



Weaverthorpe C.E. Primary School

Medical Policy

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Introduction

Weaverthorpe school welcomes and supports children with medical and health conditions. We aim to include all pupils with medical conditions in all school activities, including off site visits, differentiated as appropriate. We recognise that some medical conditions may also be defined as disabilities and consequently come under the Equalities Act 2010. This policy addresses the statutory requirement for a First Aid policy. For other legislation addressed by this policy see appendix 1.

Planning ahead

We have a responsibility to plan for pupils with medical conditions who may enrol for our school in the future and we do this by:

- having record keeping procedures in place for administering medication
- having storage facilities in place for medication
- having identified a suitable area within school (the school office) for undertaking health care procedures
- having suitable toileting facilities for children which are clean, safe and pleasant to use
- having flexible policies which take into account medical conditions, e.g. we do not refuse access to the toilet at any time to any pupil with a medical condition that requires this.
- appointing the Headteacher as our Named Person for medical needs
- following the guidance provided by the Local Authority in 'Supporting Children and Young People with Medical Conditions in School', (Jan 2015).

Emergencies

We are aware that certain medical conditions are serious and can be potentially life-threatening, particularly if ill-managed or misunderstood.

We have a procedure in place for dealing with emergencies and all staff know they have a duty to take swift action. The Headteacher ensures that all staff feel confident in knowing what to do in an emergency and this is revisited in staff training annually or more often if the need arises.

If a child needs to be taken to hospital, an ambulance will be called and, if parents are not available, a member of staff will accompany them. In this case, school will phone the parent(s)/carer(s) to arrange to meet the ambulance at the hospital. The member of staff will stay with the pupil until a parent/carers arrives. Health professionals are responsible for any decisions on medical treatment in the absence of a parent. Staff will not take a child to hospital in their own car unless it is an absolute necessity. Another member of staff must go with the child.

First Aid

We always have trained first aiders on site throughout the school day (including at least one person with a current paediatric first aid certificate). Their names and qualifications are logged in the school's Health and Safety Policy and displayed prominently around

the school. First aiders will be aware of the most common serious medical conditions at this school.

All teachers are first aid trained. Training is refreshed on a three-yearly cycle, to preserve the currency of First Aid at Work certificated qualifications. There is always a member of staff who is first aid trained on the premises.

To meet statutory requirements, we ensure that:

- There is always at least one person with a current paediatric first aid certificate on the premises.
- There are sufficient, suitably trained, first aiders who can:
 - assess the situation where there is an injured or ill person and provide immediate and appropriate treatment.
 - Send children home to recover, where necessary.
 - Fill in an accident report on the same day, or as soon as is reasonably practicable, after an incident and add a copy to the staff member and child's record.

All staff know the procedure for dealing with a medical event and how to summon first-aid assistance.

Procedure to be followed when school is notified that a child has a medical condition:

- Seek further information from parents and health professionals
- Determine whether an Individual Healthcare Plan or a risk assessment is required
- Arrange a meeting to develop the Individual Healthcare Plan if required
- Arrange any staff training
- Implement and monitor Individual Healthcare Plan as required.

Staff training

Staff who support pupils with specific medical conditions must receive additional training from a registered health professional. Training requirements are determined via Individual Healthcare Plans. The Headteacher is responsible for ensuring staff are suitably trained by liaising with the relevant healthcare professional. Any member of staff who is trained but feels unable to carry out these duties competently (for example due to having an injury/condition themselves or due to further training being required) must report this as soon as possible to the Headteacher who will make appropriate arrangements.

The Headteacher keeps a training record (in the Safeguarding file) and ensures training is refreshed as appropriate. The Headteacher is involved in determining the competency of a member of staff in undertaking specific procedures (see 'Working Together' below).

Arrangements for induction of new staff are the responsibility of the Headteacher.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training. In some cases, written instructions from the parent or on the medication container dispensed by the pharmacist is sufficient and the Headteacher will determine this.

Staffing

The Headteacher is responsible for ensuring that all **relevant** staff will be made aware of a child's condition as soon as possible.

Any supply teachers/covering staff will be informed, as appropriate, via the Volunteer and Supply Staff Induction File. Pupils with Individual Healthcare Plans have staff named in their plan who have been trained to undertake the procedures in the plan. The Headteacher ensures there are enough staff named to cover for absences and to allow for staff turnover.

Administration of medication at school

Any medicines which are required to be administered at school are kept either in the school office or in a fridge in the staffroom. In a few cases, where appropriate, we allow pupils to carry their own medicines and relevant devices. Where pupils self-administer, we will provide supervision as appropriate

- We will only administer medication at school when it is essential to do so and where not to do so would be detrimental to a child's health.
- We will only accept medication that has been **prescribed** by a doctor, dentist, nurse prescriber or pharmacist prescriber.
- We will only accept **non prescribed** medication if it is included in an Individual Healthcare Plan **or** if we have a written procedure in place for that type of medication which has been authorised by NYCC insurance.
- We only give medication when we have written parental permission to do so.
- Where appropriate, pupils are encouraged to administer their own medication.
- Controlled drugs are stored in a locked cupboard in the Headteacher's office.

Administration of medication - general

- All staff are aware that there is no legal or contractual duty for any member of staff to administer medication or supervise a child taking medication unless they have been specifically contracted to do so or it is in their job description.
- For medication where no specific training is necessary, any member of staff may administer prescribed and non-prescribed medication to pupils but only with a parent's written consent.
- Some medicines require staff to receive specific training on how to administer it from a registered health professional.

Children who can manage their own needs

We encourage all children to manage as much of their own need as is appropriate. After discussion with parents, the Headteacher will determine whether a child is competent to manage their own medicine and procedures. Where a child has been recently diagnosed or has an additional disability/condition e.g. visual impairment, we support them to gradually take on more of their own care, over time, as appropriate with the aim of them becoming as independent as possible. We aim for our pupils to feel confident in the support they receive from us to help them do this.

School trips

Staff organising our school trips ensure:

- they plan well in advance.
- they seek information about any medical/health care needs which may require management during a school trip. This is specifically relevant for residential visits when pupils may require medication/procedures that they would not normally require during the daytime.
- that any medication, equipment, Healthcare plans are taken with them and kept appropriately during the trip.
- they do a risk assessment which includes how medical conditions will be managed during the trip. Staff are aware that some children may require an individual risk assessment due to the nature of their medical condition.

Safe storage – general

- The Headteacher ensures the correct storage of medication at school.
- The Headteacher ensures the expiry dates for all medication stored at school are checked on at least a termly basis and informs parents by letter in advance of the medication expiring.
- Some medications need to be refrigerated. These are stored in a clearly labelled airtight container in the fridge located in the staff room. This area is inaccessible to unsupervised children.

Refusal

If a child refuses to take their medication, school staff will note this on the administration of medication record. Parent(s)/carer(s) will be informed as soon as is reasonably possible so that they can make alternative arrangements.

Accepting Medicines

- The Headteacher, along with the parent(s)/carer(s), ensures that all medication brought into school is clearly labelled with the child's name, the name and dose of medication and the frequency of dose. It must be in the original, full packaging containing the accompanying information leaflet.
- Medicines should be passed directly from the parent to a member of staff, preferably the school administrator.

Safe disposal

- Parents/carers are asked to collect out of date medication.
- If parents/carers do not collect out of date medication, it is taken to a local pharmacy for safe disposal.
- Disposal of medication is recorded on the administration of medication record.

Record keeping

The following records are kept in school

Name of record	Location of record	Who completes it	Who quality assures it & how often
Whole school administration of medication record	Medical folder in school office	Member of staff administering medicine	School Administrator (annually)
Individual administration of medication record - for CYP who have frequent & regular medication	Medical folder in school office	Member of staff administering medicine	School Administrator (annually)
Staff training log – including first aid	Staff personnel folders	Headteacher	Headteacher (annually)
School Medical Register	<ul style="list-style-type: none">• Medical folder in school office• Staff room• Headteacher• All classrooms	School Administrator	Headteacher (annually, or more frequently if required)

All these records will be kept securely and in accordance with NYCC's Records Retention and Disposal Schedule. All electronic records will be password protected.

Reporting Medical Events

- Parents are advised of any need to administer first aid or deal with an event such as an epileptic fit.
- Incidents are reported to the HSE when necessary (see appendix 1) and appropriate records kept for the required time.

- The SENDCO will be advised by first aiders where a child protection issue may be indicated, e.g. abuse or bullying.
- Incidents are reported to child protection agencies where required.

Enrolment forms

We ask, on our enrolment form, if a pupil has any medical /health conditions and request that the school is notified of any changes of medical circumstances at the start of each academic year.

Individual Healthcare Plans

- For children with more complex medical needs we use Individual Healthcare Plans to record important details. Individual Healthcare Plans held in accordance with data protection policy. They are updated when, and if, there are significant changes and annually reviewed with parents and health care professionals.
- Individual Healthcare Plans are kept in the medical folder in the school office.
- Individual Healthcare Plans are shared on a need-to-know basis with staff who are directly involved with implementing them.
- Individual Healthcare Plans are also shared, with parent(s)/carer(s) permission, with NYCC risk management and insurance.
- The Headteacher is responsible for ensuring any Individual Healthcare Plans are implemented.
- The Headteacher is responsible for checking Individual Healthcare Plans on an annual basis or more regularly if required, to ensure they are up to date and being implemented correctly.

School Medical register

We keep a centralised register of pupils with medical needs. The Headteacher has responsibility for keeping the register up to date.

Asthma, Allergens and Epilepsy

School staff are aware that, although these are relatively common conditions, they can develop into a life-threatening situation. More generally, dealing with them can disrupt learning and limit involvement in some school activities.

We aim for all staff to receive basic awareness training in these conditions. This training is delivered by North Yorkshire Education Services or another approved external provider and is supported by having information about these conditions located in prominent positions around the school (classrooms, staff room and the school hall).

Staff are aware of the common triggers for asthma and, while we cannot guarantee a completely trigger free environment, we aim to minimise the risk of exposure,

encourage self-responsibility, and plan for an effective response to possible emergencies.

The student information form specifically asks for details of any allergies, asthmatic condition or epilepsy. This is completed at enrolment and updated annually at the start of the school year and whenever there is a change in the circumstances, e.g. new medication. Information requested includes:

- likely triggers
- typical reactions

Pupils who have asthma will have an Asthma Plan, rather than an Individual Healthcare Plan, including signed permission for the child to carry and/or staff to administer an inhaler.

Other sections of this policy describe where this information is held, how any medication is stored, how staff are made aware of the risks and how training is provided in dealing with emergencies and the application of medication.

Staff will always give due consideration to the impact on learning of these conditions. In class this may be the result of symptoms, e.g. sore eyes, constantly running nose or tiredness from interrupted sleep. If a pupil is missing a lot of time at school or their learning is impaired, the class teacher will initially talk to the parents/carers to work out how to prevent their child from falling behind. If appropriate, the teacher will then talk to Special Education Needs Coordinator about the pupil's needs.

Other pupils will also be educated about these conditions and the need to report immediately if a fellow pupil is displaying any symptoms. when a member of staff is not present.

Measures aiming to minimise the risk of an allergic reaction include:

- The school cook will have details of any food allergies and dietary requirements.
- Any snacks provided will be monitored for potential risks, especially nut content.
- Parents/carers are made aware of their responsibility for any food brought into school by the pupil.
- We have a no food and drink sharing policy.

See also Allergens Policy

Measures aiming to minimise the risk of an allergic reaction are:

- The school does not keep furry or feathered animals
- There is no-smoking policy.

We also ensure that, as far as possible:

- The school does not use chemicals in science and art lessons that are potential triggers for pupils with asthma or allergies.
- Other school activities, e.g. cookery, nature walks, will take account of potential risks of allergic or asthmatic reactions.
- Where children with known allergies are participating in out of school activities, the risk assessment must include this information and ensure that medicines will be immediately available to them if required.
- Standard hygiene procedures e.g., hand washing, table cleaning, are applied.

In the event of an attack, reaction or fit:

- staff will ensure that medication is taken as prescribed.
- ease the symptoms where possible, e.g. by loosening tight clothing.
- if the symptoms do not ease the emergency procedures will be invoked.
- the child can return to class if there is a full recovery.
- the parents will be advised of any event and replacement medication requested if necessary

Working Together

Several people and services may be involved with a child who has a medical condition e.g. parent(s)/carer(s), pupils themselves, Healthy Child Nurse, specialist nurse, community nurse etc.

We seek and fully consider advice from everyone involved and from the Local Authority to assist us in our decisions around a pupil's medical needs.

We maintain regular contact with our Healthy Child nurse who may inform us of any pupils who have health conditions that we are not already aware of e.g. where a pupil has developed a new condition.

We work together to identify needs, identify training, draw up Individual Healthcare Plans, identify staff competency in procedures etc. However, the Headteacher and Governing Board take overall responsibility for ensuring a child's needs are met in school.

We work together to ensure our policy is planned, implemented and maintained successfully.

Summary of responsibilities

Headteacher

The Headteacher holds overall responsibility for the following but may delegate some of the responsibilities to a named person:

- Ensure the school is inclusive and welcoming and that the Medical Policy is in line with local and national guidance and policy frameworks.
- Liaise between interested parties including pupils, school staff, special educational needs coordinators, pastoral support/welfare officers, teaching assistants, Healthy Child Nurse, parents and governors.
- Ensure the policy is put into action, with good communication of the policy to all.
- Ensure every aspect of the policy is adhered to.
- Ensure information held by the school is accurate and up to date and that there are good information sharing systems in place using Individual Healthcare plans.
- Ensure pupil confidentiality.
- Assess the training and development needs of staff and arrange for them to be met.
- Provide/arrange provision of regular training for school staff in managing the most common medical conditions in school.
- Ensure all supply staff and new teachers know and implement the Medical Policy and recent local and national guidance and legislation.
- Update the medical policy at least every 3 years.
- Ensure absences due to medical needs are monitored and alternative arrangements for continuing education are in place.
- Ensure Individual Healthcare Plans are completed and reviewed annually.
- Check medication held in school for expiry dates and dispose of accordingly
- Inform parents when supply of medicine needs replenishing/disposing.
- Quality assure record keeping.
- Work together to quality assure staff competency in specific procedures.
- Regularly remind staff of the school medical policy and procedures

School staff

All staff have a responsibility to:

- Be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency.
- Understand and implement the medical policy.
- Know which children in their care have a medical condition.
- Allow all children to have immediate access to their emergency medication.
- Maintain effective communication with parent(s)/carer(s) including informing them if their child has been unwell at school.
- Ensure children who carry their medication with them have it when they go on a school trip or out of the classroom e.g. to the field for PE.
- Be aware of pupils with medical conditions who may be experiencing bullying or need extra social support.
- Ensure all pupils with medical conditions are not excluded unnecessarily from activities in which they wish to take part.
- Ensure children have the appropriate medication or food with them during any exercise and can take it when needed.

Teaching staff

Teachers at this school have a responsibility to:

- Ensure children who have been unwell have an opportunity to catch up on missed schoolwork.
- Be aware that medical conditions can affect a pupil's learning and provide extra help when needed.
- Liaise with parents, healthcare professionals and Special Educational Needs Co-ordinator if a pupil is falling behind with their work because of their condition.

Special Educational Needs Co-ordinator

The SENCo has a responsibility to:

- Help update the school's Medical Policy.
- Know which pupils have a medical condition and which have special educational needs because of their condition.
- Ensure teachers make the necessary arrangements if a pupil needs special consideration or access arrangements in exams or coursework.

Pupils

Pupils have a responsibility to:

- Treat other children with and without a medical condition equally.
- Tell their parent(s)/carer(s), teacher or nearest staff member when they, or another child, is not feeling well. We remind all children of this on a regular basis in assembly and PSHE lessons.
- Treat all medication with respect.
- Know how to gain access to their medication (includes emergency medication).
- Ensure a member of staff is called in an emergency situation.

Parent(s)/Carer(s)

Parent(s)/carer(s) are expected to support their child by:

- Telling the school if their child has/develops a medical condition
- Immediately informing the school office, in writing, if there are any changes to their child's condition or medication.
- Ensuring that they/their emergency representative is always contactable.
- Administering medication out of school hours wherever possible.
- Undertaking health care procedures out of school hours wherever possible.
- Ensuring they supply school with correctly labelled in-date medication.
- Contributing to the writing of individual health care plans/intimate personal care plans as appropriate.
- Completing the necessary paperwork e.g. request for administration of medication.
- Collecting any out-of-date or unused medicine from school for disposal.
- Keeping their child at home if they are not well enough to attend school/ infectious to other people.
- Ensuring their child catches up on any school work they have missed.
- Ensuring their child has regular reviews about their condition with their doctor or specialist healthcare professional.

Parents who do not provide this support should be aware that we may not be able to fully support their child's medical condition in school.

School procedure to be followed on being notified of a child's medical condition

Notification of a child's medical condition may come via several routes e.g. by parent(s)/(carer(s), Healthy Child nurse, admission forms etc.

Whatever the route, the Headteacher must be informed as soon as possible.

They must then:

- Seek further information about the condition.
- Determine with the support of parent(s)/carer(s) and relevant health professional whether an Individual Healthcare Plan is required.
- Identify any medication/health care procedures needed.
- Identify any aspects of a child's care they can manage themselves.
- Identify which staff will be involved in supporting the child.
- Identify what, if any, training is needed, who will provide this and when.
- Identify which staff need to know the details of the child's medical condition and inform them as appropriate.
- Ensure parent(s)/carer(s) written permission is received for any administration of medication.

Unacceptable Practice

School staff use their discretion about individual cases and refer to a pupil's Individual Healthcare Plan, where they have one.

However; it is not generally acceptable to:

- Prevent children from accessing their inhalers or other medication
- Assume every child with the same condition requires the same treatment
- Ignore the views of the child and their parent(s)/carer(s)
- Ignore medical evidence or opinion, although this may be challenged
- Send children with medical conditions home frequently or prevent them from staying for normal school activities e.g. lunch unless it is specified in the pupil's Individual Healthcare Plan
- Send an ill child to the school office or medical room without a suitable person to accompany them
- Penalise children for their attendance record if their absences relate to their medical condition e.g. hospital appointments
- Prevent pupils from drinking, eating or taking toilet breaks whenever they need in order to manage their medical condition
- Require parent(s)/carer(s), or otherwise make them feel obliged, to come into school to provide medical support to their child, including toileting issues and manual handling issues

- Prevent children from participating, or create unnecessary barriers to children participating, in any aspect of school life, including school trips e.g. by requiring the parent/carer to accompany the child.

Data Protection

We will only share information about a pupil's medical condition with those staff who have a role to play in supporting that child's needs. In some cases, e.g. allergic reactions, it may be appropriate for the whole school to be aware of the needs. In other cases, e.g. toileting issues, only certain staff involved need to be aware. We will ensure we have written parental permission to share any medical information.

School environment

We will ensure that we make reasonable adjustments to be favourable to children with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

Physical Environment

If needed, we will have an accessibility plan which outlines how we aim to develop our facilities and staffing to meet future health care needs e.g. improved physical access, improved toilet facilities.

Education and learning

We ensure that pupils with medical conditions can participate as fully as possible in all aspects of the curriculum and ensure appropriate adjustments and extra support are provided.

Teachers and support staff are made aware of children in their care who have been advised to avoid, or take special precautions, with particular activities.

We ensure teachers and PE staff are aware of the potential triggers for pupils' medical conditions when exercising and how to minimise these triggers.

Staff are aware of the potential for pupils with medical conditions to have special educational needs (SEN). The school's SEN coordinator consults the child, parent(s)/carer(s) and pupil's healthcare professional to ensure the effect of the child's condition on their schoolwork is properly considered

Insurance

The Headteacher is responsible for ensuring staff are insured to carry out health care procedures and administer medication. A copy of the NYCC insurance policy is available to all staff involved on request from the Headteacher.

Additional insurance may need to be taken out for specific procedures and the Headteacher will ensure relevant staff are able to access a copy of the insurance policy.

Complaints

For details on how to make a complaint around medical issues in school please follow our school complaints procedure available on the school website.

Home to school transport

Parents/carers are responsible for informing SEN transport or Integrated Passenger transport if their child has a medical need that they may require assistance with during the journey to and from school.

Dignity and Privacy

At all times we aim to respect the dignity and privacy of all children with medical conditions. We do this by only sharing information with those who have a role in directly supporting the child's needs.

We are considerate when giving / supervising medication / managing health care needs.

Distribution of the school medical policy

Parents/carers are informed about this school medical policy:

- When their child is enrolled as a new pupil
- Via the school's website
- In the school newsletter at intervals as appropriate

School staff are informed and reminded about this policy

- As part of their induction package
- At scheduled medical conditions training/school training days
- Whole school staff meetings

Governing Boards will review this policy every three years

Children With Health Needs Who Cannot Attend School



FIRST AID AND MEDICINES PROCEDURES

General Statement

It is our policy to ensure that appropriate first aid arrangements are in place for our staff and any visitors to our premises. This includes providing sufficiently trained employees for our business needs and maintaining an adequate supply of first aid equipment.

It also involves providing enough information to staff to enable first aid assistance to be sought during normal working hours. Where work is regularly undertaken outside these hours, then adequate first aid cover will be provided.

This procedure should be read in conjunction with the Health and Safety Policy and NYCC Guidance for Supporting Children and Young People with Medical Conditions in Schools.

Legal Position

Our duty to provide first aid at work is governed by the Health and Safety (First Aid) Regulations 1981. A First Aid Provision risk assessment is undertaken in order to determine what first aid facilities and personnel are necessary to meet the needs of our business and is reviewed periodically to ensure that the current provision is adequate.

Responsibilities of First Aid Personnel

Giving First Aid: If someone is injured, becomes unwell and needs help, the nearest first aider should be contacted, and asked to attend. The first aider will assess the situation, provide help, request assistance from other qualified persons if

necessary, and stay with the casualty until they are recovered or make arrangements for further medical assistance if they deem this necessary.

Medical support: When a first aider thinks that a casualty needs urgent medical treatment, they will arrange for the casualty to be taken to the nearest hospital accident & emergency department – if they think it is necessary, an ambulance will be called. Employees should not use their private car to transport a casualty to hospital. If an ambulance is not required. Where appropriate next of kin will be contacted.

Spillages of body fluids: Spillages of blood, vomit, urine and excrement should be cleaned up promptly using a body fluids disposal kit or similar. The area should immediately be cleared and cordoned off and cleaned up. Protective gloves must be worn and the waste be cleared appropriately.

Records: An accident form should be completed every time a first aider provides assistance to a casualty, including when the problem was illness rather than accident. As well as the usual details of the accident (if appropriate) the name of the person giving first aid and summary details of the treatment given should be recorded.

Dealing with Visitors

It is our policy to offer first aid assistance to visitors to our premises. Should a visitor feel unwell or have an accident, then the employee supervising their visit should call for a first- aider.

Staff Training

All staff undertaking first aid duties will be given full training in accordance with current legal requirements. This means that any First Aider at Work will attend a three-day (18 hours) course, any Emergency First Aider at Work will attend a basic one-day (6 hours) course and any Paediatric First Aider at Work will attend a two-day (12 hours) course.

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Appendix 2 Meeting Statutory Requirements

The statutory requirement to have a First Aid policy is met by this policy which addresses its responsibilities under the following:

- The [Statutory Framework for the Early Years Foundation Stage](#), advice from the Department for Education on [first aid in schools](#) and [health and safety in schools](#).
- [The Health and Safety \(First Aid\) Regulations 1981](#), which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel
- [The Management of Health and Safety at Work Regulations 1992](#), which require employers to make an assessment of the risks to the health and safety of their employees
- [The Management of Health and Safety at Work Regulations 1999](#), which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training
- [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations \(RIDDOR\) 2013](#), which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept
- [Social Security \(Claims and Payments\) Regulations 1979](#), which set out rules on the retention of accident records
- [The Education \(Independent School Standards\) Regulations 2014](#), which require that suitable space is provided to cater for the medical and therapy needs of pupils

[Statutory reporting](#)

- Incidents are reported to the HSE when necessary (see below) and appropriate records kept for the required time.
- Incidents are reported to Ofsted and child protection agencies where required.

Reportable injuries, diseases or dangerous occurrences to be reported to the HSE include:

- Death.
- Specified injuries, which 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).
- Any scalding 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 heat-induced illness or requires resuscitation or admittance to hospital for more than 24 hours.
- Injuries where an employee is away from work or unable to perform their normal work duties for more than 7 consecutive days (not including the day of the incident).
- Where an accident leads to someone being taken to hospital.
- Near-miss events that do not result in an injury but could have done. Examples of near-miss events relevant to schools include, but are not limited to:
 - The collapse or failure of load-bearing parts of lifts and lifting equipment.
 - The accidental release of a biological agent likely to cause severe human illness.
 - The accidental release or escape of any substance that may cause a serious injury or damage to health.
 - An electrical short circuit or overload causing a fire or explosion.

Children With Health Needs Who Cannot Attend School

The Local Authority has a statutory duty to arrange suitable education for children who cannot attend school. Weaverthorpe School will work with the Local Authority to facilitate this.