

FIRST AID AND MEDICATION
ADMINISTRATION

POLICY

CRUMLIN
INTEGRATED
COLLEGE



EACH LEARNER, EACH JOURNEY, *Every* SUCCESS

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Contents

1. Rationale and Legislative Context	2
2. Aims	2
3. First Aid Provision	2-5
4. Administration of Medicines	5-6
5. School Trips and Off-Site Activities	6
6. Accident Reporting and Recording	6-7
7. Monitoring and Review	7
8. Appendices	9
Administration of Short-Term Medication Log	10-11

1. Rationale and Legislative Context

Crumlin Integrated College is committed to safeguarding the health, safety and welfare of all pupils, staff and visitors. This policy has been developed in line with the **Health and Safety (First-Aid) Regulations (Northern Ireland) 1982 (as amended)** and guidance issued by the **Education Authority (EA)**. It outlines the arrangements for the provision of first aid and the safe administration of medicines to pupils during the school day and at school-related activities.

2. Aims

This policy aims to:

- Ensure prompt and appropriate first aid is available to all pupils, staff and visitors.
- Support pupils with medical needs to access education safely and fully.
- Clarify roles, responsibilities and procedures related to first aid and medication.
- Ensure compliance with EA guidance and safeguarding requirements

3. First Aid Provision

3.1 First Aid Personnel

Crumlin Integrated College will ensure that an appropriate number of **First Aid at Work (FAW) trained staff** are available at all times, proportionate to the size, layout and risk profile of the school. In line with EA guidance for post-primary schools, this will include **at least one FAW-trained person per 100 staff and/or pupils**, with additional trained staff within practical departments such as Science, and Physical Education. Certificates are valid for three years, with refresher training completed as required.

Current First Aid at Work Trained Personnel

Mrs. L Moore

Mr. M Thompson

Mr. J Weir

3.2 Appointed Persons

Crumlin Integrated College will also identify **appointed persons** who take charge of first aid arrangements, including summoning emergency services and maintaining first aid equipment. Appointed persons are not expected to administer first aid unless trained to do so.

3.3 First Aid Equipment

- Fully stocked first aid boxes will be available in agreed locations (Main Office and Home Economics) and clearly marked with a white cross on a green background.
- Boxes will be checked and replenished termly.
- Additional first aid kits will be provided for off-site activities, visits and sporting events.
- Medication will not be stored in first aid boxes.

3.4 Emergency Procedures

All staff will be familiar with procedures for contacting emergency services and know who is responsible for coordinating first aid and emergency responses. An ambulance will be summoned immediately where required, and parents/guardians will be informed as soon as possible.

3.5 Head Injuries and Suspected Concussion

All head injuries will be taken seriously. Where a pupil sustains a head injury or is suspected of having a concussion, staff will follow the principle **“If in doubt, sit them out”**, as outlined in Department of Education Circular **2024/15 – Concussion** and the **UK Concussion Guidelines for Non-Elite (Grassroots) Sport (2024)**.

Any pupil showing **one or more signs or symptoms of concussion** will be **immediately removed from activity**, including Physical Education, sport or play, and will not return to activity that day, even if symptoms appear to resolve. Parents/guardians will be contacted without delay and advised that the pupil must be assessed by an **appropriate healthcare professional within 24 hours**.

The school will ensure that pupils with suspected concussion are **closely monitored** until collected by a responsible adult and that arrangements are made for safe transport home. Parents/guardians will be advised that pupils should be supervised for **24–48 hours**, not left alone, and observed for any worsening symptoms.

Where **red flag symptoms** are identified (including loss of consciousness, repeated vomiting, seizure, severe or worsening headache, confusion, neck pain, or any neurological symptoms), **emergency medical services will be contacted immediately** and the pupil transferred to hospital if required.

The school will record all head injury and concussion incidents using the centralised head injury form, will phone the parent/guardian and will issue written notification of 'Concussion Protocol' to parents/guardians via the SIMS Parent App. Pupils will follow a **graduated return to learning and activity programme**, prioritising a safe return to education before any return to sport, in line with national guidance. Pupils will not return to activities with a risk of head injury until symptom-free at rest and progression through the graduated stages is complete, as outlined in the published guidance.

Sources:

- Department of Education (NI), *Circular 2024/15 – Concussion* (revised November 2024)
- *If In Doubt, Sit Them Out – UK Concussion Guidelines for Non-Elite (Grassroots) Sport* (November 2024)

3.6 Finger Entrapment and Door Safety

The school recognises finger entrapment injuries as a significant risk within educational environments and is committed to minimising this risk in accordance with EA **Guidance on Finger Entrapment in Educational Establishments** and relevant health and safety legislation, including the **Health and Safety at Work (NI) Order 1978** and the **Management of Health and Safety at Work Regulations (NI) 2000**.

The Principal or Premises Manager will ensure that **suitable and sufficient risk assessments** are carried out on all internal and external doors to identify finger trapping hazards, particularly on hinge and latch sides. These assessments will consider factors such as pupil age, special educational needs, door design, location, supervision levels and any previous incidents or near misses.

To reduce risk, the school will:

- Ensure doors with self-closing mechanisms operate safely, with a controlled two-stage closing action where fitted.
- Install appropriate **finger protection devices (finger guards)** where a risk of entrapment has been identified.

- Pay particular attention to doors in high-risk locations, including fire doors, heavy doors, circulation routes, entrances, unsupervised areas and places where pupils congregate or queue.
- The building supervisor will ensure regular inspection, maintenance and adjustment of doors and closing mechanisms in liaison with EA Maintenance Services.

All finger entrapment incidents, regardless of severity, will be treated as accidents, recorded through the EA accident reporting portal and reviewed to inform further risk control measures.

4. Administration of Medicines

4.1 General Principles

- The **primary responsibility for a pupil's health rests with parents/guardians.**
- School staff are not contractually obliged to administer medication
- No pupil under the age of 16 will be given medication without **written parental consent.**

4.2 Short-Term Medication

Staff will not administer non-prescribed medication, including pain relief such as paracetamol or aspirin, without prior written consent from parents/guardians. Prior written consent is requested at the start of the school year through the completion of the medical forms provided. Any administration will be supervised by a member of staff, logged in the college's 'Short-Term Medication Administration' Google Form (see appendix 1) and parents will be informed via the SIMS Parent App on the same day by the member of staff responsible for administering the medication.

The administration of pain relief will not be granted before 12 noon to ensure the required 4-hour delay between doses is adhered to. When a pupil arrives late to school, medication will not be administered until 4 hours after their time of signing in.

It is the responsibility of the parent/guardian to complete the medical enrollment forms within one week of their being issued to ensure staff are able to provide short-term medical support when required.

It is the responsibility of the school administration team to send out the medical enrollment form and follow-up with a reminder on the SIMS Parent App and social media reminder. However, unreturned forms will be taken as an indication that no medical issues are present and that no permission is granted for the administration of short-term medication. The college administration team are responsible for the input of details provided on the form into SIMS.

4.3 Long-Term Medical Needs and Prescribed Medication

Where pupils require regular medication to support long-term medical needs (e.g. asthma, diabetes, epilepsy or severe allergies), the school may agree to administer medication to facilitate full participation in school life.

A **Pupil Health Care Plan** will be prepared in consultation with parents and relevant medical professionals and will include:

- Details of the pupil's condition and medication requirements
- Emergency procedures
- Staff training requirements
- Arrangements for school trips and extracurricular activities

4.4 Staff Training

Crumlin Integrated College will ensure that an adequate number of staff are appropriately trained to administer medication and to respond to emergencies. Training records will be maintained and held centrally in the CPD folder in the staff drive.

4.5 Storage and Record Keeping

- All medication must be clearly labelled with the pupil's name, dosage and administration details.
- Medication will be stored securely and access restricted to trained staff.
- A record will be maintained of all short-term medication administered using the Medication logbook.
- A written record will be maintained of all long-term medication administered by staff, including time, dosage and staff initials.
- Medication expiry dates will be checked regularly.

5. School Trips and Off-Site Activities

Arrangements for first aid and medication will be considered as part of risk assessments for all educational visits. Staff leading activities will be informed of pupils' medical needs and emergency procedures, and appropriate medication and trained supervision will be provided as necessary.

Pupils who are logged on the school SIMS as having asthma, are responsible for ensuring they have an inhaler on their person for school trips, this will be checked by the member of staff responsible for the school trip prior to leaving the school building and pupils who have not brought their inhaler(s) will not be permitted to attend the trip.

6. Accident Reporting and Recording

All accidents, incidents, near misses and dangerous occurrences involving pupils, staff or visitors will be reported and recorded in line with the **Education Authority (EA) Accident Reporting Manual for Principals and Governors** and the **Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (NI) 1997 (RIDDOR)**. The college holds a digital record of accidents and injuries centrally, completed using an online form (see appendix 2).

The school recognises that **all accidents, however minor**, must be reported using the EA's online accident reporting portal to ensure accurate records, compliance with statutory duties and effective monitoring of health and safety trends. The **Principal, Safety Co-ordinator or a designated senior manager** will be responsible for completing accident reports and overseeing investigations; reports must not be completed by the injured party.

The following procedures will apply:

- **Death or major injury:** Reported immediately by telephone to the employing authority and submitted online within 24 hours.
- **Injuries resulting in an absence of more than three days:** Reported online within 72 hours.
- **All other injuries:** Recorded and submitted as soon as possible, and no later than 10 days after the incident.
- **Dangerous occurrences and near misses:** Reported promptly to enable early intervention and risk reduction.

Near-miss reporting will be actively encouraged as a preventative measure. Analysis of accident and near-miss data will be used to identify patterns, inform risk assessments and support continuous improvement in health and safety practice.

7. Monitoring and Review

This policy will be monitored by the senior leadership team and reviewed annually, or sooner if required due to changes in legislation or guidance. The effectiveness of arrangements will be evaluated through incident records, training reviews and feedback from staff and parents.