

**Supporting Students at school with medical conditions**

***We are proud to belong to the Carr Hill Community where we pursue excellence through commitment, aspiration, resilience and respect.***

# **1 Policy Statement**

The purpose of this policy is to ensure the safe and appropriate administration of medication to students with medical needs within Carr Hill High School. Most students will, at some time, have short-term medical needs, perhaps entailing finishing a course of medicine such as antibiotics. Some students may have longer term medical needs and may require medicines on a long-term basis to keep them well, for example, students with cystic fibrosis. Other students may require medicines in particular circumstances, for example severe allergies or asthma. Allowing students to take medication during the school day will minimise the time that they need to be absent from school and safeguard their wellbeing.

# **2 Legal Framework**

This policy has due regard to statutory legislation and guidance including, but not limited to, the following:

* Children and Families Act 2014;
* DfE ‘Supporting pupils at school with medical conditions’ 2015.

# **3 Definitions**

Carr Hill High School defines *“medication*” as any prescribed or over the counter medicine.

Carr Hill High School defines “*prescription* medication” as any drug or device prescribed by a medical practitioner.

Carr Hill High School defines a “*staff member*” as any member of staff employed at the school, including teachers.

For the purpose of this policy, “*medication*” will be used to describe all types of medicine.

**4 Key Roles and Responsibilities**

# The Governing Body

* The Governing Body has overall responsibility for the implementation of the Policy on Supporting students with medical conditions at Carr Hill High School

* The Governing Body has overall responsibility for ensuring that the Administering Medication Policy, as written, does not discriminate on any grounds, including but not limited to: ethnicity/national origin, culture, religion, gender, disability or sexual orientation.

* The Governing Body is responsible for handling complaints regarding this policy, as outlined in the school Complaints Policy.

* The Governing Body is responsible for ensuring that relevant health and social care professionals are consulted in order to guarantee that the needs of students with medical conditions are properly supported.

# The Headteacher

* The Headteacher is responsible for ensuring that members of staff who provide support to students with medical conditions are suitably trained and have access to information needed.

* The Headteacher is responsible for the day-to-day implementation and management of the Administering Medication Policy and relevant procedures of Carr Hill.

* The Headteacher will ensure that supply teachers are appropriately briefed regarding students’ medical conditions.

# The Business Manager

* The Business Manager is responsible for ensuring the correct level of insurance is in place for the administration of medication.

* The Business Manager is responsible for ensuring that staff members understand the local emergency services’ cover arrangements (see Appendix 9).

# Members of Staff

* May be asked to support students with medical conditions and develop healthcare plans
* School staff will consider carefully their response to requests to assist with the giving of medication or supervision of self-medication and that they will consider each request separately
* Focus on the needs of individuals in ensuring that students and parents have confidence in the school’s ability to provide effective support
* Ensure students have easy and appropriate access to their medications at all times (including school trips, PE and sporting events, school transport and before and after school clubs)
* Allow students themselves to manage their medical condition effectively in line with their individual healthcare plans
* Receive professional training where this is required
* If a student is sent to hospital then the student’s parent/carer will be informed and at least one member of staff will accompany the student until their parent/carer has arrived.

The school accepts that all employees have rights in relation to supporting student with medical need as follows:

* choose whether or not they are prepared to be involved
* receive training as appropriate and work to clear guidelines
* bring to the attention of the leadership team any concern or matter relating to supporting students with medical conditions

# Parents and Carers

* The prime responsibility for a student's health lies with the parent
* Provide school with sufficient and up-to-date information about their child’s medical needs
* Encouraged to co-operate in training their child to self-administer medication if this is practicable and that members of staff will only be asked to be involved if there is no alternative
* Parents/ carers are responsible for advising or training staff on the administration of prescription medication (in line with the printed advice that accompanies the medication)
* Where parents have asked the school to administer the medication for their child they must complete a school Consent form (Appendix 4). This ensures that the school is able to comply with the requirement to keep adequate records. School will only administer essential medication to a child where it would be detrimental to their health not to do so during the school day
* Medicines must be properly presented by parents through the school office and in accordance with the notes on the Medical Information Consent Form

# Educational Visit Trip Leaders

The Trip Leader is responsible for undertaking a risk assessment for school trips and external activities.

# Students

It is the responsibility of the students to follow all medical protocols within school.

**5 Training of Staff**

Carr Hill High School will provide whole-school awareness training so that all staff are aware of the Administering Medication Policy and understand their role in implementing the policy. In addition, specific training will be offered to staff in the management of conditions such as diabetes or epilepsy.

1. **Medication**

# Managing medicines during the school day

Medicines will only be administered at Carr Hill High School when it would be detrimental to a student’s health or school attendance not to do so.

Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.

No student under 16 will be given prescription medicines without their parent’s/ carers written consent – except **in exceptional circumstances** where the medicine has been **prescribed** to the child without the knowledge of the parents.

A student under 16 will never be given medicine containing Aspirin unless prescribed by a doctor.

# Non-prescription medicines

Un-prescribed medication, e.g. for pain relief, will be administered only with written consent of the parent/carer but will not be administered without first checking maximum dosages and when the previous dose was taken. Students are encouraged to administer non prescribed medication themselves.

# Prescription medicines

Prescribed medicines or controlled substances which have not been prescribed by a medical practitioner will **not** be administered in Carr Hill. Prescription medicines should only be taken during the school day when essential. Carr Hill will only accept prescribed medicines that are in-date, labelled and intact, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date, but will generally be available inside an insulin pen, Epipen, or a pump, rather than in its original container.

Medicines will only be administered according to the instructions on the pharmacy label and with written parental consent.

Qualified members of staff may administer a controlled drug to the student for whom it has been prescribed. Any student who has been prescribed a controlled drug may legally have it in their possession if they are deemed competent to do so but in limited amounts or prescribed doses (eg. one or two tablets/inhaler).

# Records

Carr Hill will keep a record of all medicines administered to individual students, 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. (See Appendix 3)

# Storing Medicines

Carr Hill will keep the medication securely in a locked cupboard which may only be accessed by authorised staff. In particular, all controlled drugs that have been prescribed for a student will be securely stored in a non-portable container and only named staff will have access. Where medicines need to be refrigerated they will be stored appropriately. Prescription drugs will be returned to parents/carers when no longer required, or out of date. It is the parent’s/carer’s responsibility to collect and dispose of out of date or unused medication. It is the parent/carer’s responsibility to ensure that medicines sent to school are ‘in date’. If new supplies are needed it is the responsibility of the parents to supply medication. A maximum of four weeks supply of medication may be provided to school. Sharps boxes should always be used for the disposal of needles and other sharps.

# Epipens and other Emergency Medication

Appropriate staff will be given appropriate training in the administration of emergency medication, where necessary, in conjunction with other health professionals.

Arrangements will be made for immediate access to any emergency medications for example:

* Epipens will be kept with the student with a labelled spare pen held at reception.
* Asthma medication will be kept with the student with labelled spare inhalers and equipment held in the pastoral offices, PE and reception.
* Buccal Midazolam is located at reception, training for administration is delivered by a member of the School Nursing Team to appropriate staff annually. In the event that Buccal Midazolam needs to be administered, the person administering it should check that an ambulance has been called to ensure the student gets prompt medical attention.
* Any medicines such as Ritalin which requires double locking will be kept in a locked metal box in a locked cupboard at reception.
* Wherever there are specific requirements needed with a controlled medicine, to meet the medical needs of an individual in school, then Carr Hill will work within the medical and DfE guidance regarding this.

Emergency medication will always be taken if the student goes out on a trip and identified trained staff designated to administer if required.

## 8 Supporting Students with Medical Needs that take Medication

Where a student needs to take medication in school for an extended period or has a chronic ongoing condition, an Individual Health Care Plan (IHCP) will be will be put in place. This will be agreed jointly by Carr Hill and parents/carers with the advice of health professionals. Parents/carers should provide the school with all necessary information about their child’s condition and will sign appropriate agreement forms for the administration of medication.

IHCPs and their implementation are the responsibility of the Schools Pastoral Team. The IHCPs are compiled and recorded in line with Appendix 2.

Carr Hill High School will work with parents/carers to put plans in place that give regard to the Equality Act 2010 and the SEN Code of Practice so that students with medical conditions have access to the same opportunities as other children as long as it is safe for them to do so.

Members of staff will be made aware of students with IHCPs and their conditions.

Administration of medication by a qualified member of staff or self administration by the student may take place with written permission from parents/carers and the Headteacher.

Carr Hill will ensure that procedures are in place for an emergency situation and that contingency arrangements are in place.

**9 Procedures for Off-Site Learning**

# Residential Visits

* The Trip Leader is responsible for liaising with the First Aid and Safety Support Officer to check the medical needs of students.
* The Trip Leader must check any IHCP requirements with parents/carers and put appropriate procedures and contingency plans in place, this includes undertaking a risk assessment. A copy of the IHCP is available from reception or the students linked documents.

# Day Visits

* The Trip Leader is responsible for liaising with the First Aid and Safety Support Officer to check the medical needs of students.
* The Trip Leader must check any IHCP requirements with parents/carers and put appropriate procedures and contingency plans in place, this includes undertaking a risk assessment.
* For part-day visits, students should, wherever possible, go to the First Aid Room before/after the visit to take their medication.
* For full day visits, parents/carers are responsible for completing the Parental Consent Form providing the relevant information.
* The Trip Leader will collect any necessary medication from reception and follow normal guidelines or requirements set out in an IHCP and take any plans appropriate to the needs of the individual student.

**11 Guidance for students with asthma**

At the beginning of each school year, or when a child joins the school, parents/ carers are asked to update their child’s medical information as part of the data collection sheets. In addition, parents/ carers are asked to complete Appendix 5 CONSENT FORM: USE OF EMERGENCY SALBUTAMOL INHALER From this information the school keeps its asthma register, which is available for all school staff.

Carr Hill High School recognises that asthma is a condition affecting many school students and staff.

Carr Hill High School encourages students with asthma to achieve their potential in all aspects of school life by having a clear policy that is understood by school staff.

## Medication

Immediate access to reliever inhalers is vital. The reliever inhalers of students should be kept with the student at all times, an emergency inhaler is available at reception and in the Year Leader offices.

Parents are responsible for checking that inhalers are in date and not empty.

## Record Keeping

At the beginning of each school year, or when a child joins the school, parents are asked to update their child’s medical information as part of the data collection sheets. From this information the school keeps its asthma register, which is available for all school staff.

At the end of the school year all medication is sent home with a new asthma card to complete for the following academic year. If medication changes in between times, parents are asked to inform the school.

## Emergency inhaler

The school follows the guidance supplied by the Department for Health on the use of emergency inhalers in schools. One is stored in the year leaders office and one at reception.

In order for the emergency inhaler to be used the student must comply with the statutes recommended by the Department for Health:

The emergency salbutamol inhaler should only be used by students:

* Who have been diagnosed with asthma, and prescribed a reliever inhaler;
* OR who have been prescribed a reliever inhaler AND for whom written parental consent for use of the emergency inhaler has been given.

Guidance on the use of emergency salbutamol inhalers in school March 2015 (Department of Health)

## Appendix 5 – consent form for use of school emergency inhaler.

## Appendix 6 – letter to inform parents of emergency school inhaler used Asthma attacks

Appendix 7 – how to recognise an asthma attack

Appendix 8 – What to do in the event of an asthma attack

Minor attacks should not interrupt a student’s involvement in school. When they feel better they can resume school activities. The student’s parents must be informed and the incident logged on CPOMs

## 10 Monitor and Review

This policy is reviewed every two years by the Governing Body.

Records of medication, which have been administered on school grounds, will be monitored and the information will be used to improve procedures.

Carr Hill will seek advice from any relevant healthcare professionals as deemed necessary.

**Appendix 1**

# **Record of medicine administered/ Self administered to all children**

|  |
| --- |
| Carr Hill High School |

Name of

School/setting

Date Child’s Name Time Name of Dose given Any reactions Signature Print name

Medicine of staff

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**Appendix 2**

**Letter inviting parents to contribute to individual healthcare plan development**

Dear Parent

DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child’s medical condition. I enclose a copy of the school’s policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an individual healthcare plan to be prepared, setting out what support the each pupil needs and how this will be provided. Individual healthcare plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child’s case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although individual healthcare plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child’s medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child’s individual health care plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached individual healthcare plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

# **Individual Healthcare Plan Template**

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Name of School/setting

Child’s name

Mentor Group

Date of Birth

Child’s Address

Medical diagnosis or condition

Date

Review Date

**Family Contact Information**

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Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

**Clinic/Hospital Contact**

|  |
| --- |
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Name

Phone no.

**G.P.**

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Name

Phone no.

Who is responsible for providing support in school

Describe medical needs and give details of child’s symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.

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Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

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Daily care requirements

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Specific support for the pupil’s educational, social and emotional needs

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Arrangements for school visits/trips etc.

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Other information

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Describe what constitutes an emergency, and the action to take if this occurs

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Who is responsible in an emergency *(state if different for off-site activities)*

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Plan developed with

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Staff training needed/undertaken – who, what, when

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Form copied to

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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 3**

# **Record of medicine administered/ self administered to an individual child**

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Name of School/setting

Name of Child

Date medicine provided by parent

Start and End Date of medicine

Quantity received

Name and strength of medicine

Expiry date

Quantity returned

Dose and frequency of medicine

Staff signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of parent/ Carer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date

Time given

Dose given

Name of member of

staff

Staff initials

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Date

Time given

Dose given

Name of member of

staff

Staff init

**Appendix 4**

**Parental/ Carer agreement for school to administer medicine**

The school will not give your child medicine unless you complete all sections of this form and sign this form.

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| --- | --- | --- | --- | --- |
| Date for review to be initiated by |  | | | |
| 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 | [agreed member of staff] | | | |

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 5**

CONSENT FORM:

USE OF EMERGENCY SALBUTAMOL INHALER

CARR HILL HIGH SCHOOL

**Child showing symptoms of asthma / having asthma attack**

1. I can confirm that my child has been diagnosed with asthma / has been prescribed an inhaler [delete as appropriate].

1. My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.

1. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed: Date: ………………………………………………

Name (print)……………………………………………………………………………………………………………………

Child’s name: ………………………………………………………………………………………………………………….

Year and Mentor Group: …………………………………………………………………………………………………

Parent’s address and contact details:

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……………………………………………………………………………………………………………………………………….. Telephone: ……………………………………………………………………………………………………………………..

E-mail: …………………………………………………………………………………………………………………………….

**Appendix 6**

LETTER TO INFORM PARENTS OF EMERGENCY SALBUTAMOL INHALER USE

Child’s name: ………………………………………………………………………………………………………………….…………….

Date: ……………………………………………

Dear…………………………………………….,

[*Delete as appropriate*]

This letter is to formally notify you that………………………………….has had problems with his / her breathing today. This happened when…………………………………………………………………………………………….

A member of staff helped them to use their asthma inhaler.

They did not have their own asthma inhaler with them, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol. They were given ……… puffs.

Their own asthma inhaler was not working, so a member of staff helped them to use the emergency asthma inhaler containing salbutamol. They were given ……… puffs. .

[*Delete as appropriate*]

Although they soon felt better, we would strongly advise that you have your seen by your own doctor as soon as possible.

Yours sincerely,

**Appendix 7**

# **HOW TO RECOGNISE AN ASTHMA ATTACK**

**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)

**CALL AN AMBULANCE IMMEDIATELY AND COMMENCE THE ASTHMA ATTACK PROCEDURE WITHOUT DELAY IF**

**THE CHILD**

## • Appears exhausted

## • Has a blue/white tinge around lips

## • Is going blue

## • Has collapsed

**Appendix 8**

# **WHAT TO DO IN THE EVENT OF AN ASTHMA ATTACK**

* Keep calm and reassure the child

* Encourage the child to sit up and slightly forward

* Use the child’s own inhaler – if not available, use the emergency inhaler

* Remain with the child while the inhaler and spacer are brought to them

* Immediately help the child to take two separate puffs of salbutamol via the spacer

* If there is no immediate improvement, continue to give two puffs at a time every two minutes, up to a maximum of 10 puffs

* Stay calm and reassure the child. Stay with the child until they feel better. The child can return to school activities when they feel better

* If the child does not feel better or you are worried at ANYTIME before you have reached 10 puffs, CALL 999 FOR AN AMBULANCE

* If an ambulance does not arrive in 10 minutes give another 10 puffs in the same way

**Appendix 9**

**Contacting Emergency Services**

# ***Request for an Ambulance***

**Dial 999, ask for an Ambulance and be ready with the following information:**

* **Location – Carr Hill High School**

* **Telephone Number – 01772 682008**

* **Postcode – PR4 2ST**

* **Patient’s Name, Date of Birth, Location within School and Brief Description of Symptoms (*if known*)**

* **Inform Ambulance Control of the best entrance to use and state that the Crew will be met and taken to the patient on arrival.**

***Remember, to speak clearly and slowly and be ready to repeat any information if required.***

***DO NOT END THE CALL UNTIL TOLD TO DO SO BY THE EMERGENCY SERVICES***

**Appendix 10**

**FIRST AID PROVISION**

This is the current list of First Aiders:

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| *S Johnson ext. 177*  *(19/3/19)* | *A Walker ext.141*  *(7/3/19)* | *L Illingworth*  *(12/3/21)* | *L Yates ext. 118*  *Refresher 5/12/18* | *L Johnson ext.114* |
| *K Lawton ext.162*  *(21/9/20)* | *L Greenwood ext. 298*  *(14/3/21)* | *J Thompson ext.127* | *F Beckett ext.130*  *(20/6/19)* |  |
| *Pending*  *K Goulding 17/10/18*  *J Dainty 17/10/18* |  |  |  |  |

All staff can support our first aiders by:

* Being confident in dealing with minor student welfare issues
* Staff are able to assist a student, using reasonable judgement as ‘in loco parentis’
* If a student has a minor graze, minor nose bleed it is possible for the student to self-manage these type of issues, for example, they can clean a minor graze
* Reassure the student, talk to them about the situation, ask them to manage themselves, if they begin to feel worse – to tell a member of staff
* If a student feels unwell, this isn’t necessarily a first aid situation. The appropriate adult needs to make the professional judgement as to whether contact needs to be made with parents. Call the ‘On Duty’ member of staff if help is required in the classroom

Please do let the business manager if you would be willing to receive training to become a qualified first aider in school.

Taking the training will reassure people and reduce the ‘fear factor’ that is often associated when dealing with first aid.

If a student complains of feeling ill, please use some professional judgement - let them stand outside for a moment, encourage them to have a drink, remove their blazer, tie etc. Again using your judgement, if they are blatantly ill or require further help then assistance should be sought through the 'On Duty' system. Students should not be sent directly to pastoral offices, quite often there is no one there.

If there is a situation where a student is having a seizure or fit and help is required immediately then please send a student to reception with a clear message of where a first aider is required. Again UNDER NO CIRCUMSTANCE SHOULD THESE STUDENTS BE SENT OUT OF LESSON UNACCOMPANIED.