Sheepscombe Primary School

Medical, Health and Well Being Policy

(includes First Aid – Intimate care has separate policy)

This policy was adopted at a meeting of:	FGB Meeting
Held on:	November 2024
Date to be reviewed	November 2025
Signed on behalf of the Governors:	
Signed by Head teacher	Dangerfield
Name of Head Teacher	Vicky Dangerfield

Sheepscombe Primary School and Little Lambs Nursery fully recognises its responsibility for safeguarding children and the importance of raising awareness of child protections issues. We discharge our responsibility with the attitude that 'it could happen here' where safeguarding is concerned. Any actions we take will be in the best interests of the child and compliant with the relevant statutory guidance.

This policy applies to all staff and volunteers within the school.

Designated Safeguarding Lead (DSL) – Vicky Dangerfield (Headteacher)

Deputy DSLs –Richard Crocker, James Dangerfield, Rob Gardner

Safeguarding Governor – Tessa Lentel

Gloucestershire Safeguarding Partnership Procedures

https://www.gloucestershire.gov.uk/gscp/

This policy should be read in conjunction with:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/941900/health_needs_guidance_accessible.pdf

And the school's

- Intimate Care Policy
- Safer Working Practices policy
- Health and Safety Policy;
- Equality of Opportunity Policy;
- Code of Conduct and Whistleblowing Policy
- Staff Well bring Policy
- Early Years Foundation stage policy
- Data Protection policy
- Behaviour Policy
- Anti Bullying and Hate Policy

Policies can be found here:
https://www.sheepscombeschool.co.uk/key_information/policies/policies.html

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Introduction

Sheepscombe School is a NUT FREE SCHOOL and has been since 2021 onwards

At Sheepscombe Primary and Little Lambs Nursery we have a responsibility for the care, welfare, well-being and safety of all our children whilst they are at school. We recognise that parents and families have the prime responsibility for their child's health and that it is their responsibility to provide school with information about their child's medical and health conditions. Parents should obtain details from their child's General Practitioner (GP) or Paediatrician, if needed. The school nurse or a health visitor and specialist voluntary bodies may also be able to provide additional background information about specific conditions.

Section 1 Aims

It is the aims of this policy to provide:

- Procedures for managing prescription medicines which need to be taken during the school day, including school trips/outings/residentials
- A clear statement on the roles and responsibilities of staff managing and or administering medicines, first aid and or additional care provision
- A clear statement on parental responsibilities in respect of their child's medical, health and well-being needs
- The circumstances in which children may take any non-prescription medicines
- A policy on assisting children with long-term or complex medical needs
- The need for prior written agreement from parents for any medicines to be given to a child
- Procedures for the safe storage of all medicines and first aid equipment
- Access to the school's emergency procedures
- Details of record keeping
- Fully trained staff
- Risk assessment/additional care plans (if needed)
- Educate children around being safe
- Keep parents up to date on medical needs which may affect the wellbeing of their child.

Please also refer to current Government Guidance on Health protection in schools and other childcare facilities
https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities

Section 2 Appointments inside the school day

Helpful advice for parents about attending medical appointments

We try and encourage parents to book medical appointments outside of school hours. If a medical appointment is made during school time parents must:

- Inform the School Business Manager or Head teacher
- Provide the hospital letter, dental appointment card or doctor's appointment card on request

Any other circumstances for removing your child early from school must be prearranged and authorised by the Head Teacher.

Section 3 Administering Medicine

At Sheepscombe Primary we recognise that there is no legal duty that requires school or staff to administer medicines. However, where staff are willing, they will adhere to the following guidelines:

- Parents should provide full information about their child's medical and health needs, including details of medicines their child needs and what for
- Medicines should only be brought to school when essential; that is where it would be detrimental to a child's health if not administered during the school day
- School will only accept prescription medicines that have been prescribed by a doctor, dentist and/or nurse prescriber. As part of our 'loco parentis 'role we may also administer mild analgesics such as Calpol with parental consent. However, a child under 16 should never be given aspirin unless prescribed by a doctor and staff will not administer these.
- Medicines and first aid should always be provided in the original container as dispensed and include the instructions for administration
- School will never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosage on parental instructions. This is the case for administering medicine for long-term medical conditions
- No child will be given medicines without their parent's consent. However, we may administer first aid by trained adults in the first instance if the child is deemed unwell and or has an injury so as to: preserve life, limit worsening of a condition and promote recovery
- Any trained member of staff giving medicines and or first aid will check:

Child's name

Prescribed dose

Expiry date

Allergies

Written instruction provided by the prescriber on the label

Record first aid incident using accident book or administration of medicines via medicines log sheet

Follow procedure as per appropriate care plan

• If in doubt about any procedure, staff will not administer the medicine and or first aid but check with the parents or a health professional before taking further action. If staff have any other concerns relating to administering medicines and or first aid to a child, the issue will be discussed with the parent, if appropriate, or with a health profession attached to the school or the child's care plan

• We will arrange for trained staff to keep records of all incidents. Good records help demonstrate that staff have exercised a duty of care. Our advice for parents about prescribed medicine is that it is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. Parents are encouraged to ask the prescriber about this. Where it is deemed that medicines need to be taken three times a day, parents should check that it could be taken in the morning, after school hours and at bedtime. As a school we follow the Medicines Standard of the National Service Framework (NSF) for children.

Section 4 Educational visits/school trips

We will encourage children with medical needs to participate in safely managed visits. If needed, we will do our best to consider reasonable adjustments that might enable children with medical conditions to participate fully and safely on visits. This might include reviewing and revising the visits policy and procedures so that planning arrangements will include the necessary steps to include children with medical needs. It might also include risk assessments for such children.

Sometimes additional safety measures may need to be taken for outside visits. It may be that an additional supervisor, a parent or another volunteer might be needed to accompany a particular child.

Arrangements for taking any necessary medicines will also be taken into consideration. Staff supervising excursions will always be aware of any medical needs, and relevant emergency procedures.

A copy of any Health Care plans will be taken on visits for reference, in the event of the information being needed in an emergency. There will always be a trained member of staff who is able to administer medicines and/or first aider on a visit.

First aid kits will be taken on all school visits. Travel sickness medication is administered in the same way as other medication at Sheepscombe Primary School – parents should fill in a form (see appendix 1), medication should be in the original packaging and the adult administering will make a record of the administration.

If staff are concerned about whether they can provide for a child's safety or the safety of other children on a visit, they will seek parental views and medical advice from the school health service or the child's GP.

See DfE guidance on planning educational visits and our offsite visits policy.

Section 5 Sporting Activities and Physical Education

Most children with medical needs can participate in PE and extra-curricular activities. There is sufficient flexibility built into our approaches to enable all children to participate in ways appropriate to their ability.

For many, PE activity can benefit their overall social, mental and physical wellbeing.

Any specific instruction relating to a child's ability to participate in PE will be recorded in their individual health care plan.

All adults will be aware of issues of privacy and dignity for children with particular needs. Some children may need to take precautionary measures before or during exercise, and may also need to be allowed immediate access to their medicines such as asthma inhalers.

All medicines will be at hand during all PE activity. All staff supervising PE and/or sporting activities will: consider whether risk assessments are necessary for some children; be aware of medical conditions and any preventative medicine that they may need to be taken and emergency procedures.

Section 6a Short term medical needs

Many children will need to take medicines during the day at some time during their time in school. This will usually be for a short period only, perhaps to finish a course of antibiotics or to apply a lotion. By parents giving staff the authority to administer these medicines, the time that the child needs to be absent from school will be minimised. However, such medicines should only be taken to school where it would be detrimental to a child's health if they were not administered during the school day.

Section 6b Long term medical needs

Examples as per NHS choices website: asthma, diabetes, epilepsy, allergies.

It is important to have sufficient information about the medical condition of any child with long-term medical needs.

If a child's medical needs are inadequately supported this may have a significant impact on a child's experience and the way they function in school. The impact may be direct in that the condition may affect cognitive or physical abilities, behaviour or emotional state.

Some medicines may also affect learning, leading to poor concentration or difficulties in remembering. The impact could also be indirect, perhaps disrupting access to education through unwanted effects of treatments or through the psychological effects that serious or chronic illness or disability may have on a child and their family.

The Special Educational Needs and Disabilities (SEND) Code of Practice advises that a medical diagnosis or a disability does not necessarily imply SEND. It is the child's educational needs rather than a medical diagnosis that must be considered. We will need to know about any particular needs before a child is admitted to our school and a care plan will be put in place. It will be the parent's responsibility to complete the relevant sections on the admission form and care plan, prior to their child starting school.

For children who attend hospital appointments on a regular basis, special arrangements may also be necessary. In these cases, Health Care plans (intimate care, pastoral care) would be written involving the parents and relevant health professionals.

This can include:

- Details of a child's condition
- What constitutes an emergency
- What action to take in an emergency
- What not to do in the event of an emergency and who to contact in an emergency
- The role school staff play

Further information is available here:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/638267/supporting-pupils-at-school-with-medical-conditions.pdf

Section 7 Refusing medicines

If a child refuses to take medicines, staff will not force them to do so. Parents will be informed of the refusal on the same day. If a refusal to take medicines results in an emergency, we will use our emergency procedures (see section 11).

Section 8 Controlled drugs

The definition of drugs used in this policy is based on the DFE drugs guidance and advice for schools. We will keep controlled drugs in a locked non-portable cupboard and only trained staff will have access. A record will be kept.

A controlled drug, as with all medicines, will be returned to the parent when no longer required, to arrange for safe disposal (returning the unwanted supply to the local pharmacy). We will NOT use any controlled drug for use with another child.

As a school we will use our PHSE and RHE curriculum to support the drug education teaching programme. This scheme is age-appropriate for each key stage.

Section 9 Unauthorised drugs

Unauthorised drugs are not permitted on school premises. All situations involving unauthorised drugs will be investigated fully, although Child Protection procedures always take precedence.

We will follow advice for schools using the DFE drugs guidance where appropriate. The needs of the child always come first. Parents/carers will be involved at an early stage and throughout any investigation. Support agencies will be involved if appropriate. Support for pupils will be maintained and counselling arranged if appropriate.

The police will be called if a child brings illegal drugs that constitute a criminal offence to school and a MARF submitted to Social Care.

Section 10 Storing medicines and First aid equipment

Large volumes of medicines will not be stored. We will only store, supervise and administer medicines that have been prescribed and appropriate parental consent given. Medicines will be stored strictly in accordance with product instructions (e.g. temperature) and in the original container in which dispensed. Staff will ensure that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration. Where a child needs two or more prescribed medicines, each should be in a separate container.

The School Business Manager is responsible for making sure that medicines are stored safely in the locked cupboard in the office or in the staff room fridge if necessary.

All emergency medicines such as asthma inhalers and adrenaline pens will be available to children and will not be locked away. Epipens will be kept accessible to staff on a high shelf in a labelled bag, that children cannot reach. Inhalers will be kept accessible to children and a spare inhaler kept in a safe place in school, which will be labelled with the child's name

The School Business Manager will ensure the maintenance of the contents of the first aid stations: plasters, non-adhesive dressings, micro tape, scissors, ice packs, triangular bandages, wound bandages in various sizes, gloves, a blanket and accident book. It is the responsibility of the designated first aiders to request for stocks to be replenished.

Section 11 Emergency procedures

As part of general risk management we will make the following arrangements when dealing with emergency situations:

• In the event of a serious incident an ambulance will be called and a member of staff will accompany the child, if the parent is not able to be on site quickly. The parent will be asked to go immediately to the hospital.

Section 12 First aid procedures

• Any pupil who has been injured is sent to the first aider on duty, normally in the school office or staff room, for the first aider to assess and where appropriate, treat.

• If a child is deemed unwell, the parent will be contacted to collect and take home

• Head injuries: a bump note is given to the child with date of head injury. Teachers will call in advance to speak to the parent about a head bump and also will be informed on collection. It may be appropriate for the parent to collect the child and take to hospital for a check dependant on the severity of the head injury.

• All incidents, injuries, head injuries, ailments and treatment are reported in our accident book with a copy sent home with the child.

• The office will contact parents if they have any concerns about an injury.

Sheepscombe Primary School's Paediatric first aiders identified on our staff pages on the website and on posters around the school.

They are responsible for:

- Taking charge when someone is injured or becomes ill.
- Ensuring there is an adequate supply of medical materials in first aid kits, and replenishing the contents of these kits.
- Ensuring that an ambulance or other professional medical help is summoned when appropriate.

First aiders are trained and qualified to carry out the role and are responsible for:

- Acting as first responders to any incidents; they will assess the situation where there is an injured or ill person, and provide immediate and appropriate treatment.
- Sending pupils home to recover, where necessary.
- Filling in an accident report on the same day, or as soon as is reasonably practicable, after an incident.
- Keeping their contact details up to date.

School staff are responsible for:

- Ensuring they follow first aid procedures.
- Ensuring they know who the first aiders in school are.
- Completing accident reports for all incidents they attend to where a first aider/appointed person is not called.
- Informing the Headteacher and School Business Manager of any specific health conditions or first aid needs.
- Contacting parents where required, or liaising with the School Business Manager to call the parent.

The Head teacher and School Business Manager will:

- Ensure that an appropriate number of trained first aid personnel are present in the school at all times.
- Ensure that first aiders have an appropriate qualification, keep training up to date and remain competent to perform their role.
- Ensure all staff are aware of first aid procedures.
- Ensure appropriate risk assessments are completed and appropriate measures are put in place.
- Ensure that adequate space is available for catering to the medical needs of pupils. Report specified incidents to the HSE when necessary.

In the event of an accident resulting in injury:

- The closest member of staff present will assess the seriousness of the injury and seek the assistance of a qualified first aider, if appropriate, who will provide the required first aid treatment.
- The first aider, if called, will assess the injury and decide if further assistance is needed from a colleague or the emergency services. They will remain on scene until help arrives.
- The first aider will also decide whether the injured person should be moved or placed in a recovery position.
- If the first aider judges that a pupil is too unwell to remain in school, parents will be contacted and asked to collect their child. Upon their arrival, the first aider will recommend next steps to the parents.
- If emergency services are called, the business manager will contact parents immediately.
- The first aider will complete an accident report form on the same day or as soon as is reasonably practical after an incident resulting in an injury.

Off-site procedures:
When taking pupils off the school premises, staff will ensure they always have the following:

- A mobile phone.
- A portable first aid kit.
- Information about the specific medical needs of pupils.
- School contact details (when the School Business Manager or Head teacher are not on site to receive calls from staff a list of parent contacts will be provided)

Risk assessments will be completed by the trip organiser prior to any educational visit that necessitates taking pupils off school premises. This will be done in advance and uploaded to the EVisit portal.

There will always be at least one first aider with a current paediatric first aid certificate on school trips and visits, as required by the statutory framework for the Early Years Foundation Stage.

First aid / accident record book:

- An accident form will be completed by the first aider on the same day or as soon as possible after an incident resulting in an injury.
- As much detail as possible should be supplied when reporting an accident.
- A copy of the accident report form will be kept in the school office
- Records held in the accident book will be retained by the school for a minimum of 3 years, in accordance with regulations

Reporting to the HSE

The business manager will keep a record of any accident which results in a reportable injury, disease, or dangerous occurrence as defined in the RIDDOR 2013 legislation (regulations 4, 5, 6 and 7).
The business manager will report these to the Health and Safety Executive as soon as is reasonably practicable and in any event within 10 days of the incident.
Reportable injuries, diseases or dangerous occurrences include:

- Death
- Specified injuries, which are:
    - Fractures, other than to fingers, thumbs and toes
    - Amputations
    - Any injury likely to lead to permanent loss of sight or reduction in sight
    - Any crush injury to the head or torso causing damage to the brain or internal organs

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

Information on how to make a RIDDOR report is available here:
How to make a RIDDOR report, HSE
http://www.hse.gov.uk/riddor/report.htm

Notifying parents
The class staff will inform parents of any accident or injury sustained by a pupil, and any first aid treatment given, on the same day, or as soon as reasonably practicable.

Reporting to Ofsted and child protection agencies

The Head teacher will notify Ofsted of any serious accident, illness or injury to, or death of, a pupil while in the school's care. This will happen as soon as is reasonably practicable, and no later than 14 days after the incident.
The head teacher will also notify Local Authority Designated Officer (LADO) of any serious accident or injury to, or the death of, a pupil while in the school's care.

Section 13 Intimate Care– read in conjunction with Safeguarding and Child Protection policy

Please see the school's separate Intimate Care Policy.

Intimate care arrangements will be discussed with parents on a regular basis. If intimate care is needed long term, then an appropriate Care plan will be written and reviewed with the parent. The needs and wishes of children and parents will be taken into consideration wherever possible within the constraints of staffing and equal opportunities legislation.

If a member of staff has any concerns about physical changes in a child's presentation, e.g. marks, bruises etc. they will follow the Safeguarding and Child Protection policy.

Section 14 Food

Proper nutrition is essential for good health and effective learning. As a school we will:

- Work in partnership with catering staff to ensure that meals are healthy
- Educate children about healthy eating – The eat well guide
- Promote healthy alternatives
- Encourage children to drink water throughout the school day and provide cups for those who have forgotten their bottles
- Support parents in understanding what constitutes healthy food and therefore a healthy lunch box

In consultation with parents, it has been agreed that children should bring to school fruit, vegetables or a non-sugary snack such as rice cakes or crackers for a mid-morning snack. Other snacks are discouraged. Staff will speak to parents where there are concerns.

Section 15 Sun protection

At Sheepscombe Primary we want staff and pupils to enjoy the sun safely. As a school the following measures are in place:

Education

- We will discuss with children how to stay safe in the sun
- Parents will be sent reminders about sun protection as necessary

Protection

- Parents will be encouraged to send their child to school with suitable sun hats
- Parents will be encouraged to apply sunscreen before school starts
- Parents will be encouraged to send their child in with sun screen to apply themselves
- We will provide appropriate sun canopies during sports day
- We will try to ensure that children are not exposed to sun (strong UV) during lunchtimes and afternoon PE sessions for more than 20 minutes without shade breaks
- Staff will not supply or apply sunscreen to children

Section 16 Head lice: more guidance on head lice can be found on the Gov.uk website.

Head lice are parasitic insects and only live on the heads of people. There are 3 forms of head lice: nits, nymphs and adults. Head lice move from one person to another by head-to-head (hair-to-hair) contact. They cannot jump. Head lice lay eggs which hatch after 7-10 days. It takes about 10 days for a recently hatched louse to grow into an adult and start to lay eggs.

As a school we will notify parents of active head lice infestations in their child's year group, referring to this policy and provide links to Gov.uk for treatment and prevention. Parents are responsible for:

- knowing head lice signs and symptoms
- routinely checking their child's head for head lice
- telling school that their child has head lice
- ensuring that full, proper treatment has been completed before returning to school.

Having head lice is not a reason for school absence as treatment can be administered quickly. However, should head lice be noticed, the Class Teacher will speak with the parent. If the infestation continues for more than three weeks, the Head Teacher or School Business Manager will discuss what is being done to eradicate the head lice and if necessary will make a referral to the school nurse.

Section 17 Children's well-being:

We believe that promoting children's well-being is essential for their holistic development, learning, and achievement. We are committed to creating a safe, inclusive, and nurturing environment that supports the well-being of all our pupils. We incorporate the expectations set by Ofsted based on the 2014 National Curriculum in England.

At Sheepscombe School and Little Lambs Nursery we:

- Foster a positive and caring ethos that values every child as an individual, promoting a sense of belonging and self-worth.
- Ensure a safe and secure environment where pupils can thrive emotionally, socially, and academically.
- Encourage open communication and collaboration between staff, parents/carers, and external agencies for the well-being of our pupils.
- Develop pupils' resilience, independence, and ability to manage their emotions and relationships effectively.
- Promote healthy lifestyle choices, including physical fitness, emotional well-being, and balanced nutrition.
- Embed a comprehensive approach to safeguarding and child protection.

We have a comprehensive PSHE/RHE curriculum (see separate policy) which teaches children about health, relationships and well-being. In addition, we are able to offer bespoke support through ELSA sessions with our trained practitioner and can refer children for play therapy where required. Sometimes school can help support with the cost of play therapy, or we can support parents to access grant or LA funding.

Under the 4 Ofsted categories our commitment to children is as follows:

Personal Development

- We promote pupils' personal development effectively, ensuring they have a positive attitude towards themselves and others.
- Pupils have a strong understanding of their own well-being, maintaining physical and emotional health, and can recognize when they need support.

Behaviour and Attitudes

- We have a highly inclusive and respectful culture, where pupils show exemplary behaviour and take responsibility for their actions.
- Our pupils are taught to be kind, considerate, and understanding towards others, demonstrating resilience, empathy, and tolerance.

Welfare and Safety

- We fully understand and meet the statutory safeguarding and welfare requirements, ensuring the safety and protection of all pupils.
- Pupils feel safe, secure, and well cared for, with robust systems in place to address any concerns. We speak with children on a regular basis about their well-being, welfare and safety

Leadership and Management

- We foster a culture of well-being, including continuous professional development for staff and effective partnerships with parents/carers and relevant external agencies:
- We provide staff with regular training and development opportunities on well-being principles, mental health awareness, and safeguarding.
- We promote effective communication and collaboration among staff, parents/carers, and external agencies through regular meetings, workshops, and information-sharing sessions.
- We embed activities that develop emotional literacy, resilience, and well-being into our curriculum and daily routines.
- We celebrate diversity and actively challenge stereotypes, ensuring equal access to opportunities and resources for all pupils.
- We implement a comprehensive Behaviour and Anti-Bullying Policy and procedure to prevent and address any incidents promptly and effectively.

- We provide a designated staff member as a point of contact for pupils and parents/carers to discuss concerns related to well-being and safeguarding.
- We conduct regular well-being assessments to identify and support pupils' individual needs, working closely with relevant professionals when necessary.
    - We foster positive relationships between staff and pupils through effective behaviour management strategies, clear expectations, and reward systems.
    - We offer a range of extra-curricular activities and support services that enhance pupils' well-being and physical fitness.
    - W regularly evaluate and review this Medical, Health and Well-being Policy to ensure its continued effectiveness and alignment with national standards.

Section 18 Staff Well-Being

Please see separate policy for Staff Well- being.

APPENDIX 1

Parental agreement for setting to administer medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine.

Name of school/setting	
Name of child	
Date of birth	
Group/class/form	
Medical condition or illness	

Medicine

Name/type of medicine *(as described on the container)*	
Expiry date	
Dosage and method	
Timing	
Special precautions/other instructions	
Are there any side effects that the school/setting needs to know about?	
Self-administration – y/n	
Procedures to take in an emergency	

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name	
Daytime telephone no.	
Relationship to child	
Address	
I understand that I must deliver the medicine personally to	School Business Manager

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s)_____ Date_____

APPENDIX 2 - Useful Links

Supporting pupils with medical conditions at school - GOV.UK, DfE Statutory guidance about the support that pupils with medical conditions should receive at school.

The Health and Safety (First Aid) Regulations 1981, which state that employers must provide adequate and appropriate equipment and facilities to enable first aid to be administered to employees, and qualified first aid personnel.

The Management of Health and Safety at Work Regulations 1992, which require employers to make an assessment of the risks to the health and safety of their employees.

The Management of Health and Safety at Work Regulations 1999, which require employers to carry out risk assessments, make arrangements to implement necessary measures, and arrange for appropriate information and training.

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013, which state that some accidents must be reported to the Health and Safety Executive (HSE), and set out the timeframe for this and how long records of such accidents must be kept.

The School Premises (England) Regulations 2012, which require that suitable space is provided to cater for the medical and therapy needs of pupils.