The Clere School

FIRST AID & MEDICAL NEEDS POLICY

Contents

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Aims

The Clere School is mindful of the need to safeguard the well-being of all students and management of first aid arrangements will be undertaken in such a way as to ensure there is adequate training of staff, provision of first aid equipment and recording of first aid treatment.

The School aims:

- To provide a prompt and appropriate response in cases of illness and injury
- To ensure compliance with relevant legislation
- To ensure there is a sufficient number of competent staff within the School environment
- All first aid provision is arranged and managed in accordance with the Hampshire Children's Services Safety Guidance Procedure No. 17/07 and the HSE Incident reporting in schools (accidents, diseases and dangerous occurrences)
- To keep accident records and report to Hampshire County Council and the Health and Safety Executive as required

The Headteacher is responsible for First Aid in the School, though the day to day responsibility can lie with designated staff.

First Aid Availability

The Clere School first aid provision is based in the Medical Room, which is staffed on an on-call basis between 8.30 am and 3.10 pm.

First Aid Equipment, Supplies and Accommodation

The School has a Medical Room with a sink, hot and cold water, drinking water and cups, seating area and a bed with sheets and blankets. First aid equipment and consumables are stored in the Medical Room and ordered as required by the Administration assistant.

First aid kits are sited at strategic positions close to areas where an accident is considered likely:

- Hold-all in Medical Room
- First Aid Kit in Site Managers office
- First Aid Kit in each Minibus

Administration staff should be informed if items from these sources have been used so that they may be replenished. There are several small first aid bags for off-site visits which are held and maintained by the Administration assistant with responsibility for stock.

First Aiders

The responsible manager will ensure that appropriate numbers of qualified first aiders and appointed persons are appointed as identified by the completion of the First Aid Needs Assessment and that they have the appropriate level of training to meet their statutory obligations.

Qualified First Aid Staff

At The Clere School there are a number of qualified first aiders (see page 14).

They will be responsible for administering first aid, in accordance with their training, to those that become injured or fall ill whilst at work or on the premises. There may also be other duties and responsibilities which are identified and delegated to the first aider (e.g. first aid kit inspections).

The qualified first aider is someone who has been trained and holds a First Aid at Work certificate gained from a 3-day HSE approved course.

Appointed Persons

At The Clere School there are a number of appointed persons (see page 14).

Where the first aid needs assessment identifies that qualified first aid staff are not necessary, the minimum requirement is to appoint a person (the Appointed Person) to take charge of first aid

arrangements including looking after equipment and facilities, calling the emergency services when required and taking charge when someone is injured or falls ill during the short-term, unplanned absence of the qualified first aider. There may also be other duties and responsibilities which are identified and delegated to the appointed person.

The appointed person is someone who has attended a 1-day HSE approved course.

General Provision of First Aid

If a student is injured or falls ill during the School day, he/she must inform a teacher immediately. The teacher will either send for a first aider or will send the student to the Medical Room. The student will then be assessed, treated (where appropriate) and recorded.

The student will remain under the care of that member of staff until they are fit to resume normal lessons. In the event of there being no prospect of recovery the student will be kept in the medical room and a parent or career will be contacted to collect them. If the injury/illness does not warrant a student being sent home but is a cause of concern to the first aider involved, then the parent of that student will be informed by telephone.

Emergency Procedures

All staff should know what action to take in the event of a medical emergency. This includes:

- How to summon a first aider
- How to contact emergency services and what information to give
- Who to contact within the School.

If a student needs to be taken to hospital a member of staff will always accompany them and stay with them until a parent arrives. The School tries to ensure that the member of staff is known to the student. Staff should not generally take a student to hospital in their own car.

In a medical emergency first aid will be given, an ambulance is called and parents are notified. Should an emergency situation occur to a student who has an individual Health Care Plan, the emergency procedures detailed on the plan are followed where appropriate and a copy of the Health Care Plan should be made available to the ambulance crew.

Head Injuries

Parents must be informed if their child receives an injury to their face or head. A “Head Injury” advice slip must be sent to the parent informing them that the child has received an injury and asking them to observe the child for any of the signs of concussion.

Any injury above the neck must be treated with an ice pack and the student observed for concussion before either being sent back to class, or sent home as appropriate. If the student is being sent home during the School day, a parent must collect them from the main reception.

Record Keeping

A daily First Aid Log is kept of any reported illness or injury. This includes the date, time, nature of illness/injury, treatment given and name of the member of staff who dealt with it.

Accident Reports

All accidents and incidents are reported on Daily Record Sheets detailing the student name, time of incident, type of injury/illness, resolution and who dealt with the issue, Should the injury or illness be deemed more than the usual bump or graze the on-line Hampshire Accident Report will be completed (https://hampshire.firmstep.com/default.aspx/RenderForm/?F.Name=r1vzRomrian&HideToolbar=1) Hampshire Services will advise if HSE needs to be notified. In the event of an accident to an employee or visitor, an accident report form should be completed by the individual concerned. All forms are forwarded to the responsible manager who will then arrange for any necessary investigations and additional reporting.

Prevention of Contamination from Blood/Body Fluids

Occupational exposure to blood or other body fluids through spillage poses a potential risk of infection, particularly to those who may be exposed to these in the workplace setting. Safe, effective management of spillages is a precaution which should be applied as standard.

"Sharps Box" Disposal

'Sharps boxes' will always be used for the disposal of needles. Collection and disposal of the boxes will be locally arranged as appropriate.

Medical Needs at School Policy

The Medical Needs at School Policy is reviewed, evaluated and updated regularly in line with the School's policy review timeline and accordance with local and national government and health care guidelines.

In evaluating the policy, this School seeks feedback on the effectiveness and acceptability of the Medical Needs at School Policy with a wide-range of key persons including, but not limited to, students, parents, School Health Service, healthcare professionals, the Headteacher, teachers, SENCO, first aiders and other School staff.

Policy Statement

The named person, who has overall responsibility for policy implementation, is the Headteacher. On a day to day basis the trained medical staff follows the First Aid/Medical Needs policy.

The School recognises that some students have common medical conditions that, if not properly managed, could limit their access to education. Such students are regarded as having **medical needs**. Most children with medical needs are able to attend School regularly and, with some support from the School, can take part in most normal School activities.

This School aims to provide all children with medical needs the same opportunities as others at School and will work in close cooperation with parents, health professionals and other agencies to help provide a suitably supportive environment for these students.

As defined in the Department of Education's 'Supporting Students at School with Medical Conditions', December 2015. Any member of school staff may be asked to provide support to students with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of students with medical conditions that they teach. School staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of school staff should know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

Parents, as defined in the Education Act 1944, are a child's main carers (foster partners, carer, guardian etc.). They are responsible for making sure that their child is well enough to attend School.

Parents should provide the Headteacher with sufficient information about their child's medical condition and treatment or special care needed at School. They should, jointly with the Headteacher, reach agreement on the School's role in helping with their child's medical needs. Parents' cultural and religious views should always be respected.

Ideally, the Headteacher should seek parents' agreement before passing on information about their child's health to other School staff. Sharing information is important if staff and parents are to ensure the best care for a student.

Some parents may have difficulty understanding or supporting their child's medical condition themselves. The School Health Service can often provide additional assistance in these circumstances.

The School ensures all staff understand their duty of care to children and young people in the event of an emergency. All staff, including supply staff feel confident in knowing what to do in an emergency to get support and first aid help. The Clere School understands that certain medical conditions are serious and can be potentially life threatening, particularly if ill managed or misunderstood. This School understands the importance of medication being taken as prescribed. All staff understand the common medical conditions that affect children at this School. Staff will receive training on the impact medical conditions can have on students.

SUPPORTING STUDENTS WITH MEDICAL CONDITIONS

The medical conditions in children which most commonly cause concern are asthma, diabetes, epilepsy and serve allergy reaction (anaphylaxis). Further advice will be sought for other medical conditions.

Asthma

The Clere School recognises that asthma is a widespread, serious but controllable condition affecting many students at the School.

Asthma is a condition that affects the airways. When a person with asthma comes into contact with something that irritates their airway the muscles around the walls of the airway tighten so that the airway becomes narrow and the lining inflamed and starts to swell. Sometimes sticky mucous or phlegm builds up which can further narrow the airways. This makes it very difficult to breathe and leads to symptoms of asthma.

This school welcomes all students with asthma and aims to support these children in participating fully in school life. We endeavour to do this by ensuring we:

- have staff trained on asthma management and that they have a clear understanding of what to do in the event of an attack.
- have an asthma register of students and the severity of their condition produced annually and made available to relevant School staff confidentially. SIMS also allows all staff to see students' medical conditions and actions required.
- request that parents inform the School of their child's asthma, severity, medication and triggers. We also request they inform us of any changes in their child's condition and to ensure that their child has the required emergency medication with them during School hours. Students should not bring their preventer inhaler to school as it should be taken regularly as prescribed by their doctor/nurse at home. However, if the student is going on a residential trip, we are aware that they will need to take the inhaler with them so they can continue taking their inhaler as prescribed.
- expect parents to make sure that their child is properly medicated as instructed by their doctor/nurse; following their child's Personal Asthma Action Plan.
- allow students to have immediate access to their reliever inhaler at all times.
- have an Emergency Inhaler Pack available, from the Medical room at the School, to all students with asthma. This is checked, at least every 6 months. Parents will be required to sign an 'Asthma in School' Consent Form (included in the 'New Admissions Pack') which will allow their child to use this in an emergency.
- request that parents should ensure that their child's medication is within expiry dates.
- promote asthma awareness to students, parents and staff. Students will be encouraged to understand the condition so that they can support each other.
- request that parents who keep their child at home if they are not well enough to attend school, ensure that their child catches up on any school work they have missed.

Asthma Attacks - School-wide Plan

The school recognises that if all of the above is in place, we should be able to support students with their asthma and hopefully prevent them from having an asthma attack. However, we are prepared to deal with asthma attacks should they occur.

The Department of Health Guidance on the use of emergency salbutamol inhalers in schools (March 2015) states the signs of an asthma attack are:

- Persistent cough (when at rest)
- A wheezing sound coming from the chest (when at rest)
- Difficulty breathing (the child could be breathing fast and with effort, using all accessory muscles in the upper body).
- Nasal flaring.
- Unable to talk or complete sentences. Some children will go very quiet
- May try to tell you that their chest 'feels tight' (younger children may express this as tummy ache)

If the student is showing these symptoms we will follow the guidance for responding to an asthma attack recorded below.

The Guidance goes on to explain that in the event of an asthma attack:

- Keep calm and reassure the child
- Encourage the student to sit up and slightly forward
- Use the student's own inhaler – if not available, use the emergency inhaler
- Remain with the student while the inhaler and spacer are brought to them
- *Shake the inhaler and remove the cap
- If the inhaler is new or not been used for 2 weeks or more, release 2 puffs of medicine into the air to prime the inhaler.
- Place the mouthpiece between the lips with a good seal, or place the mask securely over the nose and mouth.
- Immediately help the child to take two puffs of salbutamol via the spacer, one at a time (r 1 puff to 5 breaths or 20 seconds per dose with mask).
- If there is no improvement, repeat these steps* up to a maximum of 10 puffs
- Stay calm and reassure the student. Stay with the student until they feel better. The student can return to school activities when they feel better.

If we have had to treat a student for an asthma attack in school, it is important that we inform the parents/carers and advise that they should make an appointment with the GP

- If the student has had to use 6 puffs or more in 4 hours the parents should be made aware and they should be seen by their doctor/nurse. If the child does not feel better or you are worried at ANYTIME before you have reached 10 puffs, call 999 FOR AN AMBULANCE and call for parents/carers.
- If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way
- A member of staff will always accompany a student taken to hospital by an ambulance and stay with them until a parent or carer arrives.

However, we also recognise that we need to call an ambulance immediately and commence the asthma attack procedure without delay if the student:

- Cannot speak /short sentences
- Symptoms getting worse quickly
- Appears exhausted
- Has a blue/white tinge around lips
- Has collapsed

References
1. Asthma UK website (2015)
2. Asthma UK (2006) School Policy Guidelines.
3. BTS/SIGN asthma Guideline
4. Department of Health (2014) Guidance on the use of emergency salbutamol inhaler in schools
5. Hampshire NHS Foundation Trust

Diabetes

The Clere School recognises that diabetes is a widespread condition affecting many children and welcomes all students with the condition and recognises its responsibility in caring for them.

Diabetes is a condition in which the amount of sugar in the blood stream is too high. This comes about because the body fails to either produce insulin or enough insulin to deal with the sugar. As a result the sugar builds up in the blood causing Hyperglycaemia. People with diabetes control their blood sugar levels with diet, which provides a predictable amount of sugar and carbohydrate and insulin injections. Young people particularly can have emotional and behavioural difficulties as a result of their condition and much support is required.

- All first aid staff will have a clear understanding of diabetes and are able to recognize common signs and symptoms associated with the condition.
- All students with diabetes have an individual Health Care Plan.
- Parents should ensure that the School has a complete and up-to-date individual Health Care Plan for their child, and advise them of any changes in the child's condition.
- Parents are asked to provide spare supplies, e.g. glucose tablets, biscuits, glycogen, insulin pen etc, in a named box which will be kept in the Medical Room fridge.
- Staff members are informed each year of those students who have diabetes to keep confidentially.
- Parents should ensure that their child's medication is within expiry dates.
- Parents should keep their child at home if they are not well enough to attend School and ensure that their child catches up on any School work they have missed.

Anaphylaxis/Severe Allergies

The Clere School recognises that allergic shock (anaphylaxis) is a serious condition that may affect a number of students at the School and recognises the responsibility it has in dealing with student's allergies appropriately.

An allergy is a hypersensitive reaction to intrinsically harmless antigens (substances), usually proteins which causes the formation of an antibody which specifically reacts with it. In susceptible individuals the reaction may develop within seconds or minutes of contact with a trigger factor. The exposure may result in a severe allergic reaction that can be life threatening.
In an anaphylactic reaction chemicals are released into the blood stream that widen the blood vessels and narrow the air passages. Blood pressure falls and breathing becomes impaired. The throat and tongue can swell thus increasing the risk of hypoxia (lack of oxygen in the blood).

- All first aiders will have an understanding of what it means to be allergic, whether it be a reaction of the skin, airborne, contact, ingestion, or injection. They will be able to recognize and respond to a student who may be having an anaphylactic reaction including the administering of emergency adrenaline (Adrenaline auto-injector i.e. Epipen).
- All students with potential anaphylaxis will have an individual Health Care Plan.
- All staff will be informed of those children who have this condition.
- Parents should ensure that the School has a complete and up-to-date individual Health Care Plan for their child, and advise them of any changes in the child's condition.
- Parents will often ask for the School to ensure that their child does not come in contact with an allergen. This is not always feasible, although the School will bear in mind the

risk to such students at break and lunch and in cookery, food technology and science classes and seek to minimize the risks whenever possible.

- The parent and student will be responsible for the student carrying their emergency medication (2 x Adrenaline auto-injectors i.e. Epipen) with them during School hours.
- Parents must provide additional medication for off-site and residential trips.
- Medication for mild reactions (antihistamine liquid) is available only to all students with individual Health Care Plans. This is entirely voluntary. As a school we have agreed to purchase and keep antihistamine locked in the Medical Room. Parents of these students will be required to complete a Consent Form confirming that they are happy for their child to receive this medication as required.

Epilepsy

The Clere School recognises that epilepsy is condition which affects students at the School.

Epilepsy is a tendency to brief disruption in the normal electrochemical activity of the brain, which can affect people of all ages, backgrounds and levels of intelligence. It is not a disease or an illness, but may be a symptom of some physical disorder. However, its cause, especially in the young, may have precise medical explanation.

- All first aiders will be given training on epilepsy management and should have a clear understanding of what to do in the event of a seizure.
- Prescribed emergency medication may need to be given as an intimate procedure; the School realises the importance that proper training and guidance is given to those who volunteer to undertake this procedure. Any procedure should be carried out by 2 adults for safeguarding reasons.
- The School works in partnership the School Health Service and parents to provide a continuation of care for those students who suffer from the condition.
- Staff members are informed each year of the children at the School who have epilepsy. A copy of Health Care Plans (where provided) are available for staff to inspect.
- Advice and further information on individuals is available from the School Welfare Officer/Nurse.

Other Medical Conditions

The School recognises that there are other medical conditions not outlined in this policy which affect some students at the School. The School aims to ensure that these students are supported and welcomed to the School following consultation with the Headteacher, Head of Year, tutor, parents and health professional to ascertain the best procedures, training and care for these students.

Medical Aids

The School understands that some students may be provided with crutches, slings or other medical aids to assist movement and access to the curriculum. The Clere School will work closely with students, parents and health care professional to provide support whilst the student is in School.

- Parents should inform the School if their child uses medical aids.
- All medical aids should be approved and provided by a health care professional (e.g. doctor, hospital)
- A risk assessment Hampshire Children's Services Risk Assessment Template Form RAFT-019 and Hampshire Children's Services Assessment Form CSAF-018 Children's Personal Emergency Evacuation Plan & Review Form is required to be completed for any students with restricted mobility.
- Students should be able to use their medical aids appropriately.
- The child's parent is responsible for the medical aid to be in working order during School hours and off-site and residential visits.

Individual Health Care Plans
When completing a Student Data form as part of the application process parents are asked whether their child has any health conditions or issues. Information is also gathered from a student's previous school.

Students deemed to have a significant health condition will be the subject of an individual Health Care Plan which will identify their individual medical needs at School.

If an individual Health Care Plan has already been created, it is the parent's responsibility to request the student's previous school to forward this document to The Clere School prior to the student's start date, or request a copy from their Health Care provider. New Health Care Plans will be created by the School Health Service.

Basic information from the Health Care Plan will be made available confidentially to all staff, copies of the Health Care Plan will be made available to all key first aiders and a central register of plans will be kept in the Medical Room, where they are available for inspection by School staff. Parents may keep a copy if they wish. Confidentiality of plans will be respected.

Health care plans will be reviewed annually in consultation with parents and health care professionals to incorporate any changes which may have taken place. Parents at this School are regularly reminded to update their Plans. The School will seek permission from the student and parents before sharing any medical information with a third party, such as when a student goes on work experience.

Offsite and Residential Visits
The Clere School has a responsibility to ensure the health and safety of anyone taking part in off-site activities. All staff, whether first aid trained or not, who are attending off-site visits should be aware of any students with medical conditions and the associated information about how to act in an emergency. This should be addressed in the risk assessment for off-site activities.

Students with medical needs should be included in educational visits as far as this is reasonably practicable. School staff should discuss any issues with parents and the School Nurse in suitable time so that extra measures can be put in place prior to the visit.

Staff Training and Support
Staff are supported in carrying out their role to support students with medical conditions through appropriate training. Training needs are assessed regularly and training will be accessed through Hampshire Services (HTLC). Any first aid training course must be supplied by an organisation approved by the HSE.

Training for First Aid at Work first aiders – 3 day course (renewable every 3 years)
Training for Emergency First Aid at Work first aiders – 1 day course (renewable every 3 years).

Any member of school staff providing support to a student with medical needs will have received suitable training.

The child's role in managing their own medical needs
Where children are deemed competent to manage their own health needs and medicines by their parents and medical professional they will be supported to do this. We see this as an important step towards preparing students for the next stage of their education.

ADMINISTRATION OF MEDICATION IN SCHOOL POLICY

Managing Medicines in School

At the School:

- medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so
- no child will be given prescription or non-prescription medicines without their parent's written letter of consent or a completed Administration of Medicines and Treatment consent form. This applies equally to long term or short term courses of medication.
- we will never give medicine to children under 16 years old containing aspirin or ibuprofen unless prescribed by a doctor.
- Medication, e.g. for pain relief will never be administered without first checking maximum dosages and when the previous dose was taken. Parents will be informed.
- Where clinically possible, we will expect that medicines will be prescribed in dose frequencies which enable them to be taken outside school hours.
- we will only accept prescribed medicines if they:
    - **are in-date**
    - **are labelled**
    - **are provided in the original container as dispensed by a pharmacist**
    - **include instructions for administration, dosage and storage**. *(NB The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container)*
- All medicines will be stored safely.
- Children will know where their medicines are at all times and will be able to access them immediately. Where relevant, they will know who holds the key to the storage facility.
- When no longer required, medicines will be returned to the parent to arrange for safe disposal. Sharps boxes will always be used for the disposal of needles and other sharps
- A child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. If students carry their own medication it becomes the parent's responsibility should issues arise.
- Monitoring arrangements may be necessary. Schools should otherwise keep controlled drugs that have been prescribed for a student securely stored in a non-portable container and only named staff should have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug.
- School staff will administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines will do so in accordance with the prescriber's instructions.
- **We will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school will be noted in school**

Consent to Administer Medicines

If a student requires regular prescribed or non-prescribed medication at School, parents are asked to complete an Administration of Medication consent form. This applies equally to long term or short term courses of medication. Copies of the form are kept at Reception.

If a student requires assistance in administering their medication then this should be outlined on the form (and also in the Health Care Plan if one is in place).
Responsibility for decision-making about the administration of all non-prescribed medicines will always be at the discretion of the responsible manager who may decide to administer under certain miscellaneous or exceptional circumstances.

Refusal

If a student refuses medication staff should record this on the log sheet for that student and parents should be informed as soon as possible. A student should not be forced to take

medication.

Changes to Medication
Parents and carers are regularly reminded that they should inform the School immediately if their child's medication changes or is discontinued.

Misuse
If a student misuses medication, whether it is their own or another student's, their parents should be informed as soon as possible and they will be subject to the School's usual disciplinary procedures.

Storage of Medication
Welfare staff should ensure that medication is stored correctly. All medicines are kept in the lockable medical cabinet in the Medical Room to which access is restricted, even if students administer medication themselves. Students should know where their medication is stored and how to access it. Keys should be readily available and not held personally by members of staff.

All emergency and non-emergency medication should be clearly labelled with the student's name and should be stored wherever possible in its original container with the prescriber's instructions for dose and administration.

Some medication may need to be refrigerated and should also be clearly labelled with the student's name. This medication is stored in the refrigerator in the Medical Room.

Expiry dates on medication are checked termly and parents informed if it has expired. Expiry dates may be noted on storage boxes for ease of reference.

It is the parent's responsibility to ensure new and in date medication is provided in School on the first day of the new academic year.

Disposal of Medication

It is not the School's responsibility to dispose of medicines. It is the responsibility of the parents to ensure that all medicines no longer required including those which have date-expired, are returned to a pharmacy for safe disposal.

Off-Site and Residential Visits
Parents are sent a "Parent Consent Form/Medical Questionnaire" to be completed and returned before a residential trip which provides up to date information about the student's current condition, their overall health and any medication which would normally be taken outside School hours. These are taken by a member of staff taking part in the visit and should be accompanied by a copy of the student's Health Care Plan, if one is in place. Parents should ensure a sufficient supply of medication is available for the duration of the trip.

Record Keeping
For legal reasons records of all medicines administered are kept at the School until the student reaches the age of 21.

HOMELY REMEDIES POLICY

It is a legal requirement that we have the parents' written permission in order to administer any homely remedies medication.

The School will keep a small stock of homely remedies, such as you may have at home, which will include:

- 500mg Paracetamol Tablets
- 500mg Paracetamol Soluble Tablets
- Cetirizine Solution (students with Health Care plans only)

These will only be administered when it would be detrimental to the child not to give and only with your written permission. Sunscreen is not a medicine and students should self-administer as required.

It is not recommended to allow children to carry homely remedies around the School with them. However a child who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. If students carry their own medication it becomes the parent's responsibility should issues arise.

If, on occasion, a student needs to take a homely remedies for pain relief etc, the Welfare staff will be happy to do this. Letters with a permission tear-off slip are sent out to parents before a student joins the School. If we do not have written permission the School will not administer medication.

Hampshire County Council, in consultation with Health Practitioners, has carefully considered the benefits and dangers of administering this non-prescription drug in Schools and settings. For older students, it is sometimes appropriate to give homely remedies to control specific ailments such as migraine or period pain. When administering homely remedies to children over 10 we will adhere to the following conditions:

- The member of staff responsible for giving medicines must be wary of routinely giving homely remedies to children.
- If a student complains of pain or illness as soon as they arrive at School and asks for homely remedies, it is not advisable to give straight away. There should be at least four hours between any two doses of paracetamol containing medicines. No more than four doses of any remedy containing paracetamol should be taken in any 24 hours. Always consider whether the student may have been given a dose of paracetamol before coming to School. Many non-prescription remedies such as Beecham's Powders, Boots pain relief syrup for children, Lemsip, Night Nurse, Vicks Cold Care, etc, contain paracetamol. If paracetamol tablets are taken soon after taking these remedies, it could cause an unintended overdose. Anti-histamine medication doses should be confirmed.
- The student is first encouraged to get some fresh air/have a drink/something to eat/take a walk/sit in the shade (as appropriate)/move away from allergens and homely remedies is only considered if these actions do not work.
- There must be prior written parental consent from the parent on the day.
- Only standard paracetamol tablets may be administered. Combination drugs, which contain other drugs besides paracetamol, must not be administered.
- Homely remedies must be stored securely as all other medicines are stored and should not be kept in first aid boxes.
- Students can only be given the recommended doses advised on the medications packaging.
- The member of staff responsible for giving medicines must witness the student taking the homely remedies, and make a record of it.
- The student should be made aware that homely remedies should only be taken when absolutely necessary; that it is an ingredient in many cold and headache remedies and that great care should be taken to avoid overdosing.

Homely Remedies on Residential Visits

If a student becomes unwell during a residential visit, it may be appropriate to administer homely remedies. The general guidance on homely remedies (above) should be followed but on a residential visit, it may be appropriate to administer more than one dose. Dosage must be strictly according to the instructions on the packaging. Should homely remedies fail to alleviate symptoms and/or should staff have any concerns about a student's condition, they should not hesitate to get

professional medical attention.

Keeping Supplies of Homely Remedies

A small supply of homely remedies is kept in the Medical Room. A small supply of homely remedies may be sent in with your child when he or she starts School. These should be clearly named, with a letter of consent or completed Administrator of Medicines and Treatment consent form and will be kept in the locked medical cabinet in the Medical Room. If a student needs to take a course of prescribed medication an Administrator of Medication and Treatment consent form must be completed by the parent giving with the prescriber's instructions, for a member of staff to administer. Copies of the form are kept at Reception.

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First Aid Staff at The Clere School

Lisa Mackley
Ingrid Deevey
Alison Mitchell
Harry Fu
Corinne King
Samantha Rabehi
Chelsea Watson
Jackie McGee

Updated November 2025