



Willingham Primary School and Honey Pot Pre-School

Medical Conditions, Medicines and First Aid Policy November 2024

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Medical Conditions and Medicines

Willingham Primary School and Honey Pot Preschool are an inclusive community that welcomes and supports pupils with medical conditions. Willingham Primary School and Honey Pot Preschool provides all pupils with any medical condition, the same opportunities as others.

We will help to ensure they can:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution

The school makes sure all staff understand their duty of care to children and young people in the event of an emergency.

All staff feel confident in knowing what to do in an emergency.

We understand that certain medical conditions are serious and potentially life threatening, particularly if poorly managed or misunderstood.

We understand the importance of administering medication as directed by healthcare professionals and parents*.

All staff understand the medical conditions that affect pupils. Staff receive training on the impact medical conditions can have on pupils.

The named member of school staff responsible for this medical conditions policy and its implementation is the Office Manager.

Policy framework

The policy framework describes the essential criteria for how the school can meet the needs of children and young people with long-term conditions, including diabetes and nut allergies.

1. We are an inclusive community that supports and welcomes pupils with medical conditions.

- We welcome and support pupils with medical conditions. We provide children with medical conditions the same opportunities and access to activities (both school based and out-of-school) as other pupils. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.
- We will listen to the views of pupils and parents.
- Pupils and parents feel confident with the care they receive from us and that the level of care meets their needs.
- Staff understand the medical conditions of pupils and that they may be serious, adversely affect a child's quality of life and also impact on their ability to learn.
- All staff understand their duty of care to children and young people and know what to do in the event of an emergency.
- We understand that all children with the same medical condition will not have the same needs.



2. This medical conditions policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings.

- Stakeholders should include pupils, parents, school staff, governors and relevant local health services.

3. The medical conditions policy is supported by a clear communication plan for staff, parents and other key stakeholders to ensure its full implementation.

- Pupils and staff are informed of and reminded about the medical conditions policy through clear communication channels.

4. All staff understand and are trained in what to do in an emergency for children with medical conditions at this school.

- All school staff, including temporary or supply staff, are aware of the medical conditions at this school and understand their duty of care to pupils in an emergency.
- All staff receive training in what to do in an emergency.
- All Honeypot Staff hold a Paediatric First Aid Certificate
- Some children with a medical condition at this school have an individual healthcare plan (IHCP), which explains what help they need in an emergency. The IHCP will accompany a pupil should they need to attend hospital (this can be accessed via the child's record on Pupil Asset or Medical Tracker).

5. All staff understand and are trained in the school's general emergency procedures.

- All staff, including temporary or supply staff, know what action to take in an emergency.
- If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car, unless an additional member of staff can accompany them.

6. We have clear guidance on providing care and support and administering medication at school.

- We understand the importance of medication being taken and care received as detailed in the pupil's IHCP.
- We will make sure that there are several members of staff who have been trained to administer the medication and meet the care needs of an individual child. This includes escort staff for home to school transport if necessary. This school will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies. This school's governing body has made sure that there is the appropriate level of insurance and liability cover in place.
- We will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances, and every effort will be made to encourage the pupil to involve their parent.
- Honeypot Preschool will only administer prescribed medication.



- When administering medication, for example pain relief, this school will check the maximum dosage and when the previous dose was given. Parents will always be contacted before medicine is given, if no guidance has been given or a form completed. This is to ensure that medication is not given too often.
- We will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.
- Parents at this school understand that they should let the school know immediately if their child's needs change.
- If a pupil misuses their medication, or anyone else's, their parent is informed as soon as possible, and the school's disciplinary procedures are followed.

7. We have clear guidance on the storage of medication and equipment at school

- We make sure that all staff understand what constitutes an emergency for an individual child and that emergency medication/equipment is readily available wherever the child is in the school and on off-site activities, and is not locked away. Pupils may carry their emergency medication with them if they wish/this is appropriate.
- We will keep controlled drugs stored securely, but accessibly, with only named staff having access. Staff can administer a controlled drug to a pupil, but only once they have had specialist training.
- We will make sure that all medication is stored safely, and that pupils with medical conditions know where they are at all times and have access to them immediately.
- We will store medication that is in date and labelled in its original container where possible, in accordance with its instructions. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.
- Parents are asked to collect all medications/equipment at the end of the school term, and to provide new and in-date medication at the start of each term.
- We dispose of needles and other sharps waste in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

8. We have clear guidance about record keeping.

- Parents are asked if their child has any medical conditions on the enrolment form.
- The IHCPs are provided by the healthcare provider and are usually developed with the pupil (where appropriate), parent, school staff, specialist nurse (where appropriate) and other relevant healthcare services.
- All IHCPs are on Medical Tracker and Pupil Asset, and the Office Manager has the responsibility for ensuring they have been added.
- IHCPs are regularly reviewed by the hospital, at least every year or whenever the pupil's needs change and updates are sent to the school.
- The pupil (where appropriate) parents, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHCP. Other school staff are made aware of and have access to the IHCP through Pupil Asset & Medical Tracker for the pupils in their care.
- We make sure that the pupil's confidentiality is protected.
- We seek permission from parents before sharing any medical information with any other party.



- We meet with the pupil (where appropriate), parent, specialist nurse (where appropriate) and relevant healthcare services prior to any overnight or extended day visit to discuss and make a plan for any extra care requirements that may be needed. This is recorded in the risk assessment, which accompanies them on the visit.
- Willingham Primary School keep an accurate record of all medication administered on Medical Tracker, including the dose, time, date and supervising staff.
- Honeypot Preschool keep an accurate record of all medication administered on a paper form which is signed by the parent/carer at pick up
- We make sure that all staff providing support to a pupil have received suitable training and ongoing support, to make sure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHCP. This should be provided by the specialist nurse/school nurse/other suitably qualified healthcare professional and/or the parent. The specialist nurse/school nurse/other suitably qualified healthcare professional will confirm their competence, and this school keeps an up-to-date record of all training undertaken and by whom.

9. **We ensure that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.**

- We are committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. We are also committed to an accessible physical environment for out-of-school activities.
- We make sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.
- All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.
- We understand the importance of all pupils taking part in physical activity and that all relevant staff make appropriate adjustments to physical activity sessions to make sure they are accessible to all pupils. This includes out-of-school clubs and team sports.
- We understand that all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.
- We make sure that pupils have the appropriate medication/equipment/food with them during physical activity.
- We make sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.
- All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition. This school will not penalise pupils for their attendance if their absences relate to their medical condition.
- We will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENDCo who will liaise with the pupil (where appropriate), parent and the pupil's healthcare professional.



- We make sure that a risk assessment is carried out before any out-of-school visit. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

10. Where necessary we are aware of the common triggers that can make common medical conditions worse or can bring on an emergency.

- We are committed to identifying and reducing triggers both at school and on out-of-school visits.
- School staff have been given training and written information on medical conditions which includes avoiding/reducing exposure to common triggers.
- The IHCP details an individual pupil's triggers and details how to make sure the pupil remains safe throughout the whole school day and on out-of-school activities. Risk assessments are carried out on all out-of-school activities, taking into account the needs of pupils with medical needs.
- We review all medical emergencies and incidents to see how they could have been avoided, and necessary changes are made to school policy according to these reviews.

11. Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.

- We work in partnership with all relevant parties including the pupil (where appropriate), parent, school's governing body, all school staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.

12. The medical conditions policy is regularly reviewed, evaluated and updated. Updates are produced every two years.

- In evaluating the policy, where necessary, we seek feedback from key stakeholders including pupils, parents, school healthcare professionals, specialist nurses and other relevant healthcare professionals, school staff, local emergency care services and governors. The views of pupils with medical conditions are central to the evaluation process.

*The term 'parent' implies any person or body with parental responsibility such as a foster parent, carer, guardian or local authority.



First Aid

Introduction

The Local Authority (Cambridgeshire County Council) is the employer and its **Policy Statement for First Aid** is as follows:

Schools have a responsibility to ensure that adequate and appropriate equipment and facilities are provided to enable first aid to be rendered to employees who become ill or are injured at work. It is reasonable to expect this responsibility to include children, staff, adult learners and visitors to the school.

The amount of first aid provision will depend on the nature of the establishment, in particular:

- *The number of people using the premises*
- *The nature of the hazards*
- *The geographical layout*
- *Accessibility to assistance / NHS facilities*

All trained staff have access to at least 1 first aid box. Every member of staff should be aware who the first aiders are and the location of the facilities.

Arrangements should be made for activities taking place in the evenings, at weekends and during school holidays.

The first aider or an appointed person is responsible for checking and replenishing first aid boxes on a regular basis. A first aid box must be available for groups taking part in activities off-site.

The function of first aiders is to preserve life and minimize the consequences of illness in an emergency until further help is obtained. If a first aider is not available and immediate first aid treatment is required, the necessary action should be taken by a responsible person that is available at the time.

The school will use the Government guidance 'Health protection in schools and other childcare facilities' February 2023 to support its approach to first aid:

<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

Rationale

In accordance with the health and safety regulations (First Aid) 1982 and in line with the Cambridgeshire County Council policy statement (as outlined above), the staff of Willingham Primary School will abide by this policy in situations where it is considered first aid is required.

It is the policy of Willingham Primary School to provide emergency first aid to staff, children and visitors to the school site or to any pupil, member of staff or volunteer on an educational visit taking place in a location away from the school site.

Willingham Primary Working Day

The school is open to staff and deliveries from 7am and is usually closed by 6pm. The school must ensure there is first aid provision throughout that time. At times where there are few staff on site (early mornings, late afternoons, governor meetings, lettings and events) it is sufficient to have an appointed person (who does not have to be first aid trained), a first aid kit and access to a phone.

Appointed Person

The school will identify a person (or persons) to be the appointed person who will take charge of an emergency situation, arrange for first aid and/ or call an ambulance / inform parents. In the absence of this person, the headteacher or deputy headteacher or site manager (after hours) will assume this role. The name of the appointed person is the office manager for calling an ambulance/ parents. The office manager



will be responsible for stocking and ordering of first aid provisions. The office team will ensure training records are kept up to date and the office manager will be responsible for reporting any incidents (alongside the headteacher) via the on-line reporting system IRF96.

The role of a First Aider (3 day certificate – First Aid at Work)

The main duties are:

- Give immediate help to casualties with common injuries or illness and those arising from specific hazards in school
- When necessary, ensure that an ambulance or other medical professional help is called
- Advise the parent or next of kin of the situation

Successful members of staff will receive a first aid certificate. Refresher training will be arranged every 3 years.

Training of First Aiders (1 day certificate – First Aid at Work)

Staff appointed to provide first aid, and other members of staff who are willing to provide first aid will be given HSE recommended training known as First Aid at Work. The school will ensure that such a course will include resuscitation of children. Successful members of staff will receive a first aid certificate. Refresher training will be arranged every 3 years.

In order to meet the requirement of the children's individual healthcare care plans (IHCPs) appropriate numbers of first aid personnel will be included in any training organised in school to cover children's individual care, to ensure emergency first aid can be provided where the 'named child teaching assistant' is absent. Records of training will be kept.

The names of all the qualified first aiders can be obtained from the office manager. Lists of qualified first aiders are also displayed in the first aid room, on the Health and Safety notice board and in the staff room.

The role of an emergency first aider (certified with 1 days training)

An emergency first aider can assess an injury and decide, in loco parentis, if it warrants treatment or if it is sufficient for the injured person to rest and recuperate. This would typically be the teaching assistant for the child's class, midday supervisors/office staff during the lunch period or office staff at any other time or in the absence of a TA. Where treatment is applied, records of the treatment must be logged on Medical Tracker and an email sent to parents/carers. In the absence of an email address a paper copy will be issued.

First Aid Boxes

- Reception classroom
- First aid room
- After School Club/Breakfast Club Room
- Kitchen – responsibility of outside caterer
- Honeypot pre-school

Supplies for the first aid box are held in the first aid room. A teaching assistant from reception classes, the after school club/breakfast club staff are responsible for ensuring that their box has the necessary equipment. Plasters (and a list of children allergic to plasters) are available from the school office and all children with allergies and medical conditions have a care plan in place on Medical Tracker. Honeypot staff are responsible for their own first aid kit supplies. Kitchen staff are employed by outside caterers and are responsible for their own first aid kit.

First aiders should also have access to general waste for the disposal of usual dressings, swabs etc., and a protective resuscitation aid.



Epipens are stored by the office in the metal cabinet. Inhalers are stored in the class first aid boxes and are bagged and named. Records as to expiry dates will be maintained by the office team using Medical Tracker. Training will be provided to key support staff working with children with specific conditions to ensure the school's responsibilities identified through individual care plans can be met. HoneyPot Preschool store their inhalers and epipens in the kitchen cupboard with a photo of the child on the front of the cupboard door.

Travelling First Aid Boxes

For visits, off-site activities and residential trips the EVC (Education Visits Coordinator) must assess the level of first aid provision and number of qualified staff required. Staff will have their own mobile available to them to make emergency calls and will be aware of any IHCPs for children attending the visit.

For each individual trip/visit, which takes place off site, the school will provide a mobile first aid bag and this bag will contain as a minimum (equivalent or additional items are acceptable; additional items may be necessary for specialized activities):

- A leaflet giving advice on general first aid
- A selection of individually wrapped plasters
- Micropore tape
- At least one large (18 x 18) individually wrapped sterile unmedicated wound dressing
- 2 individually wrapped triangular bandages
- Packs of individually wrapped moist cleansing wipes
- At least ten pairs of disposable gloves
- Waste bag
- Sick bags
- 2 instant ice packs
- Saline wipes
- Head bump stickers – see Appendix 1 below

First Aid Stations

Willingham Primary School has a dedicated area which is the first aid room by the main office. It has its own sink area and is close to disabled toilets. Ice packs are available in the staff room and ice pack covers are washed after every use.

Hygiene Control and Prevention of Spreading

All staff are expected to follow basic hygiene procedures. Single use disposable gloves are provided and handwashing facilities are available. Staff must take care when handling blood and other body fluids. If they are in contact with blood or body fluid and believe there is a risk to their health they must report this

immediately to the headteacher and via the county's on-line reporting system. Soiled dressings should be disposed of in general waste.

School will liaise with Public Health England and take advice on infection control during any outbreak of communicable diseases. The school follows the PHE and Government guidance on managing specific diseases:

- for pupils - <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-9-managing-specific-infectious-diseases>
- For staff - <https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities/chapter-7-staff-health>

Medication Policy



Teachers cannot be contractually required to administer or oversee the administration of medication to pupils. Where parents/carers request the school administers prescribed or un-prescribed medication and where appropriate staff are available to do so, a consent form should be completed. The medication must be passed to the school office within its original labelled container, showing clearly the full name of child, dosage required and the date the prescription was issued, if prescribed medication. Parents should hand it into the school office, or the Breakfast Club if before school, where parents will be asked to complete a consent form. All medicines given will be logged in medical tracker and the parent will be sent an email to notify them that the medication has been given.

Children must not bring medication into school themselves nor keep it on their person. The only exception to this is inhalers, which many of our older children prefer to keep in their drawers. (See below).

Inhalers & other important medications (e.g. nut allergies, diabetes and epilepsy)

Teachers should know which children in their class have medical conditions and this information (along with where important medications are stored) should be easily accessible for any supply teacher, in the class purple folder. Teachers must ensure that children have easy access to their asthma inhalers. Therefore, when outside the school building (e.g., PE, school trips etc.) inhalers must accompany the children. Inhalers are kept in the medical room in individually labelled bags within their year group boxes. (Other medications are kept in the medical cabinet near the school office). Currently, if a child needs their inhaler whilst in the school building, if symptoms are only mild, they may be accompanied by another sensible child to the office. If no-one is in the office, they must be told to ask the headteacher for help. At no time should a child wait longer than absolutely necessary for their inhaler. In the event of a more extreme need, and if the teacher is alone with their class, the teacher must ask the adjacent class teacher to supervise their class whilst the teacher summons the assistance of one of the first aiders. (see First Aid section). Whenever an inhaler is used this should be logged in medical tracker and an email sent to the parent to notify them that the inhaler has been used.

Illness procedure

Pupils

When a child feels unwell, the teaching assistant attached to the class, in liaison with the class teacher, should contact the office to arrange for parents/carers to be contacted to collect the unwell child.

Staff and other adults

Members of staff or other adults (other adults include parents, governors, visitors, contractors, students on work experience and any other adult authorised to be on the school premises) who are taken ill at school should liaise with the appointed person to either seek medical attention or go home, accompanied if appropriate. In an emergency, an ambulance will be called and, for staff members, the next of kin contacted. Details of staff member's next of kin details are on Pupil Asset.

Accidents & Minor Injury Procedures

Pupils

Superficial injuries such as small bumps, scratches and grazes can occur regularly with children as part of normal play. This type of injury should be cleaned up and attended to by the designated first aider for that class or the first aider on duty (break and lunchtime).

Emergency first aiders have the responsibility to make a judgement at the time of the incident as to whether the injury requires more intensive medical attention before contacting the office. They are advised to act in loco parentis and decide, if it were their child, would they apply first aid or comfort and distract them from the incident. Where the child is treated/cleaned up and judged to require no further attention, but is fit and happy enough to remain in school, Medical Tracker will be completed and an email sent informing the parent/carer of the treatment given. If a head bump (see Appendix 1 below) has been attended to then, in addition to Medical Tracker, the child will receive a sticker, to highlight the incident,



and a pink slip completed with details of where on the head the bump happened. If the injury is substantial, the matter will be referred to the school office and the parents will be contacted by phone to warn them that their child has been in an accident and given treatment.

Where an accident is judged to be of a serious nature, first aid will be provided and the child comforted whilst the parent/ carer is contacted and /or the emergency services called. This may mean calling an ambulance (where the child would be accompanied to hospital by a familiar adult) or the child would be taken by car to Willingham surgery or hospital for treatment (accompanied by two members of staff).

Staff and other adults

Where a member of staff or other adult (other adult includes parents, governors, visitors, contractors, students on work experience and any other adult authorised to be on the school site) is involved in an accident at school, first aid will be provided and details recorded on Medical Tracker and where necessary, the next of kin will be contacted for members of staff. Where necessary an ambulance will be called or the casualty will be taken to Willingham surgery or hospital for treatment.

Major Accident Checklist

In the case of a major accident where the appointed person has assessed the needs of the pupil/adult as needing URGENT hospital treatment the following should take place:

- First aid is administered, if appropriate
- An ambulance is called immediately – this must be logged in Medical Tracker
- The head is notified, even when off site
- Parents/carers/next of kin are called to meet at the hospital
- A member of staff accompanies the pupil/adult in the ambulance, if parent/carers/next of kin not available
- The incident is recorded on Medical Tracker and on the county online reporting system (IRF96) by the First Aid Lead, as soon as possible or within a school working day of the accident
- The school makes follow-up calls to the parents/carers
- The school investigates the incident to establish the need for changes to avoid a similar accident.

Care Plans / Food Allergies

Children with known medical needs will have their image displayed in the staff room and first aid room and class teachers will be made aware of children with allergies, to ensure swift treatment on any emergency situation. Their emergency prescribed medicine is stored in the metal cabinet by the office.

Medicine for children with ongoing medical needs (i.e. ADD) are kept in the lockable cabinet in the first aid room.

Children with dietary requirements or food allergies will have their image displayed in the kitchen to ensure that they are easily identified and the trigger foods avoided.

Records will be kept in the school office.

Record Keeping

All incidents are logged on Medical Tracker, for pupils (an IRF96 folder will be maintained for adults and serious pupil incidents) and will record the following:

- Date and time of incident
- Name of child / adult
- Name of person providing treatment
- Details of treatment

All records will be kept for a minimum of 21 years on Medical Tracker or for older documents, in a catalogued box folder kept in the archive cupboard. These online records will be considered confidential



information. Where the accident/incident meets certain criteria, specifically if a visit to GP/hospital is needed, the office manager will arrange for the accident/incident to be logged on the county's on-line accident reporting system IRF96. A copy of the on-line record should be printed off and kept on the file in the school office and should be reviewed as they are completed by the headteacher, to identify any recurring incidents.

A step-by-step guide to medical tracker has been given to each member of staff.

School Activities

School will ensure a first aider or staff member with emergency first aid training is on site for all pupil 'after school' clubs and activities run by the school. For adult after school activities including staff meetings, parents' evenings, adult learning workshops, parent information evenings, governor meetings and any other activity taking place outside the school's core hours a member of staff will be nominated as the 'appointed person'; access to a first aid room and a phone line provided. Where it is a private or community letting, it is the responsibility of the hirer to ensure they have appropriately trained first aid support and an emergency phone.

Employee responsibility

Each member of staff at Willingham is expected to ensure their own safety and the safety of their colleagues by acting responsibly at all times. In addition, the care and safety of the children should be paramount in their working day at Willingham.

First Aid for a Lone Worker

Working unaccompanied on the school site should be avoided wherever possible. Where it is essential for an employee to work alone on the school site, he/she will inform the head, or if the head is lone working, the site manager, to make them aware that they are on site and when they expect to leave. They should have access to the school phone system or a mobile phone and the first aid room.

First Aid for Lettings

The school should include a paragraph in the letting agreement regarding first aid provision. However, it is the responsibility of the hirer to ensure they have adequate provision/ suitably qualified adults for first aid and an emergency phone. First aid boxes are the responsibility of the hirer.

Insurance

In the event of a claim alleging negligence by a member of staff, action is likely to be taken against the employer rather than the employee. Cambridgeshire County Council's insurance explicitly states that employees who assist in any medical procedure are acting within the scope of their employment and are indemnified.



Appendix 1

Head Injury Protocol

1. First aid will be given at the first aid room/bench at breaktime and lunchtime and will be manned by a first aid trained employee
2. Completion of Medical Tracker is key to ensure that we have gathered all facts, checked key indicators for concussion and that, if needed, give medical professionals a full and clear account of the incident
3. Head bump sticker to be placed on child's t-shirt/jumper (initialled by staff giving first aid)
 - a. Pink slip completed and passed on to teacher or teaching assistant of child's class. Please ensure that time, date and a brief description of the incident are present on the pink slip
 - b. Please use your knowledge and judgement as to whether you feel the head bump warrants a level of 1:1 observation. If in doubt please contact a three day first aid trained person for advice and contact parent/carer
4. Any pupil being sent home should be handed over to the parents/carers/medical professional by the first aider who dealt with the head bump, where possible.

