



# **SUPPORTING MEDICAL CONDITIONS & FIRST AID POLICY**

**Version History:**  
**Revised: February 2025**  
**Ratified by Trustees: March 2025**

# WYVERN MEDICAL CONDITION & FIRST AID POLICY

How this statement supports out vision	
<b>Think</b>	THINK as we learn about the medical needs of our students and what is needed to support them.
<b>Grow</b>	GROW because we come to understand how medical conditions can present our students with barriers to their achievement and how these can be countered.
<b>Care</b>	CARE because we aim to provide the support needed to support students with medical conditions to safely access all aspects of the college curriculum.

## 1. Purpose and rationale

This policy aims to ensure that students, staff and parents understand how our college will support students with medical conditions and that students with medical conditions are properly supported to allow them to access the same education as other students, including college trips and extra-curricular activities. Furthermore, the policy provides advice to staff on supporting and dealing with medical and welfare issues within the college.

Wyvern College is an inclusive community which aims to support and welcome students with medical conditions. The college is committed to providing children with medical conditions the same opportunities as others at college.

## 2. Principles and content

This policy has been written in consultation with Trustees and staff.

- This policy is available on the college website;
- Trustees will ensure the policy is reviewed annually;
- This policy meets the requirements under Section 100 of the Children and Families Act 2014, which places a duty on governing boards to make arrangements for supporting students at their school with medical conditions;
- It is also based on the Department for Education (DfE)'s statutory guidance on supporting students with medical conditions at school December 2015.

## 3. Responsibility for implementation

### I. Staff

Supporting students with medical conditions during college hours is not the sole responsibility of one person. Those staff who take on the responsibility to support students with medical conditions (e.g. college first aiders) will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so. The college is responsible for ensuring that suitably qualified first aiders are available within the workplace.

Teachers will take into account the specific needs of students with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a student with an Individual Healthcare Plan needs help. Known medical conditions are named on the class plan sheet which all staff have access to, individual class plan sheets for a class are attached to the register in SIMs so the regular class teacher has immediate access, medical conditions are also flagged on the register in Edulink for cover. In the event of a medical emergency in lessons, teaching and support staff will know how to seek emergency medical support as will staff on duty at break.

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## II. Parents

Parents will:

- Provide the college with sufficient and up-to-date information about their child's medical needs;
- When needed ensure that prescription medication is sent into the welfare office with a letter of permission to administer it and clear instructions as to when it is to be administered. All medication handed into the welfare office must be in the original container and bear the pharmacy label with instructions and the student's name.
- Be involved in the development and review of their child's Individual Healthcare Plan and may be involved in its drafting;
- Carry out any action they have agreed to as part of the implementation of the Individual Healthcare Plan e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times.
- Ensure that parental permissions in Edulink for over the counter medications such as paracetamol are up to date.
- Ensure that their child does not carry any medication in school except Asthma inhalers, Epipens or antihistamine for severe allergic reactions and insulin. Paracetamol and other non-prescription medications should be requested from the welfare office.
- Check their child's Edulink account for details of any visit to the Welfare office as needed.

## III. Students

- Students with medical conditions will often be best placed to provide information about how their condition affects them. Students should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their Individual Healthcare Plans. They are also expected to comply with their plans.
- Students must not bring medication into college except Asthma inhalers, Epipens or antihistamine for severe allergic reactions and insulin

## IV. School nursing team and other healthcare professionals

The school nursing service will notify the college when a student has been identified as having a medical condition that will require support in college. This will be before the student starts college, wherever possible. They may also support staff to implement a child's Individual Healthcare Plan.

Healthcare professionals, such as GPs and pediatricians, may liaise directly with the college to support a student with a medical condition. They may also provide advice and guidance on developing plans.

## V. Responsibilities of the Welfare Officer

The Welfare Officer or other staff working in the Welfare Office will:

- ensure that the college is aware of staff and students with known medical conditions or physical disabilities and any special requirements that may arise from this;
- ensure that the college is aware of staff and students with allergies;
- keep records (including Individual Healthcare Plans where necessary) within the SIMs systems to be accessible to all staff and to parents via Edulink, for each student stating any medical condition, treatment or medicines required and to ensure that these are kept up to date;

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- record any visits to the Welfare Room by students onto their SIMs records;
- deal with emergency procedures for staff and students, liaising with emergency services if required;
- ensure safe keeping of prescribed medicines belonging to students;
- record the administering of medication to students, including non-prescription medication. The college asks parents for parental permission to administer a range of non-prescription medication and a 'yes' or 'no' response is recorded on the child's record, this preference can be updated by parents at any time using edulink;
- inform parents of serious accidents, illness or incidents involving a student at college and the action taken (e.g. head injuries);
- liaise with senior staff regarding accidents or incidents which may need investigation and reporting to the Health and Safety Executive;
- liaise with pastoral staff, the safeguarding team and the Learning Support department regarding medical issues or welfare concerns about students;
- check and ensure upkeep of first aid boxes across the college and those used for educational visits;
- work with other external agencies re vaccinations and medicals;
- provide information to staff and students in respect of medical/social/health awareness and information regarding infectious diseases;
- monitor absence and attendance daily working closely with Pastoral Leaders, Senior Leadership Team and other outside agencies as required;
- undertake further training and refresher courses as required.

Personal Protective Equipment (disposable gloves, masks and aprons) is provided for use by staff who are administering first aid and it is important this is worn, particularly for dealing with students who are bleeding or where other bodily fluids such as vomit are present.

### VI. Managing medicines

Prescription and non-prescription medicines will only be administered at college:

- When it would be detrimental to the student's health or school attendance not to do so and
- Where we have parents' written consent

Students under 16 will not be given medicine containing aspirin unless prescribed by a doctor. Anyone giving a student any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents are able to view this via the Edulink app.

The college will only accept prescribed medicines that are:

- In-date
- Labelled
- Provided in the original container, as dispensed by the pharmacist, and include the student's name instructions for administration, dosage and storage

The college will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Students will be informed about where their medicines are at all times and those with emergency medication such as epipens or antihistamine, asthma inhalers and insulin will be able to access them immediately. Medicines and devices such as

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asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to students and not locked away.

Parents will be expected to collect medicines and to arrange for safe disposal when they are no longer required or out of date.

## **VII. Trained first aiders**

The Welfare Officer, who is a trained first aider, is based in the Welfare Office which is centrally located within the college and is open during the day to deal with medical issues.

In addition, there are other trained staff who provide cover in the Welfare Office and may carry out welfare duties in the absence of the Welfare Officer, and they are also trained first aiders.

In addition, a number of staff within the Community Enterprise team are also trained first aiders and work in the Nursery, Sport and Fitness Suite and Community Office.

A small number of teaching staff are also trained first aiders as they may lead trips in the UK or abroad, but unless there was an emergency, they generally would not be called upon to deal with first aid issues during a normal day as they would be teaching.

## **VIII. Equal opportunities**

Wyvern College is clear about the need to actively support students with medical conditions to participate in college trips and visits, or in sporting activities. The college will consider what reasonable adjustments need to be made to enable students to participate fully and safely on trips, visits and sporting activities. Individual risk assessments may need to be carried out so that planning arrangements take account of any steps needed to ensure that students with medical conditions are included. In doing so, students, their parents and any relevant healthcare professionals may be consulted.

However, the college also recognises that there may be certain activities where it would be impossible to risk assess an activity as safe for an individual student. The college is committed to safeguarding its students and there may be occasions when a student cannot participate in an activity because the college deems it unsafe to do so.

## **4. Accountability**

This policy is written by the DSL. It is the responsibility of the Clerk to the Trustees to ensure that the policy is available on the college website for parents and other stakeholders.

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## 5. Supporting documents

### Related documents

This document should be read in conjunction with the college's Health and Safety Policy 19, the Mental Health and Well-Being Policy, the Safeguarding policy and the Self-Harm management guidance document.

Attached to this policy are the following documents:

1. Safe storage of medication.
2. Individual Healthcare Plans.
3. Dealing with life-threatening allergies.
4. St John Ambulance guidance 'What to look for - Asthma attacks'.
5. St John Ambulance guidance 'What is a severe allergic reaction?'
6. St John Ambulance guidance 'Diabetic emergency

### Related documents

#### 1. SAFE STORAGE OF MEDICATION

The Welfare Officer checks the expiry dates for all medication stored at college each term. Parents of students with medical conditions are responsible for ensuring that all emergency medication brought into college is clearly labelled with the student's name, the name and dose of the medication and the frequency of dose. It is the responsibility of parents to ensure adequate supplies of new and in-date medication comes into college at the start of each term, or as required, with the appropriate instructions and ensures that this is handed into reception and that a student is not enabled to carry their own medication with the exception of epipens and anti-histamines to treat severe allergic reactions, asthma inhalers and insulin.

Students must not carry their own over the counter medication in college; or their own prescription medication, the only medication that should be carried by students is that which is always needed e.g. asthma inhalers, an EpiPen or Insulin. Students must ensure that they store their medication securely in their bag and do not share this or give to other students to use. Students should only carry the amount of medication they might reasonably expect to use in 1 day and it should be in the original labelled container with the pharmacy label.

Emergency medication is available to students who require it during the college day or at off-site activities, where we have parental permission.

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## 2. INDIVIDUAL HEALTHCARE PLANS

The college uses an Individual Healthcare Plan for children with complex health needs to record important details about individual children's medical needs at college, their triggers, signs, symptoms, medication and other treatments. Further documentation can be attached to the Individual Healthcare Plan if required.

Specific health needs which will generate an Individual Healthcare Plan are:

- asthma
- diabetes
- epilepsy
- anaphylaxis

Other medical conditions may require an Individual Healthcare Plan and parents are encouraged to contact the Welfare Officer to discuss their child's individual health needs.

An Individual Health Plan, accompanied by an explanation of why and how it is used, is sent to all parents of students with a complex health need. This is sent by the college:

- at enrolment in year 7
- in-year admission
- when a diagnosis is first communicated to the college
- new diagnosis
- When the college is informed of a change in the medical condition or it's treatment.

It is the responsibility of parents and carers to inform the college when the child is admitted about any medical conditions and to update the college when their child develops a new medical condition or when there is a change in their medical condition.

Individual Healthcare Plans are used to create a central register of students with medical needs. The Welfare Officer has responsibility for maintaining this register.

Parents have access in Edulink to change parental permission for medications and to change or update any medical conditions of their child.

## 3. DEALING WITH LIFE-THREATENING ALLERGIES

The college has a responsibility to protect anyone who has a life-threatening allergy by ensuring that reasonable precautions are put in place to prevent any incidents from arising, and also to enable anyone who has a life-threatening allergy to take a full and active part in college life.

### Communication

- The Welfare Officer contacts parents of students known to have life-threatening allergies to decide whether the generic health care plan for students with allergies is suitable for their child and can be applied or whether a different Individual Healthcare Plan is necessary.

### Storage and Medication

- EpiPens and other medication for life-threatening allergies should be carried by the student, a back up or spare supply should be stored in the Welfare Office in an unlocked drawer of the filing cabinet. The college has a back up epipen for emergency use which it has been issued in line with guidance but does not hold a backup of any other type of auto injector device.

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- It is the responsibility of parents to ensure that the medication is up to date and that their child has it in their possession at the start of the college day.

### Training of Staff in Administering Epi-pens

- staff attending first aid training courses would cover this as part of the course;
- Caterlink, the college's catering firm, are aware of the dangers of allergies and are able to provide advise on allergens in the food supplied on request.

### Educational Visits

- it is the responsibility of the trip leader to ensure that medication is collected from the Welfare Office before a visit and returned after the visit;
- it is important that a child with a life-threatening allergy is supervised by a member of staff when using an EpiPen;
- before residential visits all staff attending are made aware of medical conditions which might cause concern.



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## 4. WHAT TO LOOK FOR – ASTHMA ATTACKS



If you think someone is having an asthma attack, these are the five key things to look for:

1. Difficulty breathing or speaking
2. Wheezing
3. Coughing
4. Distress
5. Grey-blue tinge to the lips, earlobes and nailbeds (known as cyanosis).

### **What you need to do - Asthma attacks**

- First, reassure them and ask them to breathe slowly and deeply which will help them control their breathing.
- Then help them use their reliever inhaler straight away. This should relieve the attack.
- Next, sit them down in a comfortable position.
- If it doesn't get better within a few minutes, it may be a severe attack. Get them to take one or two puffs of their inhaler every two minutes, until they've had 10 puffs.
- If the attack is severe and they are getting worse or becoming exhausted, or if this is their first attack, then call 999/112 for an ambulance.
- Help them to keep using their inhaler if they need to. Keep checking their breathing, pulse and level of response.
- If they lose consciousness at any point, open their airway, check their breathing and prepare to treat someone who's become unconscious – see below.

### **WHAT TO DO IF SOMEONE IS UNCONSCIOUS**

1. **Open their airway.**
2. **Tilt head.**
3. **Check for breathing.**
4. **If they're breathing:**  
Put them in the recovery position.
5. **If they're not breathing:**  
Begin CPR.

### **WHAT TO DO IF SOMEONE IS UNCONSCIOUS AND NOT BREATHING**

1. **Call 999.**
2. **Pump:**  
30 chest compressions at a rate of 100–120 per minute.
3. **Breathe:**  
Give two rescue breaths.
4. **Continue to pump and give rescue breaths until help arrives.**

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## 5. WHAT IS A SEVERE ALLERGIC REACTION?

A severe allergic reaction can develop just seconds after someone comes into contact with the allergen. Some allergens include animal hair, bee stings, medication (especially penicillin), and food, such as nuts and shellfish. It can affect the whole body, and if it's not treated quickly enough it could be fatal. This is called anaphylactic shock.

### Signs and symptoms to look for:

- a red, itchy rash, or raised area of skin (weals)
- red, itchy, watery eyes
- swelling of hands, feet, or face
- abdominal pain, vomiting, or diarrhoea

### There may also be:

- difficulty in breathing
- swelling of tongue and throat with puffiness around eyes
- confusion and agitation
- signs of shock leading to collapse and unresponsiveness

### What to do:

1. Call 999 straight away and tell ambulance control that you suspect a severe allergic reaction.
2. If someone's having a severe allergic reaction, then they may have medication, like an EpiPen. This is a pre-filled injection device which when injected, can help reduce the body's allergic reaction. Check if they have one, and if they do, help them to use it or do it yourself following the instructions.
3. Help them to get comfortable and monitor their breathing and level of response.

**\* HOW TO USE IT...**

1. Remove the blue safety cap.  
Remember: **blue** to sky, **orange** to thigh
2. Hold the EpiPen<sup>®</sup> roughly **10cm** away, with the orange tip pointing towards your outer thigh.
3. Jab the EpiPen<sup>®</sup> firmly into your outer thigh at a right angle.  
Hold firmly for **3** seconds.
4. Dial **999**  
Ask for an ambulance and say '**anaphylaxis**' (anna-fill-axis).

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## 6. WHAT TO LOOK FOR – DIABETIC EMERGENCY



### Hyperglycaemia

This is where the blood sugar level is higher than normal. It may be caused by a person with diabetes who has not had the correct dose of medication. They may have eaten too much sugary or starchy food or, they may be unwell with an infection.

#### Signs and symptoms to look for:

- warm, dry skin
- rapid pulse and breathing
- fruity, sweet breath
- excessive thirst
- drowsiness, leading them to become unresponsive if not treated (also known as a diabetic coma)

#### What to do

If you suspect hyperglycaemia (high blood sugar), they need urgent treatment. Call 999 for emergency help and say that you suspect hyperglycaemia.

They may be wearing a medical bracelet or medallion, or have a card on them which can alert you to their condition.

While you wait for help to arrive, keep checking their breathing, pulse and whether they respond to you.

If they become unresponsive at any point, open their airway, check their breathing and prepare to start CPR.

### Hypoglycaemia

This is where the blood sugar level is lower than normal. It can be caused by an imbalance between the level of insulin and the level of glucose in the blood. Someone with diabetes may recognise the onset of a hypoglycaemic episode.

#### Signs and symptoms to look for:

- weakness, faintness or hunger
- confusion and irrational behaviour
- sweating with cold, clammy skin
- rapid pulse
- palpitations
- trembling or shaking
- deteriorating level of response

#### What to do

If you suspect hypoglycaemia (low blood sugar), help the person to sit down. If they have their own glucose gel or glucose tablets, help them take it. If not, you need to give them something sugary, such as an 150ml glass of fruit juice or non-diet fizzy drink; three teaspoons of sugar or sugar lumps; or three sweets such as jelly babies.

If they improve quickly, give them more of the sugary food or drink and let them rest. If they have their blood glucose testing kit with them, help them use it to check their blood sugar level. Stay with them until they feel completely better.

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If they do not improve quickly, look for any other reason why they could be unwell and call 999 for emergency help. Keep monitoring their breathing and level of response while waiting for help to arrive.

If they are not fully alert, don't try to give them something to eat or drink as they may choke. If they become unresponsive at any point, open their airway, check their breathing and prepare to give CPR.

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## 7.Head injuries:

A minor head injury is an injury (like a bump or a cut) to the head that doesn't result in any serious brain injury. Sometimes a minor head injury can cause [concussion](#), but this is not always the case.

It can be hard to tell the difference between a minor and a severe head injury.

[Read about severe head injuries](#)

## Symptoms of minor head injury

Minor head injuries often cause a bump or bruise. Other symptoms of a minor head injury may include:

- a mild [headache](#)
- nausea (feeling sick)
- [dizziness](#)
- blurred vision

## Phone 999 if you or someone else has a head injury and:

- is unresponsive
- cannot stay awake
- has had a seizure (fit)
- has fallen from a height like 5 or more stairs
- is having problems with their senses, like hearing loss or double vision
- has numbness or weakness in any part of their body
- is struggling to walk, balance, speak, write, or understand other people
- hit their head with force, like being hit by a car
- has a head wound with something inside it, like glass
- has signs of damage to their skull, like a dent in their head
- has severe neck pain or cannot move their head

## Go to A&E if you or someone else has a head injury and:

- is confused or was 'knocked out' for any length of time
- has [vomited](#)
- has a persistent [headache](#) that is not helped by painkillers

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- is showing unusual behaviour, like being very irritable or crying more than usual
- has memory loss (amnesia)
- is intoxicated due to alcohol or recreational drugs
- has a blood clotting disorder (haemophilia) or takes blood thinning medicine (like [warfarin](#) or apixaban)
- has previously had brain surgery
- has a large bruise or wound to the head or face
- has a black eye
- has blood or clear fluid coming from their ears or nose
- has bruising behind their ears
- the injury wasn't accidental, for example if someone else has hurt a child on purpose

### Treating a minor head injury

Most people who go to hospital with a minor head injury can return home shortly afterwards. They should make a full recovery within a few days.

There are some things you can do to manage minor head injuries at home. You should:

- have someone stay with you for 24 hours after the injury to watch for [serious symptoms](#) appearing
- get plenty of rest
- avoid stressful or noisy situations
- limit screen time (including smartphones)
- take [paracetamol](#) or [ibuprofen](#) to help with mild pain, following all instructions on the packaging
- use a cold compress (like a bag of frozen peas wrapped in a tea towel) to help soothe the injury
- keep children with a head injury calm, and encourage them to avoid rough play

It's also recommended that you:

- avoid alcohol or recreational drugs
- avoid sleeping pills, sedatives or tranquillisers (unless prescribed by a medical professional)
- use a barrier (like a tea towel) between a cold compress and your skin
- avoid using a cold compress for longer than 30 minutes, or more often than every 2 hours
- avoid playing contact sports for at least 3 weeks, and follow [return to sport guidelines](#)

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- avoid returning to work or school until you feel able, as it may increase your recovery period
- avoid driving a car, motorbike, bicycle, or operating machinery, until you have no symptoms that affect your ability to see or think

If your child has a minor head injury, they may cry or be distressed. This is normal – with attention and reassurance most children will settle down. However, seek medical help if your child continues to be distressed despite simple measures like pain relief.

### Contact your GP if:

- you still have symptoms 2 weeks after the injury
- you're unsure about driving or returning to sports, work, or school

[Read more about returning to sports after a head injury](#)

### Preventing a minor head injury

Injuries cannot be completely avoided, but there are some steps you can take to help reduce the risk of more serious injury. You could:

- wear a helmet that fits well when doing activities like cycling
- wear safety equipment when playing contact sports
- clear up any spillages quickly to avoid someone slipping
- use safety equipment if you're doing any kind of DIY
- fit safety gates at the top and bottom of stairs for young children
- follow health and safety guidance at work



Source: [NHS 24](#)