

## **First Aid Policy**

January 2026

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**This policy can be made available in large print or other accessible format if required.**

## **1 Introduction**

- 1.1 This policy has been authorised by the Governors of King's College School ("the School"). It is available to parents and pupils and to all members of School staff. It is a whole school policy and applies to EYFS and the boarding provision.
- 1.2 The arrangements within this policy (for example the number of first aiders and first aid boxes and contents of first aid boxes) are based on the results of a suitable and sufficient risk assessment carried out by the School in regard to all staff, pupils and visitors.
- 1.3 This policy complies with regulation 13 of the Education (Independent School Standards) (England) Regulations 2014(SI 2014/3283), the Health and Safety at Work etc Act 1974 and subsequent regulations and guidance including the Health and Safety (First Aid) Regulations 1981 (SI 1981/917) and the First Aid at work: Health and Safety (First Aid) Regulations 1981 approved code of practice and guidance.
- 1.4 In addition to this policy, the School also has Procedures for the Administration of Medicines and Procedures for the Care of Ill or Injured Pupils or Staff (appended).

## **2 Definitions**

- 2.1 'Appointed persons' are members of staff who are not qualified first aiders but who are responsible for looking after the first aid equipment and facilities and calling the emergency services if required.
- 2.2 'EFAW' means Emergency First Aid at Work.
- 2.3 'FAW' means First Aid at Work.
- 2.4 'First aid' means the treatment of minor injuries which do not need treatment by a medical practitioner or nurse as well as treatment of more serious injuries prior to assistance from a medical practitioner or nurse for the purpose of preserving life and minimising the consequences of injury or illness. For the avoidance of doubt, first aid does not include giving any tablets or medicines, the only exception being giving aspirin in accordance with accepted first aid practice to treat a suspected heart attack. A first aider can assist an individual to take aspirin when an ambulance is on route.
- 2.5 'First aiders' are members of staff who have completed an approved first aid course and hold a valid certificate of competency in FAW or EFAW or an approved alternative qualification which has been identified in place of FAW or EFAW which meets the requirements of the First Aid Guidance.

- 2.6 'First Aid Guidance' is the First aid at work: Health and Safety (First Aid) Regulations 1981: approved code of practice and guidance (Health and Safety Executive, L74, 3<sup>rd</sup> Edition, 2013).
- 2.7 'First aid personnel' means first aiders or appointed persons or both.
- 2.8 'Inhalers Guidance' means the Guidance on the use of emergency salbutamol inhalers in schools (Department of Health, March 2015).
- 2.9 'Staff' means any person employed by the School, volunteers at the School, and self-employed people working on the premises.
- 2.10 'School Accident and Illness Book' has the meaning given in 15 below.
- 2.11 School Nurse: Alison Gelling, the School Nurse, is primarily located in the School's First Aid Room. Alison Gelling is registered with the Nursing and Midwifery Council; the School verifies this registration annually. The School Nurse also directs Boarding House staff in first aid procedures for all boarders in coordination with the Boarding House Matron.
- 2.12 The School's 'First Aid Room' is located on the ground floor of the main building, just outside the Dining Hall, and is clearly signposted and identifiable with a white cross or white writing on a green background. It is used for the provision of medical or dental first aid when required. The First Aid Room has essential first aid facilities and equipment. As far as is possible, the School reserves this room exclusively for giving medical or dental first aid treatment.

### **3 Policy Aims**

- 3.1 To ensure that the School has adequate, safe, and effective first aid provision in order for every pupil, member of staff and visitor to be well looked after in the event of any illness, accident, or injury no matter how major or minor.
- 3.2 To ensure that all staff and pupils are aware of the procedures in the event of any illness, accident, or injury.
- 3.3 To ensure that first aid provision is available at all times while people are on the School's premises and while on educational visits. Nothing in this policy should affect the ability of any person to contact the emergency services in the event of a medical emergency. For the avoidance of doubt, staff should dial 999 for the emergency services in the event of a medical emergency before implementing the terms of this policy and make clear arrangements for liaison with ambulance services on the School site including King's College Chapel.

### **4 Medical Emergencies**

- 4.1 If an ambulance is called, the School Nurse or first aider in charge should arrange for the ambulance to be met and to have access to the site. For the avoidance of doubt, the address that should be provided is: King's College School, West Road, Cambridge, CB3 9DN or King's College Chapel, King's Parade, CB2 1ST.

4.2 Staff should always call an ambulance when there is a medical emergency and / or serious injury.

4.3 Examples of medical emergencies include:

- a significant head injury;
- fitting, unconsciousness, or concussion;
- difficulty in breathing and / or chest pains;
- exhaustion, collapse and/ or other signs of an asthma attack;
- a severe allergic reaction;
- a severe loss of blood;
- severe burns or scalds;
- drowning;
- diabetic emergency;
- choking;
- the possibility of a case of testicular torsion;
- the possibility of a serious fracture.

However, if in doubt as to whether something is a medical emergency or serious injury, then it should be treated as such.

4.4 Arrangements should also be made to ensure that any pupil is accompanied in the ambulance, or followed to hospital, by a member of staff if it is not possible to contact the parents or legal guardian(s) in time.

## **5 Responsibilities**

5.1 The School Governors oversee and supervise the health and safety at the School.

5.2 The School Governors in turn delegate the day-to-day management of health and safety, including first aid arrangements, to the Head who is assisted by the School Nurse and School Bursar in these duties.

5.3 These duties include ensuring that:

- there is adequate and appropriate first aid equipment, facilities and qualified first aid personnel on the School site(s) and for ensuring that the correct first aid procedures are followed.
- suitable and sufficient risk assessments of all employees, pupils and visitors to the School are regularly carried out.

5.4 The Head delegates to the School Nurse the day-to-day responsibility for ensuring that there is adequate and appropriate first aid equipment, facilities and qualified first aid

personnel. The Head is responsible for ensuring that all staff (including those with reading and language difficulties) are aware of, and have access to, this policy. The Head will ensure that there is at least one first aider present at the School when children are present. In the Pre-Prep Department, there will be at least one person who has a current paediatric first aid certificate on the premises at all times when children are present. On outings including children from the Early Years Foundation Setting (EYFS) there must be at least one person who has a current paediatric first aid certificate. Additionally, there must be a paediatric first aider supervising EYFS children while they are eating when on the school site and on all educational visits. The Head delegates to the School Nurse responsibility for collating medical consent forms and important medical information for each pupil and ensuring the forms and information are accessible to staff as necessary. The Head is responsible for ensuring that staff have the appropriate and necessary first aid training as required and that they have sufficient understanding, confidence and expertise in relation to first aid.

- 5.5 The School Nurse, in consultation with the School Bursar, will regularly (at least annually) carry out a first aid risk assessment and review the School's first aid needs and arrangements to ensure that the School's first aid provision is adequate. The risk assessment shall include an assessment of the School's insurance arrangements.
- 5.6 The main duties of first aiders are to give immediate first aid to pupils, staff or visitors when needed and to ensure that an ambulance or other professional medical help is called when necessary. First aiders will ensure that their first aid qualifications are kept up to date through liaison with the School Nurse. In the Pre-Prep department, staff who have a paediatric first aid qualification within the EYFS statutory framework are listed as paediatric first aiders on the School's first aider list. First aiders will undergo appropriate EFAW or FAW update training within every three-year period to maintain their qualification. A complete list of current first aiders is appended to this policy.
- 5.7 The School Nurse provides first aid and nursing care to pupils and staff during the school day in the First Aid Room. The School Nurse delegates to the Boarding House team first aid and nursing care responsibilities outside of school hours. The School Nurse is the appointed person responsible for the First Aid Room, the first aid boxes, updating staff in regard to pupils' illnesses as necessary and for the reporting as described in paragraph 15 below.
- 5.8 All staff are to be aware of the first aid procedure and know who to contact in the event of any illness, accident or injury. Staff will always use their best effort to secure the wellbeing and welfare of pupils. Staff receive updates from the School Nurse regarding administration of medicine training on an annual basis at a minimum or more frequently when required.
- 5.9 Everyone on the School premises is expected to take reasonable care for their own and others' safety.

## **6 First Aid Boxes**

- 6.1 First aid boxes are marked with a white cross on a green background. The first aid boxes will be stocked by the School Nurse in accordance with workplace first aid kits. Specification for the content of the workplace first aid kits is BS 8599-1:2019. First aid boxes will be inspected by the School Nurse at the start of every term at a minimum; they are located at the following positions around the School site and are located as close to hand washing facilities as is practicable:

- First Aid Room
- Pre-Prep
- Junior Department
- Science Prep Room
- Astro Pitch Hockey Store
- Art Room
- DT Room
- Staff Room
- Kitchen
- Sports Department
- Minibuses
- Housekeeping Department
- Clerk of Works Workshop
- Machine Room
- Swimming Pool
- SCC
- School Office

If first Aid boxes are used, they should be taken to the First Aid Room to be appropriately re-stocked.

- 6.2 First aid boxes for any off-site activities are kept in the First Aid Room.

- 6.3 The School minibuses should have a prominently marked first aid box on board which is readily available for use and which is maintained in a good condition. The first aid box should be stocked in accordance with British Standard BS 8599-1 which came into effect in 2019. The minimum stock for travelling first aid boxes is:

- 1 First Aid guidance leaflet
- 1 content list
- Medium Sterile Dressing – 1
- Plasters – 10
- Triangular Bandage – 1
- Alcohol-Free Moist Wipes – 10
- Nitrile Disposable Gloves – 2
- Resuscitation Face Shield – 1
- Foil Blanket – 3
- Adherent Dressing – 1

- Burn Dressing – 2
- Clothing Cutters – 1
- Medium Trauma Dressing – 1

6.4 A first aid box is located in the choristers' vestry in King's College Chapel and is available for use when choristers are present in Chapel. This first aid box is checked regularly by Boarding House staff. The School Nurse or designated first aider takes additional first aid kits to Chapel for whole-school events.

## **7 First Aid Room and Isolation Room**

7.1 The First Aid Room may be used for first aid treatment and for the care of pupils during school hours. The Boarding House Sick Bay may be used for first aid treatment and the care of boarders outside of school hours. The First Aid Room is located centrally on the ground floor of the main school building; the School Nurse is contactable there on extension 238 or 01223 803998. The First Aid Room also has essential first aid facilities and equipment. As far as is possible, the School reserves this room exclusively for giving first aid.

## **8 Information on Pupils**

8.1 Parents are requested to provide written consent for the administration of first aid, medical treatment and medication. This requirement will not prevent a child of sufficient understanding and intelligence to understand fully what is proposed, from giving or withholding consent to medical treatment or from seeking advice or treatment in confidence. Parents are requested to update the School Nurse of any changes in a child's medical information that occur throughout the School year.

8.2 The School Nurse will be responsible for reviewing pupils' confidential medical forms and nursing records and providing essential medical information regarding allergies, recent accidents or illnesses, or other medical conditions which may affect a pupil's functioning at the School to the Head, Form Tutors and first aiders on a "need to know" basis. This information should be kept confidential but may be disclosed to the relevant professionals if it is necessary to safeguard or promote the welfare of a pupil or other members of the School community.

## **9 Procedures for pupils with medical conditions such as asthma, epilepsy, diabetes etc.**

9.1 The information held by the School will include details of pupils who need to have access to asthma inhalers, adrenaline auto-injectors, medications or similar and this information should be circulated to teachers and first aiders.

9.2 Where appropriate, and when parents have signed a consent to carry own medication form, individual pupils will be given responsibility for keeping such equipment with them and this will be reviewed on a regular basis. In other cases, the equipment will be kept, suitably labelled, in the First Aid Room.



- 9.3 The School has guidance and protocols in place to deal with common medical conditions such as anaphylaxis, asthma and diabetes. Copies of the guidance and protocols are available from the School Nurse.
- 9.4 The School adopts the Inhalers Guidance from the Department of Health (March 2015) in respect of the use of emergency salbutamol inhalers and holds stock salbutamol inhalers which can be used when a pupil is not able to access their own inhaler. The emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given and who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.
- 9.5 The School adopts the guidance on the use of adrenaline auto-injectors in schools (Department of Health 2017). The Human Medicines (Amendment) Regulations 2017 allows schools to buy adrenaline auto-injector devices without a prescription for emergency use in children who are at risk of anaphylaxis, but their own device is not available or is not working (e.g. because it is broken or out of date). The School's spare adrenaline auto-injector should only be used on pupils known to be at risk of anaphylaxis for whom both medical authorisation and written parental consent for use of the spare adrenaline auto-injector has been provided. The School's spare adrenaline auto-injector can be administered to a pupil whose own prescribed adrenaline auto-injector cannot be administered correctly without delay.

## **10 Procedure in the event of illness**

- 10.1 Pupils may visit the School Nurse in the First Aid Room at any time during the day. If a pupil is unwell during lessons then they should consult the member of staff in charge who will assess the situation and decide on the next course of action. The pupil will be told to go to see the School Nurse in the First Aid Room and will be accompanied, as necessary. The School Nurse will decide on the next course of action and provide the first aid as required.
- 10.2 Staff may visit the School Nurse or First Aid Room as and when necessary, but appropriate cover must be arranged.
- 10.3 The School will discuss with parents the procedures for children who may become ill or infectious and take necessary steps to prevent the spread of infection and illnesses.

## **11 Procedure in the event of an accident or injury**

- 11.1 If an accident occurs, the member of Staff in charge will assess the situation and decide on the next course of action, which may involve immediately calling for an ambulance. The School Nurse should be called for as soon as possible, if deemed necessary by the member of staff in charge. Appointed persons or first aiders are to be called for, if necessary, and should be called if the School Nurse is not available immediately. However minor the injury, the School Nurse should always be informed, even if not called for at the time.

- 11.2 In the event that the first aider or School Nurse do not consider that they can adequately deal with the presenting condition by the administration of first aid, then they should arrange for the injured person to access appropriate medical treatment without delay. This may involve calling for an ambulance or making arrangements to transport the injured person to A&E or access other appropriate medical services.

## **12 Hygiene and infection control**

- 12.1 If a spillage of blood or other bodily fluids occurs, the School Nurse must be informed. The person who discovered the spillage will then arrange for the proper containment, clear up and cleansing of the spillage site.
- 12.2 All staff should take precautions to avoid infection and to follow basic hygiene procedures (such as regular hand washing).
- 12.3 The first aider should take the following precautions to avoid risk of infection:
- 12.3.1 cover any cuts and grazes on their own skin with a waterproof dressing;
  - 12.3.2 wear suitable single use disposable gloves when dealing with blood or other bodily fluids;
  - 12.3.3 use suitable eye protection and a disposable apron where splashing may occur;
  - 12.3.4 use devices such as face shields, where appropriate, when giving mouth to mouth resuscitation;
  - 12.3.5. wash hands after every procedure.
- 12.4 If the first aider suspects that they or any other person may have been contaminated with blood and other bodily fluids which are not their own, the following actions should be taken without delay:
- 12.4.1 wash splashes off skin with soap and running water;
  - 12.4.2 wash splashes out of eyes with tap water or an eye wash bottle;
  - 12.4.3 wash splashes out of nose or mouth with tap water, taking care not to swallow the water;
  - 12.4.4 record details of the contamination;
  - 12.4.5 report the incident to the School Nurse and take medical advice if appropriate.
- 12.5 The School Nurse must be notified immediately of any suspected case of infectious disease (including Covid-19). The pupil should be brought to the First Aid Room and remain there until collected by parents. The School will then follow all current guidance from the government and local health protection teams regarding the correct procedures to follow.

## **13 Automated External Defibrillators (AEDs)**

- 13.1 The School's AED is located in the foyer of the SCC.

- 13.2 The AED should only be used where a person is in cardiac arrest. It should not be used where a person is conscious, breathing and / or their heart is still beating.
- 13.3 If a person is suffering from a cardiac arrest, the first person on the scene should immediately call the emergency services and commence CPR. If possible, a first aider who is trained in the use of AEDs should be called for. However, AEDs are designed to be used by any person by following the step-by-step instructions on the AED.
- 13.4 The person administering the AED should ensure that the area around the casualty is clear before using the AED. They should then stay with the casualty until the emergency services arrive.

## **14 First aid in the Games Department**

- 14.1 The School Nurse is responsible for providing first aid boxes and bags for the relevant sporting areas within the School. There are 8 bags which can be used by Staff and team managers for home and away fixtures and these are kept in the First Aid Room.

A first aid bag should be taken with the travelling team. If an incident occurs first aid should be sought from the visiting school first aid personnel. If necessary, the pupil should be taken to the nearest casualty centre by a member of staff; parents should be notified immediately. Treatment and after-care should then be followed up by the School Nurse. Any incident of treatment must be reported to the School Nurse on return to School.

## **15 Reporting**

- 15.1 In the event of an accident, injury or illness requiring first aid, the relevant first aider should complete a record of the first aid provision given. These records, including medical records, will be regularly monitored by the Head or a member of the Senior Leadership Team in coordination with the School Nurse to identify whether review or change in practice is needed.
- 15.2 All injuries, accidents, and illnesses however minor must be recorded by the first aider who treats the pupil. This is either recorded in the log book provided with the first aid kit or the log book situated in St Martin's for Juniors. All provision of first aid for Pre-Prep is recorded in Medical Tracker. Alternatively, the incident may be reported to the School Nurse who will ensure that it is logged appropriately and that the relevant record is made. The School Nurse or relevant first aider will ensure that parents or guardian(s) are informed as necessary. For Pre-Prep pupils, Medical Tracker generates an email alert to parents automatically. The School Nurse will inform the HSE where required.
- 15.3 Parents or guardian(s) will be informed of all serious or significant injuries, accidents, or illness involving their child as soon as is possible and (when considered appropriate) will be given additional information as to risks and possible complications arising from their condition and or any treatment or medication.

- 15.4 Parents will also be informed each time their child receives a bump to the head by receiving a head bump form on the same day that the injury occurred; for Pre-Prep pupils, parents will be notified by an alert generated by Medical Tracker.
- 15.5 Should a member of staff discover that a child has been taken to A&E outside of school hours as a result of something happening during the school day, they should inform the School Nurse, who should then record as much information as possible regarding the visit in the Emergency and Accident Record.
- 15.6 The School is legally required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (SI 2013/1471) (RIDDOR) to report relevant injuries, work-related diseases, incidents and dangerous occurrences to the HSE.
- 15.7 Fatal and specified injuries to staff only should be reported by calling the Incident Contact Centre (ICC) on 0845 300 99 23. 15.9. All other reportable matters involving staff, pupils and visitors should be reported online at <http://www.hse.gov.uk/riddor.report.htm> within 10 days.

## Reportable Matters

### 15.9.1 Accidents involving Staff

- work related accidents resulting in death or a specified injury (including as a result of physical violence) **must be reported immediately**.

Specified injuries are:

- fractures, other than to fingers, thumbs and toes;
- amputations;
- any injury likely to lead to permanent loss of sight or reduction in sight;
- any crush injury to the head or torso causing damage to the brain or internal organs;
- serious burns (including scalding) which covers more than 10% of the body or which causes significant damage to the eyes, respiratory system or other vital organs;
- any scalping requiring hospital treatment;
- any loss of consciousness caused by head injury or asphyxia;
- any other injury arising from working in an enclosed space which leads to hypothermia or heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours.
- work related accidents which prevent the injured person from continuing with their normal work for more than 7 days must be reported within 15 days.

- **cases of work related diseases** that a doctor notifies the School of (for example: certain poisonings; lung diseases; infections such as tuberculosis or hepatitis; occupational cancer)
- **certain dangerous occurrences** (near misses – reportable examples: bursting of closed pipes; electrical short circuit causing fire; accidental release of any substance that may cause injury to health)

### 15.9.2 Accidents involving pupils or visitors

- accidents where the **person is killed** or is **taken from the site of the accident to hospital for treatment** and where the accident arises out of or in connection with:

- any School activity (on or off the premises);
- the way a School activity has been organised or managed (e.g. the supervision of an educational visit);
- equipment, machinery or substances;
- the design or condition of the premises;

If anyone at the School is known or suspected to be suffering from a disease which is classified as a notifiable disease, and / or in the opinion of a registered medical practitioner has an infection and / or is contaminated in a manner which could present significant harm to human health (as set out in the Health Protection (Notification) Regulations 2010), the School should ensure that a report is made by the proper officer at the relevant local authority. More information can be found at <http://www.hpa.org.uk>.

- 15.10 The School will notify local child protection agencies, as appropriate, of any serious accident or injury to, or the death of, any child whilst in their care and act on any advice given.
- 15.11 The School will also notify Ofsted of any serious accident, illness or injury to, or death of, any child whilst in their care, and of the action taken in respect of it. Notification must be made as soon as is reasonably practicable, but in any event within 14 days of the incident occurring.

## 16 Records

- 16.1 School Accident and Illness Book: all injuries, accidents, illnesses, and dangerous occurrences (unless very minor in the view of the School Nurse) must be recorded in the School Accident and Illness Book. The date, time and place of the event or illness must be noted with the personal details of those involved with a brief description of the nature of the event or illness. Any first aid given should also be noted, with the name and signature of the first aider or person dealing with the accident. What happened to the injured or ill person immediately afterwards should also be recorded. Records should be stored for at least three years or if the person injured is a minor (under 18), until they are 21.
- 16.2 The School Nurse will complete an Accident Report Form for every serious or significant accident that occurs on or off the School site if in connection with the School. These

forms will be kept by the School Nurse. Records should be stored for at least three years or if the person injured is a minor (under 18), until they are 21.

- 16.3 The School Nurse will complete an Accident Report Form in respect of any accident causing personal injury to staff and provide a copy of this Accident Report Form to the Head. The Head will take reasonable steps to investigate the circumstances of such accidents once they receive notice of it. If it is found that there are discrepancies between the information reported and the Head's findings these should also be recorded on the form. These records will be kept by the School Nurse for at least three years.

## **17 Monitoring**

- 17.1 The Governors' and Head review and discuss an abridged A&E report provided by the School Nurse at the termly meetings of the Governors' Finance and General Purposes Sub-Committee to discuss any major accidents. The School's Health and Safety Committee reviews all accidents and injuries at termly meetings to take note of trends at the School in order to identify whether a change in welfare practice is needed. The information helps identify any further training that may be useful for investigative or insurance purposes.

## **18 Version Control**

Date of last review	January 2026
Date of next review	January 2027
Policy Owner	School Bursar and School Nurse
Authorisation	Rev Dr Stephen Cherry, Chair of Governors on behalf of the Board of Governors

Appendix 1 – Updated 25<sup>th</sup> November 2025

### STAFF FIRST AID TRAINING RECORD

NAME	COURSE ATTENDED	EXPIRY
Nick Batcheler	QA Paediatric First Aid (level 3)	May 2027
Charlotte Pinner	QA 1 day Emergency First Aid at Work (level 3)	March 2027
Kathryn Richardson	QA Paediatric First Aid (level 3)	May 2027
Nicola Shepherd	QA Paediatric First Aid (level 3)	May 2027
Caroline Smith	QA Paediatric First Aid (level 3)	May 2027
Iza Brunning	QA 1 day Emergency First Aid at Work (level 3)	Aug 2027
David Humphrey	QA 3 day FAW (Level 3)	Sept 2027
Alex Sears	QA 1 day Emergency First Aid at Work (level 3)	Nov 2027
Karen Williams	QA 3 day FAW (Level 3)	Nov 2027
Angus Gent	QA 1 day Emergency First Aid at Work (level 3)	Nov 2027
Mark Milne	QA 1 day Emergency First Aid at Work (level 3)	Nov 2027
James Randle	QA 1 day Emergency First Aid at Work (level 3)	Nov 2027
Rachael Dunlop	QA 1 day Emergency First Aid at Work (level 3)	Nov 2027
Alex Thompson	QA 1 day Emergency First Aid at Work (level 3)	May 2028
Matt Andrews	QA Paediatric First Aid (level 3)	Aug 2028
Sarah Simcock	QA 1 day Emergency First Aid at Work (level 3)	Sept 2028
Alison Gelling	QA 3 day FAW (Level 3) QA Paediatric First Aid (level 3)	Nov 2028 May 2027
Alan Barker	QA 3 day FAW (Level 3)	Jan 2026
Donna Bramwell	QA Paediatric First Aid (level 3)	Sept 2026
Alex Knott	QA Paediatric First Aid (level 3)	Sept 2026
Claire Cooke	QA Paediatric First Aid (level 3)	Sept 2026
Dougie Rice	QA Paediatric First Aid (level 3)	Sept 2026
Tom Pickard	QA Paediatric First Aid (level 3)	Sept 2026
Richard Brown	QA 1 day Emergency First Aid at Work (level 3)	Sept 2026
Jill Hay	QA 3 day FAW (Level 3)	Oct 2026
Karolina Seta	QA 1 day Emergency First Aid at Work (level 3)	Aug 2027
Tim McMorrin	QA 1 day Emergency First Aid at Work (level 3)	Aug 2027
Alex Stanford	QA Paediatric First Aid (level 3)	Aug 2027
Matthew Headdock	QA 3 day FAW (Level 3)	Aug 2027
Jessy Wakefield	QA 1 day Emergency First Aid at Work (level 3)	May 2028

## Appendix 2

### Procedures for the Administration of Medicines

The following procedures have been written using the guidelines for the Department of Education 2015 guidance on *Supporting students at school with medical conditions*, the Royal College of Nursing practice guidance for medicines management 2020, *Controlled Drugs (Supervision of management and use) Regulations 2013* and the professional guidance co-produced by the Royal Pharmaceutical Society and Royal College of Nursing *Professional Guidance on the Administration of Medicines in Healthcare Settings (January 2019)*.

These guidelines are intended for those staff who find themselves in a position of responsibility regarding the storage and administration of medication. This will ensure a safe and appropriate procedure is followed when administering medicines to pupils in our care.

- No pupil under the age of sixteen should be given medicines without their parent's permission.
- Each pupil must have a completed Medical Record form prior to starting school. This includes parental consent for the School Nurse or first aider to give appropriate treatment for minor problems using non-prescription (over the counter) medicines.
- Parents have a clear responsibility to provide the school with written details of the medical needs of their children and any medication they require. Parents are also expected to inform the school of any changes as they arise.
- All medicines provided to the school by parents for their child must be in the original prescription packaging and be listed in the British National Formulary. No medicines written in a foreign language will be accepted.
- The School Medical Officer will treat and prescribe for boarders who are registered at Newnham Walk Surgery.

### Storage of Medicines

All medicines will be stored in a locked cupboard, firmly attached to a wall. All medicines which require refrigeration will be kept locked in either the First Aid Room or Sick Bay medical refrigerators. Prescribed medication that is no longer needed in school must be returned to the child's parents or disposed of safely.

### Controlled Drugs

Controlled drugs (CDs) are subject to safe custody and must be stored in a locked receptacle such as an appropriate CD cabinet. This cabinet is located in the School's First Aid Room. The key to this cabinet is securely stored and only accessible to staff authorised to have access to it. CDs must be administered in a timely fashion in line with relevant legislation and local standard operating procedures.

Recording administration of controlled drugs:

- Controlled Drug Recording Book is kept in bound book format;
- There must be a separate page for each strength and form of an individual drug;



- Each page must specify the name, strength and form of the drug at the head of the page and all entries on that page must relate to that drug only;
- Each entry must be in chronological order stating:
  - Name of child;
  - Date drug issued to the child;
  - Amount issued;
  - Name and signature of person issuing the drug;
  - Name and signature of witness, if possible;
  - Balance left in stock.
- Each entry must be legible and written in indelible ink;
- If a mistake is made, it should be crossed through with a single line so that it can still be read;
- The Controlled Drug Recording Book must be kept on the premises;
- The Controlled Drug Recording Book must be available for inspection by an authorised person.

The Controlled Drug Recording Book must also state the following when CDs are obtained:

- Date the CDs are received;
- Name and address from whom they were obtained (e.g. pharmacy, parent);
- Amount received;
- Running balances.

### **Guidance for Staff**

All staff that could potentially administer medicines to pupils at school, in the Boarding House or on school trips should be identified in advance. These staff members must receive appropriate training from the School Nurse with regards to the safe administration of medicine and correct documentation procedures to follow. These staff members will then read, agree and sign to say that they will follow the appropriate procedures. **It is the staff's responsibility to access the training sessions provided.**

The school recognises that some pupils need regularly prescribed medication administered by staff throughout the school day or whilst living in the Boarding House. It may also be necessary to give pupils over the counter medicine from general school stock. The complete list of medicines that can be used without a prescription from a GP are listed on the Medical Record form which parents must complete before admission to the school.

All stock medication is accurately recorded including a running stock balance. Stock levels are checked at the start of each term.

All staff that administer medicines to pupils:

1. must be certain of the identity of the child to whom the medicine is to be administered;
2. must check that the child is not allergic to the medicine before administering it;
3. must know the therapeutic uses of the medicine to be administered (i.e. what it is for), its normal dosage, side effects, precautions and contra-indications;

4. must be aware of the child's plan of care if appropriate;
5. must check that the prescription or the label on the medicine dispensed is clearly written and unambiguous;
6. must check the expiry date of the medicine to be administered;
7. must have considered the dosage, method of administration, route and timing;
8. must administer or withhold medicine in the context of the child's current condition;
9. must contact the prescriber or another authorised prescriber without delay where contra-indications to the prescribed medicine are discovered, where the child develops a reaction to the medicine, or where assessment of the child indicates that the medicine is no longer suitable;
10. must make a clear, accurate and immediate record of all medicine administered, intentionally withheld or refused by the child, ensuring their signature is clear and legible.

## **Procedures for the Care of Ill or Injured Pupils or Staff**

When pupils or staff become ill or injured at School they are able to attend the First Aid Room staffed by the School Nurse who will carry out any required first aid in an efficient and timely manner following the protocol below:

- Pre-Prep pupils must be accompanied to the First Aid Room by an adult member of staff. Older children may attend alone or be accompanied by a friend.
- The School Nurse will make an initial assessment and decision regarding the course of action or treatment to be undertaken. The Nurse must follow the Nursing and Midwifery Council Code of Conduct in the care of pupils or staff at all times.
- After the initial assessment, the following are possible treatment options:
  - To give first aid where appropriate and as a priority;
  - Treatment and return to School or to the Boarding House;
  - The administration of medication if required. See also the School's administration of medication procedures (Appendix 1);
  - Admission to First Aid Room for day pupils until a parent can collect;
  - Care of a boarder out of school hours in Sick Bay;
  - Referral to the pupil / staff's GP or request for an ambulance;
  - In cases where an ambulance is requested, a member of staff will accompany the pupil until a parent arrives. In all cases involving a pupil, the School Nurse or Boarding House staff will make all reasonable effort to contact the parents as soon as possible. Contact will be made initially by telephone and followed up by email or letter. A brief history of the case will be noted and recorded as soon as possible in the day book. (See also the Section on Recording and Reporting below).

The Boarding House Sick Bay provides suitable separate accommodation for boarders who are ill. This accommodation contains 2 beds and complies with the requirements of the School Premises Regulations 1999 having a usable floor space of at least 7.4 m<sup>2</sup> per bed with beds at least 1.8 m apart.

A boarder who is ill is checked regularly by the School Nurse or Boarding House staff and is able to summon assistance if required by using the bell and internal phone system in sick bay.

### **GPs, Dentists and Opticians**

The School ensures that all boarders are registered with a GP in the local area and is able to contact them for advice and appointments when necessary and when parents are not available. In addition, and in compliance with the National Minimum Standards for Boarding Schools, the School will make arrangements with any available dental practice or optician in Cambridge, when required.

Boarders are free to choose whether or not they are accompanied when seen by a doctor, dentist, optician or other medical professional and can choose whether they are seen by a male or female doctor.

## Appendix 4

### Body Fluid Spillage Procedures

Blood and body fluids (e.g. faeces, vomit, saliva, urine, nasal and eye discharge) may contain viruses or bacteria capable of causing disease. It is therefore vital to protect both yourself and others from the risk of cross infection. In order to minimise the risk of transmission of infection both staff and pupils should practice good personal hygiene and be aware of the procedure for dealing with body spillages.

This document is to be used in conjunction with the Public Health England: [Health protection in schools and other childcare facilities](#) Chapter 6: cleaning the environment (updated 5 March 2025).

All body fluid spills must be cleaned up promptly. Staff must wear the appropriate Personal Protective Equipment (PPE) when managing any spillage.

#### Spillage Kits

Designated spillage kits are provided in clearly marked yellow drawstring bags. Each kit contains:

- Disposable gloves
- Plastic aprons
- Face masks
- Absorbant spillage pad
- Odour neutraliser spray
- Plastic scrapers (to be retained for disinfection and re-use)
- Emergency Spillage Compound granules
- Yellow clinical waste bags
- Disinfectant spray

Spillage kits are available in the following locations:

- First Aid Room
- Boarding House Sick Bay
- Dining Room (hook behind door)
- Staff Room
- St Martin's (ground floor staff toilet)
- Art Room
- Science Prep Room
- Squash Court
- M2 Classroom
- Library
- SCC (Galley)
- Music Block (cleaners' cupboard)

#### Initial Body Fluid Spillage Procedure

1. Isolate the area to ensure the safety of pupils and staff.

2. Retrieve the nearest available spillage kit.
3. Put on the disposable gloves and apron. Mask (optional).
4. Apply odour neutralizer, if required.
5. For liquid spillages use the absorbent pad, paper towels, or spillage granules. Allow at least 90 seconds for absorption.
6. Wipe up the spillage using the absorbent sheet or paper towels and place in a bin bag.
7. For solid spillages the granules may be used, paper towels or black plastic scrapers.
8. Clean the area and proceed with the secondary cleaning procedure outlined below.
9. Ventilate the area and allow to dry.
10. Dispose of all PPE in the bin bag.
11. Dispose of bag in the general waste bin.
12. Any contaminated clothing must be bagged and returned to the child's parent.
13. Staff involved must thoroughly wash their hands afterwards.

Spillage kits **must be returned** to housekeeping and replaced with a new one from the wall-mount next to the noticeboard. Please ensure the housekeeping team is informed. Plastic scrapers should be bagged separately and returned to housekeeping for disinfection and re-use. Once replenished, spillage kits must then be returned to their designated storage location.

**Secondary Body Fluid Spillage Procedure** (to be carried out **only** when initial clean-up has been carried out)

1. Following initial clean up, disinfect the affected area thoroughly.
2. Before 1630, notify the housekeeping team to arrange disinfection via: [housekeeping@kcs.cambs.sch.uk](mailto:housekeeping@kcs.cambs.sch.uk) or call ext 272.
3. After 1630, notify the duty caretaker or evening housekeeping team, call ext 288.
4. Disinfectant supplies (mop handle, bucket, wet floor signs and disposable mop heads) will be stored in the designated area.
5. Used mop head should be placed in a black bin bag and disposed of with general waste.
6. Staff must thoroughly wash their hands upon completion.

## **Intimate Care Guidelines**

The safety and welfare of all our pupils is the School's highest priority. The school will act in accordance with Section 175 of the Education Act 2002, *Keeping Children Safe in Education 2025* and *Guidance for safer working practice for those working with children and young people in education settings Feb 2022*. Meeting a pupil's intimate care needs is one aspect of safeguarding.

Additionally, the School recognises its duties and responsibilities in relation to the Equalities Act 2010 which requires that any pupil with an impairment that affects their ability to carry out day to day activities must not be discriminated against and schools must make 'reasonable adjustments' to avoid disabled children being put at a disadvantage to their peers. Adjustments may include the provision of intimate and personal care.

The School is committed to ensuring that all staff responsible for the intimate care of children undertake their duties in a sensitive and professional manner at all times. This policy has been written to safeguard both children and staff and applies to all staff involved in the intimate care of children.

Intimate care is defined as any care which involves washing, touching or carrying out a procedure which most children are able to carry out for themselves but are unable to do so due to physical disability, special educational needs associated with learning difficulties, medical needs, or needs arising from the child's stage of development.

### **Principles**

The following are the fundamental principles of intimate care upon which our policy guidelines are based. Every child has the right to:

- be safe;
- personal privacy;
- be valued as an individual;
- be treated with dignity and respect;
- be involved and consulted in their care to the best of their abilities;
- express their views on their care and to have their views taken into account; and
- have levels of care that are appropriate and consistent.

### **Responsibility of Parents**

Partnership with parents is an important principle in any educational setting and is particularly necessary in relation to students needing intimate care. Much of the information required to make the process of intimate care as comfortable as possible is available from parents. Parents should be encouraged and empowered to work with staff to ensure their child's needs are identified, understood and met. This might include involvement with Individual Health Care Plans, Education Plans or any other plans which identify the support of intimate care where appropriate. Parents should ensure that all information given to the school is up to date.

### **Expectation of Parents**

Parents will endeavour to ensure that their child is continent before admission to school, unless the child has additional needs.

Parents will discuss any specific concerns with staff about their child's toileting needs, and staff will work with parents / carers to ensure that the child is encouraged and praised where needed, when using the toilet.

Parents must inform the school if a child is not fully toilet trained before starting school, after which a meeting will then be arranged to discuss the child's needs.

Parents accept that on occasions their child may need to be collected from school as the result of soiling.

### **Staff Responsibilities**

Intimate care routines should always take place in an area which protects the child's privacy and dignity. Children's intimate care routines should always be carried out by an appropriate member of staff, at the discretion of the Head of Department and with regard to the needs of the child. Appropriate support and training should be provided when necessary. This training must include moving and handling training and safe use of the child's personal equipment if required.

The following steps will be taken to ensure the health and safety of both staff and children:

1. Alert another member of staff.
2. Escort the child to a changing area, such as designated toilet areas. A shower facility is available in the disabled toilet in the Sports and Cultural Centre (SCC). A shower kit is available which includes towel, wipes and shower gel.
3. Collect any equipment and clothes.
4. All adults should wear gloves. Plastic apron if necessary.
5. The child should undress as appropriate and clean themselves as much as possible, under the verbal guidance of an adult if needed. A non-touch approach must be used unless there is prior agreement with the child's parent.
6. Soiled clothes should be placed inside plastic bags (double wrapped) and given to parents at the end of the day. Plastic aprons and gloves disposed of.
7. Children are expected to dress themselves in clean clothing, wash their hands and return to class.
8. The area must be cleaned and disinfected by an adult before anyone else is allowed access to it. Staff should follow the body fluid spillage procedures.
9. Adults should wash their hands thoroughly after the procedure.

Intimate care incidents must be recorded including date, time, name of child, adult(s) in attendance, nature of the incident, the support required, action taken and any concerns or issues. This will enable staff to monitor progress made.

Parents of children of any age requiring support should to be informed the same day.



## **Special Educational Needs and Disability (SEND)**

The School recognises that some children with SEND and / or other home circumstances may result in children arriving at school with underdeveloped toileting skills. If a child requires assistance because of a special educational need or disability, their rights to inclusion are additionally supported by the Special Educational Needs and Disability Act 2001 and Equality Act 2010. Please see the School's *Special Educational Needs and Disabilities (SEND) Policy* for more information.

Pupils who require regular assistance with intimate care have written Individual Education Plans (IEP) or Health Care Plans agreed by staff, parents / carers and any other professional actively involved, such as the School Nurse or physiotherapists. Plans should be reviewed as necessary, but at least annually and at any time of change of circumstances, e.g. for residential trips or staff changes (where the staff member is involved in intimate care). Plans should also take into account procedures for educational visits.

## TOILET MANAGEMENT PLAN

Child's Name: .....

DOB:.....

Name of Support Staff Involved:

Area of need:

Equipment required: .....

Location of suitable toilet facilities: .....

Support required: .....

Frequency of support: .....

### **Working Towards Independence**

Child will try to:

Personal Assistant will:

Target Achieved: .....

Review Date: .....

Signatures:

Parents/Carer: .....

Child (if appropriate): .....

Personal Assistant: .....

Senior Management/SENCO: .....

Date:.....