatric	KS1 Corridor	17.1.26	
Emma Claridge - Paediatric	KS1/EYFS	17.1.26	
1 Day First Aid Training			
Daniel Callaby	PE Instructor	10.1.26	
Lisa Hanks	Lower KS2	10.1.26	
Nicola Lipscombe	School Office	10.1.26	
Rebecca Smith-Ames	Reception	7.7.26	
Jo Callum	Lower KS2	7.7.26	
Keri Garrod	Upper KS2	25.3.25	
Sean Walker	School Office	25.3.25	

Mental Health First Aider (specify for pupils or adults)

Alison Williamson	Lower KS2	Feb 2026	
Leanne Collison	KS1	Feb 2026	
Kerensa Healy – Senior Mental Health	KS1 Corridor	May 2025	

- 1. Training for First Aiders/Appointed persons should be provided by a HSE accredited provider.
- 2. A register of First Aiders/Appointed persons and their training history should be maintained by Line Managers and refresher training should be offered before certification expires.
- 3. Training for Paediatric First Aid is not approved by the HSE but may be included if first aid assessment identifies this and/or this meets OFSTED requirements.
- 4. Mental Health First Aiders should be appropriately trained and certificated and attend refreshers as necessary. Records of certificates should also be maintained at the academy.

Appendix 3: accident report form template (to be used if no other form is in place)

NAME OF INJURED PERSON		ROLE/CLASS	
DATE AND TIME OF INCIDENT		LOCATION OF INCIDENT	
INCIDENT DETAILS			
Describe in detail what ha	ppened, how it happened and	I what injuries the	person incurred
ACTION TAKEN			
Describe the steps taken the injured person imm		ncluding any first	aid treatment, and what happened to
FOLLOW-UP ACTION RE	EQUIRED		
Outline what steps the sch the risk of the incident		heck on the injure	d person, and what it will do to reduce
NAME OF PERSON ATTENDING THE INCIDENT			
SIGNATURE		DATE	

Appendix 4: Model process for developing individual healthcare plans

Annex A: Model process for developing individual healthcare plans

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed Headteacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them) Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professional must be provided School staff training needs identified Healthcare professional commissions/delivers training and staff signed-off as competent - review date agreed IHCP implemented and circulated to all relevant staff IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate

Source:

Supporting Pupils at School with Medical Conditions Statutory Guidance April 2014

Appendix 5: Individual Healthcare Plan template

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no. G.P.	
Name	
Phone no.	
Who is responsible for providing support in school	

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc
Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision
Daily care requirements
Specific support for the pupil's educational, social and emotional needs
Arrangements for school visits/trips etc
Arrangements for school visits/trips etc
Other information
Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (state if different for off-site activities)	
	-
Discoulant Local Control of the Cont	
Plan developed with	_
Staff training needed/undertaken – who, what, when	
The state of the s	-
Form copied to	
·	

Appendix 6: Parental Agreement for Setting to Administer Medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by Name of	
school/setting	
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 member of staff]
The above information is, to the best of my knowledg consent to school/setting staff administering medi policy. I will inform the school/setting immediately frequency of the medication or if the medicine is s	cine in accordance with the school/setting , in writing, if there is any change in dosage or
Signature(s)	Date
(Parent/Carer/Guardian/Person with parental response	sibility)

Appendix 7: Record of Medicine Administered to an Individual Child

Name of school/setting		
Name of child		
Date medicine provided by parent Group/class/form		
Quantity received		
Name and strength of medicine		
Expiry date		
Quantity returned		
Dose and frequency of medicine		
Staff signature		
Signature of parent		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Stati lititiais		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Record of medicine		

administered to an individual child (Continued)

Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Date		
Time given Dose given		
Name of member of staff Staff initials		
Stail illidais		
- .		
Date		
Time given Dose given		
Name of member of staff Staff initials		
otali lilitais		
- .	 	
Date		
Time given Dose given		
_		
Name of member of staff		
Staff initials		

Appendix 8: Record of Medicine Administered to All Children

Name of school/se	etting							
Date	Child's n	ame	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name

Appendix 9: Model Letter Inviting Parents to Contribute to Individual Healthcare Plan Development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the academy's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the academy, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely



EASTGATE ACADEMYFirst Aid Annexe

Head Teacher L Hothersall	Sign and Date	Md Hothersell
Author Elaine Oldroyd	Sign and Date	Elaine Oldroyd 5.1.23

Next Review Date	January 2024	
Committee Responsible	Governing Board Jan 2024	

Change History

Version	Date	Change Description	Stored
1			
2			
3			
4			
5			
6			

Appendix 1: local first aid procedures

These procedures for First Aid and Medical treatment at Eastgate Academy form part of the Eastern Multi-Academy Trust First Aid and Medical Policy

1. First Aid Procedure

- 1.1 This procedure forms part of, and should be read in conjunction with, the First Aid Policy. It is designed to confirm how the Trust will address the responsibilities regarding the administration of first aid to staff, pupils and visitors.
- 1.2 All organisations, including educational establishments, should ensure their procedures and arrangements reflect an assessment of the need. The procedures should cover first aid personnel, equipment and practices and be designed in accord with the legal standards and good practice.
- 1.3 The First Aid Coordinator in conjunction with the Principal is responsible for determining the actual provision required at their respective establishments, with the appropriate manager responsible where additional needs relevant to their specific operation exist.
- 1.4 The Trust has determined that each Academy will have at least one trained Mental Health First Aider to support students. The name of the Mental Health First Aider will be added to the list of first aiders.

2. Assessment of Need

- 2.1 The First Aid Coordinator in conjunction with the Principal has undertaken an assessment of the first aid need to determine a provision which is suitable and sufficient in line with the Policy.
- 2.2 Following the assessment, it has been determined that the Academy needs a minimum of 6 full first aid qualified staff and additionally a number of appointed persons.
- 2.3 Departmental managers should determine any additional personnel, equipment and facilities required using the same approach, for example, specific first aid provision should form part of the arrangements for offsite work and educational visits.

3. First Aid Provision

3.1 The First Aid Co-ordinator is the Operations Officer and is located in the School Office. A First Aid treatment room is site in the Toilet Corridor and is available for person who require such a facility.

4. First Aid Rooms

- 4.1 The site has a room available for first aid, which will;
- be adequately stocked with first aid equipment
- · be accessible to stretchers
- · be clearly sign-posted
- be provided with a chair, a desk and necessary equipment and a telephone
- have washable surfaces and adequate heating, ventilation and lighting
- · be kept clean, tidy, accessible and available for use at all times when staff and students are on site
- be positioned as near as possible to the point of access for transport to hospital
- display a notice in the room advising of the names, locations, and, if appropriate telephone extensions
 of first aiders and how to contact them

The designated person must check all first aid equipment is in date and stocks replenished.

- 4.2 The first aid room will be provided with or have ready access to the following;
- · a sink with hot and cold running water
- toilet facilities
- · drinking water and disposable cups
- · soap and paper towels
- foot operated refuse containers lined with disposable yellow clinical waste bags, or a container suitable for the safe disposal of clinical waste
- blankets.

5. Equipment

- 5.1 Suitable and sufficient equipment will be provided, based on an assessment of the need, the minimum stock of first aid items at each location will be:
- A leaflet giving general guidance on first aid (for example HSE leaflet Basic Advice on First Aid at Work)
- 20 individually wrapped sterile adhesive dressings (assorted sizes) appropriate to the type of work (dressings may be of a detectable type for food handlers)
- Two sterile eye pads
- Four individually wrapped triangular bandages (preferably sterile)
- Six safety pins
- Six medium sized individually wrapped sterile unmedicated wound dressings, approximately 12cm x 18cm
- · One pair of disposable gloves
- 5.2 These additional materials are also available:
- Aprons
- Gloves
- Resuscitate
- Wipes
- Sterile water/saline (where mains water is not available)
- Clinical waste bins/bags
 Bio hazard disposal pack.
- Eye wash stations (where assessed as needed)
- 5.3 Tablets and medication of any description will not be kept as part of the first aid provision. If medication is needed for pupils it will be kept in a locked cupboard or fridge as appropriate and accessed only by designated staff.

5.4 Current Locations:

- First Aid Room
- Kitchen
- · Reception classroom
- 5.5 All first aiders are also issued with a grab bag containing an appropriate selection of first aid equipment
- 5.6A centralised stock is also available to enable the first aiders to restock the first aid boxes, as and when necessary. The stock will be held by the First Aid Coordinator to whom requests for additional supplies should be made. The Departmental Technicians will check and refill their First Aid boxes on a regular basis and must request supplies from the First Aid Coordinator.
- 5.7 The First Aid Coordinator also holds a grab bag containing an appropriate selection of first aid equipment for use by educational visits leaders.
- 5.8 The location of the first aid boxes, rooms and the boxes themselves will be clearly marked by a white cross on a green background.

5.9 Managers who identify a need for specific additional equipment should seek approval from the First Aid Coordinator prior to purchase to ensure it is in accord with the standards and appropriate for use at the site.

6, Travelling first aid kits

- 6.1 Where departmental activities necessitate the need for travelling, staff should to be provided with first aid equipment. The following items are considered suitable provisions;
- A leaflet giving general guidance on first aid (for example, HSE leaflet Basic Advice on First Aid at Work)
- · Six individually wrapped sterile adhesive dressings
- One large sterile unmedicated dressing approximately 18cm x 18cm
- Two triangular bandages
- Two safety pins
- · Individually wrapped moist cleansing wipes
- · One pair of disposable gloves
- 6.2A properly stocked first aid kit will always be carried in the mini buses.
- 6.3 First Aid supplies will be provided for staff in charge of trips and visits by the First Aid Co-ordinator, who needs to be advised in advance of the trip.
- 6.4 The trip leader must ensure that the medical notes for all children together with any required medication is taken on the trip

7. Defibrillator

- 7.1 The academy has acquired an automated external defibrillator (AED). It is located Photocopier Room near the school office
- 7.2 No specific training is needed to use a defibrillator the instructions are clear and must be followed carefully.

8. Illness and Minor Injury

- 8.1 Parents become responsible for their child if the pupil is unwell or injured. In order to contact parents quickly, it is essential that changes of address or phone number are passed to the School Office as soon as these are known.
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- so that the parents can go to the hospital. The hospital staff will decide whether to treat the child before the parents arrive.
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- 15.6 Records will be kept on file of student medical needs, parental permissions, individual health care plans and medication given as required.

16. Emergency Procedure for Major Incidents

- 16.1 In the event of an emergency or if an at risk student/person falls ill then member of staff at the incident must;
- Call 999.
- · Summon a First Aider/Pastoral Support.
- · Emergency treatment should be delivered.
- 16.2 If 999 is called the following information must be given;
- The Academy's telephone number 01553 773088
- The Academy's address; Littleport Terrace, King's Lynn PE30 1QA
- Give your name.
- Name of casualty and symptoms/any known medical condition.
- Inform ambulance control of the best entrance e.g. main reception entrance.
- If an ambulance is called to the main reception, School Office should be informed and a member of staff should go to the entrance to give directions to the ambulance crew.
- If the emergency services are called the parent of the casualty will be telephoned by School Office as soon as is practicable.

17. Hygiene

- 17.1 All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should use disposable gloves (non latex) when administering first aid, these can be found in every first aid box. Any spillages must be notified to a site maintenance assistant who will follow the correct procedure.
- 17.2 Hands must always be washed before and after giving first aid.
- 17.3 Single-use disposable gloves must be worn if treatment involves blood or other body fluids. Any soiled dressings must be put in a yellow clinical waste bag and disposed of in a clinical waste box.
- 17.4 Any body fluids on the floor should have absorbent granules sprinkled on to them, then swept up with the designated dustpan and brush (in medical room). This should also go in a yellow bag and disposed of in a clinical waste box. If possible areas should be cleaned up with absorbent powder specifically for body fluids.
- 17.5 Body fluid spillages on hard surfaces should be cleaned up with absorbent powder specifically for body fluids.
- 17.6 Exposed cuts or abrasions should always be covered.
- 17.7 In the event of wide spread viral/bacterial infections across the Academy the following actions will be taken:
- The Academy will report the situation to parents via the website, newsletters and text messages with guidance regarding avoidance, recognition, treatment and guidance on attendance.
- The guidance materials will also be used to communicate the information to students, as well as displaying posters around the Academy site.

Appendix 2 - list of appointed person(s) for first aid and/or trained first aiders

Name	Location	Expiry Date	
Justina Snow	Outdoor Learning / Eagles	06.03.27	
Viv Gosling	Upper KS2	17.5.25	
Amy Hall – Paediatric	KS1	30.9.24	
Donna Hubbard	Lower KS2	17.5.25	
Sue Burton	Doves	06.03.27	
Emma Brown - Paediatric	KS1 Corridor	17.1.26	
Emma Claridge - KS1/EYFS Paediatric		17.1.26	
1 Day First Aid Training			
Daniel Callaby	PE Instructor	10.1.26	
Lisa Hanks	Lower KS2	10.1.26	
Nicola Lipscombe	School Office	10.1.26	
Rebecca Smith-Ames	Reception	7.7.26	
Jo Callum	Lower KS2	7.7.26	
Keri Garrod	Upper KS2	25.3.25	
Sean Walker	School Office	25.3.25	

Mental Health First Aider (specify for pupils or adults)

Alison Williamson	Lower KS2	Feb 2026
Leanne Collison	KS1	Feb 2026
Kerensa Healy – Senior Mental Health	KS1 Corridor	May 2025

- 1. Training for First Aiders/Appointed persons should be provided by a HSE accredited provider.
- 2. A register of First Aiders/Appointed persons and their training history should be maintained by Line Managers and refresher training should be offered before certification expires.
- 3. Training for Paediatric First Aid is not approved by the HSE but may be included if first aid assessment identifies this and/or this meets OFSTED requirements.
- 4. Mental Health First Aiders should be appropriately trained and certificated and attend refreshers as necessary. Records of certificates should also be maintained at the academy.

Appendix 3: accident report form template (to be used if no other form is in place)

NAME OF INJURED PERSON		ROLE/CLASS	
DATE AND TIME OF INCIDENT		LOCATION OF INCIDENT	
INCIDENT DETAILS			
Describe in detail what ha	ppened, how it happened and	I what injuries the	person incurred
ACTION TAKEN			
Describe the steps taken the injured person imm		ncluding any first	aid treatment, and what happened to
FOLLOW-UP ACTION RE	EQUIRED		
Outline what steps the sch the risk of the incident		heck on the injure	d person, and what it will do to reduce
NAME OF PERSON ATTENDING THE INCIDENT			
SIGNATURE		DATE	

Appendix 4: Model process for developing individual healthcare plans

Annex A: Model process for developing individual healthcare plans

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed Headteacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them) Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professional must be provided School staff training needs identified Healthcare professional commissions/delivers training and staff signed-off as competent - review date agreed IHCP implemented and circulated to all relevant staff IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate

Source:

Supporting Pupils at School with Medical Conditions Statutory Guidance April 2014

Appendix 5: Individual Healthcare Plan template

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no. G.P.	
Name	
Phone no.	
Who is responsible for providing support in school	

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc		
Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision		
Daily care requirements		
Specific support for the pupil's educational, social and emotional needs		
Arrangements for school visits/trips etc		
Arrangements for school visits/trips etc		
Other information		
Describe what constitutes an emergency, and the action to take if this occurs		

Who is responsible in an emergency (state if different for off-site activities)	
	-
Discoulant Local Control of the Cont	
Plan developed with	_
Staff training needed/undertaken – who, what, when	
The state of the s	-
Form copied to	
·	

Appendix 6: Parental Agreement for Setting to Administer Medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by Name of	
school/setting	
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 member of staff]
The above information is, to the best of my knowledg consent to school/setting staff administering medi policy. I will inform the school/setting immediately frequency of the medication or if the medicine is s	cine in accordance with the school/setting , in writing, if there is any change in dosage or
Signature(s)	Date
(Parent/Carer/Guardian/Person with parental response	sibility)

Appendix 7: Record of Medicine Administered to an Individual Child

Name of school/setting		
Name of child		
Date medicine provided by parent Group/class/form		
Quantity received		
Name and strength of medicine		
Expiry date		
Quantity returned		
Dose and frequency of medicine		
Staff signature		
Signature of parent		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Stati lititiais		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Record of medicine		

administered to an individual child (Continued)

Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Date		
Time given Dose given		
Name of member of staff Staff initials		
Stail illidais		
- .		
Date		
Time given Dose given		
Name of member of staff Staff initials		
Stall lillials		
- .	 	
Date		
Time given Dose given		
_		
Name of member of staff		
Staff initials		

Appendix 8: Record of Medicine Administered to All Children

Name of school/se	etting							
Date	Child's n	ame	Time	Name of	Dose given	Any reactions	Signature	Print name
				medicine			of staff	

Appendix 9: Model Letter Inviting Parents to Contribute to Individual Healthcare Plan Development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the academy's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the academy, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely



EASTGATE ACADEMYFirst Aid Annexe

Head Teacher L Hothersall	Sign and Date	Md Hothersell
Author Elaine Oldroyd	Sign and Date	Elaine Oldroyd 5.1.23

Next Review Date	January 2024
Committee Responsible	Governing Board Jan 2024

Change History

Version	Date	Change Description	Stored
1			
2			
3			
4			
5			
6			

Appendix 1: local first aid procedures

These procedures for First Aid and Medical treatment at Eastgate Academy form part of the Eastern Multi-Academy Trust First Aid and Medical Policy

1. First Aid Procedure

- 1.1 This procedure forms part of, and should be read in conjunction with, the First Aid Policy. It is designed to confirm how the Trust will address the responsibilities regarding the administration of first aid to staff, pupils and visitors.
- 1.2 All organisations, including educational establishments, should ensure their procedures and arrangements reflect an assessment of the need. The procedures should cover first aid personnel, equipment and practices and be designed in accord with the legal standards and good practice.
- 1.3 The First Aid Coordinator in conjunction with the Principal is responsible for determining the actual provision required at their respective establishments, with the appropriate manager responsible where additional needs relevant to their specific operation exist.
- 1.4 The Trust has determined that each Academy will have at least one trained Mental Health First Aider to support students. The name of the Mental Health First Aider will be added to the list of first aiders.

2. Assessment of Need

- 2.1 The First Aid Coordinator in conjunction with the Principal has undertaken an assessment of the first aid need to determine a provision which is suitable and sufficient in line with the Policy.
- 2.2 Following the assessment, it has been determined that the Academy needs a minimum of 6 full first aid qualified staff and additionally a number of appointed persons.
- 2.3 Departmental managers should determine any additional personnel, equipment and facilities required using the same approach, for example, specific first aid provision should form part of the arrangements for offsite work and educational visits.

3. First Aid Provision

3.1 The First Aid Co-ordinator is the Operations Officer and is located in the School Office. A First Aid treatment room is site in the Toilet Corridor and is available for person who require such a facility.

4. First Aid Rooms

- 4.1 The site has a room available for first aid, which will;
- be adequately stocked with first aid equipment
- · be accessible to stretchers
- · be clearly sign-posted
- be provided with a chair, a desk and necessary equipment and a telephone
- have washable surfaces and adequate heating, ventilation and lighting
- · be kept clean, tidy, accessible and available for use at all times when staff and students are on site
- be positioned as near as possible to the point of access for transport to hospital
- display a notice in the room advising of the names, locations, and, if appropriate telephone extensions
 of first aiders and how to contact them

The designated person must check all first aid equipment is in date and stocks replenished.

- 4.2 The first aid room will be provided with or have ready access to the following;
- · a sink with hot and cold running water
- toilet facilities
- · drinking water and disposable cups
- · soap and paper towels
- foot operated refuse containers lined with disposable yellow clinical waste bags, or a container suitable for the safe disposal of clinical waste
- blankets.

5. Equipment

- 5.1 Suitable and sufficient equipment will be provided, based on an assessment of the need, the minimum stock of first aid items at each location will be:
- A leaflet giving general guidance on first aid (for example HSE leaflet Basic Advice on First Aid at Work)
- 20 individually wrapped sterile adhesive dressings (assorted sizes) appropriate to the type of work (dressings may be of a detectable type for food handlers)
- Two sterile eye pads
- Four individually wrapped triangular bandages (preferably sterile)
- Six safety pins
- Six medium sized individually wrapped sterile unmedicated wound dressings, approximately 12cm x 18cm
- · One pair of disposable gloves
- 5.2 These additional materials are also available:
- Aprons
- Gloves
- Resuscitate
- Wipes
- Sterile water/saline (where mains water is not available)
- Clinical waste bins/bags
 Bio hazard disposal pack.
- Eye wash stations (where assessed as needed)
- 5.3 Tablets and medication of any description will not be kept as part of the first aid provision. If medication is needed for pupils it will be kept in a locked cupboard or fridge as appropriate and accessed only by designated staff.

5.4 Current Locations:

- First Aid Room
- Kitchen
- · Reception classroom
- 5.5 All first aiders are also issued with a grab bag containing an appropriate selection of first aid equipment
- 5.6A centralised stock is also available to enable the first aiders to restock the first aid boxes, as and when necessary. The stock will be held by the First Aid Coordinator to whom requests for additional supplies should be made. The Departmental Technicians will check and refill their First Aid boxes on a regular basis and must request supplies from the First Aid Coordinator.
- 5.7 The First Aid Coordinator also holds a grab bag containing an appropriate selection of first aid equipment for use by educational visits leaders.
- 5.8 The location of the first aid boxes, rooms and the boxes themselves will be clearly marked by a white cross on a green background.

5.9 Managers who identify a need for specific additional equipment should seek approval from the First Aid Coordinator prior to purchase to ensure it is in accord with the standards and appropriate for use at the site.

6, Travelling first aid kits

- 6.1 Where departmental activities necessitate the need for travelling, staff should to be provided with first aid equipment. The following items are considered suitable provisions;
- A leaflet giving general guidance on first aid (for example, HSE leaflet Basic Advice on First Aid at Work)
- · Six individually wrapped sterile adhesive dressings
- One large sterile unmedicated dressing approximately 18cm x 18cm
- Two triangular bandages
- Two safety pins
- · Individually wrapped moist cleansing wipes
- · One pair of disposable gloves
- 6.2A properly stocked first aid kit will always be carried in the mini buses.
- 6.3 First Aid supplies will be provided for staff in charge of trips and visits by the First Aid Co-ordinator, who needs to be advised in advance of the trip.
- 6.4 The trip leader must ensure that the medical notes for all children together with any required medication is taken on the trip

7. Defibrillator

- 7.1 The academy has acquired an automated external defibrillator (AED). It is located Photocopier Room near the school office
- 7.2 No specific training is needed to use a defibrillator the instructions are clear and must be followed carefully.

8. Illness and Minor Injury

- 8.1 Parents become responsible for their child if the pupil is unwell or injured. In order to contact parents quickly, it is essential that changes of address or phone number are passed to the School Office as soon as these are known.
- 8.2 Students must not leave lessons for first aid treatment other than in cases of emergency. Any member of staff who becomes aware that a student is injured, or needs immediate treatment, must accompany the pupil to the medical room and obtain a First Aider for assessment and care. If the injury is serious and the student cannot walk, the teacher must contact a First Aider or send another adult to alert a First Aider. Office staff may contact other available First Aiders. A First Aid rota is in operation from 8.00a.m. to 4.15pm.
- 8.3 All injuries will be attended to in the First Aid treatment room. If necessary, having first informed a member of the Senior Management/Leadership Team, the First Aiders will arrange for the parents to take the student home or to hospital. No-one else should send an ill student home.
- 8.4 Parent consent will be obtained before Calpol is administered.

9. Emergency and Serious Injury

9.1 Normally only the First Aiders will have the responsibility to call an ambulance after being called to an accident or illness, however, a member of the senior leadership team or any member of staff attending a serious injury may call an ambulance if required. The First Aid Co-ordinator or a member of the administrative or pastoral team will contact the parents to tell them of their child's injury and whereabouts

- so that the parents can go to the hospital. The hospital staff will decide whether to treat the child before the parents arrive.
- 9.2 In the case of a very serious accident or injury, the Emergency Policy's procedures will be carried out. The Trust must also be informed in these circumstances.

10 Head Injuries

- 10.1 Accidents involving a pupil's head can be problematic because the injury may not be evident and the effects only become noticeable after a period of time.
- 10.2 If the injury is minor, all head injuries should be monitored closely and parents made aware by a telephone call. Serious head injuries should always be referred for hospital treatment (please follow the section for Emergency Arrangements).
- 10.3 A telephone call to the parent to advise of all head injuries should be made, so parents are informed and can make a decision whether to collect their child to monitor themselves at home, rather than remain at school for monitoring.

11. Record keeping

- 11.1 The First Aiders will log all visits to First Aid by students on the First Aid department google spreadsheet. For accidents/injuries, the First Aider on duty will also make an entry in the Accident Book. The Accident book containing blank forms is held in the School Office and may be accessed by any member of staff at any time of day or night. The First Aid log sheets and completed Accident Book sheets for the current academic year are held in files the School Office. Records from previous years' files will be filed appropriately.
- 11.2 Staff must make an official record of any injury, minor or major, in the Accident Book which is kept in the School Office. Any serious injuries such as broken limbs, dislocations and lacerations by contaminated material, must be reported to Operations Officer Any such injuries must be reported on a RIDDOR form by Operations Officer and will be followed by an in-depth Health and Safety investigative report.

12. Reporting an Accident

- 12.1 Any first aid treatment given on the Academy's premises or as part of a school related activity should be reported to and recorded on an incident report form.
- 12.2 First Aid treatment given by first aiders should be recorded in line with the Policy.
- 12.3 Any accident occurring on the Academy premises or as part of a school related activity must be reported by the member of staff attending the accident and an Incident report form filled in.
- 12.4 Incident Report forms are available from School Office and should be filled in with precise detail containing all the required information.

13 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

- 13.1 Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), some accidents must be reported to the HSE. Please refer to the Accidents and Incident Reporting Policy for more detail.
- 13.2 RIDDOR reports must be carried out by the Operations Officer with the member of staff concerned. The Principal is responsible for reporting serious accidents to the Trust's governing body. Accidents are discussed at Health and Safety Committee and Academy Council meetings.

- 13.3 The First Aid Co-ordinator will provide the Principal with an analysis of the term's incidents to see if there are any problem areas. This information will also be given to the relevant Head(s) of Department.
- 13.4 Any report under RIDDOR must be communicated to the Trust as a matter of urgency.

14. Information about Students' Medical Conditions

- 14.1 It is the responsibility of the parents to inform the Academy about their child's medical conditions. Each year, during the first half of the Autumn term, all parents will be issued with a blank Data Check Sheet. They will be asked to complete and return it to the Academy.
- 14.2 Information from parents may be received by the Academy in a number of ways, such as via the admission form, via letters from parents, via conversations subsequently recorded in writing with tutors. This information should be passed immediately to the School Office to add to the database. A medical register will be produced at the start of every term by the Operations Officer in the form of a completed medical data sheet for each student (it is the responsibility of parents to ensure that the Operations Officer has a completed sheet for their child).
- 14.3 The DSL must be informed if a pupil becomes pregnant. Individual teachers will then be told in confidence.
 - 14.4 The School Office will issue detailed information on medical conditions and emergency contacts to leaders of residential visits. Parents will be required to complete a declaration agreeing to emergency treatment and confirming that information held by the Academy is up to date. Leaders can obtain copies of the declarations from the School Office.

15. Students with Medical Needs

- 15.1 Many students will at some time have a short-term medical condition that may affect their participation in activities. Other students have medical conditions that, if not properly managed, could limit their access to education. These medical conditions include diabetes, asthma, epilepsy and anaphylaxis (extreme allergic reaction). Such students are regarded as having medical needs and will be more at risk than their classmates. In a few cases, individual health care plans may be needed.
- 15.2 It is the parents' responsibility to inform the Academy about the child's medical condition and requirements. If information is withheld from staff they should not generally be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith. The Teacher must alert the First Aid Co-ordinator when a student is discovered to have medical needs. The First Aid Co-ordinator will liaise specifically with the parent to obtain as much information as possible and ensure the School Office has the information for the MIS database.
- 15.3 With particularly serious medical conditions, each case must be treated individually, in relation to the illness and its requirements, to the parents' possible wish for confidentiality and to the child's knowledge of their own condition. The School Office will talk in confidence to each of the child's regular teachers at the start of each academic year about serious medical conditions and requirements, alerting them to the child's knowledge of their own condition.
- 15.4 When the student goes out of the Academy, for example on work experience, the placement must be informed.
- 15.5 Information on students' medical conditions must be made available to first aiders in the event of an incident and to emergency medical practitioners if called.
- 15.6 Records will be kept on file of student medical needs, parental permissions, individual health care plans and medication given as required.

16. Emergency Procedure for Major Incidents

- 16.1 In the event of an emergency or if an at risk student/person falls ill then member of staff at the incident must;
- Call 999.
- · Summon a First Aider/Pastoral Support.
- · Emergency treatment should be delivered.
- 16.2 If 999 is called the following information must be given;
- The Academy's telephone number 01553 773088
- The Academy's address; Littleport Terrace, King's Lynn PE30 1QA
- Give your name.
- Name of casualty and symptoms/any known medical condition.
- Inform ambulance control of the best entrance e.g. main reception entrance.
- If an ambulance is called to the main reception, School Office should be informed and a member of staff should go to the entrance to give directions to the ambulance crew.
- If the emergency services are called the parent of the casualty will be telephoned by School Office as soon as is practicable.

17. Hygiene

- 17.1 All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should use disposable gloves (non latex) when administering first aid, these can be found in every first aid box. Any spillages must be notified to a site maintenance assistant who will follow the correct procedure.
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- The guidance materials will also be used to communicate the information to students, as well as displaying posters around the Academy site.

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Sean Walker	School Office	25.3.25	

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Appendix 3: accident report form template (to be used if no other form is in place)

NAME OF INJURED PERSON		ROLE/CLASS	
DATE AND TIME OF INCIDENT		LOCATION OF INCIDENT	
INCIDENT DETAILS			
Describe in detail what ha	ppened, how it happened and	I what injuries the	person incurred
ACTION TAKEN			
Describe the steps taken the injured person imm		ncluding any first	aid treatment, and what happened to
FOLLOW-UP ACTION RE	EQUIRED		
Outline what steps the sch the risk of the incident		heck on the injure	d person, and what it will do to reduce
NAME OF PERSON ATTENDING THE INCIDENT			
SIGNATURE		DATE	

Appendix 4: Model process for developing individual healthcare plans

Annex A: Model process for developing individual healthcare plans

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed Headteacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them) Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professional must be provided School staff training needs identified Healthcare professional commissions/delivers training and staff signed-off as competent - review date agreed IHCP implemented and circulated to all relevant staff IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate

Source:

Supporting Pupils at School with Medical Conditions Statutory Guidance April 2014

Appendix 5: Individual Healthcare Plan template

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no. G.P.	
Name	
Phone no.	
Who is responsible for providing support in school	
, , , , , , , , , , , , , , , , , , , ,	

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc
Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision
Daily care requirements
Specific support for the pupil's educational, social and emotional needs
Arrangements for school visits/trips etc
Arrangements for school visits/trips etc
Other information
Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (state if different for off-site activities)	
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Plan developed with	_
Staff training needed/undertaken – who, what, when	
The state of the s	-
Form copied to	
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Appendix 6: Parental Agreement for Setting to Administer Medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by Name of	
school/setting	
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 member of staff]
The above information is, to the best of my knowledg consent to school/setting staff administering medipolicy. I will inform the school/setting immediately frequency of the medication or if the medicine is s	cine in accordance with the school/setting , in writing, if there is any change in dosage or
Signature(s)	Date
(Parent/Carer/Guardian/Person with parental respons	sibility)

Appendix 7: Record of Medicine Administered to an Individual Child

Name of school/setting		
Name of child		
Date medicine provided by parent Group/class/form		
Quantity received		
Name and strength of medicine		
Expiry date		
Quantity returned		
Dose and frequency of medicine		
Staff signature		
Signature of parent		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Stati lititiais		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Record of medicine		

administered to an individual child (Continued)

Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Date		
Time given Dose given		
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Date		
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Date		
Time given Dose given		
_		
Name of member of staff		
Staff initials		

Appendix 8: Record of Medicine Administered to All Children

Name of school/se	etting							
Date	Child's n	ame	Time	Name of medicine	Dose given	Any reactions	Signature of staff	Print name

Appendix 9: Model Letter Inviting Parents to Contribute to Individual Healthcare Plan Development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the academy's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the academy, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely



EASTGATE ACADEMYFirst Aid Annexe

Head Teacher L Hothersall	Sign and Date	Md Hothersell
Author Elaine Oldroyd	Sign and Date	Elaine Oldroyd 5.1.23

Next Review Date	January 2024	
Committee Responsible	Governing Board Jan 2024	

Change History

Version	Date	Change Description	Stored
1			
2			
3			
4			
5			
6			

Appendix 1: local first aid procedures

These procedures for First Aid and Medical treatment at Eastgate Academy form part of the Eastern Multi-Academy Trust First Aid and Medical Policy

1. First Aid Procedure

- 1.1 This procedure forms part of, and should be read in conjunction with, the First Aid Policy. It is designed to confirm how the Trust will address the responsibilities regarding the administration of first aid to staff, pupils and visitors.
- 1.2 All organisations, including educational establishments, should ensure their procedures and arrangements reflect an assessment of the need. The procedures should cover first aid personnel, equipment and practices and be designed in accord with the legal standards and good practice.
- 1.3 The First Aid Coordinator in conjunction with the Principal is responsible for determining the actual provision required at their respective establishments, with the appropriate manager responsible where additional needs relevant to their specific operation exist.
- 1.4 The Trust has determined that each Academy will have at least one trained Mental Health First Aider to support students. The name of the Mental Health First Aider will be added to the list of first aiders.

2. Assessment of Need

- 2.1 The First Aid Coordinator in conjunction with the Principal has undertaken an assessment of the first aid need to determine a provision which is suitable and sufficient in line with the Policy.
- 2.2 Following the assessment, it has been determined that the Academy needs a minimum of 6 full first aid qualified staff and additionally a number of appointed persons.
- 2.3 Departmental managers should determine any additional personnel, equipment and facilities required using the same approach, for example, specific first aid provision should form part of the arrangements for offsite work and educational visits.

3. First Aid Provision

3.1 The First Aid Co-ordinator is the Operations Officer and is located in the School Office. A First Aid treatment room is site in the Toilet Corridor and is available for person who require such a facility.

4. First Aid Rooms

- 4.1 The site has a room available for first aid, which will;
- be adequately stocked with first aid equipment
- · be accessible to stretchers
- · be clearly sign-posted
- be provided with a chair, a desk and necessary equipment and a telephone
- have washable surfaces and adequate heating, ventilation and lighting
- · be kept clean, tidy, accessible and available for use at all times when staff and students are on site
- be positioned as near as possible to the point of access for transport to hospital
- display a notice in the room advising of the names, locations, and, if appropriate telephone extensions
 of first aiders and how to contact them

The designated person must check all first aid equipment is in date and stocks replenished.

- 4.2 The first aid room will be provided with or have ready access to the following;
- · a sink with hot and cold running water
- toilet facilities
- · drinking water and disposable cups
- · soap and paper towels
- foot operated refuse containers lined with disposable yellow clinical waste bags, or a container suitable for the safe disposal of clinical waste
- blankets.

5. Equipment

- 5.1 Suitable and sufficient equipment will be provided, based on an assessment of the need, the minimum stock of first aid items at each location will be:
- A leaflet giving general guidance on first aid (for example HSE leaflet Basic Advice on First Aid at Work)
- 20 individually wrapped sterile adhesive dressings (assorted sizes) appropriate to the type of work (dressings may be of a detectable type for food handlers)
- Two sterile eye pads
- Four individually wrapped triangular bandages (preferably sterile)
- Six safety pins
- Six medium sized individually wrapped sterile unmedicated wound dressings, approximately 12cm x 18cm
- · One pair of disposable gloves
- 5.2 These additional materials are also available:
- Aprons
- Gloves
- Resuscitate
- Wipes
- Sterile water/saline (where mains water is not available)
- Clinical waste bins/bags
 Bio hazard disposal pack.
- Eye wash stations (where assessed as needed)
- 5.3 Tablets and medication of any description will not be kept as part of the first aid provision. If medication is needed for pupils it will be kept in a locked cupboard or fridge as appropriate and accessed only by designated staff.

5.4 Current Locations:

- First Aid Room
- Kitchen
- · Reception classroom
- 5.5 All first aiders are also issued with a grab bag containing an appropriate selection of first aid equipment
- 5.6A centralised stock is also available to enable the first aiders to restock the first aid boxes, as and when necessary. The stock will be held by the First Aid Coordinator to whom requests for additional supplies should be made. The Departmental Technicians will check and refill their First Aid boxes on a regular basis and must request supplies from the First Aid Coordinator.
- 5.7 The First Aid Coordinator also holds a grab bag containing an appropriate selection of first aid equipment for use by educational visits leaders.
- 5.8 The location of the first aid boxes, rooms and the boxes themselves will be clearly marked by a white cross on a green background.

5.9 Managers who identify a need for specific additional equipment should seek approval from the First Aid Coordinator prior to purchase to ensure it is in accord with the standards and appropriate for use at the site.

6, Travelling first aid kits

- 6.1 Where departmental activities necessitate the need for travelling, staff should to be provided with first aid equipment. The following items are considered suitable provisions;
- A leaflet giving general guidance on first aid (for example, HSE leaflet Basic Advice on First Aid at Work)
- · Six individually wrapped sterile adhesive dressings
- One large sterile unmedicated dressing approximately 18cm x 18cm
- Two triangular bandages
- Two safety pins
- · Individually wrapped moist cleansing wipes
- · One pair of disposable gloves
- 6.2A properly stocked first aid kit will always be carried in the mini buses.
- 6.3 First Aid supplies will be provided for staff in charge of trips and visits by the First Aid Co-ordinator, who needs to be advised in advance of the trip.
- 6.4 The trip leader must ensure that the medical notes for all children together with any required medication is taken on the trip

7. Defibrillator

- 7.1 The academy has acquired an automated external defibrillator (AED). It is located Photocopier Room near the school office
- 7.2 No specific training is needed to use a defibrillator the instructions are clear and must be followed carefully.

8. Illness and Minor Injury

- 8.1 Parents become responsible for their child if the pupil is unwell or injured. In order to contact parents quickly, it is essential that changes of address or phone number are passed to the School Office as soon as these are known.
- 8.2 Students must not leave lessons for first aid treatment other than in cases of emergency. Any member of staff who becomes aware that a student is injured, or needs immediate treatment, must accompany the pupil to the medical room and obtain a First Aider for assessment and care. If the injury is serious and the student cannot walk, the teacher must contact a First Aider or send another adult to alert a First Aider. Office staff may contact other available First Aiders. A First Aid rota is in operation from 8.00a.m. to 4.15pm.
- 8.3 All injuries will be attended to in the First Aid treatment room. If necessary, having first informed a member of the Senior Management/Leadership Team, the First Aiders will arrange for the parents to take the student home or to hospital. No-one else should send an ill student home.
- 8.4 Parent consent will be obtained before Calpol is administered.

9. Emergency and Serious Injury

9.1 Normally only the First Aiders will have the responsibility to call an ambulance after being called to an accident or illness, however, a member of the senior leadership team or any member of staff attending a serious injury may call an ambulance if required. The First Aid Co-ordinator or a member of the administrative or pastoral team will contact the parents to tell them of their child's injury and whereabouts

- so that the parents can go to the hospital. The hospital staff will decide whether to treat the child before the parents arrive.
- 9.2 In the case of a very serious accident or injury, the Emergency Policy's procedures will be carried out. The Trust must also be informed in these circumstances.

10 Head Injuries

- 10.1 Accidents involving a pupil's head can be problematic because the injury may not be evident and the effects only become noticeable after a period of time.
- 10.2 If the injury is minor, all head injuries should be monitored closely and parents made aware by a telephone call. Serious head injuries should always be referred for hospital treatment (please follow the section for Emergency Arrangements).
- 10.3 A telephone call to the parent to advise of all head injuries should be made, so parents are informed and can make a decision whether to collect their child to monitor themselves at home, rather than remain at school for monitoring.

11. Record keeping

- 11.1 The First Aiders will log all visits to First Aid by students on the First Aid department google spreadsheet. For accidents/injuries, the First Aider on duty will also make an entry in the Accident Book. The Accident book containing blank forms is held in the School Office and may be accessed by any member of staff at any time of day or night. The First Aid log sheets and completed Accident Book sheets for the current academic year are held in files the School Office. Records from previous years' files will be filed appropriately.
- 11.2 Staff must make an official record of any injury, minor or major, in the Accident Book which is kept in the School Office. Any serious injuries such as broken limbs, dislocations and lacerations by contaminated material, must be reported to Operations Officer Any such injuries must be reported on a RIDDOR form by Operations Officer and will be followed by an in-depth Health and Safety investigative report.

12. Reporting an Accident

- 12.1 Any first aid treatment given on the Academy's premises or as part of a school related activity should be reported to and recorded on an incident report form.
- 12.2 First Aid treatment given by first aiders should be recorded in line with the Policy.
- 12.3 Any accident occurring on the Academy premises or as part of a school related activity must be reported by the member of staff attending the accident and an Incident report form filled in.
- 12.4 Incident Report forms are available from School Office and should be filled in with precise detail containing all the required information.

13 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)

- 13.1 Under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), some accidents must be reported to the HSE. Please refer to the Accidents and Incident Reporting Policy for more detail.
- 13.2 RIDDOR reports must be carried out by the Operations Officer with the member of staff concerned. The Principal is responsible for reporting serious accidents to the Trust's governing body. Accidents are discussed at Health and Safety Committee and Academy Council meetings.

- 13.3 The First Aid Co-ordinator will provide the Principal with an analysis of the term's incidents to see if there are any problem areas. This information will also be given to the relevant Head(s) of Department.
- 13.4 Any report under RIDDOR must be communicated to the Trust as a matter of urgency.

14. Information about Students' Medical Conditions

- 14.1 It is the responsibility of the parents to inform the Academy about their child's medical conditions. Each year, during the first half of the Autumn term, all parents will be issued with a blank Data Check Sheet. They will be asked to complete and return it to the Academy.
- 14.2 Information from parents may be received by the Academy in a number of ways, such as via the admission form, via letters from parents, via conversations subsequently recorded in writing with tutors. This information should be passed immediately to the School Office to add to the database. A medical register will be produced at the start of every term by the Operations Officer in the form of a completed medical data sheet for each student (it is the responsibility of parents to ensure that the Operations Officer has a completed sheet for their child).
- 14.3 The DSL must be informed if a pupil becomes pregnant. Individual teachers will then be told in confidence.
 - 14.4 The School Office will issue detailed information on medical conditions and emergency contacts to leaders of residential visits. Parents will be required to complete a declaration agreeing to emergency treatment and confirming that information held by the Academy is up to date. Leaders can obtain copies of the declarations from the School Office.

15. Students with Medical Needs

- 15.1 Many students will at some time have a short-term medical condition that may affect their participation in activities. Other students have medical conditions that, if not properly managed, could limit their access to education. These medical conditions include diabetes, asthma, epilepsy and anaphylaxis (extreme allergic reaction). Such students are regarded as having medical needs and will be more at risk than their classmates. In a few cases, individual health care plans may be needed.
- 15.2 It is the parents' responsibility to inform the Academy about the child's medical condition and requirements. If information is withheld from staff they should not generally be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith. The Teacher must alert the First Aid Co-ordinator when a student is discovered to have medical needs. The First Aid Co-ordinator will liaise specifically with the parent to obtain as much information as possible and ensure the School Office has the information for the MIS database.
- 15.3 With particularly serious medical conditions, each case must be treated individually, in relation to the illness and its requirements, to the parents' possible wish for confidentiality and to the child's knowledge of their own condition. The School Office will talk in confidence to each of the child's regular teachers at the start of each academic year about serious medical conditions and requirements, alerting them to the child's knowledge of their own condition.
- 15.4 When the student goes out of the Academy, for example on work experience, the placement must be informed.
- 15.5 Information on students' medical conditions must be made available to first aiders in the event of an incident and to emergency medical practitioners if called.
- 15.6 Records will be kept on file of student medical needs, parental permissions, individual health care plans and medication given as required.

16. Emergency Procedure for Major Incidents

- 16.1 In the event of an emergency or if an at risk student/person falls ill then member of staff at the incident must;
- Call 999.
- · Summon a First Aider/Pastoral Support.
- · Emergency treatment should be delivered.
- 16.2 If 999 is called the following information must be given;
- The Academy's telephone number 01553 773088
- The Academy's address; Littleport Terrace, King's Lynn PE30 1QA
- Give your name.
- Name of casualty and symptoms/any known medical condition.
- Inform ambulance control of the best entrance e.g. main reception entrance.
- If an ambulance is called to the main reception, School Office should be informed and a member of staff should go to the entrance to give directions to the ambulance crew.
- If the emergency services are called the parent of the casualty will be telephoned by School Office as soon as is practicable.

17. Hygiene

- 17.1 All staff should take precautions to avoid infection and must follow basic hygiene procedures. Staff should use disposable gloves (non latex) when administering first aid, these can be found in every first aid box. Any spillages must be notified to a site maintenance assistant who will follow the correct procedure.
- 17.2 Hands must always be washed before and after giving first aid.
- 17.3 Single-use disposable gloves must be worn if treatment involves blood or other body fluids. Any soiled dressings must be put in a yellow clinical waste bag and disposed of in a clinical waste box.
- 17.4 Any body fluids on the floor should have absorbent granules sprinkled on to them, then swept up with the designated dustpan and brush (in medical room). This should also go in a yellow bag and disposed of in a clinical waste box. If possible areas should be cleaned up with absorbent powder specifically for body fluids.
- 17.5 Body fluid spillages on hard surfaces should be cleaned up with absorbent powder specifically for body fluids.
- 17.6 Exposed cuts or abrasions should always be covered.
- 17.7 In the event of wide spread viral/bacterial infections across the Academy the following actions will be taken:
- The Academy will report the situation to parents via the website, newsletters and text messages with guidance regarding avoidance, recognition, treatment and guidance on attendance.
- The guidance materials will also be used to communicate the information to students, as well as displaying posters around the Academy site.

Appendix 2 - list of appointed person(s) for first aid and/or trained first aiders

Name	Location	Expiry Date
Justina Snow	Outdoor Learning / Eagles	06.03.27
Viv Gosling	Upper KS2	17.5.25
Amy Hall – Paediatric	KS1	30.9.24
Donna Hubbard	Lower KS2	17.5.25
Sue Burton	Doves	06.03.27
Emma Brown - Paediatric	KS1 Corridor	17.1.26
Emma Claridge - Paediatric	KS1/EYFS	17.1.26
1 Day First Aid Training		
Daniel Callaby	PE Instructor	10.1.26
Lisa Hanks	Lower KS2	10.1.26
Nicola Lipscombe	School Office	10.1.26
Rebecca Smith-Ames	Reception	7.7.26
Jo Callum	Lower KS2	7.7.26
Keri Garrod	Upper KS2	25.3.25
Sean Walker	School Office	25.3.25

Mental Health First Aider (specify for pupils or adults)

Alison Williamson	Lower KS2	Feb 2026
Leanne Collison	KS1	Feb 2026
Kerensa Healy – Senior Mental Health	KS1 Corridor	May 2025

- 1. Training for First Aiders/Appointed persons should be provided by a HSE accredited provider.
- 2. A register of First Aiders/Appointed persons and their training history should be maintained by Line Managers and refresher training should be offered before certification expires.
- 3. Training for Paediatric First Aid is not approved by the HSE but may be included if first aid assessment identifies this and/or this meets OFSTED requirements.
- 4. Mental Health First Aiders should be appropriately trained and certificated and attend refreshers as necessary. Records of certificates should also be maintained at the academy.

Appendix 3: accident report form template (to be used if no other form is in place)

NAME OF INJURED PERSON		ROLE/CLASS	
DATE AND TIME OF INCIDENT		LOCATION OF INCIDENT	
INCIDENT DETAILS			
Describe in detail what ha	ppened, how it happened and	I what injuries the	person incurred
ACTION TAKEN			
Describe the steps taken the injured person imm		ncluding any first	aid treatment, and what happened to
FOLLOW-UP ACTION RE	EQUIRED		
Outline what steps the sch the risk of the incident		heck on the injure	d person, and what it will do to reduce
NAME OF PERSON ATTENDING THE INCIDENT			
SIGNATURE		DATE	

Appendix 4: Model process for developing individual healthcare plans

Annex A: Model process for developing individual healthcare plans

Parent or healthcare professional informs school that child has been newly diagnosed, or is due to attend new school, or is due to return to school after a long-term absence, or that needs have changed Headteacher or senior member of school staff to whom this has been delegated, co-ordinates meeting to discuss child's medical support needs; and identifies member of school staff who will provide support to pupil Meeting to discuss and agree on need for IHCP to include key school staff, child, parent, relevant healthcare professional and other medical/health clinician as appropriate (or to consider written evidence provided by them) Develop IHCP in partnership - agree who leads on writing it. Input from healthcare professional must be provided School staff training needs identified Healthcare professional commissions/delivers training and staff signed-off as competent - review date agreed IHCP implemented and circulated to all relevant staff IHCP reviewed annually or when condition changes. Parent or healthcare professional to initiate

Source:

Supporting Pupils at School with Medical Conditions Statutory Guidance April 2014

Appendix 5: Individual Healthcare Plan template

Name of school/setting	
Child's name	
Group/class/form	
Date of birth	
Child's address	
Medical diagnosis or condition	
Date	
Review date	
Family Contact Information	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Name	
Relationship to child	
Phone no. (work)	
(home)	
(mobile)	
Clinic/Hospital Contact	
Name	
Phone no. G.P.	
Name	
Phone no.	
	1
Who is responsible for providing support in school	

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc
Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision
Daily care requirements
Specific support for the pupil's educational, social and emotional needs
Arrangements for school visits/trips etc
Arrangements for solitor visits/trips etc
Other information
Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (state if different for off-site activities)	
	-
Plan developed with	
Staff training needed/undertaken – who, what, when	
Training freedod/andertaken whe, when	_
Form copied to	
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	1

Appendix 6: Parental Agreement for Setting to Administer Medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Date for review to be initiated by Name of	
school/setting	
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 member of staff]
The above information is, to the best of my knowledg consent to school/setting staff administering medi policy. I will inform the school/setting immediately frequency of the medication or if the medicine is s	cine in accordance with the school/setting , in writing, if there is any change in dosage or
Signature(s)	Date
(Parent/Carer/Guardian/Person with parental response	sibility)

Appendix 7: Record of Medicine Administered to an Individual Child

Name of school/setting		
Name of child		
Date medicine provided by parent Group/class/form		
Quantity received		
Name and strength of medicine		
Expiry date		
Quantity returned		
Dose and frequency of medicine		
Staff signature		
Signature of parent		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Stati lititiais		
Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Record of medicine		

administered to an individual child (Continued)

Date		
Time given		
Dose given		
Name of member of staff		
Staff initials		
Date		
Time given Dose given		
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Time given Dose given		
Name of member of staff Staff initials		
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Date		
Time given Dose given		
_		
Name of member of staff		
Staff initials		

Appendix 8: Record of Medicine Administered to All Children

Name of school/setting								
Date	Child's n	ame	Time	Name of	Dose given	Any reactions	Signature	Print name
				medicine			of staff	

Appendix 9: Model Letter Inviting Parents to Contribute to Individual Healthcare Plan Development

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the academy's policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the academy, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely