

FIRST AID

1. Policy Statement

First Aid, Accident Reporting and Medication Policy¹

This policy is written in support of the school's aims and vision. At Bournemouth Collegiate School we are committed to ensuring that every pupil (including boarders and those in our EYFS setting), every member of staff and every visitor will be provided with adequate first aid in the event of an accident or illness, no matter how minor or major.

Procedures and information set out in this document aim to ensure that:

- *all members of the school community are aware of the procedures to follow in the event of an accident, the support available and the role that they play*
- *effective management systems are in place to support individual children with medical needs*
- *medicines are recorded, handled, stored and administered responsibly*
- *first aid provisions are available at all times while pupils or employees are on school premises, and also off the premises whilst on visits or trips*
- *all incidents involving medical assistance are properly recorded*

By implementing this policy we will be helping to achieve our shared vision that all members of the Bournemouth Collegiate School community should be healthy, stay safe, enjoy and achieve, and be able to make a positive contribution.

To this end, all staff, including non-first aiders, have a responsibility in ensuring the welfare of pupils by ensuring that:

- *they are familiar with the first aid procedures in operation and know who the current First Aiders are and how they can be located*
- *Senior School pupils are sent to the Medical Room and Prep School pupils to reception if there is any reasonable concern about an injury or illness. Safety is paramount at all times.*
- *pupils are aware of the first aid procedures*
Requests from parents for the administration of medicines to Senior School pupils are referred to the School Nurses (Mrs Beverley Brehaut and Mrs Hilde Duckitt). In the Prep School, written parental permission is required before medicine is administered by the Senior First Aider.

¹ *This policy was drawn up in conjunction with Guidance from Managing Medicines in Schools and Early Years Settings (Department for Education and Skills / Department of Health)*

There are a range of forms, given here in appendices, which parents / guardians are required to complete throughout the course of their child's schooling as and when medical support may be needed. They are available on request from the School Offices and the website.

BCS is fully committed to ensuring that the application of this First Aid Policy is non-discriminatory in line with the UK Equality Act (2010). Further details are available in the school's Equal Opportunity Policy document.

This policy is applicable to all pupils in both Senior and Prep schools, including those in boarding and EYFS and BCS seeks to implement this policy through adherence to the procedures set out in the rest of this document.

In line with our Provision of Information policy, this document is available to all interested parties on our website and on request from the Senior school and Prep school offices and should be read in conjunction with the following documents: Educational Visits and Activities Off-Site; Risk Policy; Risk Assessment; Supervision; Health and Safety.

This document is reviewed annually by the School Nurse (Senior) and Senior First Aider (Prep) or as events or legislation change requires. The next scheduled date for review is November 2012.

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PART A

1. Key Personnel

- a) The School Nurses are Mrs Beverley Brehaut and Mrs Hilde Duckitt (extension 6560). They are based in the Medical Room on the Senior School Site but also provide guidance to the Prep School where the Senior First Aider is Mrs Angelina Ferredu (ext 4110).

The school nurses are registered with the Nursing and Midwifery Council and will always act within their scope of practice and adhere to the code and conduct of the NMC at all times. The Business Manager checks their annual verification from the NMC. They will adhere to the School Nurse's Confidentiality Policy (see Part E), has completed the First Aid at Work [FAW] training, and has access to professional guidance and consultation through Dr S Walker-Date, Shelley Manor Medical Centre, Beechwood Avenue, Southbourne.

- b) A number of school staff are designated First Aiders They are based in a variety of locations around the school sites and a list is posted at various points around the site. First Aid assistance can always be called for via Reception (extension 6550) in the Senior School and the Office at the Prep School (extension 4110).

First Aiders at Bournemouth Collegiate School have undertaken training and have a qualification approved by the HSE. They hold a valid certificate of competence in either Emergency First Aid at Work (EFAW) or First Aid at Work (FAW). This training enables them to give emergency first aid to someone who is injured or becomes ill whilst on the school premises. Five of those with FAW qualification have completed the Paediatric First Aid training and are also permitted to administer prescribed medicines.

First Aiders at Bournemouth Collegiate School are co-ordinated by the School Nurses who are responsible for ensuring that:

- First Aid qualifications and insurance (provided by the school) are up to date [copies of certificates are kept by the Business Manager in his office]
- the list of First Aiders is kept up to date and posted around the school in the designated locations for the benefit of staff, pupils and visitors (see section 2)
- information on the location of equipment, facilities and first aid personnel is provided to staff via the staff handbook
- the First Aid Notice Board in the Staff rooms are kept up to date
- there is a First Aider present on each school site when pupils are present
- there is someone with the relevant paediatric First Aid training (minimum of 12 hours training) on a site where EYFS are present – including on visits
- the number of First Aiders (both EFAW and FAW trained) is adequate to provide First Aid cover during the school day and after school hours for boarding pupils and for after school activities. (This is to be reviewed regularly by the School Nurses in consultation with the Principal, Head of Prep and the Business Manager in light of on-going risk assessments)

2. First Aid Equipment and Information

a) Medical Room and Medical Wing

A fully stocked and suitable Medical Room is available on the Senior School site and is supervised by the School Nurses. The room includes a washbasin and an examination couch and there are three separate sick bay rooms with beds and two separate toilets adjacent to the rooms. On the Prep site, pupils are supervised in the medical room which contains a washbasin and pull out bed. (Parents of Prep pupils are always informed and asked to collect their child if not well enough to be in school) In an emergency, pupils receiving medical attention may use the adult toilets situated next door to the medical room if necessary.

b) First Aid Information

Information about First Aiders at Bournemouth Collegiate School is available in various locations around the school including the following:

Senior School:

- Reception
- Medical Wing
- Sixth Form Centre
- Art Department
- Music Department
- Home Economics Room
- Staff Room
- Science Laboratories (Attenborough, Chemistry and Physics Labs)
- Outside the Jones Hall
- PE Department Office
- Maintenance Department
- Kitchen (responsibility of Brookwoods)
- All school minibuses
- Swimming pool
- Design and Technology Centre
- Administration offices

Prep School:

- School Office
- Staff Room
- Kitchen (responsibility of Brookwoods)
- Swimming Pool
- Maintenance Department

c) **First Aid Supplies**

The School Nurses will ensure that:

- An adequate number of first aid containers are available and easily accessible across both the school sites
- All first aid containers are marked with a white cross on a green background
- Each school minibus carries a full first aid kit in addition to which staff are given a First Aid kit, size depending on number of pupils, for any trips they accompany
- First aid containers are well stocked and available for PE staff to carry with them during games, PE and fixtures
- Eye Wash Stations are situated in all science laboratories, art and design technology rooms, and site offices. Eye wash tubing is kept in all science laboratories
- First aid containers are fully stocked and available in the administration offices and staff rooms
- Spare stock is stored in the Medical Wing on the Senior site
- All containers are regularly checked for stock levels and expiry dates each term
- Contents of all first aid containers adhere to the guidelines stipulated by the HSE

3. **What to do in the event of an incident requiring medical assistance**

If a person becomes unwell

A pupil, member of staff or visitor who becomes unwell during a lesson or activity may, if they are able, be sent to the Medical Room (Senior School) or School Office (Preparatory School) to seek assistance. They should preferably be accompanied by another person. The Senior First Aider at the Prep School will telephone parents to collect a child if they become unwell.

a) If a person is involved in an accident or medical emergency

- Call for assistance from the nearest First Aider or the School Nurses
- Ensure that other pupils/persons in the vicinity are safe and supervised
- The First Aider who attends will take charge and will decide on and, if appropriate, administer the relevant First Aid treatment
- All incidents must be recorded and parents informed in line with the Recording and Reporting procedures set out below (section 3)

b) If there is a serious accident or medical emergency necessitating an Ambulance

- Call for assistance from the nearest First Aider or a School Nurse
- Ensure that other pupils/persons in the vicinity are safe and supervised
- The First Aider who attends will take charge and will decide on and, if appropriate, administer the relevant First Aid treatment
- The member of staff who initially called for assistance will stay with the casualty at least until the First Aider has taken responsibility for the welfare of the casualty concerned. This may include escorting them to the hospital if required
- If they are not already present, inform a School Nurse or Senior First Aider immediately of the incident / accident

- Any person who believes the situation requires it may telephone for an ambulance. Dial **999 / 112** from any telephone. DO NOT LEAVE THE CASUALTY ALONE in order to do this – ask a colleague. (If you send someone else to make the call, ensure that you tell them to return straight to you in order to inform you of the 999 call having been successfully made.)
- After an ambulance has been requested, if they have not already been alerted, inform the Principal, or member of Senior Leadership Team. They will, in turn, inform relevant senior colleagues
- Another member of staff should await the arrival of the emergency services and direct them appropriately
- A familiar member of staff will accompany the casualty in the ambulance and at the hospital until the parent or guardian arrives. The Vice Principal will arrange any necessary teaching cover
- Where there is an urgent need for surgical or medical treatment to be given and the parents cannot be contacted, the decision about the competence of the child to give or withhold consent to urgent surgical or medical treatment, in the absence of the parent, must be the responsibility of the doctor
- All incidents must be recorded in line with the Recording and Reporting procedures set out below (section 3)

c) Hygiene and infection control when dealing with a medical incident

- Common sense infection control measures (such as hand washing and the use of disposable gloves when dealing with blood or bodily fluids) must be followed by all staff when dealing with medical incidents
- Hand washing facilities and/or alcohol gel dispensers are available throughout the school
- Single use disposable gloves are to be found in medical kits and must be used at all times when providing treatment involving blood or body fluids
- Cleaning staff should always be called to deal with the clearing up of spillages of bodily fluids and any items contaminated must be disposed of in line with the School Nurses' instructions. Yellow bags for the disposal of contaminated items are available from Medical Room.

d) Head injuries

All head injuries should be regarded as potentially serious, irrespective of the extent of external injury. It is important to monitor any person with a head injury very carefully, looking for key signs such as sickness, dizziness, incoherence or drowsiness. If in doubt, or if any of the key signs are exhibited, seek medical help. The School policy with regard to head injuries is always to 'play safe'.

Parents will be asked to collect their child and seek expert medical attention.

The School Nurses or Senior First Aider will ensure that any pupil who has been treated for a head injury, no matter how minor, takes home a note advising parents of developing symptoms that may require medical investigation.

4. **Accident reporting and record keeping**

Where there is an accident or medical emergency, and First Aid assistance has been provided, the person who has administered First Aid must record the incident according to the procedure outlined below. N.B. it is a statutory requirement that all accidents / incidents as described in the Health and Safety Policy must be recorded in an accident book or on-line system, and must be readily accessible for a minimum of seven years. This is kept by the School Nurses.

Parents are initially notified of an incident involving their child by the School Office, and must be kept sensibly informed by an appropriate member of staff. The School Nurses or Senior First Aider will be responsible for ensuring that parents are notified of significant incidents / accidents both verbally and in writing.

a) **How to record an accident or medical incident**

- Any incident / accident must be recorded on the appropriate form online or can be downloaded as a hard copy by the person attending the casualty or dealing with the incident.
- The records of first aid treatment given by a First Aider or appointed person must include:
 - Date, time and place of incident
 - Full name of injured / ill person
 - Detail of the injury / illness and what first aid treatment was given
 - Any review of the persons condition
 - Name and signature of the first aider or appointed person dealing with the incident
- These records when complete are kept by the School Nurses in their office
- Forms to record accident/incident information are available on G:drive
- Once an Accident or Incident Report and Investigation Form has been completed the form must be returned to a School Nurse who maintains the records centrally
- The School Nurses will keep a record of any reported injury, disease or dangerous occurrence which must include
 - the date and method of reporting
 - the date, time and place of event
 - personal details of those involved
 - brief description of the nature of the event or illness

b) **Informing the HSE or RIDDOR - statutory requirements**

The School Nurse is responsible for determining if the HSE needs to be informed of an accident or incident and for keeping a school central record in the medical office (Senior School) together with the RIDDOR form if appropriate.

Under the reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) the following accidents MUST be reported to the HSE without delay:

- accidents to employees resulting in death or major injury (including as a result of physical violence)
- dangerous occurrences
- accidents to any persons (pupils and visitors included) killed or taken from the premises to a hospital
- accidents to employees which prevent the injured person from doing their normal work for more than 3 days must be reported within 10 days of the accident

The School Nurse will be responsible for ensuring that the HSE, at the HSE Incident Contact Centre at www.hse.gov.uk/contact/index.htm, is notified without delay about the above accidents and then followed up with a completed RIDDOR form (F2508) within 10 days. These can be accessed online www.hse.gov.uk/riddor/online or by telephone **0845 300 99 23**.

Details of RIDDOR accidents will be made available to the Health and Safety Committee and will also be forwarded to UCST Central Office.

- c) In line with the Accident, Records and Notification procedures in the UCST Group Health and Safety document (page 13 ff.) Beverley Brehaut at the school will notify the HSE, under

RIDDOR, of any serious accident, illness or serious injury to, or death of, any pupil whilst in our care, and of action taken in respect of it. For EYFS pupils Ofsted will also be notified and will be notified of any instance in connection to medicines which leads to such an event. A pupil's GP has the responsibility of reporting notifiable diseases and ensuring that a pupil is safe to return to school and not cause public health problems from infections.

For boarders, this role will be fulfilled by the school doctor if appropriate during term time. However, the school may also seek advice from the Health Protection Agency if a pupil is believed to be suffering from a notifiable disease as identified under the Health Protection (Notification) Regulations 2010 (see Appendix X). For pupils in our EYFS, notification will be made to Ofsted as soon as is reasonably practicable, but in any event within 14 days of the incident occurring. If BCS, without reasonable excuse, fails to comply with this requirement, we commit an offence. Contact details for Ofsted are as follows: www.ofsted.gov.uk or by telephone on 0300 123 4666.

5. Risk Assessment for medical and First Aid needs

Reviews are carried out annually by the Heads of Departments (including the Head of Boarding) and monitored by the Health and Safety Co-ordinator together with the School Nurse. Recommendations for prevention or control of identified risks are forwarded to the Principal for consideration.

During this monitoring and evaluating the following aspects are considered:

- any changes to staff, building / site, activities, off site facilities
- further training and refresher courses required for staff
- specific hazards in time or place

- specific health needs i.e. epilepsy, serious allergies
- numbers of first aiders required in both time and place
- Accident statistics - aimed at finding ways to reduce number of preventable injuries

PART B

6. Administration of Medicines Policy

Rationale

Most pupils will at some time have a medical condition that may affect their participation in normal school life. This may either be a short term condition which is quickly resolved or a long term condition with pupils having medical needs that limit their access to education. At Bournemouth Collegiate School we aim to work with the parents to provide measures to minimise the impact of medical difficulties on the child's school life.

Parents or guardians have prime responsibility for their child's health and should provide the school with information about their child's medical conditions. Whilst there is no legal duty requiring staff to administer medicines or supervise pupils taking their medicines, we will endeavour to accommodate pupils' medical needs in close cooperation with the parents. The School Nurses are trained and have a good awareness of the administration of medications.

Aims

The aims of this policy are to ensure:

- the school assist parents in providing medical care for their children
- staff and pupils are educated in respect of special medical needs
- training is arranged for staff who volunteer to support individual pupils with special medical needs as appropriate
- there is appropriate liaison with the medical services as necessary
- relevant national guidance in relation to medication in schools is adopted and implemented
- the responsibilities for first aid provision and the administration of medicines are set out clearly

Non-prescribed medication

Bournemouth Collegiate School has designated staff who, with a parent's written consent, will administer non-prescription medication to pupils in the Senior School under the guidance of the Homely Remedy Policy (Appendix 3):

- Mrs Beverley Brehaut (Senior School Nurse) Mrs Hilde Duckitt (School Nurse), Mrs Mary-Anne Revill (Head of Boarding), Mr David Revill (Head of Boarding), Mr Tom French (Head

of Boys Boarding), Mr Richard Harrison-Poole (Boarding Housemaster), Mr Callum McGregor (Boarding Housemaster), Mrs Jo Nowak (Head of Girls Boarding); Mrs Robyn Chambers (Boarding Housemistress); Miss Chloe Lawrence (Boarding Housemistress), Ms Joanne Dawes (Principal's PA).

- The Prep School does not store or administer non-prescribed medication, including over the counter medicines.

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Parents will need to complete and sign the medical form (Appendix 1) consenting to a list naming non-prescription medications, together with the circumstances in which they may be issued, being administered to their children. These medical forms are retained in the Medical Room.

All administering of non-prescription medication must be recorded in the school's Medicine log book. The records indicate the following:

- Date and time medication administered
- Full name of pupil
- Reason for administering the medication
- Dose, method and form of medication
- Signature and name of person administering the medication

Prescribed medicines

We will only accept medicines in school if deemed absolutely essential i.e. where it would be severely detrimental to a child's health if the medicine were not to be taken during the school day. Our preferred approach is to encourage parents wherever possible to administer medicines before and after school, and just before bedtimes. Parents are encouraged to refer to their GP on issues of dosage with this in mind. We will only accept medicines that have been supplied by a registered doctor, dentist, nurse or pharmacist prescriber. The medicines must be provided in the original container (as dispensed by the pharmacist), clearly labelled with the pupil's name and include prescriber's instructions for administration. ONLY the named first-aiders below are authorized to administer prescribed medicines:

Senior School Nurse:	Mrs B Brehaut
School Nurse:	Mrs H Duckitt
Head of Girls Boarding:	Mrs J Nowak
Head of Boys Boarding:	Mr T French
Boarding Housemistresses:	Mrs R Chambers, Miss C Lawrence
Boarding Housemasters:	Mr R Harrison – Poole; Mr C Macgregor
Prep School:	Mrs A Ferreddu (Receptionist)
	Mrs Maureen Hemming (administrator)

Parents need to complete a form (appendix 2) requesting the school to administer prescribed medication to their child which amongst other things must give the name and type of medication, dosage and frequency of administration. This form must be signed by the School Nurse (senior site) or the Head (Prep Site) agreeing to administer the medication.

BOURNEMOUTH COLLEGIATE SCHOOL will NOT accept medicines that have been removed from their original container nor make changes to dosage on parental instruction.

Record keeping

Clear records are maintained of all prescribed medications brought into the school in a 'Medications Register.' Entries to The Medications Register are made in ink in chronological and in year order. It is kept in the Medical Room. It is in an approved format and entries are kept until the pupil in question has attained the age of 22.

Medications Register entries:

- are made at the time medication is received and dispensed
- show the name and address of the person from whom the medicine was obtained
- show the name of the person for whom the medicines were supplied
- show the name of the person who accepted the medication
- show the date the medicine was obtained or supplied
- give the name of medicine supplied
- detail the quantity and form in which e.g. liquids, capsules the medication is supplied
- detail the amount administered each time
- details the amount left each time
- notes the expiry date of the medication

Refusing medication

If a child refuses to take any medication, the school may not force them to take it. The school will inform the parents as soon as possible if this occurs.

School trips

Bournemouth Collegiate School tries to encourage all children with medical needs to participate in school trips where safety permits.

Staff supervising children on school trips are made aware of any medical needs in their information pack (containing copies of Form 4s and Prescribed Medicines forms). The School Nurse or senior first aider will advise on any special precautions or emergency procedures that may be required. A First Aid bag is provided by The School Nurse for all School trips and all EYFS trips will be accompanied by a First Aider who has the necessary paediatric First Aid training. Medicines are only administered on school trips by experienced members of staff following written instructions.

Storage of medication

The school only stores a small volume of non prescribed medication

- Pupils' own medication is given to the School Nurse and must always be accompanied by the relevant completed consent forms
- All medication is locked away in the Medical room (Senior site) or in the administration office (Prep Site). Pupils and staff know how such medication can be accessed.
- Asthma inhalers and EpiPens are NOT locked away and are readily available to staff and pupils
- Where medication needs to be refrigerated this is placed in a fridge available for this purpose in the Medical Room. In the Senior School, access to this refrigerator is restricted to the School Nurses and in their absence Ms J Dawes. At the Prep School the refrigerator is accessed by the office staff. Medicine must never be put into a fridge containing food.

Disposal of medication

School staff will not dispose of any medication. Parents are required to collect all medication held at school at the end of each term and are responsible for the disposal of expired medication.

Legislation

The procedures in this section have regard to the National '***Pastoral Practitioners Organisation***' who also advise that all schools develop effective management systems to support individual children with medical needs, in accordance with the '*Medicines Standard of the National Service Framework for Children*' (see Part C of this document)

BOURNEMOUTH COLLEGIATE SCHOOL understands that failing to comply with them could make the school and staff both civilly and criminally liable.

BOURNEMOUTH COLLEGIATE SCHOOL recognises its responsibility to adhere to the following areas of legislation:

The Medicines Act 1968

The misuse of Drugs Act 1971

The controlled Drugs (Penalties) Act 1985

The Health and Safety at Work act 1974

Management of Health and Safety at Work Act 1999

Control of Substances Harmful to Health Regulations 2002

The Education (School Premises) Regulations 1999

The Education (ISS) (England) Regulations 2003

Part 4, The Disability Discrimination Act as amended by the SEN and Disability Act of 2001.

First Aid Regulations and RIDDOR

PART C

7. MANAGEMENT OF MEDICAL CONDITIONS

a) ASTHMA

Asthma is a condition of the respiratory system – it affects the airways in the lungs. When a person with asthma comes into contact with something that irritates their airway [an asthma trigger], the muscles around the walls of the airway tighten so that the airways become narrower and the lining of the airways become inflamed and start to swell. Sometimes stick mucous or phlegm builds up which can further narrow the airways. This makes it difficult to breathe and leads to symptoms of asthma.

Recognition of an asthma attack

- The airways in the chest become restricted
- The pupil may only be able to speak with difficulty
- The pupil may wheeze, unable to breathe out
- The pupil may become distressed, anxious, exhausted, have a tight chest of may even go blue around the lips and mouth

What to do if a pupil has an asthma attack

- Call for help from the School Nurse (ext 6560) at the Senior School or the Senior First Aider (**ext.4110**) at the Prep School
- If the School Nurse is not available at the Senior School call for a first aider – via Reception (**ext.6550**). If the Senior First Aider is not available at the Prep School call for a first aider via reception (**ext.4110**).
- Ask a member of staff to get the pupil's emergency inhaler from the Medical Room at Senior site or from the school office at Prep or Pre-Prep
- Ensure that the reliever medicine is taken. The medication must belong to the pupil having the asthma attack
- Note that some pupils may not have spare medication stored with School
- Stay calm and reassure the pupil. Attacks can be frightening, so stay calm, the pupils has probably been through this before. It is very comforting to have a hand to hold but do not put your arm around the pupil's shoulder as this is very constrictive. Listen carefully to what the pupil is saying. Loosen any tight clothing
- Encourage the pupil to breathe deeply and slowly. Most people find it easier to sit upright or lean forward slightly. Lying flat on the back is not recommended
- Call 999/112 and request an ambulance urgently if
 - The reliever has no effect after five or ten minutes
 - The pupil is becoming distressed or unable to talk
 - The pupil is getting exhausted, becomes disorientated or collapses
 - The pupil looks blue

- You have any doubts at all about the pupil's condition
- The pupil's parents or guardian will need to be informed after an attack even if relatively brief
- Minor attacks should not interrupt a pupil's involvement in the School. As soon as the pupil feels better they can return to School activities.

Please contact the School Nurse for advice, help and support and for further information or training regarding the practical use of asthma inhalers.

In developing this set of procedures, Bournemouth Collegiate School has regard to the guidance of the National Asthma Campaign, Asthma UK and the School Nurse. In recent years the incidence of childhood asthma has doubled and the School recognises its responsibility in dealing with children appropriately.

- Bournemouth Collegiate School understands the importance of ensuring the pupils feel safe and secure
- Bournemouth Collegiate School recognises that asthma is a widespread, serious but controllable condition and welcomes pupils with asthma
- Bournemouth Collegiate School tries to ensure that its environment is favourable to children with asthma
- Bournemouth Collegiate School encourages, helps and supports pupils with asthma to achieve their potential and to participate fully in aspects of school life
- Pupils with severe asthma will have an Individual Health Care Plan
- All Bournemouth Collegiate School staff, through reading of this document, should have an understanding of what it means to be asthmatic, signs and symptoms of an asthma attack and what to do in an emergency
- All staff must understand that access to inhalers is vital. The majority of pupils keep spare inhalers, labelled with the pupil's name.
 - Seniors: in the Medical Room at Senior site.
 - Prep: inhalers are handed in to the office at the beginning of the day and collected at the end of the day. They are collected by the pupils when they leave the site for PE or games lessons
- Some pupils may not have spare medication kept by the School and, instead, responsibly carry it themselves
- All staff, teaching and non-teaching, have access to information on pupils with severe asthma in the Medical Matters folders in the senior school which are situated in the Staff Room, Reception, Medical Room, Sixth Form Office, Vice Principals Office, PE Office. At the Preparatory sites this is kept in the administration Office.
- A printout of pupils' medical conditions can be obtained from Engage Unite and Individual Health Care Plans are available to all staff and kept confidentially and available in Medical Matters Folders.
- Advice and further information is available from the School Nurse

Bournemouth Collegiate School is committed to working in partnership with all parties to ensure the policy is implemented and maintained and to ensure effective communication of the policy.

b) **EPILEPSY**

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 it may be a symptom of some physical disorder. However, its cause – especially in the young – may have no precise medical explanation.

Tonic Clonic Seizures (grand mal)

The person may make a strange cry and fall suddenly. Muscles first stiffen and then relax, and jerking or convulsive movements begin which can be quite vigorous. Saliva may appear around the mouth and the person may be incontinent.

Complex and partial seizures (temporal lobe seizures)

These occur when only a portion of the brain is affected by excessive electrical discharge. There may be involuntary movements, such as twitching, plucking at clothing or lip smacking. The person appears conscious, but may be unable to speak or respond during this form of seizure. Ensure safety of the person – gently guide away from dangers and speak calmly to the person and stay until they recover.

Absence (petit mal)

This can easily pass unnoticed. The person may appear to daydream or stare blankly. There are very few signs, if any, of an ‘absence / petit mal’ seizure. This can lead to serious learning problems as the seizures may be frequent and the person does not receive any visual or aural messages during those few seconds. Therefore it is so important to be understanding, note any petit mals and inform parents.

Teachers can play an important role in the recognition of epilepsy and in the recognition of changing patterns or an increased rate of seizures.

Procedure for an epileptic seizure

Total seizure (total clonic)

- **KEEP CALM** – pupils will tend to follow your example! Let the seizure follow its own course. It cannot be stopped or altered.
- Ask the other pupils to leave the room and ask a responsible pupil to fetch another adult.
- **Call or send for help from the School Nurse (ext 6560)** at the Senior site or the Senior First Aider (**ext. 4110**) at the Prep Site
- If the School Nurse or Senior First Aider is not available call for a first aider – via Reception (**ext.6550** at Senior, **ext 4110** at Prep sites)
- **Note the time.**

- Refer to the pupil's Individual Health Care Plan which can be accessed in the Medical Matters Folders situated around the school (see Asthma Policy)
- If the pupil has emergency medication, ask a member of staff to get the pupil's emergency box from the Medical Room at Senior site or from the office at Prep
- Administer the prescribed medication as per instruction – kept with the emergency medication – according to the pupil's Individual Health Care Plan
- Protect the pupil from harm. Only move the pupil during seizure if you have to for their protection. If possible move any objects that may hurt them, rather than move them from dangerous objects.
- As soon as possible (normally post-seizure) place the pupil on their side – this does not have to be true recovery position – just so that the tongue falls forward so that any saliva can drain out of the mouth easily
- Put something under their head to protect them from facial abrasions if at all possible
- Try not to leave the pupil alone if at all possible. If you need to leave the pupil make sure there is something behind their back to try to maintain a sideways position
- Talk quietly to the pupil to reassure them but do not try to restrain any convulsive movements
- Do not place anything in their mouth
- Minimise any embarrassment as during the fit the pupil may be incontinent – cover with a blanket to keep warm
- Once recovered, move them to the Medical Room. The wheelchair (stored in the Medical Room toilet) may be used if appropriate – send a responsible pupil to fetch this – check no obvious injuries have occurred
 - If possible, ask other pupils to leave the Medical Room – perhaps sick pupils could sit in the Reception area
 - Allow the pupil to sleep on their side. Do not leave them alone as the seizure may be the first of a cluster – leave with the School Nurse or a First Aider
- Call the pupil's parent / guardian and request the pupil be collected from school so that they can sleep as long as needed. If the seizure occurs in the morning they may even be able to return in the afternoon. This is a very individual decision and will be left to the parent to decide.
- **If the seizure lasts five minutes or longer call an ambulance immediately.**
 - If a seizure lasts that long, it is likely to last longer. It is very important that the pupil goes to hospital and gets the proper treatment within one hour of the beginning of the seizure. If you are concerned or the pupil has received injury e.g. due to a fall, call an ambulance. We are advised it is better not to call an ambulance if the seizure lasts less than five minutes as they are better off left in peace and quiet.
 - When the ambulance arrives, report to the paramedic details of the seizure – especially how long it has lasted. If the parent arrives, report the details of the seizure to them.
 - An appropriate member of staff must accompany the pupil in the ambulance and stay with them until the parents arrive.
- Ensure any pupils who were present at the time of the seizure have a chance to talk it over with the School Nurse.

Please contact the School Nurse for advice, help and support and for further information or training in the administration of emergency epileptic medication.

In developing these procedures, Bournemouth Collegiate School has regard to the guidance of Epilepsy Action and the School Nurses. The School recognises its responsibility in dealing with children appropriately.

- Bournemouth Collegiate School understands the importance of ensuring the pupils feel safe and secure
- Bournemouth Collegiate School recognises that epilepsy is a common condition affecting many children and welcomes pupils with epilepsy
- Bournemouth Collegiate School encourages, helps and supports pupils with epilepsy to achieve their potential and to participate fully in aspects of school life
- Pupils with epilepsy will have an Individual Health Care Plan
- All Bournemouth Collegiate School staff, through reading of this document, should have a clear understanding of the condition epilepsy and what to do in the event of a pupil having an epileptic seizure
- Some pupils may have emergency medication – but it is NOT carried by pupils it is vital that all staff know where this is kept
 - Seniors: in the Medical Room at Senior site.
 - Prep: the administration office
- The School Nurses provide training for all staff on the use of epileptic emergency medication
- Bournemouth Collegiate School advises pupils with epilepsy to provide spare clothing to be kept in school especially underwear and socks
- All staff, teaching and non-teaching will be informed of pupils with epilepsy in the Medical Matters Folders
- A printout of pupils' medical conditions is available on Engage Unite and Individual Health Care Plans are available to all staff and kept confidentially in Medical Matters Folders
- Advice and further information is available from the School Nurses

Bournemouth Collegiate School is committed to working in partnership with all parties to ensure the policy is implemented and maintained and to ensure effective communication of the policy.

c) **ALLERGIES AND ANAPHYLAXIS**

An allergy is a hypersensitive reaction to intrinsically harmless antigens (substances, usually proteins that cause the formation of an antibody and react specifically with that antibody). In susceptible individuals, the reaction may develop within seconds or minutes of contact with a trigger factor. Exposure may result in a severe allergic reaction (anaphylaxis) 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).

Triggers can be:

- Skin or airborne contact with particular materials

- Injection of a specific drug or insect bite
- Ingestion of a certain food e.g. nuts, fish, eggs

Recognition

- Anxiety
- Widespread red blotchy skin eruption
- Swelling of the tongue and throat
- Puffiness around the eyes
- Impaired breathing from tight chest to severe difficulty in breathing

Serious symptoms

- Cold, clammy skin
- Blue-grey tinge around the lips
- Weakness / dizziness
- Feeling of impending doom

Progresses further

- Restlessness
- Aggressiveness
- Gasping for air
- Yawning (trying to get oxygen into the body to the brain)
- Unconsciousness

Treatment

- Call or send for help from the School Nurse (ext 6560) at the Senior site or the Senior First Aider (ext. 4110) at the Prep Site
- If the School Nurse is not available at the Senior School call for a first aider – via Reception (ext.6550). If the Senior First Aider is not available at the Prep School call for a first aider via reception (ext.4110).
- Ask a member of staff to get the pupil's emergency box from the Staff Common Room at Senior site or from the office at the Prep site
- Administer antihistamine tablets / syrup as prescribed in the emergency box
- If the pupil feels better, allow them to rest and contact the parents
- **If the serious symptoms appear call for an ambulance and ADMINISTER ADRENALINE VIA EPIPEN IMMEDIATELY.** Instructions are kept in the emergency box with the EpiPen.
 - Lie the pupil down if possible, and lift the legs up slightly
 - Try and expose the thigh, especially if the pupil is wearing thick trousers
 - Remove the grey safety cap of the EpiPen
 - Hold the EpiPen very firmly to the outer aspect of the thigh, at right angles to the leg
 - Press hard into the thigh, UNTIL A CLICK IS HEARD
 - Hold the EpiPen in place for a count of ten seconds
 - Remove the EpiPen from the thigh and rub the area gently
 - Do NOT throw the used EpiPen away

- Ensure the used EpiPen is taken to hospital with the pupil in the ambulance
 - If the pupil is feeling no better or appears worse after ten minutes you may need to give a second injection if available (using the other thigh)
- Stay with the pupil until the ambulance arrives

Please contact the School Nurses for advice, help and support and for further information or training in the administration of emergency anaphylactic medication.

In developing these procedures, Bournemouth Collegiate School recognises the advice and guidance of the Anaphylaxis Society, Allergy UK and the School Nurse. The School recognises its responsibility in dealing with children appropriately.

- Bournemouth Collegiate School understands the importance of ensuring the pupils feel safe and secure
- Bournemouth Collegiate School recognises that allergic shock (anaphylaxis) is a common condition affecting many children and positively welcomes pupils with different types of allergies
- Bournemouth Collegiate School encourages, helps and supports pupils with allergies to achieve their potential and to participate fully in aspects of school life
- All Bournemouth Collegiate School staff will have a clear understanding, through reading of this document, of what it means to be allergic to a particular substance (whether the trigger of a reaction is skin or airborne contact, injection or ingestion), signs and symptoms of a reaction, and what to do in the event of a pupil having an anaphylactic reaction, including the use of an EpiPen to administer emergency adrenaline
- The School Nurses provide training for all staff and how to administer the emergency medication
- All staff must understand that immediate access to EpiPens and/or antihistamine tablets/syrup is vital. The School has at least one EpiPen and/or two antihistamine tablets or a bottle of antihistamine syrup which are be labelled correctly with the pupil's name and form, in a clear bag/container
- Allergy boxes are stored in individual pupil boxes clearly labelled with the pupil's name and are to be found in the Staff Common Room at the Senior site and in the Offices at Prep and Pre-Prep. Staff must familiarise themselves with these locations.
- Please note that some pupils may not have spare medication in the emergency boxes – they carry it with themselves responsibly
- All staff, teaching and non-teaching will be informed of pupils with allergies in the Medical Matters folders.
- A printout of pupils' medical conditions can be obtained from Engage Unite and Individual Health Care Plans are available to all staff and kept confidentially and are available Medical Matters Folder
- The School will also inform catering staff of pupils with food allergies, to ensure the pupils' dietary requirements are catered for
- Advice and further information is available from the School Nurses

Bournemouth Collegiate School is committed to working in partnership with all parties to ensure the policy is implemented and maintained and to ensure effective communication of the policy.

d) **DIABETES MELLITUS: TYPE 1 INSULIN DEPENDENT**

Diabetes Mellitus is a condition when the body fails to produce sufficient amounts of insulin, a chemical that regulates blood sugar (glucose) levels. As a result, sugar builds up in the blood stream and can cause hyperglycaemia. People with diabetes control their blood sugar with diet (which provides a predictable amount of sugar and carbohydrate) and insulin injections. Children can have emotional, eating, behavioural and confidence difficulties as a result of their condition. Therefore much support is required.

Hypoglycaemia – low blood sugar

Hyperglycaemia – high blood sugar

Causes of Hypoglycaemia

- Inadequate amounts of food ingested – missed or delayed
- Too much or too intense exercise
- Excessive insulin
- Unscheduled exercise

Recognition of Hypoglycaemia

- Onset is SUDDEN
- Weakness, faintness or hunger
- Palpitations, tremors
- Strange behaviours or actions
- Sweating, cold, clammy skin
- Headache, blurred speech
- Confusion, deteriorating level of response, leading to unconsciousness
- Seizures

Treatment of Hypoglycaemia

- Call or send for help from the School Nurse (ext **6560**) at the Senior site or the Senior First Aider (ext. **4110**) at the Prep Site
- If the School Nurse is not available at the Senior School call for a first aider – via Reception (ext.**6550**). If the Senior First Aider is not available at the Prep School call for a first aider via reception (ext.**4110**).
- Ask a member of staff to get the pupil's emergency box from the Medical Room at Senior site, or from the office at Prep or Pre-Prep site (Follow pupils individual Medical Plan)
- Ensure the pupil eats a quick sugar source e.g. three glucose tablets, glucogel, fruit juice or fizzy drink (not a diet version)
- In the Medical Room and Prep / Pre-Prep Offices there is a 'diabetic snack box' should the pupil not have any snacks with them

- Wait ten minutes and, if the pupil feels better, follow with a carbohydrate snack e.g. cereal bar, toast
- Once recovered allow the pupil to resume school activities
- **If the pupil becomes drowsy and unconscious then the situation is now LIFE-THREATENING and call an ambulance**
 - Place the pupil in the recovery position and stay with the pupil until the ambulance arrives
- Contact the parent / guardian immediately

Causes of Hyperglycaemia

- Too much food
- Too little insulin
- Decreased activity
- Illness
- Infection
- Stress

Recognition of Hyperglycaemia

- Onset is over time – hours or days
- Warm, dry skin, rapid breathing
- Fruity / sweet breath
- Excessive thirst and increased hunger
- Frequent urination
- Blurred vision
- Stomach ache, nausea, vomiting
- Skin flushing
- Lack of concentration
- Confusion
- Drowsiness that could lead to unconsciousness

Treatment of Hyperglycaemia

- Call or send for help from the School Nurse (ext 6560) at the Senior site or the Senior First Aider (ext. 4110) at the Prep Site
- If the School Nurse is not available at the Senior School call for a first aider – via Reception (ext.6550). If the Senior First Aider is not available at the Prep School call for a first aider via reception (ext.4110).
- Ask a member of staff to get the pupil's emergency box from the Medical Room at Senior site, or from the office at Prep site (Follow pupils individual Medical Plan)
- Encourage the pupil to drink water or sugar-free drinks
- Allow the pupil to administer the extra insulin required
- Permit the pupil to rest before resuming school activities if able
- Contact parent / guardian

Please contact the School Nurse for further advice, help and support and for further information.

In developing these procedures, Bournemouth Collegiate School recognises the advice and guidance of the British Diabetic Society, Diabetes UK and the School Nurse. The School recognises its responsibility in dealing with children appropriately.

- Bournemouth Collegiate School understands the importance of ensuring the pupils feel safe and secure
- Bournemouth Collegiate School recognises that diabetes is a widespread condition affecting children and welcomes pupils with diabetes
- All pupils with diabetes will have an Individual Health Care Plan
- Bournemouth Collegiate School encourages, helps and supports pupils with diabetes to achieve their potential and to participate fully in aspects of school life
- All Bournemouth Collegiate School staff will have a clear understanding, through reading this document, of what it means to be a diabetic and what to do in the event of a pupil having a hypoglycaemic or hyperglycaemic episode and what to do in an emergency
- **All staff must understand that immediate access to insulin or diabetic snacks is vital**
- Pupils' emergency boxes are kept in the Medical Room at Senior site and in the medical room/office at Prep School. Staff must familiarise themselves with these locations. The Medical Room and Prep School Medical room/Office also have 'spare diabetic snacks' in a labelled emergency box.
- Please note that some pupils do not lodge spare insulin with School – they have it on them at all times
- All staff, teaching and non-teaching will be informed of pupils with diabetes in Medical Matters Folders
- A printout of pupils' medical conditions can be obtained from Engage Unite and Individual Health Care Plans are available to all staff and kept confidentially and are available in Medical Matters Folders
- The School will also inform catering staff of pupils with diabetes in case these pupils have no snacks with them and urgently need something to eat
- Advice and further information is available from the School Nurse

Bournemouth Collegiate School is committed to working in partnership with all parties to ensure the policy is implemented and maintained and to ensure effective communication of the policy.

e) HEAD LICE

In developing this document, Bournemouth Collegiate School has regard to the advice and guidance of the Infection Control Nurses Association and the School Nurse. The School recognises its responsibility in dealing with children appropriately.

- Head lice infection is not primarily a School problem but one of the wider communities
- Whilst the School cannot solve the problem it can help parents to deal with it
- Head lice do cause concern and frustration for some children, parents and teachers
- The School Nurse should be informed in confidence of all head lice cases
- The School Nurse may decide to offer information, advice and support to parents
- All reports shall remain confidential
- The School may inform parents by an 'advice' letter given to a whole year or class group but not individual parents
- Affected pupils will not be excluded from School
- The School will maintain a sympathetic attitude and avoid stigmatising / blaming families who are experiencing difficulty with control measures
- The School will assist in reducing agitation and alarm
- Routine head inspections are not effective and will not be introduced to placate anxious parents
- It is part of the School Uniform Rules for all pupils to keep their hair tied back at all times as this is a preventable measure against head lice

PART D

8. POLICY FOR PROVISION OF MEDICATION AND MEDICAL CARE TO BOARDING PUPILS AT BOURNEMOUTH COLLEGIATE SCHOOL

This policy needs to be read in conjunction with:

- Health and Safety Policy – First Aid, Accident Reporting and Medication Policy and Procedures
- Health Education Policy
- PHSE policy

This guidance is aimed at standards 7 and 15 of the minimum standards produced by the National Care Standards Commission for Boarding Schools.

The Principal and boarding staff of Bournemouth Collegiate School wish to ensure that pupils with medication needs receive appropriate care and support within each of the boarding houses.

It is expected that parents would normally keep their children at home if acutely unwell or infectious.

If a Senior boarding pupil returns to school from home with any prescribed medication or a 'homely' remedy that is required to be administered at school, the pupil's parents are required to put their permission for staff or self administration of such medication in writing to the school. A specific form is available for this purpose. Such permission should detail comprehensive information regarding the pupil's condition, medication prescribed, type, dosage, frequency, and duration of medication regime. This form serves as written permission for the staff to administer the medication, or, after the following of our policy for assessing a pupil's suitability to self medicate, provides permission for the pupil to self-medicate.

If a boarding pupil is unwell and considered to be infectious or for instance has a gastric upset that could spread quickly through the boarding community, the School Nurse or Boarding Staff will isolate the boarder in the boarding house – either in their own rooms (if single) or in the Medical sick bay. Parents or guardians will then be informed and required to take the pupil home until fully recovered and no longer infectious and 48 hours has elapsed since their last bout of diarrhoea or vomiting.

- Prescribed medications will not be accepted in the boarding house without a completed and signed medication form / letter from the parent
- Each item of medication must be delivered to the Boarding Housemaster / Mistress in a secure and labelled container as originally dispensed. The boarding houses will not accept medication in unlabelled containers
- Medication should then be handed to the Nurses, who will decide whether a boarder is able to self administer according to the Self administration policy (Appendix 4) For younger pupils the medication will be dispensed from the medical room during the day

and from the boarding staff in the evenings / weekends. Unless otherwise indicated, all medication to be administered in school is kept in a locked medicine cabinet.

- If a pupil refuses to take medicines, staff cannot force them to do so, and will inform the parents of the refusal as a matter of urgency on the same day
- It is the responsibility of parents to notify the school in writing if the pupil's need for medication has ceased. The nurses should be informed if a medical supply is running low and they will obtain further supplies from the School Doctor.
- It is the responsibility of parents to renew the medication when supplies are running low and to ensure that the medication supplied is within its expiry date
- The boarding staff will not make changes to dosages on parental instructions
- The boarding houses will not dispose of medicines. Medicines, which are in use and in date, should be collected by the parent at the end of each term. Date expired medicines or those no longer required for treatment will be returned immediately to the parent for transfer to a community pharmacist or safe disposal.

For any pupil with long term or complex medication needs, the School Nurse will ensure that an Individual Health Care Plan is drawn up, in conjunction with the appropriate health professionals. Individual Health Care Plans are kept in the Medical Room and in Medical Matters Folders if appropriate.

The responsibility for pupil's safety is clearly defined and each person involved with a boarder's medication and medical needs is aware of what is expected of them. With this in mind, Bournemouth Collegiate School believes that pupils under the age of 11 should not be permitted to self-medicate by nature of their young age.

Within the Boarding aspect of the school, Boarding House Staff and School Nurse are seen to be acting in 'loco-parentis' and have within their job descriptions and contracts, the delegated responsibility, from the Principal, for the administration and supervision of prescription medication. These medications will be administered under the guidance of the Homely Remedy Guidelines (Appendix 3).

The administration of medication by the staff is considered by UCST to be an act of 'taking reasonable care' of the pupils and as this is a remit of their employment they are fully indemnified by the Bournemouth Collegiate School against claims for alleged negligence.

All prescribed medicines and 'homely' medications are to be stored inside the locked Medicine Cabinet in a designated place in the Boarding House. The staff member on duty has access to the key to this cabinet. A list of prescribed medicines and 'homely' medicines will be printed and kept in a 'Medical Matters' file in the Boarding House Staff Office. They are regularly checked for stock and date.

Non-prescription medication

All non-prescription medication that is administered will be recorded in the Boarders Medical Records Folder. The records will detail the name of pupil, medication prescribed, dose /

frequency, method of administration, the number of tablets given, and a daily entry for signatures when administered.

Prescription medication

All prescription medication that is administered is recorded on the pupil's individual medication sheet for their records, and is only given to the boarder for whom it is prescribed. Boarders who are keeping and administering their own medication are assessed by the School Nurse as sufficiently responsible to do so and to store their medication safely in their lockable lockers in the boarding house.

A record of medication given in the Boarding House will be sent to the School Nurse in the Medical Room and vice versa regarding medication issued during the school day. If appropriate, parents are informed via a phone call from the staff member on duty.

Protocol for the provision of over the counter (OTC) medicines for boarders

The School follows guidelines laid out in the BSA briefing paper 'Medical Protocols and practice' May 2005. A copy of this document is kept in the Medical Room and each of the boarding houses, accessible to all staff that may be required to oversee/administer OTC medications.

Supply of OTC medications

The school nurse decides which OTC medications may be held in the Boarding House. These medications are administered following the Homely Remedy Guidelines. Currently, the only OTC medicines held are:

- Paracetamol (tablets and soluble)
- Ibuprofen
- Cetirizine (antihistamine – cream or tablet)
- Immodium
- Milk of Magnesia
- Oral Rehydration salts
- Throat Lozenges
- Salbutamol
- Hyoscine hydrobromide (joy rides for travel sickness)
- Simple Linctus

Staff responsibilities

The School Nurse will oversee the Boarding Staff.

- Regularly check the Boarding House stock (amounts, expiry dates) and storage
- Order and deliver more medication for houses when stock is running low
- Be available for staff to consult with any question they may have

The Boarding staff will:

- Only administer those medicines for which there is a homely remedy policy

- Keep updated with any changes to policies etc. by reading the medication file regularly
- Attend appropriate training, whether in-house or external, to ensure safe administration of OTC medications
- Obtain more medication via the Medical Room as required

Trail of medication (ordering OTC medications)

What follows is the procedure for the ordering of OTC medications in the Boarding House:

1. Boarding staff become aware of low stock
2. Written request sent to School Nurse
3. Nurse arranges with the School Doctor for a private prescription for further supply of medication
4. Pharmacist prepares OTC medications and these are delivered. School is billed after each order
5. Medications counted into Medical Room drug book and kept there until required by Boarding Houses
6. Medications signed out of Medical Room drug audit book and into house drug record book, by Nurse or Boarding Staff.
7. As medications are given, the drug book is completed and individual record cards updated
8. Any unused / expired medication is signed out and returned to the Medical Room

G.P. Services

1. All boarders have access to Dr Walker Date, Shelley Manor Medical Centre (tel: 01202 309421)
2. Termly boarders will be routinely registered with this practice. For weekly boarders this is optional
3. Boarders have a choice as to whether they are seen by a male or female doctor.
4. Boarders can freely choose whether or not they are accompanied by staff when being seen by the doctor
5. Pupils ask the school Nurse to make a GP appointment. The pupil will then be escorted by a staff member to that appointment
6. Weekly boarders who are not registered at this Practice and who need a routine appointment; it is the Parent/guardians responsibility to arrange this
7. A weekly boarder who needs an emergency appointment will be registered as a temporary patient at the Shelley Manor Medical Practice

First Aid and Minor Illnesses

Treatment is given at school by the School Nurse or a qualified first aider.

Written school records are kept by School Nurses and/or Boarding Staff in the Boarding House or Medical Room of all medication, treatment and first aid administered to boarders, giving name, date, time, medication/treatment and reason for administration (if not prescribed), which is signed by the responsible member of staff.

Written records are kept by the School Nurses and/or Boarding Staff in Boarding House or Medical Room of all significant illnesses, accidents or injuries to boarders (either as part of the above school medication and treatment records or separately).

Written parental permission is obtained in advance for the admission of first aid and appropriate non-prescription medication to boarders, and to seek medical, dental or optical treatment when required. Parental consent is obtained each time, prior to offering influenza / travel / routine childhood immunizations. The requirement is without prejudice to the right of a Gillick-competent² boarder to give or withhold consent to medical treatment or to seek medical advice or treatment in confidence.

Dentist and Optician Services.

Dental and Optician appointments for boarders can be arranged as required.

Dental Services: Beechwood Dental Practice (01202 397074)

Optician Services: Julian May Opticians (01202 432435)

If emergency care is needed this will be arranged through the School Nurse.

Other Medical Services.

Links exist via the GP with outside professional services (e.g. physiotherapist, psychologist, social worker etc. through Child and adolescent Mental Health services.)

PART E

9. SCHOOL NURSE'S CONFIDENTIALITY POLICY

Bournemouth Collegiate School will respect the privacy of pupils and staff by encouraging a safe, caring environment. The safety, well-being and protection of our pupils are the paramount consideration in all decisions regarding confidentiality. It is an essential part of the ethos of our School that trust is established to enable pupils, staff and parents to seek help. In line with Standard 15.15 of the National Minimum Boarding standards, the maintenance of non NHS records are regularly monitored by the School Nurses.

In developing this policy, the School acknowledges the advice and guidance of the Nursing and Midwifery Council (NMC). This policy is available to all pupils, staff – teaching and non-teaching, permanent or temporary – and parents / guardians.

As a Registered General and Children's Nurse, the School Nurses are required to comply with the Nursing and Midwifery Council Code of Professional Conduct which gives clear guidelines for

² Gillick competence is used in medical law to decide whether a child (16 years or younger) is able to consent to his or her own medical treatment, without the need for parental permission or knowledge. A child will be Gillick competent if he or she has sufficient understanding and intelligence to understand fully what is proposed

professional practice with regard to confidentiality and trust-based patient relationships. The School Nurse is accountable and responsible for her actions.

Aim:

- To ensure that all pupils, staff and parents are aware of the School Nurse's professional and ethical obligations regarding confidentiality
- To ensure that all pupils, staff and parents are aware of the legal and professional duty of care required of a registered nurse

Confidentiality

Confidentiality is defined as 'something which is spoken or given in private'. Confidentiality is a fundamental part of the nurse-patient relationship. Pupils, staff and parents need to know the boundaries of confidentiality in order to feel safe and comfortable discussing personal issues and concerns including relationships.

- The School Nurses have a responsibility and duty to act in the best interests of the School, which includes balancing openness with maintaining the necessary confidentiality
- The complexity of meeting the privacy needs of each pupil, complying with regulations both educational and medical, meeting professional standards, can present conflicting directions
- However the duty of confidentiality to her 'client' is greater than that owed to the School which employs the School Nurses
- Nurses also have a legal (common law and statutory) duty of confidence and a breach of confidentiality may render them liable to disciplinary proceedings by the NMC
- The NMC is responsible for maintaining professional standards

Medical information

- Standards are established for collecting and recording pupil health information and are used to enhance the welfare of the pupil
- All pupil health information is distinguished from other types of school records
- All health information is confidential and is treated in a manner in accordance with ethical standards of nursing practice as pupils, staff and parents entrust their private information to the School Nurses
- Health and mental health information should be shared only when it is educationally relevant for a pupil's academic progress or essential to ensure the protection of other pupils and staff
- The School Nurses will use their professional judgement and knowledge to determine which health information is to be shared and to whom – information available to others will be on a 'need to know' basis and the appropriate sharing of information between School staff is an essential element in ensuring our pupils' well-being and safety
- Staff may be informed of certain relevant chronic medical conditions that may affect the pupil during their school day, with parental / pupil consent
- If information is to be copied or released to individuals outside the School, then the nature of the disclosure should be documented along with written parental consent

- Disclosure may occur if information on certain subjects is sensitive i.e. bereavement, parental separation or divorce, serious physical or mental illness, suicide or attempted suicide, physical abuse, bullying, substance abuse, sexual problems, serious academic problems or disciplinary matters
- As a general rule, medical information is confidential and should not be discussed without parental consent unless the pupil is in danger or a high-risk situation
- The School Nurses 'owe' the same duty of confidentiality to a person consulting because of a cold as to one seeking sexual health advice – i.e. no distinction between the reasons for the consultation

Medical emergencies

Confidential information may be disclosed when a medical emergency means a patient's consent cannot be obtained e.g. serious accident or unconsciousness, as it is in their medical interest.

Child Protection

If the pupil has disclosed something that the School Nurses feel may cause them or other people harm then the Nurses will follow the school's Child Protection (Safeguarding) Policy. This means that confidentiality cannot be guaranteed to pupils in matters of disclosure relating to safeguarding issues.

The School Nurses will be able to help and listen to a pupil's problems, concerns or worries, so pupils should not hesitate in contacting her for support and guidance. The Medical Room door is always open.

10. Appendices

Appendix 1: Prep School Medical Form Including EYFS

To be completed and returned to the School Office.

You may wish to keep a photocopy of this form for your records.

PART 1: PERSONAL DETAILS

PUPILS DETAILS

SURNAME: _____ YEAR _____

FIRST NAMES: _____

DATE OF BIRTH: _____ Male Female

TOWN AND COUNTRY OF BIRTH: _____

HOME ADDRESS: _____

_____ POSTCODE: _____

TELEPHONE NUMBER: _____

NATIONAL HEALTH NUMBER (if known): _____

GENERAL PRACTITIONER NAME AND ADDRESS: _____

PART 2 - MEDICAL HISTORY:

Does your child suffer from any allergies (food, medication or other)? Yes / No

If yes, please give details of the symptoms and any immediate treatment that may be required:

.....

.....

.....

.....

.....

.....

Pupil Name:

Does your child suffer from any of the following: *(please delete as appropriate)*

Asthma:	Yes / No
Attention deficit disorder	Yes / No
Bleeding disorders	Yes / No
Dental problems	Yes / No
Depression	Yes / No
Diabetes	Yes / No
Ear and hearing problems	Yes / No
Epilepsy / seizures	Yes / No
Eye or visual problems:	Yes / No

Eczema or skin problems	Yes / No
Hayfever	Yes / No
Heart disease / disorders	Yes / No
Mental health problems	Yes / No
Musculoskeletal problems	Yes / No
Speech problems	Yes / No
Any past operations	Yes / No
Dieterary or nutritional requirements	Yes / No

If yes to any of the above please give details including any treatment that may be required whilst at school:

.....

Is your child fit in all respects for the usual school sports and activities: Yes / No

If no, please give details:

.....

If any medical treatment is needed during school please put the request in writing to the School.

It is requested that you send full details if your child is ever exposed to any infection before returning to school.

Please note that any medications bought into school must be handed in to the School Nurse with instructions regarding dose, frequency and duration of treatment.

Please inform the school of any significant changes in your child's health whilst they are registered at the school.

Parent /Guardian signature:

Please print name of signatory:

Date:

Pupil name: **PART 3 CONSENT**

1. Administration of medication:

The Prep school does not administer any medication to any pupils unless instructed to do so by the parent.

Any medication bought into the school must be clearly labelled and must remain in the original packaging.

A form must be completed by the parents (obtainable from Reception) instructing the School on the administration of any medications.

2. First Aid and Medical emergency

In cases of medical emergency or personal injury whilst the child is in the care of the School and in the event of the School being unable to contact the parent or the child's guardian, a member of staff available will act in loco parentis unless the young person is over 18 years of age, whereupon they would be responsible for their own medical treatment. All reasonable steps will be taken to secure necessary first aid and medical treatment, and consent to any treatment deemed by a medical practitioner to be in the best interest of the child.

I authorise the School to give agreement for necessary first aid and medical or surgical treatment, including the administration of anaesthetics to my child in the event of my being unavailable to sign the hospital consent form

Signature of Parent / Guardian:

Please print name of signatory:

Date:

Senior School Medical Form

To be completed and returned to Mrs Hilde Duckitt c/o the School Office.

You may wish to keep a photocopy of this form for your records.

PART 1: PERSONAL DETAILS

PUPILS DETAILS

SURNAME: _____ YEAR _____

FIRST NAMES: _____

DATE OF BIRTH: _____ Male Female

TOWN AND COUNTRY OF BIRTH: _____

HOME ADDRESS: _____

_____ POSTCODE: _____

TELEPHONE NUMBER: _____

NATIONAL HEALTH NUMBER (if known): _____

GENERAL PRACTITIONER NAME AND ADDRESS: _____

_____ Tel No: _____

GUARDIAN NAME AND ADDRESS: _____

GUARDIAN TELEPHONE NUMBER: _____

PART 2 - MEDICAL HISTORY:

Does your child suffer from any allergies (food, medication or other)? Yes / No

If yes, please give details of the symptoms and any immediate treatment that may be required:

.....

.....

.....

Does your child suffer from any of the following: (please delete as appropriate)

Asthma:	Yes / No
Attention deficit disorder	Yes / No
Bleeding disorders	Yes / No
Dental problems	Yes / No
Depression	Yes / No
Diabetes	Yes / No
Ear and hearing problems	Yes / No
Epilepsy / seizures	Yes / No
Eye or visual problems:	Yes / No

Eczema or skin problems	Yes / No
Hayfever	Yes / No
Heart disease / disorders	Yes / No
Mental health problems	Yes / No
Musculoskeletal problems	Yes / No
Speech problems	Yes / No
Any past operations	Yes / No
Dieterary or nutritional requirements	Yes / No

If yes to any of the above please give details including any treatment that may be required whilst at school:

.....

.....

.....

Is your child fit in all respects for the usual school sports and activities: Yes / No

If no, please give details:

.....

If any medical treatment is needed during school please put the request in writing to Mrs Hilde Duckitt.

It is requested that you send full details if your child is ever exposed to any infection before returning to school.

Please inform the school of any significant changes in your child's health whilst they are registered at the school.

Parent /Guardian signature:

Please print name of signatory:

Date:

Pupil Name: _____ **PART 3 CONSENT**

1. Administration of non prescriptive medication:

The following medications may be given according to the dosage schedule in the British National Formulary for Children 2008. Please indicate if you give permission for these medications to be administered:

(please delete as appropriate)

MEDICATION		REASON
Paracetamol	Yes / No	Pain relief / fever management
Simple cough linctus	Yes / No	Symptomatic relief
Hay fever medication (cetirizine)	Yes / No	Wasp bee stings, hay fever, urticaria
Throat lozenges	Yes / No	Sore throat
Calamine Lotion	Yes / No	Mild sunburn / itchy rash
Aqueous cream	Yes / No	Dry skin
Sticking plaster	Yes / No	Cuts / grazes
Ibuprofen (this will <u>not</u> be administered to pupils with asthma)	Yes / No	Pain relief / fever management

I give consent for a member of staff to administer the above agreed non prescriptive medication to my child in the event of them becoming unwell at school.

Should my child become unwell whilst on a school outing, I give consent for the member of staff in charge to administer these non prescriptive remedies.

Signature of Parent / Guardian

Please print name of signatory:

Date:

2. First Aid and Medical emergency

In cases of medical emergency or personal injury whilst the child is in the care of the School and in the event of the School being unable to contact the parent or the child's guardian, a member of staff available will act in loco parentis unless the young person is over 18 years of age, whereupon they would be responsible for their own medical treatment. All reasonable steps will be taken to secure first and medical treatment, and consent to any treatment deemed by a medical practitioner to be in the best interest of the child.

I authorise the School to give agreement for necessary first aid and medical or surgical treatment, including the administration of anaesthetics to my child in the event of my being unavailable to sign the hospital consent form

Signature of Parent / Guardian:

Please print name of signatory:

Date:

BOARDERS ONLY:

Child's Name: _____

- | | |
|---|----------|
| 1. Do you wish for the school to arrange routine visits to the opticians: | Yes / No |
| 2. Do you wish for the school to arrange routine visits to the Dentist | Yes / No |
| 3. Does your child suffer any problems with bed wetting | Yes / No |
| 4. Is your child insured for private care | Yes / No |
- If yes, please provide details:
-
-

PART 4: IMMUNISATION STATUS: (Boarders only)

Please enter the dates the following vaccinations were administered

(The unshaded areas indicate when the vaccines are scheduled according to the current Department of Health guidance)

	2 MONTHS	3 MONTHS	4 MONTHS	12 MONTHS	13 MONTHS	3 – 4 YEARS	13 – 18 years
Tetanus							
Diphtheria							
Polio							
Pertussis (whooping cough)							
Haemphilis influenza (HIB)							
Measles, mumps and rubella (MMR)							
Meningitis C							
Pneumococcal							
(HPV) – girls only							

Has your child ever suffered from the following infectious diseases: (please delete as appropriate)

Measles	Yes/ No
Mumps	Yes / No
Pertussis (Whooping cough)	Yes / No
Rubella	Yes / No
Scarlet Fever	Yes / No
Chicken Pox	Yes / No
Hepatitis B	Yes / No
Malaria	Yes / No

OTHER Vaccinations:

VACCINATION	DATES
BCG	
Influenza <i>(please give date of last dose)</i>	
Hepatitis A	Dose 1: Dose 2:
Hepatitis B	Dose 1: Dose 2: Dose 3: Anti Hbs (blood test):
Typhoid <i>(please give date of last dose)</i>
Yellow Fever <i>(please give date of last dose)</i>
Rabies	Dose 1: Dose 2:
OTHER:

Would you like the school to arrange any vaccinations that may be required for travelling during the school term?

(Please delete as appropriate): Yes / No

Parent / Guardian signature:

Please print name of signatory:

Date:

Appendix 2

Request for the School to Administer Medication

The school will not give your child medicine unless you complete and sign this form and the school nurse or Head of Prep or Principal has agreed that the school staff can administer the medication.

DETAILS OF PUPIL:

Surname: _____ Forenames: _____

DOB: _____ M / F: _____ Form: _____

Address: _____

Condition or illness: _____

MEDICATION:

Name / type of medication (as stated on container): _____

How long will your child be taking this medication? _____

Date Dispensed: _____

Full directions for use:

Dosage and Method: _____

Timing: _____

Special Precautions: _____

Side Effects: _____

Self Administration: _____

Procedures to take in an emergency: _____

CONTACT DETAILS

Name: _____ Telephone number _____

Relationship to pupil: _____

Address: (if different from above): _____

I understand that I must deliver the medicine personally to the pupil and accept that this is a service which the school is not obliged to undertake.

Signature: _____

Date: _____

Appendix 3: SCHOOL HOMELY REMEDY GUIDELINES

The following medications may be administered by named members of staff who have been deemed competent to do so and in accordance with the Homely Remedy Policy and following a training session with the School Nurse:

- Paracetamol
- Ibuprofen
- Cetirizine
- Immodium
- Milk of Magnesia
- Oral Rehydration salts
- Throat Lozenges
- Salbutamol
- Hyoscine hydrobromide
- Simple Linctus

<i>Agreed by General Practitioner</i>	<i>Signature:</i> <i>Print:</i> <i>Date:</i>
<i>Agreed by School Nurses</i>	<i>Signatures:</i> <i>Print:</i> <i>Date:</i>
<i>Agreed by Principal</i>	<i>Signature:</i> <i>Print:</i> <i>Date:</i>

PARACETAMOL

Drug approved name	Paracetamol
Dose	Under 12 years: 250 - 500mg Over 12 years: 500mg – 1g
Route	Oral – tablet or soluble or syrup
Frequency	Every 4 – 6 hours. Not more than 2 every 4 hours
Period of administration	Do not administer for more than 3 days. Consult with the School nurse for further medical attention
Maximum administration	4 doses in 24 hours (maximum 8 tablets in 24 hours for over 12 years)
Indications for use	<p>PAIN: It is the first line choice for pain relief in most persons with mild to moderate pain including:</p> <ul style="list-style-type: none"> ◆ Headache ◆ Migraine ◆ Toothache ◆ Sore throat ◆ Period pains ◆ Ear ache ◆ Back pain ◆ Symptoms of cold and flu <p>FEVER: It helps to bring down high temperatures</p>
	◆ A dose of paracetamol has been taken in the last four hours

Criteria for exclusion	<ul style="list-style-type: none"> ◆ Has taken other medicines which contain paracetamol given within the time frame (see attached list) ◆ A maximum of four doses have been given within 24 hours ◆ A paracetamol overdose ◆ A known allergy to paracetamol
Side Effects	<p>Side effects are rare</p> <ul style="list-style-type: none"> ◆ Skin rash ◆ Signs of allergic reaction eg itching; swelling of lips, tongues or throat, difficulty breathing <p style="text-align: center;">CALL 999 it this occurs</p> <p>Any suspected adverse drug reaction should be reported immediately to the School Nurse</p>
In case of overdose	<p>Paracetamol can be very harmful and life threatening if an overdose is taken.</p> <p>Any person overdosing on paracetamol must be taken to the hospital immediately even if there are no symptoms present.</p>
Storage of medication	Locked in a cupboard in the Boarding Office / Medical room

IBUPROFEN

Drug approved name	IBUPROFEN
Type of drug	Non Steroidal Anti-inflammatory Reduces pain, inflammation and fever
Dose and frequency	Under 12 years: 200mg Over 12 years: 200mg – 400mg three to four times a day
Route	Oral: tablet, chewable tablet or syrup Topical: gel, spray, cream, mousse
Special Precautions	Should be taken with water or milk and preferable with or after food
Period of administration	Do not administer for more than 3 days. Consult with the School nurse for further medical attention
Maximum administration	Maximum dose 1.2g in 24 hour period

	6 x 200mg or 3 x 400mg
Indications for use	<p>PAIN: For mild to moderate pain including:</p> <ul style="list-style-type: none"> ◆ Headache ◆ Migraine ◆ Toothache ◆ Sore throat ◆ Period pains ◆ Ear ache ◆ Back pain ◆ Symptoms of cold and flu <p>INFLAMMATION</p> <ul style="list-style-type: none"> ● Due to muscle and joint injuries <p>FEVER: It helps to bring down high temperatures</p>
Criteria for exclusion	<ul style="list-style-type: none"> ◆ Do not administer to anyone with a history of Asthma ◆ Previous history of allergic reaction ◆ Pregnancy ◆ Stomach problems or stomach ulcers ◆ Do not take with Aspirin
Side Effects	<p>Side effects are rare can vary in severity and frequency</p> <ul style="list-style-type: none"> ● Wheezing, shortness of breath, skin rash, itching, bruising, facial swelling ● Call 999 if these occur ● May cause some stomach side effects such as nausea, heartburn, indigestion, diarrhoea <p>Any suspected adverse drug reaction should be reported immediately to the School Nurse</p>
Storage of medication	Locked in a cupboard in the Boarding Office / Medical room

CETIRIZINE

Drug approved name	Cetirizine (see attached list of medications containing)
Type of drug	Antihistamine
Dose	Adult and Child over 6 years: 10mg
Route	Oral – tablet or syrup
Frequency	Once daily
Maximum administration	1 dose in 24 hours
Indications for use	<p>Allergic symptoms:</p> <p>Hayfever symptoms</p> <ul style="list-style-type: none"> • Runny, blocked and itchy nose • Itchy, watery eyes • Frequent sneezing <p>Skin allergy reactions</p> <ul style="list-style-type: none"> • Rash • Itching • Urticaria (Hives / nettle rash)
Criteria for exclusion	<ul style="list-style-type: none"> ◆ Pregnancy ◆ Known kidney disorders ◆ Do not give if on Erythromycin (antibiotic)
Side Effects	<p>Possible side effects are rare</p> <ul style="list-style-type: none"> • Headache • Dizziness • Agitation • Dry mouth • Drowsiness • Stomach discomfort
In case of Overdosage	<p>Contact the School Nurse</p> <p>Contact GP or A&E</p>
Storage of medication	Locked in a cupboard in the Boarding Office / Medical room

Simple Linctus

Drug approved name	Simple Linctus
Dose	Adults: 5ml adult linctus Children 6 – 12years: 5 - 10ml of paediatric linctus
Route	Oral –syrup
Frequency	3 - 4 times a day
Maximum administration	Adults; 20ml adult Linctus Children: 40ml paediatric linctus
Indications for use	<ul style="list-style-type: none"> • Dry, irritating cough
Criteria for exclusion	None
Side Effects	None
In case of overdose	Contact the School Nurse
Storage of medication	Locked in a cupboard in the Boarding Office / Medical room

Milk of Magnesia

Drug approved name	Milk of Magnesia
Dose	Over 12 years: For stomach upsets: 5 – 10 ml For Constipation: 30 – 45ml at night Under 12 years: For stomach upset: 5ml For Constipation: 5 – 10ml at night
Route	Oral – Liquid
Frequency	For constipation: nightly, reducing the dose until constipation cleared.
Maximum administration	Over 12 years: maximum 60ml in 24 hours Under 12 years: maximum 30ml in 24 hours
Indications for use	<ul style="list-style-type: none"> • Stomach discomfort • Indigestion • Over acidity • Heartburn • Flatulence • Constipation •
Criteria for exclusion	◆ Acute gastro-intestinal conditions
Side Effects	<ul style="list-style-type: none"> • Colic
In case of Overdosage	Contact the School Nurse Contact GP or A&E
Storage of medication	Locked in a cupboard in the Boarding Office / Medical room

IMMODIUM

Drug approved name	LOPERAMIDE
Dose	Adult and Child over 12 years: 2mg Not to be given to under 12 years age.
Route	Oral – tablet
Frequency	Adults: 2 capsules taken initially then 1 capsule after every loose
Maximum administration	6 capsules in 24 hours
Indications for use	<ul style="list-style-type: none"> • Uncomplicated acute diarrhoea given in conjunction with oral rehydration salts. • Only use if diarrhoea is disabling
Criteria for exclusion	<ul style="list-style-type: none"> ◆ Very young children ◆ If abdominal distension (bloating) occurs ◆ Pregnancy ◆ Colitis ◆ Blood in stool
Side Effects	<p>Possible side effects are rare</p> <ul style="list-style-type: none"> • Abdominal cramps • Dizziness • Drowsiness • Skin reactions • Abdominal bloating
In case of Overdosage	Contact the School Nurse Contact GP or A&E
Storage of medication	Locked in a cupboard in the Boarding Office / Medical room

Throat Lozenges

Drug approved name	Strepsil
Dose	1 lozenge every two to three hours
Route	Oral – Lozenge
Maximum administration	Maximum 12 lozenges in 24hours
Indications for use	Relief of sore throat
Criteria for exclusion	None
Side Effects	None
Storage of medication	Locked in a cupboard in the Boarding Office / Medical room

Joy-Rides (Travel Sickness)

Drug approved name	Hyoscine hydrobromide
Type of drug	Travel sickness medication
Dose and frequency	7 – 12 years: 1-2 tablets (0.15mg) Over 12 years: 2 tablets (0.15mg)
Route	Oral: chewable tablet
Special Precautions	Take 20 minutes prior to journey or at onset of nausea
Maximum administration	Over 12 years: 4 tablets in 24 hours Under 12 years: 2 tablets in 24 hours
Indications for use	Prevention of motion sickness
Criteria for exclusion	<ul style="list-style-type: none"> ◆ Do not give to anyone with Glucoma ◆ Pregnancy
Side Effects	<ul style="list-style-type: none"> • Drowsiness • Dry mouth • Dizziness • Blurred vision • Difficulty passing water
Storage of medication	Locked in a cupboard in the Boarding Office / Medical room

Oral Rehydration Salts

Drug approved name	DIORALYTE
Dose	1 sachet reconstituted in 200ml cooled, boiled water
Route	Oral – Powdered sachets reconstituted.
Frequency	Age 12 years and above: 200 – 400 ml after each loose motion
Period of administration	Until resolved. Any unused solution should be discarded after 1 hour unless stored in a refrigerator where it may be kept for up to 24hours.
Indications for use	<ul style="list-style-type: none"> • Rehydration following diarrhoea <p>It aids the absorption of water and electrolytes which helps to prevent dehydration and complications associated with dehydration.</p>
Storage of medication	Locked in a cupboard in the Boarding Office / Medical room

SALBUTAMOL

(Only child's own prescribed inhaler may be used)

Drug approved name	SALBUTAMOL (Ventolin)
Type of drug	Short acting β 2 agonist
Method of action	Known as a reliever as it opens the airways and assist with breathing
Dose and frequency	100 μ g per dose (1 puff = 1 dose) Children 5 – 18 years old 1 -2 puffs 4 doses in one day
Route	Blue coloured inhaler
Special Precautions	May need to be used with a spacer
Period of administration	If there is no improvement or worsening of symptoms, please seek medical attention through the School Nurse
Indications for use	<ul style="list-style-type: none"> • For the management of asthma • If asthma worsens, or child is complaining of wheezing, tightness in chest or short of breath • May be used prior to exercise to prevent wheezing induced by exercise
Criteria for exclusion	<ul style="list-style-type: none"> ◆ Any known allergy to the inhaler or its products ◆ If not prescribed for the named person.
Side Effects	<ul style="list-style-type: none"> • Fine tremor (particularly hands) • Nervous tension • Headache • Racing pulse • Palpitations • Dry mouth • Allergic reaction – paradoxical bronchospasm whereby the wheezing gets worse shortly after taking a dose of salbutamol. If this occurs stop taking the inhaler and seek medical attention <p>Any suspected adverse drug reaction should be reported immediately to the School Nurse</p>
Storage of medication	Reliever inhalers should always be easily accessible and not locked away in a cupboard. See Medical management policy re the management of Asthma

DRUGS CONTAINING PARACETAMOL	DRUGS CONTAINING IBUPROFEN	DRUGS CONTAINING CETIRIZINE
<p>Calpol, Anadin extra, Alka Seltzer XS, Disprin Extra, Disprol, Hedex, Medinol, Panadol, Paracodol, Paramol, Solpadeine, Syndol, Feminax, Midrid, Migraleve,</p> <p>Medications for cold relief: Beechams, Benylin, Covonia cold and Flu, Day and night Nurse, Day Nurse, Night Nurse, Lemsip, sinutab, Sudafed, Otrivine Mu-cron, Medinite,</p>	<p>nurofen, calprofen, cuprofen Solpadeine Migraine, solpaflex Ibuprofen (gel, mousse, spray) Nurofen Gel, Radian B (Gel, Lotion, Muscle rub, spray,cream) Lemsip cold and flu sinus 12hr ibuprofen Lemsip max flu 12hr capsules Sudafed dual relief Max</p>	<p>Benadryl Piriteze Zirtek</p>

Appendix 4

Boarder's storage and self administration of medication procedure

Aim:

It is good practice to support and encourage children who are able to take responsibility for managing their own medications from an early age. There may be circumstances where it is not appropriate for the young boarder to self manage their medication. The School Nurse and boarding staff need to assess the ability of each boarder to self manage their medication.

Procedure:

Boarders should hand in any medication, prescribed or OTC, to the boarding staff for safekeeping. However, some boarders may wish to keep their own medication and administer themselves.

They must consult with the School Nurse who will discuss their medication with them. In order for a boarder to be able to self medicate the School Nurse must complete the Self Administration Risk Assessment Tool for the individual boarder.

The following criteria must be assessed:

- Age of boarder (pupils over the age of 16 are able to store their own medication)
- If under the age of 16 is the boarder competent and have the permission of parents to self administer.
- Type of medication being stored (prescribed or OTC)
- No controlled medication may be self administered by any boarder
- The boarder's understanding of their own medication including
 - Name of medication
 - What it is being used for
 - Dose and frequency of administration
 - Any special precautions
 - Safe storage of the medication in a locked cupboard in the boarding room and where no other boarders are able to access it
 - What to do if an overdose occurs or any side effects are suffered.

Once deemed as competent to self administer by the School Nurse, the boarders must sign a declaration form agreeing to take responsibility for their own storage of medication and self administration. A copy of this form will be stored in the Boarders Medical File in the Medical Room and a copy will be kept by the Boarder.

BOARDER’S SELF ADMINISTRATION RISK ASSESSMENT TOOL

Boarder Name:

Date of Birth:

	Yes	No	Action required
1. The boarder has verbalised that he / she wishes to self administer their own prescribed or OTC medication			
2. The boarder can explain what each medication is used for			
3. The boarder can demonstrate a understanding of <ul style="list-style-type: none"> • The dose required • How frequently the medication can be taken • Any side effects • Any special instructions • Expiry date 			
4. The boarder is aware that any side effects caused or overdose must be reported to the school nurse			
5. The boarder understands that he / she must inform the School Nurse and the boarding staff if they replace any medication or bring in any new medication			
6. The boarder agrees that any medication will be stored in a secure, locked cupboard in their boarding room and that they must not leave any medication lying around in their rooms at any given time.			
7. The boarder understands that if they are deemed to not be storing or administering the medication correctly that they will no longer be able to self administer their medication			
8. Boarders agree that if they are under the age of 16 then the school requires parental consent to allow the boarder to self administer their medication.			

Is the boarder suitable for self-administration: Yes/ No

Signature of School Nurse:.....

Date:

SELF ADMINISTRATION AND STORAGE OF MEDICATION

BOARDER NAME:

DATE OF BIRTH:

I, _____ understand that I may store my own medication in a locked cupboard in my room and that I may self administer the medication as discussed with the School Nurse.

List of medication:

Signed:

Print Name:

Date:

A risk assessment has been completed for the above boarder and I agree that he / she is competent to self administer their own medication.

Signed:

Print Name:

Position:

Date: