Supporting Students with Medical Needs Policy

September 2024

Title:	Supporting Students with Medical Needs Policy
Procedure Code:	TBC
Source:	Sir William Burrough Primary School
Document Owner:	Executive Headteacher
Review & Update By:	Executive Headteacher
Advisory Committee:	X
Approval Committee:	School Committee
Date Approved:	September 2024
Date of Publication:	September 2024
Date of Next Review:	September 2025
Required on Website:	Yes

0. Document Control

The table below contains the changes made between the different final editions of this document set for approval. This is to help provide information to those reviewing and approving the document of the changes being made.

Document Edition	Section	Details of change
September 2024	All	First policy in UST style

Contents

0. Document Control 3
1. Definitions 5
2. Scope of the Policy 5
3. Policy Aims and Ethos 5
4. Links to Legislation and Guidance Documents 6
5. Roles and Responsibilities 6
6. Notification of a Medical condition and Individual Healthcare Plans (IHPs) 8
7. Staff Training 10
8. Administering Medicines 11
9. Approval Signature 13
10. Appendix 1 – Key Members of Staff Referenced 14
11. Appendix 2 – Links to Legislation & Guidance Documents 14
12. Appendix 3 – Processes for Developing Individual Healthcare Plan 15
13. Appendix 4- Medication Request Forms and Managing a critical Incident 16

1. Definitions

The "Trust" refers to the company known as the University Schools Trust, East London and all Trustees, Governors and Staff who work within it.

A "School" refers to an individual academy within the Trust, as denoted by their Unique Reference Number. As such a 'school' may span one or several phases of education to the individual academies within the Trust. Depending on the context the term "School" may refer to a singular academy or to all of the academies within the Trust but as separate entities.

"Staff" refers to any individual who is employed by the Trust or who operates on the Trust's behalf, e.g. Trustees and Governors.

A "Parent" includes the natural or adoptive parent of a pupil as well as any non-parent / carer who has parental responsibility including being involved in the day-to-day care of a pupil.

A "Pupil" includes any incoming or current pupil at any School within the Trust. It also includes any individual who was previously a pupil at any School within the Trust and who has left within the appropriate timeframe for consideration as necessary, e.g. complaints. The term pupil is used as standard by the UST in its policy documents but can be replaced with the term "student" or "child" with no change of definition.

The "Headteacher" is defined as the individual who has ultimate responsibility for a school in line with UST strategy, approach, ethos and values. Individual schools may have alternative titles for this position such as Executive Headteacher or Principal.

2. Scope of the Policy

This policy applies to staff employed at Sir William Burrough School and to the pupils and their parents/guardians who attend the school.

3. Policy Aims and Ethos

Sir William Burrough Primary School has an inclusive school community which welcomes and supports students with medical conditions. The school ensures that students with medical conditions have access to the same opportunities as all other students in the school. We understand that some of our students have medical needs which mean that additional measures are required to ensure that they are able to have full access to the curriculum; that the impact of their medical difficulties upon their life in school is minimised as far as possible and that all staff who work with the students understand the nature of their difficulties and how best to help them:

- We make sure all staff understand their duty of care to children and young people in the event of an emergency.
- We understand that certain medical conditions are serious and potentially life threatening, particularly if poorly managed or misunderstood.
- We understand the importance of medication and care being taken as directed by healthcare professionals and parents.

- All staff understand the medical conditions that affect students at this school. Relevant staff receive training on the impact medical conditions can have on students and their learning.
- No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.
- We will listen to the views of students and parents/carers. Students and parents/carers feel confident in the care they receive from this school and the level of that care meets their needs.
- We understand that all children with the same medical condition will not have the same needs.

4. Links to Legislation and Guidance Documents

This policy has been developed using Ofsted guidance regarding students with medical needs (April 2104), and with reference to DFE guidance 'Supporting Pupils at School with Medical Conditions" (December 2015), The Equality Act (2010), and The Special Educational Needs and Disability Code of Practice (2014, updated January 2015), Education Act (1996) and (2002), The Children and Families Act (2014) and The NHS Act (2006).

4.1. Relevant Internal Policies

This policy should be read in conjunction with the following policies;

- The First Aid Policy
- The SEND Policy
- The Accessibility Plan

5. Roles and Responsibilities

5.1. Trust Board

The Trust Board is responsible for ensuring that:

- The supporting pupils with medical conditions policy and procedures of SWB School (as laid out in section 100 of the Children and Families Act 2014) is implemented
- The Policy, as written, does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation. In addition, that no student with a medical condition should be denied admission or prevented from taking up a place in school because arrangements for their medical condition has not been met
- Complaints regarding this policy are dealt with in accordance with the school's complaints policy
- All pupils with medical conditions are able to participate fully in all aspects of school life. In doing so, members of the Trust Board may take into account that school procedures and facilities are such that school systems can deal with students' needs in a flexible manner and may offer programmes of study are suited to part-time attendance at school or alternative programmes of study at alternative venues. Support must take into account the needs of students as individuals, and should work towards increasing the individual's confidence and ability to self-care
- Relevant training is delivered to staff members who take on responsibility to support students with medical conditions

- Information and teaching support materials regarding supporting pupils with medical conditions are available to members of staff with responsibilities under this policy
- Written records of any and all medicines administered to individual students and across the school population are kept up to date
- Parents, carers and students remain confident in the school's ability to provide effective support for students with medical conditions at the academy

The level of insurance in place reflects the level of risk, and that suitable risk assessments are in place for school trips and other activities outside of the normal timetable.

5.2. Executive Headteacher/Deputy Headteacher

The Executive Headteacher/Deputy Headteacher are responsible for:

- Ensuring that this policy is developed effectively with partner agencies and then making staff aware of this policy
- The day-to-day implementation and management of the policy
- Liaising with Healthcare professionals regarding the training required for staff
- Identifying staff who need to be aware of a child's medical condition and actions they need to take to support them
- Developing Healthcare Plans (IHP) - (Appendix A)
- Ensuring that a sufficient number of trained members of staff are available to implement the policy and deliver IHPs in normal, contingency and emergency situations
- If necessary, facilitating the recruitment of staff for the purpose of delivering the promises made in this policy; and ensuring that more than one staff member is identified, to cover holidays/absences and emergencies
- Ensuring that the correct level of insurance is in place for staff who support children in line with this policy
- Continuous two-way liaison with school nurse and school in the case of any child who has or develops and identifies medical condition
- Ensuring confidentiality and data protection
- Assigning appropriate accommodation for medical treatment/care.

5.3. Policy Compliance Lead

SWB primary school will ensure that students with medical conditions receive appropriate care and support at school. This policy incorporates the advice of the Department of Education and Skills and the Department of Health (Ref: 1448-2005DCL-EN, March 2005) and the most recent guidance from the DFE *Supporting Pupils at School with Medical Conditions* (DFE, December 2015).

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, governing bodies must comply with their duties under the Act. Some may also have Special Educational Needs and Disabilities, and may have an Education Health Care plan which brings together health and social care needs as well as their special educational needs.

5.4. All Staff

Staff members are responsible for:

- Taking appropriate steps to support students with medical conditions and familiarising themselves with procedures which detail how to respond when they become aware that a child a with medical condition needs help
- Knowing where the controlled drugs are stored
- Making reasonable adjustments to include pupils with medical conditions into lessons
- Administering medication under controlled conditions, when medically necessary, if this is in their Job Description or if they have agreed to undertake that responsibility
- Undertaking training to achieve the necessary competency for supporting pupils with medical conditions, where the support may be emergency in nature, e.g. administering epi-pens or calling an ambulance
- Referring students to a first aider if they have any concerns about a student's health
- Referring students to the designated safeguarding lead if they have any concerns about
- a student's health or wellbeing.

6. Notification of a Medical condition and Individual Healthcare Plans (IHPs)

School admissions forms request information from parents on pupil's pre-existing medical conditions, which are then recorded on the Medical Condition Register. A starter checklist will be put in place detailing: action, time-frame, staff member responsible, with each action being signed off by the staff member responsible (See APPENDICES E and F). The school will ensure there is sufficient time between the completion of paperwork and the student starting school to ensure all medical care systems are in place. In addition to the admissions forms further checks will be made during the Year 6 transition process and the Nursery or Reception Admissions Process.

At the Year 6 Parents Information evenings parents and carers will be informed of the importance of keeping the school updated with their children's medical conditions. At these events additional information will be gathered via medical questionnaires to be completed by all parents and carers. In the Primary Phase staff will be notified by email prior to the start day for a new child with food allergies and medical conditions requiring emergency medication. This will also be displayed in the child's classroom in the medical needs cupboard and the first aid room. In addition, parents should advise the school at any point in the school year if a condition develops or is diagnosed. Schools do not have to wait for a formal diagnosis before providing support.

A medical condition register is kept, updated and reviewed regularly by the nominated member of staff and Pastoral Coordinator. Staff have an overview of the list for the children in their care. This is accessible via Arbor and the medical condition register or caseload which is displayed in key communal areas and in classrooms and the first aid area.

The Pastoral Coordinator is responsible for sharing this information with staff and ensuring that the school management system is accurately updated.

Where required, the School Nursing Service, Healthcare Visitor for under 5s or relevant health care professionals must be informed and take the lead in writing Individual Healthcare Plans (IHP).

Individual Health Care Plans (IHP)

An IHP details exactly what care a child needs in school to address their medical conditions, when they need it and who is going to give it. It also includes information on the impact any health condition may have on a child's learning, behaviour or classroom performance. They are essential in cases where medical conditions fluctuate or where there is high risk that emergency intervention will be needed and are likely to be helpful in the majority of other cases. However, some students with medical needs may not require an IHP. The school, healthcare professional and parent should agree, based on evidence, when a healthcare plan would be inappropriate.
Where necessary an Individual Healthcare Plan will be developed in collaboration with the child, their parents/carers, the Headteacher, the SENDCo, Deputy Headteacher or Pastoral Coordinator – Primary School, and medical professionals. Where an IHP is unavailable a medical support plan will be created.

IHPs will be easily accessible to all relevant staff, including supply and agency staff, whilst preserving confidentiality. However, in the case of conditions with potential life-threatening implications, the information will be made available to everyone. The IHP will accompany a student should they need to attend hospital.

IHPs are kept securely in the medical room, with a copy in the AEN office or with AEN records. Staff have access to them and refer to them when taking children with medical conditions offsite (a copy of the IHP is taken on the trip) and forms part of the risk assessment. In the Primary School, a further copy of the IHP and medical pack will be stored in the child's classroom.

IHPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.

Where a child has an EHC Plan or statement of special educational needs, the IHP will be linked to the care plan or become part of it.

Where a child is returning from a period of hospital education, alternative provision or home tuition, the school will collaborate with the LA and the alternative provision to ensure that the IHP identifies the support the child needs as part of reintegrate.

In periods of transition, for example from Primary School, the Pastoral Co-Ordinator will ensure that all support documentation is in place to support the medical needs of the pupils.

See Appendix 3 for the IHP process.

Self-Management - Students with medical conditions are often best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs where their age and understanding allows. After discussion with parents, students who are competent should be encouraged to take responsibility for managing their own medicines and procedures. This should be reflected within IHPs. At SWB no pupils will be responsible for carrying their own medication and will be supervised during administration of all medication. If a child refuses to take medicine or carry out a necessary procedure, staff

should not force them to do so, but will follow the procedure agreed in the individual healthcare plan. Parents will be informed as soon as possible so that alternative options can be considered.

Emergencies, Record Keeping and unacceptable Practice
All staff are aware of procedures when dealing with medical emergency. (Appendix B Managing a Critical Incident). These should be supervised by trained First Aider. All staff are aware of pupils on the health care plan and understand the need to follow agreed emergency support. All staff know how to call the emergency services; guidance is displayed in the school offices.

Children will be informed in general terms of what to do in an emergency (such as telling a teacher). In the event of an emergency, every effort will be made to contact a parent so that they may accompany their child to hospital. If this is not possible, a member of staff will accompany the child to hospital by ambulance and stay until the parent/s arrives. Health care professionals are responsible for any decisions on medical treatment when parents are not available.

Written records will be kept of all medicine and First Aid administered to pupils Parents will be informed if a child has been unwell in school.

SWB understands that the following behaviour is unacceptable:

- Assuming that pupils with the same condition require the same treatment
- Ignoring the views of the pupil and/or their parents
- Ignoring medical evidence or opinion
- Sending pupils home frequently or preventing them from taking part in activities at school
- Sending the pupil to the medical room or school office alone if they become ill
- Penalising pupils with medical conditions for their attendance record where the absences relate to their condition
- Making parents feel obliged or forcing parents to attend school to administer medication or provide medical support, including toilet issues
- Creating barriers to children participating in school life, including educational visits.
- Refusing to allow pupils to eat, drink or use the toilet when they need to in order to manage their condition.

7. Staff Training

All staff understand their duty of care to all students in an emergency. If staff require the support of a first aider (identified by green lanyards), they know that they can contact the medical room or reception. The Secondary and Primary school ensure that sufficient numbers of trained first aiders are available at all times during the school day and available on educational trips and visits.

The Deputy Headteacher, Pastoral lead, Pastoral-Co-ordinator, class teachers and first aiders are aware of students' medical conditions. Staff who are for supporting pupils with medical needs receive suitable and sufficient training to do so. Staff who supervise the medical room have up to date first aid training. In addition, training in particular medical needs e.g. diabetes is in place for pastoral staff. This information is shared on the school management system and published medical lists with children's photos are available in all staff offices, the medical room and the staff medical boards for each year group and in

classroom medical cupboards. All First Aiders should sign to confirm they have read the full medical information. In the Primary Phase all MDAs and kitchen staff should sign if the child has a food allergy.

All newly appointed staff will be briefed about this policy as part of their induction and required to read this policy on SchoolBus. For supply teachers, students with medical conditions will be identified in one of the following ways; on lesson planning documentation (seating plans), in class medical cupboards or flagged on the visitor's booklet. All staff will be given a briefing on existing procedures and changes to existing procedures.

For students with serious or life-threatening conditions, relevant key staff will be trained to meet the needs of the student in question. The relevant healthcare professional will normally lead on identifying and agreeing with the school, the type and level of training required, and how this can be obtained. Training will be sufficient to ensure that staff are competent and have confidence in their ability to support students with medical conditions, and to fulfil the requirements as set out in individual healthcare plans. All staff will be aware of which colleagues have been trained in what to do in an emergency situation. This information will be displayed in all offices. Training will be reviewed annually, or sooner if the student's medical needs change.

Staff must not undertake health care procedures without appropriate training. A first-aid certificate does not constitute appropriate training in supporting children with medical conditions. Healthcare professionals, including the School Nursing Service, can provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

SWB Primary School will keep a record of medical conditions supported, training undertaken, and a list of staff qualified to undertake responsibilities under this policy. The Deputy Headteacher will be responsible for the updating and sharing of this list. This list will be distributed alongside the medical list in all offices.

The School Office is responsible for making phone calls to the emergency services should the need arise.

8. Administering Medicines

SWB School will follow the administering medicines guidelines in 'Supporting Pupils at School with Medical Conditions" (December 2015). Prior to staff members administering any medication, the parents/carers of the child must complete and sign a 'Parental Consent to store and administer Medicine's form'. Completed forms should be kept in the child's medical bag in the classroom cupboard. Medical room and a copy in their school file. A copy will be given to parents.

The following procedures should be followed for the administration of prescribed medication for both long and short-term medical conditions. This includes the administration of antibiotics

- Medication can only be accepted in school where it has been prescribed by a doctor or other medical professional
- The medication should be in its original, secure container with the original prescription label showing the child's name correctly
- For pupils who attend for the main school day, the school will not administer antibiotics that are to be administered 3 times per day, as these can be administered within the home. For children who attend our out-of-hours childcare, one of the three doses can be administered in school. We ask

that parents always request a three times per day dosage of medication from their GP. Where antibiotics must be administered 4 times per day, children attending for the normal school day can be administered one dose in school and pupils attending our out-of-hours child-care can be administered two doses in school

- All necessary equipment should be provided by the parent/carer (for example measuring syringe or measuring spoon)
- Medication can only be administered to pupils where parents/carers provide such medication to the school and parents/carers must specifically request in writing that the school administers it, using a 'Medication Administration Request Form' (Appendix 4)
- An additional form must be completed by parents where pupils require several medications. Parents should sign to confirm that the combined medications have been administered to the pupil without any adverse effects and that approval has been obtained for their combined administration from a medical practitioner, using the 'Combined Medications Request Form' (Appendix 4)
- Medication will not be accepted without a written parental request and clear instructions as to administration
- Parents must also specify in advance at what times/intervals and what dose of the non- prescription medicine is to be given. It must never be left for staff to diagnose or decide where and when the medication is required or administered
- All medicines should be stored in a locked medicine cabinet when on school premises, except for medicines such as inhalers, where it is vital that the medication can be accessed quickly in an emergency. The exception to this is medication which must be refrigerated
- Wherever possible pupils should be encouraged to self-administer medication unless they are deemed too young or unable to do so. This will be done under the close supervision of an appropriate adult. Guidance from health colleagues may need to be sought in making this decision
- The school member of staff administering the medication (or supervising self-administration) must record details of each occasion when medicine is administered to a pupil
- If pupils refuse to take medication, the school staff should not force them to do so. The school should inform the child's parents as a matter of urgency, and may need to call the emergency services
- Parents/carers should be advised that it is their responsibility to notify the school of any changes to a child's medication. Parents/carers should also inform the school of any other circumstances that may affect the administration of medication or of the child's reaction to the medication.

Other Issues for Consideration:

Legislation was passed to allow schools in the UK to keep spare adrenaline auto –injectors (AAI's) for emergency use, which came into effect from 1 October 2017. SPW school will be purchasing AAIs from a pharmaceutical supplier, without prescription, for use in emergencies. Letter will be sent out to AAI user's parents for consent.

The school will also hold emergency Salbutamol Inhalers. The inhalers will only be used by pupils who either been diagnosed with asthma or prescribed an inhaler, or who have been prescribed an inhaler as a reliever medication. Written consent will be required from their parents/carer (a letter will be sent annually and mid-term for those who have new diagnosis).

Site Trips

When preparing risk assessments staff will consider any reasonable adjustments, they might make to enable a child with medical needs to participate fully and safely on visits.

Additional safety measures may need to be taken for outside visits and it may be that an additional staff member or a parent/carer might be needed to accompany a particular child. Arrangements for taking any medicines will need to be planned or as part of the risk assessment and visit planning process. A copy of their IHP should be taken on trips and visits in the event of information being needed in an emergency. (Specific details will be clearly stated on the risk assessment).

9. Approval Signature

Signature of (enter position e.g. Chair) _____

Print name _____

Date _____

10. Appendix 1 – Key Members of Staff Referenced

Role	Name
Executive Headteacher	Siobhan Fehim
Senior Deputy Headteacher	David Hodges
Deputy Headteacher	Karyce Maitland
Pastoral lead	Heather Coney
Pastoral Coordinator	Syeda Begum

11. Appendix 2 – Links to Legislation & Guidance Documents

Appendix 2 contains the full details of the documents referred to in the Links to Legislation Guidance Documents section. This should be the web locations or internal system as appropriate. Reference may also be made that copies are available on request if also appropriate.

Where possible electronic versions of the policy should link directly to the location of the document referenced.

SEND Code of Practice (2014) *https://www.gov.uk/government/publications/send-code-of- practice-0-to-25*
Childrens and Families Act (2014)
https://www.legislation.gov.uk/ukpga/2014/6/contents/enacted
Education Act (1996 and 2002) *https://www.legislation.gov.uk/ukpga/1996/56/contents*
https://www.legislation.gov.uk/ukpga/2002/32/contents
NHS Act (2002) *https://www.legislation.gov.uk/ukpga/2006/41/contents*
Supporting Children in Schools with Medical Conditions (2021)
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf

12. Appendix 3 – Processes for Developing Individual Healthcare Plan

Step	Actions	
1	Parent or healthcare professional informs school that a child has a medical condition or is due to return from long-term absence, or that medical needs have changed.	
2	Inclusion Lead/Deputy Headteacher co-ordinates meeting to discuss the child's medical needs and identifies members of the school staff who will provide support to the pupil.	
3	Meeting held to discuss and agree on the need for IHP to include key school staff, child, parent, and relevant healthcare professionals.	
4	Develop IHP in partnership with healthcare professionals and agree on who leads	
5	School staff training needs identified	
6	Training Delivered to staff with review date agreed	
7	IHP implemented and circulated to relevant staff	
8	IHP reviewed annually or when condition changes. Parent/carer or healthcare professional to initiate. (Back to step 3)	
9	In the absence of a healthcare professional, parents and school professionals will meet to create an interim medical plan.	

13. Appendix 4- Medication Request Forms and Managing a critical Incident

Medication Administration Request Form - Secondary

This form must be completed by parents/carers prior to the administration of any non-emergency medication. Please read the guidance in our policy for 'Supporting Pupils with Medical Needs' prior to completing this form.

Forename	Surname
Date of Birth	M/F
Class	
Condition or Illness	
Medication	
Name/type of medication (as described on container)	
For how long will your child take this medication?	
Date dispensed	
Full directions for use	
Dosage and amount (as per instructions on container)	
Method	
Timing	
Special storage instructions	
Special precautions	
Side effects	
Self-administration?	
Action to be taken if pupil refuses to take the medication	
Procedures to take in an emergency	

Contact Name	
Daytime Telephone No	
Relationship to Pupil	
Address	
I understand that I must deliver the medication personally to the agreed member of staff and I request that authorised staff administer (or supervise self-administration) the above medication to my child. I accept that this is a service which the school is not obliged to undertake. I consent to medical information concerning my child's health to be shared with other school staff and/or health professionals to the extent necessary to safeguard his/her health and welfare. I confirm that the medication has been prescribed by a doctor/consultant and that this information has been provided in consultation with my child's doctor/consultant.	
Full Name of Parent/Carer	
Signature	Date

Template B: 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 knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____ Date_____

Combined Medications Request Form

For parents/carers to complete for pupils who require several medications

Pupil's Name: .....

Pupil's date of Birth: .....

I confirm that the combined medications listed below have been administered to my child without any adverse effect and that approval has been obtained from a medical practitioner for their combined administration.

Parent/Carer Name: .....

Signed ..... Dated.....

Relationship to child.....

Date Information Supplied	Name of Medication	Type	Dose	When Given	Method of Administration	Start Date (as applicable)	End Date (as applicable)	Special Precautions

1. First check that you and the casualty are not in any danger, if you are make the situation safe.	**Adult first at scene** • Check that the casualty is breathing and is conscious. If not, call for help and dial **999**. • In case of any life and death situation ring **999** from a mobile phone. • Ask if the casualty has any medical needs • Do not move the casualty, wait for direction from the First Aider. • If the casualty is a child ask for their name, form class and if possible their date of birth. • You should always get another adult to call reception if possible via the nearest office. • If no other adult is in the vicinity, leave the casualty and go to the nearest phone and ring 104. • Give the casualty's details to the office staff. • In every office there is a list of current First Aiders and students with medical needs which is hung on the wall. • If it is a 999 call handover the phone to the First Aider. • The situation may draw a crowd. Ask someone to find an adult and a member of SLT immediately. Then ask the crowd to disperse. • If you have other commitments, inform the SLT colleague. You will need to stay with the casualty unless directed by the SLT colleague. **First Aider** • First Aider to identify the casualty and see if they have any existing medical needs. • First Aider will have to bring the First Aid Box. This will have the list of medical needs for all students. • First Aider goes in the ambulance with the casualty and stays at the hospital until the family arrive. **Office staff** • Office staff should immediately release the medical room staff and make an announcement on the radio to check that a First Aider has arrived. • Office staff check to see if the child has a medical care plan or has any medication on site. Pass on the details to the First Aider immediately. • Inform the family that there has been a critical incident and they are required on site immediately. **SLT.** • SLT on duty to ensure safe environment for all students and check on the wellbeing of any witnesses. • The SLT checks that contact has been made with parent/carer and ensures there are follow up calls. • Ensure the incident is recorded in the accident and medical book. Obtain a full account from all witnesses and pass onto the Headteacher/Deputy Headteacher.
2. Try to identify the casualty and stay at the scene.	
3. Immediately ask someone to get help from the school office (in person or on ext. 104).	
4. Ask for a First Aider and member of SLT to attend immediately informing them it is a critical incident	
5. Stay at the scene and calm the situation.	
6. Assist the First Aider and follow any instructions given to you.	
7. First Aider decides if it is a 111/999 call.	
8. First Aider gives instructions in dealing with the casualty's medical care.	