

Remedicare Education Services

First Aid & Administration of Medicines Policy

Organisation: Remedicare Education Services

Primary Site: Alpine House, Unit 6, Millars Brook, Molly Millars Lane, Wokingham, RG41 2RT

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1. Purpose and Statement of Intent

Remedicare Education Services is committed to protecting and promoting the health, safety and welfare of the children and young people, staff, visitors and other individuals who access or work within our provision.

As an alternative provision provider supporting children and young people with a range of special educational needs and disabilities, including SLD, PMLD, SEMH, communication needs, complex learning profiles and medical needs, Remedicare recognises that some individuals may require additional or specialist arrangements to ensure that they can participate safely and meaningfully in education.

The purpose of this policy is to establish clear arrangements for:

- providing appropriate first aid;
- responding to illness, injury and medical emergencies;
- administering and supporting the safe use of medicines;
- identifying and managing individual healthcare needs;
- ensuring appropriate Individual Healthcare Plans (IHPs) are in place where required;
- supporting children with allergies, asthma, epilepsy, diabetes and other medical conditions;
- ensuring appropriate arrangements are in place for transport, outreach, community and off-site activities;
- ensuring staff receive appropriate training and understand the limits of their competence;
- maintaining accurate records of first aid, medicines and medical incidents;
- ensuring parents/carers, commissioning schools and relevant health professionals are appropriately involved;
- ensuring reasonable adjustments are considered so that children and young people with medical needs are not unnecessarily excluded from education or activities.

Remedicare will maintain appropriate first aid provision based on a first aid needs assessment, taking account of:

- the number and age of children and young people;
- the SEND and medical profile of the cohort;
- the size and layout of each site;

- the activities undertaken;
- outdoor and community provision;
- transport arrangements;
- staffing levels;
- foreseeable risks and emergencies;
- the distance and response time to emergency medical services.

This policy applies across Remedicare's provision, including centre-based provision, outreach, community activities, educational visits and transport where Remedicare staff have responsibility for supporting the child.

2. Legal and Guidance Framework

Remedicare will have regard to applicable legislation and statutory guidance, including, where relevant:

- Health and Safety at Work etc. Act 1974
- Health and Safety (First-Aid) Regulations 1981
- Management of Health and Safety at Work Regulations 1999
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Medicines Act 1968
- Human Medicines Regulations 2012
- Misuse of Drugs Act 1971 and relevant controlled drug requirements
- Equality Act 2010
- Children and Families Act 2014
- SEND Code of Practice: 0 to 25 years
- Supporting pupils at school with medical conditions – DfE statutory guidance, as applicable to the children and young people Remedicare supports
- Current Early Years Foundation Stage statutory framework where Remedicare provides provision within the EYFS age range
- Current DfE allergy safety guidance and associated statutory requirements where applicable
- Relevant Health and Safety Executive guidance
- Relevant NHS and healthcare professional guidance

Remedicare will monitor relevant changes to legislation and statutory guidance and update this policy where required.

3. Scope

This policy applies to:

- all Remedicare employees;
- agency and temporary staff working under Remedicare's direction;
- volunteers and other adults working directly with children where relevant;
- contractors where they are required to follow Remedicare's health and safety arrangements;
- all children and young people accessing Remedicare provision;
- all Remedicare sites and activities undertaken on behalf of Remedicare.

No member of staff will be expected to undertake a medical procedure or administer medication unless they have received the appropriate training and have been authorised to do so.

Staff must work within the limits of their training, competence and role.

4. Core Principles

Remedicare will operate the following principles.

4.1 Safety

The safety and wellbeing of children, young people and staff is the primary consideration.

4.2 Inclusion

A medical condition or disability will not, in itself, be treated as a reason to prevent a child or young person from accessing education, activities, trips or community provision.

Reasonable adjustments will be considered to enable safe participation.

4.3 Individualised Support

Children and young people with medical conditions will be assessed individually. Remedicare recognises that children with the same diagnosis may have very different support needs.

4.4 Partnership Working

Where appropriate, Remedicare will work with:

- parents/carers;
- commissioning schools;
- local authorities;
- NHS professionals;
- GPs;
- school nurses;
- specialist nurses;
- therapists;
- other relevant professionals.

4.5 Competence

Staff will only undertake first aid or medical procedures for which they have appropriate training, authorisation and current competence.

4.6 Confidentiality

Medical information will be treated sensitively and shared only with those who need the information to safely support the child or young person.

However, confidentiality will not prevent information being shared where necessary to safeguard a child or adult or respond to an emergency.

4.7 Recording and Learning

Medical incidents, medication administration, accidents, near misses and relevant concerns will be recorded appropriately and reviewed to identify learning or additional control measures.

5. Roles and Responsibilities

5.1 Directors

Directors have overall responsibility for ensuring that Remedicare has appropriate systems for first aid and the management of medicines.

Directors will ensure that:

- appropriate resources are available;
- first aid provision is reviewed;

- appropriate insurance arrangements are maintained;
- staff training needs are identified;
- significant incidents are appropriately investigated;
- statutory reporting requirements are met;
- this policy is reviewed.

5.2 Service Director / Health & Safety Lead

The Service Director / nominated Health & Safety Lead will oversee the implementation of this policy.

Responsibilities include:

- ensuring first aid needs assessments are completed;
- monitoring first aid provision across Remedicare sites;
- ensuring appropriate staff training;
- ensuring first aid equipment is available and maintained;
- ensuring appropriate medication systems are in place;
- ensuring significant incidents are reviewed;
- ensuring appropriate risk assessments are completed;
- liaising with external professionals where required;
- ensuring lessons from incidents are incorporated into practice.

5.3 Centre Managers / Managers / Team Leaders

Centre Managers, Managers and Team Leaders are responsible for implementing this policy within their areas of responsibility.

They must ensure that:

- staff know who the trained first aiders are;
- first aid equipment is accessible;
- emergency information is accessible to relevant staff;
- medication arrangements are followed;
- medication records are completed accurately;
- individual healthcare plans are known to relevant staff;
- incidents are reported promptly;
- cover arrangements are in place when trained staff are absent.

6. First Aiders and Appointed Persons

Remedicare will ensure that sufficient staff are trained in appropriate first aid qualifications based on the first aid needs assessment.

Depending on the needs of the provision, this may include:

- Emergency First Aid at Work (EFAW);
- First Aid at Work (FAW);
- Paediatric First Aid (PFA);
- emergency paediatric first aid;
- specialist medical training;
- epilepsy/seizure medication training;
- asthma training;
- anaphylaxis/adrenaline auto-injector training;
- other healthcare training identified through an IHP or risk assessment.

First aiders must:

- act within their training and competence;
- provide appropriate immediate first aid;
- summon emergency medical assistance when required;
- remain with the individual until appropriate support is available;
- record treatment provided;
- report incidents in accordance with Remedicare procedures;
- maintain current training where required.

Being a first aider does not automatically authorise a staff member to administer medicines.

7. First Aid Needs Assessment

Remedicare will maintain a first aid needs assessment for each relevant setting and activity.

The assessment will consider:

- staffing levels;
- numbers of children;

- age range;
- SEND profile;
- known medical conditions;
- foreseeable injuries;
- activities undertaken;
- outdoor provision;
- community access;
- transport;
- proximity to emergency services;
- lone-working arrangements;
- off-site provision.

The assessment will be reviewed:

- at least annually;
- following significant changes;
- following a serious incident;
- where the medical or SEND profile of the cohort changes;
- where staffing or premises arrangements change.

8. First Aid Equipment

Appropriate first aid equipment will be provided at Remedicare sites.

First aid equipment will be:

- clearly identified;
- readily accessible;
- appropriately stocked;
- checked regularly;
- replaced when used or expired.

Medication must not be stored inside general first aid boxes.

Where medication or emergency medical devices are required, they will be stored in accordance with the child's IHP, manufacturer's instructions and relevant risk assessment.

9. First Aid Arrangements

When a child or young person becomes unwell or is injured:

1. Staff will assess the immediate situation.
2. A trained first aider will be contacted where appropriate.
3. Emergency services will be contacted immediately where required.
4. The child's IHP will be consulted where relevant.
5. The child will be supported in an appropriate and safe area.
6. Parents/carers will be contacted where appropriate.
7. The incident will be recorded.
8. Any required follow-up action or review will be completed.

Staff should not leave a child requiring urgent medical assistance unattended.

Where a child requires emergency medical treatment, **999 should be called without delay.**

10. Emergency Medical Treatment

Where a medical emergency occurs, staff should:

- remain calm;
- follow the child's IHP or emergency healthcare plan where available;
- provide appropriate first aid within their competence;
- call 999 where required;
- clearly explain the emergency to the emergency operator;
- provide relevant medical information;
- send a member of staff to meet emergency services where possible;
- contact parents/carers;
- ensure appropriate safeguarding arrangements remain in place for other children.

A staff member should remain with the child until responsibility is safely transferred to an appropriate healthcare professional or parent/carer, subject to emergency circumstances and professional direction.

11. Administration of Medicines

Medication will only be administered by Remedicare where appropriate arrangements are in place.

Remedicare will generally require:

- written parental/carers consent;
- clear medication instructions;
- medication in the original pharmacy-labelled container where applicable;
- confirmation of the prescribed dose and frequency;
- appropriate staff training;
- an appropriate medication administration record;
- an Individual Healthcare Plan or other healthcare information where required.

Staff must never administer medication based solely on verbal instructions where written authorisation is required.

Medication must not be administered outside the agreed instructions unless there is an appropriate emergency healthcare plan or other lawful and clinically supported arrangement.

12. Self-Administration

Where a child or young person is able to safely self-administer medication, Remedicare will support this wherever appropriate.

The level of independence will be assessed individually.

Depending on the child, this may involve:

- independent self-administration;
- staff supervision;
- staff prompting;
- staff holding the medication and providing access when required;
- staff administering the medication.

Any arrangements must be clearly documented.

13. Refusal of Medication

A child or young person should not normally be forced to take medication.

Where medication is refused:

- staff should remain calm;
- staff should follow the child's IHP/emergency plan;
- parents/carers should be informed where appropriate;
- the refusal should be recorded;
- medical advice should be sought where the missed medication could create a significant health risk.

Where medication is time-critical or life-saving, staff must follow the specific emergency healthcare plan and seek emergency medical advice where required.

14. Medication Errors

A medication error includes, but is not limited to:

- wrong child;
- wrong medication;
- wrong dose;
- wrong time;
- missed dose;
- duplicate dose;
- incorrect route;
- medication given without authorisation.

If a medication error occurs:

1. The child's immediate safety must be assessed.
2. Appropriate medical advice must be sought without delay.
3. Parents/carers must be informed.
4. The incident must be recorded.
5. The Service Director/Centre Manager must be informed.
6. The incident must be reviewed to identify learning and prevent recurrence.

Where the incident raises safeguarding or professional conduct concerns, Remedicare's safeguarding procedures and Staff Concerns & Conduct Protocol will also apply.

15. Storage of Medicines

Medication will be stored safely and in accordance with:

- manufacturer's instructions;
- pharmacy instructions;
- the child's healthcare plan;
- risk assessments;
- relevant legal requirements.

Medication requiring refrigeration will be stored appropriately.

Controlled drugs will be managed in accordance with applicable legal and organisational requirements.

Medication must remain identifiable to the individual child.

Medication must not be accessible to other children.

Emergency medication, such as inhalers or adrenaline auto-injectors, must be readily accessible to authorised staff and not stored in a location that would create an unsafe delay during an emergency.

16. Medication During Transport and Off-Site Provision

Where a child requires medication during transport, outreach, community activities or educational visits:

- the medication must accompany the child where required;
- the responsible staff member must know where it is stored;
- the relevant emergency plan must be accessible;
- staff must understand what action is required in an emergency;
- appropriate risk assessments must be completed;
- emergency contact information must be available.

For children with life-threatening medical conditions, transport arrangements must specifically address access to emergency medication and the actions staff must take.

17. Individual Healthcare Plans (IHPs)

Where a child has a medical condition requiring specific support, Remedicare will consider whether an IHP is required.

An IHP may include:

- the child's medical condition;
- medication;
- dosage and timing;
- known triggers;
- symptoms;
- emergency procedures;
- daily healthcare needs;
- level of independence;
- staff responsibilities;
- required training;
- arrangements for activities outside the centre;
- transport arrangements;
- emergency contact details;
- relevant healthcare professional details;
- review arrangements.

IHPs should be developed with appropriate involvement from:

- the child or young person, where appropriate;
- parents/carers;
- relevant healthcare professionals;
- Remedicare staff;
- the commissioning school or local authority where appropriate.

IHPs must be reviewed:

- at least annually where appropriate;
- following a significant change in medical needs;
- following a serious medical incident;
- when medication changes;
- when advised by an appropriate healthcare professional.

18. Children with Complex SEND and Medical Needs

Remedicare recognises that some children may have difficulty communicating pain, illness or changes in their physical wellbeing.

Staff should therefore consider individual communication methods, including:

- AAC;
- PECS;
- objects of reference;
- visual supports;
- known communication signals;
- Intensive Interaction;
- personalised indicators of distress or illness.

Staff should know the individual child's baseline presentation where this information is available.

Changes in behaviour, presentation, regulation, communication or physical functioning may be indicators of illness or discomfort and should be appropriately considered.

Staff must avoid assuming that changes in behaviour are purely behavioural where there may be an underlying medical cause.

19. Allergies and Anaphylaxis

Remedicare will maintain appropriate arrangements for children with allergies.

For children with known severe allergies:

- relevant information will be clearly recorded;
- emergency medication will be accessible;
- relevant staff will receive appropriate training;
- an individual emergency plan will be followed;
- risk assessments will consider known triggers;
- arrangements will extend to transport, community activities and off-site provision.

Where anaphylaxis is suspected, staff must follow the child's emergency plan and call **999**.

Emergency medication such as an adrenaline auto-injector must only be administered by staff who are appropriately trained or otherwise acting under applicable emergency arrangements.

Remedicare will also have regard to current DfE allergy safety guidance and statutory requirements where applicable.

20. Asthma

Children with asthma must have appropriate access to their prescribed inhaler and spacer where required.

Staff must be aware of:

- the child's asthma plan where available;
- where the medication is stored;
- how the child accesses it;
- signs of an asthma emergency;
- when emergency medical assistance is required.

Where a child requires support to use their inhaler, appropriately trained staff may assist in accordance with the child's healthcare arrangements.

21. Seizures and Epilepsy

Where a child has epilepsy or another seizure condition, their IHP/emergency plan must clearly identify:

- usual presentation;
- known triggers where relevant;
- when emergency medication should be administered;
- medication and dosage;
- route of administration;
- who is trained to administer it;
- when 999 must be called;
- post-seizure care;
- recording requirements.

Only appropriately trained and authorised staff may administer emergency seizure medication.

All significant seizures and medication administration must be recorded.

22. Mental Health First Aid

Remedicare recognises the importance of supporting staff wellbeing and mental health.

Mental Health First Aiders may:

- listen without judgement;
- provide initial support;
- signpost staff towards appropriate professional support;
- encourage staff to seek support at an early stage;
- promote positive mental health awareness.

Mental Health First Aiders are **not medical professionals or therapists** unless separately qualified.

They must not diagnose mental health conditions or provide clinical treatment.

Where there is an immediate concern regarding risk of serious harm to an individual or another person, the matter must be escalated immediately through appropriate safeguarding, emergency or management procedures.

Confidentiality will be maintained wherever possible, but information may need to be shared where necessary to protect someone from harm.

23. First Aid, Accident and Incident Recording

All relevant first aid and medical incidents must be recorded promptly on CPOMS.

Records should include:

- date and time;
- child/person involved;
- location;
- what happened;
- injury or symptoms;
- first aid provided;
- medication administered, where applicable;
- staff involved;
- parent/carer notification;
- further action required.

Where appropriate, information will also be recorded within Remedicare's safeguarding or incident recording systems, including CPOMS where a safeguarding concern is identified.

24. Parent/Carer Notification

Parents/carers should be informed of significant injuries, illness, medication administration or medical incidents involving their child.

The method and urgency of communication will depend upon the circumstances.

For serious incidents, parents/carers should be contacted as soon as reasonably practicable.

Where a child has an IHP, the agreed communication arrangements within that plan should be followed.

25. RIDDOR

Remedicare will comply with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR).

Where an incident is potentially reportable, Remedicare will assess the incident against the current HSE requirements.

Reportable incidents may include:

- work-related deaths;
- specified injuries to employees;
- certain work-related diseases;
- dangerous occurrences;
- injuries resulting in an employee being away from work or unable to perform normal duties for more than seven consecutive days.

Specified injuries, deaths and dangerous occurrences must be reported without delay and within the applicable statutory reporting period. Over-seven-day employee injuries must be reported within 15 days.

Remedicare will not assume that every hospital attendance is automatically RIDDOR-reportable. Each incident will be assessed against the applicable regulations.

26. Off-Site, Outreach and Community Provision

First aid and medical arrangements must not stop at the Remedicare site.

Before outreach, community activities or educational visits, staff must consider:

- individual medical needs;
- medication;
- emergency medication;
- location and access to emergency services;
- staff competence;
- communication arrangements;
- transport;
- environmental risks;
- relevant risk assessments;
- emergency contacts.

Where a child has a significant medical condition, their IHP and emergency arrangements must be available to the staff responsible for them.

27. Transport

Where Remedicare provides or arranges transport, relevant medical needs must be communicated to the responsible staff/transport provider on a need-to-know basis.

Where necessary:

- medication will travel with the child;
- emergency medication will be immediately accessible;
- relevant emergency procedures will be available;
- transport risk assessments will identify medical risks;
- staff will know how to respond if a medical emergency occurs during transport.

A child must never be transported without necessary emergency medication where the child's healthcare plan identifies that it is required.

28. Training

Remedicare will identify training requirements through:

- first aid needs assessments;
- individual healthcare plans;
- risk assessments;
- staff role requirements;
- medical advice;
- incident learning.

Training may include:

- first aid;
- paediatric first aid;
- emergency first aid;
- medication administration;
- epilepsy and seizure management;
- asthma;
- anaphylaxis;
- diabetes;
- moving and handling where medically relevant;
- other specialist healthcare procedures.

Training records will be maintained by Remedicare.

Staff must inform their manager if they do not feel competent or confident to undertake a medical procedure.

29. Confidentiality and Information Sharing

Medical information is sensitive personal information.

Remedicare will ensure information is:

- stored securely;
- shared on a need-to-know basis;
- accessible to staff who require it to keep the child safe;
- reviewed when circumstances change.

Medical information may be shared without consent where this is necessary to protect the child or another person from serious harm or where there is another lawful basis for doing so.

30. Safeguarding

Medical concerns may sometimes overlap with safeguarding.

Staff must follow Remedicare's Safeguarding and Child Protection Policy where:

- a child's medical needs are not being appropriately met;
- medication is deliberately withheld or misused;
- there are concerns about fabricated or induced illness;
- a child discloses concerns about medical treatment;
- a medication error raises concerns about deliberate or reckless conduct;
- staff fail to follow a child's agreed healthcare arrangements;
- there are concerns about neglect or unsafe care.

Where concerns relate to staff conduct, Remedicare's Staff Concerns & Conduct Protocol and relevant disciplinary procedures may also apply.

31. Review and Quality Assurance

Remedicare will monitor the effectiveness of its first aid and medicines arrangements through:

- regular equipment checks;
- training audits;
- medication record checks;
- IHP reviews;
- incident reviews;
- accident and near-miss analysis;
- risk assessment reviews;
- safeguarding audits;
- feedback from children, parents/carers and staff.

Where an incident identifies a weakness in practice, Remedicare will consider whether additional:

- training;

- supervision;
- risk assessment;
- staffing;
- equipment;
- healthcare advice;
- procedural changes

are required.

32. Policy Review

This policy will be reviewed at least annually and sooner where required by:

- changes in legislation;
- changes in statutory guidance;
- changes to DfE or HSE guidance;
- significant incidents;
- changes to Remedicare provision;
- changes to medical or SEND needs within the cohort;
- recommendations from audits or external professionals.

Policy Owner: Service Director / Health & Safety Lead

Next Review: September 2027

Key references

The policy should be read alongside the current DfE guidance on supporting pupils with medical conditions, HSE first-aid guidance, RIDDOR requirements and the current EYFS framework where applicable. The DfE's existing medical-conditions guidance remains in force while revised guidance is being developed.

For first-aid provision, DfE guidance also makes clear that first aid and medicine administration are distinct functions, and that staff should not be required to administer medicines without appropriate arrangements and training.