First Aid and Medical Conditions Policy

Reviewed on	Sept 2026 (Hamwic) Sept 2026 (SHS)	Review frequency	At least annually
Next review due	Sept 2027	Template Yes / No	No

Owner	Head of Estates/Headteacher	Approved by	Executive

1. History of Policy Changes

Date	Page	Change	Origin of Change
Sep 25		Addition of information following legislation updates	

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3. Introduction

Hamwic Education Trust (HET) will undertake to ensure compliance with the relevant legislation with regard to the provision of first aid for all employees and to ensure best practice by extending the arrangements as far as is reasonably practicable to children and others who may also be affected by our activities.

Responsibility for first aid at a school is held by the school leader who is the responsible manager.

All staff have a statutory obligation to follow and co-operate with the requirements of this policy.

4. Scope

Our first aid policy requirements will be achieved by:

- Carrying out a First Aid Risk Assessment to determine the first aid provision requirements for our premises.

- It is our policy to ensure that the first aid risk assessment will be reviewed periodically or following any significant changes that may affect first aid provision.
- the first aid risk assessment form will be used to produce the first aid needs assessment for our site.
- ensuring that there are enough trained first aiders on duty and available for the numbers and risks on the premises in accordance with the first aid risk assessment;
- ensuring that there are suitable and sufficient facilities and equipment available to administer first aid/medicines in accordance with the first aid risk assessment;
- ensuring the above provisions are clear and shared with all who may require them.

The responsible manager/designated person will ensure that appropriate numbers of qualified first aiders or appointed persons are nominated as identified by completion of the first aid needs assessment and that they are adequately trained to meet their statutory duties.

5. Definitions (delete as appropriate)

- 'HR' in this policy, means Hamwic Education Trust HR.
- 'Local Governing Committee' in this policy, where reference is made to the Governing Committee, this means the Local Governing Committee of the school, or the Trust in the case of a school where no Local Governing Committee is present. Where a Governing Committee is not present in a school, or numbers are low, Governors from other schools/partnerships may be used.
- 'Manager' in this policy, is anyone as identified in the staffing structure with line management responsibilities.
- 'UHS' is University Hospital Southampton
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6. First Aid Provision

It is the responsibility of the lead first aider the First Aid at Work (FAW)/first aiders to check the contents of all first aid boxes half termly, or if large amounts of stock have been used. The lead first aiders are responsible for maintaining first aid supplies for the first aid boxes ensuring they are always equipped, along with administering first aid in the school to pupils & adults.

All first aiders to receive the first aid allowance must have an in date first aid certificate and be administering first aid when needed. Lead first aiders are responsible for administering first aid in the school to both pupils and adults.

A lead first aider is an employee who has a completed a three-day First Aid at Work certificate (current) and/ or a 1 or 2 day paediatric trained person (certificate current) who is considered as one of the main first aiders dealing with first aid on a regular daily basis as decided by the school/HET.

The First Aid allowance is £15 per month

They must notify the Business Manager/ Operations Manager when supplies need ordering.

The school is situated within UHS, so accidents and medical emergencies will be referred immediately to trained NHS staff. During a trip or off site activity, a member of NHS staff will accompany the school staff to take responsibility for medical treatment or emergency care. They will take charge of the first

aid administration/emergency treatment commensurate with their training. If there is ever an occasion where the school first aider is the first to react to an incident, As the school is situated within their actions will always be in conjunction and full cooperation with the trained UHS medical staff who have ultimate responsibility for the health of the children on site. This does not include Outreach children who are not on site at UHS. All Outreach teachers have completed a 1 day paediatric training qualification (certificate current). Following their assessment of the injured person, they are to administer appropriate first aid and make a balanced judgement as to whether there is a requirement to call an ambulance. Within UHS classrooms, UHS staff will take the lead in this decision making wherever possible. If the incident is serious UHS staff will be called for support, and SHS staff will remain with the injured person until a complete handover has taken place. The injured person should not be moved if there is any possibility of a spinal or neck injury.

The first aider/appointed person is to always request an ambulance or ensure that there has been a full hand over to UHS staff on the following occasions:

- In the event of a severe injury.
- in the event of any significant head injury;
- in the event of a period of unconsciousness;
- whenever there is the possibility of a fracture/dislocation or where this is suspected;
- whenever the first aider is unsure of the severity of the injuries;
- whenever the first aider is unsure of the correct treatment;
- in the event of a severe allergic reaction or following the administration of an EpiPen; • in the event of the person having difficulty breathing;
- severe seizure if person has not had a seizure before.

In the event of an accident involving a pupil/student, where appropriate, it is policy to always notify parents of their child's accident if it:

- Is considered to be a serious (or more than minor) injury;
- requires first aid treatment for serious (or more than minor) injury;
- requires attendance at hospital;
- if there has been an injury to the head.

Our procedure for notifying parents will be to use all telephone numbers available to contact them and leave a message should the parents not be contactable. This will be in full knowledge and agreement with UHS staff for children on site in the hospital.

In the event that parents cannot be contacted and a message has been left, our policy will be to continue to attempt to make contact with the parents every hour. In the interim, we will ensure that the qualified first aider, appointed person or another member of staff remains with the pupil/student until the parents can be contacted and arrive (as required). Home schools will also be informed of any new serious injuries.

In the event that the pupil requires hospital treatment and the parents cannot be contacted prior to attendance, the qualified first aider/appointed person/another member of staff will accompany the student to hospital and remain with them until the parents can be contacted and arrive at the hospital.

All accidents requiring first aid treatment are to be recorded on the minor accident form if it involves a pupil. For more serious accidents/incidents use the online form for pupils & for staff, visitors etc.

All accidents requiring hospital treatment will be reported to the head of estates immediately in line with RIDDOR. There will then be an accident investigation by the head of estates and relevant staff.

7. Supporting pupils with a medical condition

All pupils at Southampton Hospital School (SHS) have an identified medical condition that has resulted in either a hospital admission, a prolonged spell of absence form school or both. We work in a multi-disciplinary setting with different teams of health professionals both within UHS and the community. We fully recognise as a school that mental illness and physical illness can both impact powerfully on young people's wellbeing and educational engagement. Our school exists to lessen that impact and help young people access and manage education alongside their medical condition.

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities

The governing board will implement this policy by:

- Ensuring sufficient training is being offered to staff
- Ensuring the school has procedures in place to ensure all staff are informed of pupils' medical conditions
- Ensuring there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Ensuring that procedures are in place to provide supply teachers with appropriate information about the policy and relevant pupils
- Ensuring that the school is consulting with and supporting schools with the creation and monitoring of individual healthcare plans (IHPs)

The named person with responsibility for implementing this policy is Nell Giles.

Legislation and statutory responsibilities

- This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.
- It is also based on the Department for Education's statutory guidance: Supporting pupils at school with medical conditions.

Roles and responsibilities:

The governing board

The governing board has ultimate responsibility to make arrangements to support pupils with medical conditions. The governing board will ensure that all staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

The headteacher

The headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Make sure that school staff are appropriately insured and aware that they are insured to support pupils in this way
- Work with educational settings to support and advise their creation and implementation of IHPs and other modifications for children with medical conditions
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date
- Ensure effective communication occurs between UHS staff, community health professionals and school staff, through appropriate systems, protocols and practices

Staff

Supporting pupils with medical conditions during school hours is not the sole responsibility of one person. All of our staff will be asked to provide support to pupils with medical conditions. This will sometimes include the administration of medicines (mainly school trips) under the supervision of relevant health professionals. The vast majority of children's medications, whilst in hospital, will be administered by UHS staff and SHS staff will only administer under circumstances agreed directly with a nurse, Doctor and/ or therapist within UHS. Medical professionals and/or school will ensure parents have been consulted in these plans. All staff will receive sufficient and suitable training, and will achieve the necessary level of competency before administering any medications.

SHS staff will attend regular ward rounds, MDTs and handovers to ensure medical needs of all children are fully understood and supported. Teachers will take into account the needs of pupils with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

SHS will encourage involvement of parents and health care professionals in the following ways:

- Providing the school with sufficient and up-to-date information about their child's medical needs
- Being involved in the development and review of a child's IHP and may be involved in its drafting
- Carrying out any action they have agreed to as part of the implementation of the IHP or hospital treatment plan e.g. provide medicines and equipment

Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their treatment plans and/or IHPs. SHS will encourage this student voice through curriculum content, emotional support, RSHE and attendance at MDTs, ward rounds and hand overs. They are also expected to comply with their treatment plans and IHPs.

Southampton Hospital School recognises that medical conditions may be physical, psychological or psychiatric in nature. The school is committed to ensuring that pupils experiencing mental ill health receive the same level of support, reasonable adjustment and educational access as those with physical health conditions.

Equal opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities. Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

Being notified that a child has a medical condition

Medical staff or referring schools will be asked to notify the school directly about new students' medical conditions and requirements. School staff will contact schools to discuss any current IHPs. On discharge, school staff and/or health care professionals will endeavour to support schools to review their IHPs and medical provision for returning students. This may not happen if children are discharged in school holidays or without the knowledge of the Hospital School or the returning school. In these cases, the Hospital School will notify the returning school at the start of the succeeding term. Planning for reintegration to the pupil's home school or next educational placement will begin at the earliest appropriate opportunity. SHS staff will work collaboratively with parents/carers, healthcare professionals and home schools to ensure successful transition arrangements and continuity of educational and medical support.

Individual healthcare plans

Upon admission to Southampton Hospital School, an Individual Healthcare Plan (IHP) is developed for every pupil in collaboration with relevant healthcare professionals, parents/carers, the young person and their home school. The IHP is used to ensure that medical, educational and pastoral needs are clearly understood and that appropriate support and reasonable adjustments are put in place from the outset of a placement.

In addition, every pupil is provided with a Pupil Profile, which captures key information about their strengths, interests, educational needs, health needs and preferred strategies for support. The Pupil Profile is a working document that is regularly reviewed and updated throughout a pupil's placement to ensure that support remains responsive to changing needs.

Medical and educational needs are monitored through ongoing assessment and reviewed through the school's Assess, Plan, Do, Review processes, ensuring a coordinated and holistic approach to support. Where appropriate, updates to a pupil's IHP and Pupil Profile are made in consultation with healthcare professionals, parents/carers, the young person and the home school.

On discharge, relevant information from the Pupil Profile and any agreed transition documentation is shared with parents/carers and the pupil's home school to support continuity of provision and successful reintegration.

Southampton Hospital School leaders and staff will work collaboratively with home schools, families and healthcare professionals to review and amend Individual Healthcare Plans where required, ensuring that the plans remain accurate, effective and reflective of the pupil's current needs.

Managing medicines

During a hospital admission, all medicines will be managed by health care professionals, not by SHS staff. The only exception to this may be in the event of a school trip or visit off site. In this instance, SHS staff will create a medication plan with the appropriate health care professionals. All school trips involving dual registered pupils off site are attended by a health care professional from UHS.

Outreach students will be individually risk assessed with parents' full knowledge and consent. Parents will be asked to complete medical forms and agree to all measures outlined in the risk assessment. They will be asked to accompany children if the medical risk is too high for school staff to manage alone.

Students will be actively encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with health care professionals and parents where appropriate.

Pupils will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a pupil to take a medicine or carry out a necessary procedure if they refuse, but will consult immediately with UHS staff.
For outreach students, an adult (parent or agreed carer) must always be present during teaching sessions, and they will be responsible for this. If sessions are taking place in a public space such as a library, a full risk assessment is completed with the pupil and their parents before sessions begin. If the medical risk is deemed to be moderate to high, parents will be asked to remain on site, nearby or easily contactable.

School staff should use their discretion and judge each case individually with reference to the pupil's IHP, but it is not acceptable to:

- Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every pupil with the same condition requires the same treatment
- Ignore the views of the pupil or their parents
- Ignore medical evidence or opinion (although this may be challenged)
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise pupils for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips

Emergency procedures

- Staff will follow the school's emergency procedures (for example, calling 999 or 2222 within UHS for an ambulance). All pupils' treatment plans or IHPs will clearly set out what constitutes an emergency and will explain what to do in such an instance.

Training

Staff who are responsible for supporting pupils with medical needs will receive suitable and sufficient training to do so. The training will be identified according to current admissions. Staff will be present in handovers, ward rounds and MDTs wherever possible. Medical information from such meetings will be shared with the necessary staff via morning briefings, email or Bromcom entries.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the pupils
- Fulfil the school based requirements in treatment plans and IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures
- All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

Record keeping

Treatment plans, medical meeting minutes and/or IHPs are kept on Bromcom and/or Microsoft Teams, which are accessible to all. Teaching and non-teaching staff, including cover staff. Medical information will be stored securely in accordance with UK GDPR requirements and Trust information governance procedures. Access will be limited to staff who require the information to fulfil their professional responsibilities.

Insurance

The Trust board and local governing body will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

We will ensure that we are a member of the Department for Education's risk protection arrangement (RPA).

Complaints

Parents with a complaint about their child's medical condition or needs should discuss these directly Nell Giles, Headteacher, who will consult with relevant medical professionals and staff to investigate the complaint.

8. Managing and administration of medicines

Whilst the majority of medicines are administered and managed by University Hospital Southampton (UHS) clinical staff, Southampton Hospital School recognises that medicines may occasionally need to be managed by school staff during off-site educational visits, outreach provision or other exceptional circumstances. In these circumstances, medicines will only be administered by appropriately trained staff following agreement with parents/carers and relevant healthcare professionals. Appropriate records will be maintained, and medication will be stored and transported safely in accordance with medical advice.

Where SHS staff are required to administer medication during outreach provision or educational visits, written parental consent must be obtained in advance. Medication administration records must be completed following each administration. Staff must only administer medication for which they have received appropriate training and support from relevant healthcare professionals.

Where medication is brought onto school visits or used within outreach provision, it must be clearly labelled and remain readily accessible. Emergency medication, including inhalers and adrenaline auto-injectors, must never be stored in a manner that delays access during an emergency.

8. Transport to Hospital

Where the School Leader/SLT considers that hospital treatment is required the school should contact the emergency services for advice and follow it. Parents must be contacted and informed of the situation. If the emergency happens on site at UHS, the nearest available UHS staff will be informed immediately. This may be ward nurse, matron, HCA, therapist or doctor. School staff must stay in attendance until a full hand over has taken place and the medical team are happy for them to leave.

The phone number to call an ambulance on the UHS site is 2222.

School staff and medical staff should agree who is going to inform the parent and do so immediately.

If school staff are not satisfied that the appropriate medical care is being provided they should call 999 and/or 2222.

If school considers that further medical advice is required, the school should contact the pupil's next of kin. If the next of kin cannot be contacted and/or do not have access to own transport, the school can, only in these exceptional circumstances arrange to transport the injured person using their school staff transport or walking them to A&E.

They must be accompanied by an additional responsible adult to support the injured person wherever possible and where this does not delay essential treatment. If a child needs to be taken to hospital by ambulance a member of staff should accompany the child and stay with the injured child until their parents/guardians arrive.

For outreach children, staff should call parents immediately if they are not already in attendance at the session. If the next of kin cannot be contacted and/or do not have access to own transport, the school can, only in these exceptional circumstances, arrange to transport the injured person using their own transport or walking them to A&E. In cases of more serious illness or injury, teachers will call 999 immediately and request an ambulance. They should also contact the school office, and parents must be informed as soon as possible. If an ambulance arrives before the parent, the outreach teacher must accompany the child in the ambulance and notify the parent and school office of where they are being taken to. They must stay with the child until the parent arrives.

Please note: All staff who are likely to use their own vehicles for business travel must have the appropriate business insurance, a valid MOT certificate (if required). It is the responsibility of the Head

Teacher/Manager to check these documents together with the individual's driving license making note of any endorsements on an annual basis and maintain appropriate records.

9. Monitoring & Review

This policy will be reviewed annually by the owner