



WOODCOTE HOUSE SCHOOL

MEDICAL POLICY & FIRST AID PROCEDURES

Members of Staff responsible for this document:

Danielle Delaney – Head of Pastoral care

Chloe Fisher - Head Matron

Woodcote House School is a family-owned Preparatory Boarding and Day school for boys aged 7 – 13 years. It is an educational establishment and a place of work. This Medical Policy is designed to comply with the best practice and meet the legal requirements of the School. We aim to take the best possible medical and pastoral care of our boys, efficiently and sympathetically. The staff are “in loco parentis” with regard to the pastoral care of the boys, who will receive medication in event of illness or injury at the discretion of the Head Matron and her team of Matrons.

First Aid and Medical Matters are the responsibility of the Head Matron, as is the storage and disposal of all medicines and medical equipment. The Headmaster and/or the Head of Pastoral Care are also kept informed of any illness and assist in any injuries, should the need arise.

The Matrons are ultimately responsible for the boys’ health and parents are always kept informed of any issues that may arise. There will always be a minimum of two Matrons available at one time to look after boys who are unwell and the Head Matron is always contactable in the event of an accident or emergency. The Head Matron will decide if a boy is unfit to play games and this is written on the “Day List” which is read out in Assembly each morning.

The heights and weights of each boy are measured every term. If a boy is injured, he is taken to A&E at St. Peter’s Hospital, Chertsey, or Frimley Park Hospital, Frimley, or if less serious, Magnolia House Surgery in Sunningdale.

First Aid Kits around the School are checked at least each term and can be found in the following locations:

1. Medicine Room x 3
2. Science Laboratory
3. The London School Bus
4. Yellow Landrover
5. School Minibuses (one in each)
6. Kitchen

Staff First Aid Training is carried out by an External Agency, every 3 years (most recently on 05.01.18)

In the absence of the Head Matron, the Assistant Matrons in the Medicine Room, or any other suitably qualified member of Staff available, will administer First Aid. Any First Aid administered by other Staff around the School, on outings or away Sports events, should convey treatment given to the Head Matron on their return. They may need to be documented.

First Aid on a daily school basis is administered from the Medicine Room but there is a Mobile First Aid bag that can be taken to an incident, if the child cannot be brought to the Medicine Room. The Head Matron is on duty to cover all matches (Wednesday and Saturday afternoons) and all afternoon games sessions (Monday-Friday)

All First Aid or any treatment must be logged onto the management system. The Head Matron also records this information in the boys' Personal Medical Records on the management system.

Serious injuries or Incidents that require Hospital treatment are recorded in the Pupil Accident book and kept in the First Aid cupboard in the Medicine Room.

Parents are informed of minor incidents by the Matronal Staff, who in turn inform the Games Staff and Master on Duty. The Headmaster and/or The Head of Pastoral Care are also kept informed.

Accidents or incidents relating to Staff are recorded in the Accident Book, which is kept with the Bursar, in the Bursar's Study.

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), place a legal duty to report work-related deaths, major injuries or over three day injuries, work-related diseases and dangerous occurrences. This is done by calling the Incident Contact Centre (ICC) on 0845 300 9923 (Mon-Fri 0830-1700).

PERSONNEL & PROCEDURE

We employ a **HEAD MATRON**, Chloe Fisher, who has completed the following courses: SJA First Aid at Work (February 2016), BSA Essential for Matrons course (October 2015). She is in charge of a team of three other matrons and is ultimately responsible for the provision of healthcare to all boys and visiting pupils.

Second in line is Georgina Eyre who is First Aid qualified and attended a one day SJA Paediatric First Aid at Work course in September 2016 and a BSA Essentials for Matrons course in October 2016.

We have two other Matrons, Victoria Blaney-Brown and Ruby Lange who are Gap Year assistants and who have both completed the Emergency First Aid trained three-hour course held as a Staff Inset in January 2018 and have completed the BSA course Induction Training for Gap Assistants in January 2018 also.

The **SCHOOL DOCTOR** is Dr. Kate Dyerson, a GP based at Magnolia House Surgery in Sunningdale. She has a surgery at the school on Monday and Thursday mornings. All full boarders are registered with the School Doctor. If a boy has seen the doctor, his parents are informed as soon as possible by telephone and the Headmaster and Danielle Delaney are informed. The Head Matron also has her mobile number for emergencies.

The **SCHOOL COUNSELLOR** is Janet Weeks, a counsellor based in Maidenhead. She visits the school every Tuesday between 10am – 12pm. A child can have a meeting with Janet Weeks for a maximum of 15 minutes per week unless otherwise discussed. Initial request for help are received from parents or teaching staff and or tutors. Appointments made to see Janet should always be made through either Chloe Fisher, Danielle Delaney or Marianne Rees. All meetings between Janet Weeks and any child are completely confidential.

WEEKLY STAFF MEETING

The staff meeting occurs every Tuesday morning at 7.30am with all teaching staff and the Head Matron attending. At the staff meeting there is an allotted time given to speak about any child regarding any issues that have arisen. The Head matron attends the meeting and is responsible for divulging this information to the assistant matrons.

DENTIST – Taking boys for routine dental appointment is not the responsibility of Woodcote House School staff and parents are encouraged to arrange these during the school holidays or Exeat weekends where possible. When a boy needs to see a dentist urgently we will take him to the Penny Hill Dental Surgery, Bagshot and his parents will be informed.

OPTICIAN – As with dental appointment, parents are encouraged to arranged these in the Exeat Weekends or holidays but in emergency we use Simon Pestell Opticians in Lightwater. All boys must have an annual eye test and results of this given to the Head Matron for school records.

HEALTH ASSESSMENTS

All boys, who are full boarders, are weighed and measured in their first term at Woodcote and termly thereafter. Any problems are referred to the appropriate practitioner in consultation with the parent. All screening information is recorded in the Pupil's Health File. The School Doctor is not involved with day boys except in emergencies and for consultation regarding school health issues.

A separate health questionnaire is given to new members of staff prior to commencements of employment.

PARENTAL CONSENT FOR MEDICAL CARE

Parents are required to complete a Health Questionnaire giving full details of vaccinations, medical and health issues of their child. (See New Boys Health Questionnaire)

In the School's terms and conditions, signed by the parents before their child enters the School, consent is given for Staff to administer any medication to the boys at the School. This consent authorises emergency first aid, medical or dental treatment when required and in their absences.

Any particular medical concerns will involve a discussion between the parents and the Head Matron, along with the Head of Pastoral Care. Any special arrangements for the care of that child, or any staff training for any particular chronic condition will be arranged (e.g. the use of an Epipen). Information must be provided before commencing at the school to ensure the Head Matron has registered the child with Magnolia House Surgery in good time before they start at the school. This is also paramount for overseas boys whose details must be translated into English and signed by their current doctor.

SICK WING

Boys who are unwell are cared for in the Sick Wing, currently situated near the vicinity of the Medicine Room. Boys who are feeling ill or who may be infectious must be admitted to the Sick Wing. There is a bathroom next door for their use.

Cross infection is to be avoided; hence no other boys may visit those in Sick Wing, should an infectious disease be suspected. The Head Matron will always be available on site when Sick Wing is occupied. Fresh water, vomit bowls and tissues are

provided to all boys in Sick Wing. Boys may watch TV but are encouraged to sleep as much as possible.

Boys with a temperature of over 38 degrees centigrade are to be admitted to Sick Wing and given an age appropriate dose of Paracetamol or Ibuprofen which will reduce the body temperature as well as relieving aches and symptoms of fever. The temperature should then be checked every 4 hours. After an 8 hour period of normal temperature, the boy may be discharged from Sick Wing if he is feeling well.

In case of vomiting, 12 hours must elapse since the last vomit before the boy may get up and mix with other boys. In severe viral vomiting, 48 hours should elapse. In the case of Day Boys, 48 hours must pass since the last vomiting or diarrhoea before returning to school.

Food may only be offered to boys in Sick Wing when the Matrons consider it appropriate. Dairy foods are not advisable after a stomach upset. Water and dry toast are usually offered at the 3-4 hour stage. If this is tolerated with no further vomiting after 2 hours, a light meal may be taken.

If more beds are required for sick boys, Wing Dormitory may be converted into a second Sick Wing. Occasionally boys need to rest in their own beds in dormitories.

When discharged from Sick Wing, boys may be “off games” the following day, on the advice of the Head Matron. Parents are given the opportunity to take their child home if the illness becomes protracted. It is recognised however that distance and busy schedules may limit this option. Parents must always be reassured that we are more than happy to care for their sick boy.

If numbers of sick boys increases and the disease is becoming a school epidemic, boys are to be sent home where possible, to limit the spread of infection. All bedding from Sick Wing is washed on a high heat of 60 degrees or more if deemed necessary.

HYGIENE PROCEDURES RELATING TO SICKNESS AND SPILLAGES OF BODILY FLUIDS

Staff must wear disposable gloves when coming into contact with bodily fluids, handling vomit bowls or soiled bed linen and towels. Gloves must be worn to mop body fluids, which are disposed of immediately after use. Area affected sanitised and disinfected with Dettol and bedding washed at a high temperature as detailed above. In severe cases, bedding and other soiled items will be disposed of.

ADMINISTRATION OF MEDICINES

All medication must be licensed for Paediatric use.

Consent - Written consent for the administration of all medicines, creams and first aid treatment is obtained from parents when the boy joins the School. Parents also sign a consent form when they bring medication in from home. Non-prescription medicines may then be given to boarders and day boys where deemed appropriate by the Matrons (or staff members on special occasions such as leavers' trips or out of school activities).

Self-Medication - The Head Matron will use her discretion when to allow a boy to self medicate, e.g. allowing an asthmatic boy to carry his own Inhaler, under "Gillick Competency". A boy may be encouraged towards independence with his own medication, for instance a boy with diabetes, but all his medication will be administered by the Head Matron or by the boy himself under their supervision.

Prescribed Medication - All Matrons may administer prescribed medication. If this has been prescribed by the School Doctor, parents will be informed prior to administration, where possible. Prescribed medication must only be given to the boy for whom it has been prescribed. Prescribed medication must be kept in its original container and the label must not be altered. If a boy shows an adverse reaction to any medication, it will be noted on the management system and the Head Matron will take appropriate action.

All medicines brought into school by a parent are noted in the Medicine Administration Record File, stating the dose and frequency required. The Head Matron is responsible for ensuring that a child on a trip or going home, takes his medication with him.

Administering Medication for boys from abroad – As a result of new legislation from the GMC (General Medical Council), with which we must comply, we can only administer medication that has been prescribed in the UK. However for those boys on medication who are living abroad, we need to ensure continuity of medication whilst a boy is moving to and from home and school. Therefore, we need a letter from his family doctor with details of the medication that has been prescribed. This must be in English. We will administer this medication but at the earliest opportunity the Head Matron will take the boy to our School Doctor and will ask her to prescribe the same medication, having read the prescription and letter from the family doctor.

All medication brought into school must be sent in the original container with the original label. If a boy from abroad requires any kind of medical treatment or their family doctor makes a change to the dosage or medication, parents must inform the Head Matron who will take him to be seen by our School Doctor for the medicines to be prescribed and dispensed for the boy to take whilst he is at Woodcote House School. Once again, we will require a letter or prescription from the family doctor in English with the details of the new medication or dosage.

HOMELY REMEDIES (over the counter medications)

Safe Administration of Medicines - All Matrons must have an assessment of their competence in the administration of medicines to children at the commencement of their employment. This will be carried out by the Head Matron after some elementary training has been provided and recorded.

All staff responsible for giving medicines must read the instructions on the label regarding usage, correct dose, frequency, instructions, drug interactions, side effects and contraindications.

It is not necessary to check the medication with another member of staff but the child must be told the name of the medication he is about to receive. Parents are not usually informed of homely remedies administered to their child.

A list of boys' allergies is on the management system and the matrons should check this carefully before administering any medication.

The management system must be checked to establish any previous doses that day. Expiry dates must be checked and nothing used if past this date. Pills or medicines must not be decanted from one container to another. Medicines must not be mixed, even if apparently the same type or dose. Eye drops, eye ointments, nasal sprays etc. must not be used for more than one person to maintain good hygiene and avoid cross infection, unless specific cross-infection precautions have been taken.

All containers must be labeled with the original unaltered label. Treatments prescribed for individuals are not to be used for others or kept as stock. All labels must be applied to the inner container, e.g. the ointment and not the box.

Medication must not be handled where possible, but given directly into the patient from the dispensing foil or bottle. Any tablet that is dropped must be discarded.

Constituents of each medication must be checked to avoid overdoses e.g. giving Lemsip (contains Paracetamol) and giving Paracetamol together would result in an overdose for the child. The School Nurse keeps an inventory of the drugs kept in the School.

Safe Storage of Medicines - Ensuring safe storage of medicines is the overall responsibility of the Head Matron. All medicines are kept in a locked cupboard with the exception of creams and ointments, which are available for frequent use. Asthma inhalers and Epipens are also accessible for urgent requirement. A lockable refrigerator is available for the storage of certain medicines. Any medication brought on site by a member of staff must be carefully stored and administered to avoid access by the boys. Alternatively, it should be given to the Head Matron and stored appropriately.

Defibrillator Policy

A specific defibrillator Policy has been created and is stored along with the other specific policies in the medical file which is situated in the Medicine Room

Specific Medication

Analgesia (treatment of pain, swelling and temperatures)

An ice pack will be applied to the affected area as soon as possible following an accident. Sprains and swellings should be treated with ice. Ibuprofen will be necessary for the first 24 hours as an anti-inflammatory. In moderate to severe pain, Paracetamol will be given alongside Ibuprofen. Analgesia will help relieve the chills and aches of a cold as well as bringing down a high temperature. Ibuprofen medicine, whether tablets or capsules, should not be taken on an empty stomach. Frequent doses of Paracetamol and Ibuprofen must be avoided.

Cough Medicines

If the cough is “dry” (tickly), a soothing linctus e.g.: Honey and Lemon will give relief. If the cough is “chesty” (it could be productive or non-productive) an expectorant will be given (e.g. Chesty Cough Relief). An irritating night cough can be relieved with “Drowsy” cough medicines but these should be avoided during the daytime.

Sore Throats

Throat lozenges are given for symptomatic relief of sore throats.

Anti-Histamines/Travel Pills

Will be given as required. Cetrizine 10mg is given as a maximum daily dosage for hay fever symptom prevention and for treatment of allergic reactions, rashes etc.

Sleeping Tablets

Sleeping tablets will only be administered if prescribed by our School Doctor.

Elastoplast

Plasters will be used with cuts but use of plasters must also be recorded in case of allergic reactions. Softer dressings are also used such as Mepore.

Sun Protection

The School provides a high factor sunscreen and these are included in First Aid Kits in the summer term, or as necessary. Children are encouraged to wear hats and drink water when it is hot and sunny.

Steroids

Steroid cream (Hydrocortisone 1%) must be applied very thinly as it can cause friable skin. It must not be applied unless on prescription or direction of the School Nurse.

HEAD LICE AND REMEDIES

The School policy is to use the dry comb method of detection, which proves to be the most effective. The best way to prevent head lice spreading is to regularly check heads and treat them as soon as LIVE lice are found. ALL boys will have their hair checked weekly, by the Matrons, using the dry comb method, known as “Bug Busting”. Any boy found to have infestation will be treated with HEDRIN and a repeated application in 7 days. At Exeats/end of terms, parents will be informed if their child has head lice and the treatment used and treatment needed at home.

Day Boy Head Lice Policy – the Head Matron will check a boy’s head if requested. No medication is given but parents are informed if a case is found.

CONTROLLED DRUGS

Controlled drugs are kept in a locked cabinet within the locked cupboard. This inner cupboard is for the sole use of controlled drugs and only those with authorised access will have access to the key. They are counted every time medication is administered and a weekly count is made the Head Matron, witnessed by another Matron. Each boy has his own book for the recording of his controlled drugs. There is a Risk Assessment for Controlled Drugs.

DISPOSAL OF MEDICINES AND SHARPS

Needles are disposed of in a designated Sharps container, which the Head Matron takes to the Health Centre for disposal. Unused medicines are returned to the Chemist or Doctor for disposal.

ERRORS IN ADMINISTRATION OF MEDICINES

In the case of an error made by staff during administration of medication, which could potentially cause harm, a report will be completed and filed in the boy’s health records and the parent will be informed. The School Doctor will also be informed.

CHRONIC CONDITIONS

The Head Matron liaises with parents as to specific care requirements and medication for any boy suffering from a chronic condition (i.e. Asthma, Diabetes, Epilepsy,

Anaphylaxis, Cystic Fibrosis). The Head Matron trains the Matrons to a greater degree and the other staff to a satisfactory level on any chronic condition that is present in any boy in the School and any action that would be necessary to take in the event of an attack. Training is given in the use of Epipens, Inhalers and Insulin injections. Any boy presenting symptoms of a chronic condition would be taken to a doctor in consultation with parents.

Asthma is a chronic condition involving the respiratory system, in which the airway occasionally constricts and becomes inflamed. A condition that is most common in children. If treatment is not given in the early stages, then it could lead to respiratory failure.

Signs and Symptoms of a severe asthma attack:

Normal relief from medication does not work

Boy is breathless and having difficulty in speaking full sentences

Pulse rate is 120 per minute or more

Rapid breathing over 30 breaths per minute

What to do if a boy becomes breathless, wheezy or coughing continually:

Keep Calm

Let the pupil sit in the position he find most comfortable.

DO NOT make the boy lie down.

Assist the boy to take puffs of his blue inhaler (Ventolin/Salbutamol) 10 times.

IF A CHILD HAS AN ASTHMA ATTACK VENTOLIN IS TO BE GIVEN USING A SPACER.

Get assistance from the Head Matron or send someone to the Medicine Room for help.

Dial 999.

If the symptoms disappear/improve, no further action is necessary but the boy will be checked back in the Medicine Room. If this attack occurs during a sports activity they will stop, taking no further part. If there is no improvement after 5-10 minutes after they have used the inhaler, it can be repeated but if there is still no effect, an ambulance will be called for immediately.

Diabetes is a disorder caused by the insufficient or absent production of the hormone insulin by the pancreas. Insulin is responsible for the absorption of glucose into the cells. A diabetic will carry his/her own Blood Monitor A normal reading is between 4-7. A diabetic may suffer from HYPOGLYCAEMIA, which is when the reading has fallen below 4. HYPERGLYCAEMIA is when the reading has risen above 7.

Signs and symptoms of HYPOGLYCAEMIA:

(low blood sugar due to too much insulin)

Hunger

Sweating

Trembling/Shakiness

Drowsiness

Irritability

Rapid pulse

What to do:

Keep Calm

Check the boy's blood sugar with his Blood Monitor

Give the boy his glucose tablets or GlucoGel, which comes in a tube, if he is unable to take tablets

Retest after 10 minutes if he is still low or feeling unwell

Accompany to the Medicine Room

If he is unconscious put him onto the recovery position and seek help immediately

DO NOT LEAVE A CHILD UNATTENDED.

Signs and Symptoms of HYPERGLYCAEMIA

(high blood sugar due to lack of insulin)

Vomiting

Nausea

Deep rapid breathing

Blurred vision

Breath smells of acetone (nail polish remover)

Seek advice from School Doctor and/or call 111

What to Do:

Keep calm

Contact the Head Matron for advice

Accompany the boy to the Medicine Room for monitoring

CYSTIC FIBROSIS

CF is a most common serious pulmonary and gastric disease in children. It is a multi system disorder affecting the endocrine glands (mucus producing). It appears in varying degrees of severity. CF is characterized by a tendency to develop chronic lung infections and an inability to absorb fats and other nutrients from food.

Sign and symptoms

Wheezy respirations

Dry non-productive cough

Increased viscosity of mucus

What to do:

Give vitamins and enzyme replacements orally before eating anything

Physiotherapy daily to loosen and drain mucus from the lungs

If an infection develops, the boy will need to be seen by the School Doctor and parents informed ASAP

ANAPHYLAXIS

Anaphylactic Shock is a life threatening allergic reaction that occurs in people with extreme sensitivity to a particular substance (allergen) often a food e.g. nuts or insect e.g. wasp sting

Signs and symptoms are:

- Urticaria (nettle rash) over the body
- Difficulty in swallowing, speaking or breathing
- Swelling of lips, mouth, throat
- Asthma like symptoms
- Rapid pulse
- Nausea/vomiting
- Sense of impending doom/panic
- Collapse or even unconsciousness.

What to Do:

- Keep calm and assess the situation
- If the boy/staff feels faint or weak, lie them down and elevate the legs
- If signs of vomiting, lie them in the recovery position
- If having difficulty breathing, they will feel comfortable propped up in the sitting position
- If symptoms potentially life threatening, help administer their own EPIPEN if carried (and note the time given)
- Seek Medical attention immediately
- DO NOT LEAVE THEM UNATTENDED**
- If Epipen has been administered, boy must go to A&E

Storage of EPIPENS

When we have a boy for whom Epipens are prescribed for nut allergies, the Epipens are kept in the Dining Hall. Epipens are also kept in the Medicine Room. Whenever the boy leaves the school, they **MUST** have their Epipens with them. A boy is permitted to carry his own Epipen.

TRIPS OUT OF SCHOOL

Woodcote House School staff in charge of outings are accountable for all boys taken out of School and must ensure that the Risk Assessment has been adequate and that they liaise with the Head Matron to ensure that all medical needs are have been considered and that appropriate First Aid Kit is taken.

The Head Matron will inform relevant staff of any significant medical information and will provide First aid Kits for all school trips.

It is the responsibility of the member of staff taking the trip to ensure they take a First Aid kit with them and that it is carried with the group onto the Sports pitch or to the area of the visit.

CHILDREN VISITING FROM OTHER SCHOOLS

Woodcote House School has a duty of care to all visiting children. First Aid cover is provided at every home fixture or social function for all children on the premises. All details of treatment given to visiting pupils are recorded in the Day Book and communicated to the staff the schools concerned. Medication is only administered to visiting pupils after authorisation from the parent or the member of staff from the visiting school. If an accident form is necessary, it will be completed and a copy will be given to the accompanying member of staff.

FIRST AID COVER FOR MATCHES

Cover is provided at all home Cricket, Rugby and Football matches. The Head Matron or the other matrons will be at the touchline for all Rugby and Football matches. Cricket matches will be covered by at least two of the Matrons. When a player is injured the First Aider will decide whether they are fit to continue and must inform the referee of the reason to keep the injured child out of play.

With visiting teams, the First Aider must take responsibility for the child's welfare and advise the staff accordingly. However, the coach from the visiting school is ultimately responsible for the child's welfare. If he deems the boy is fit to continue play, against our advice, he is responsible for the occurrence of any medical problem, which may ensue. With any head injury the child should stop play immediately.

PROCEDURE IN THE EVENT OF AN ACCIDENT

IN ANY LIFE THREATENING SITUATION AN AMBULANCE SHOULD BE CALLED AT THE EARLIEST OPPORTUNITY WITHOUT WAITING FOR THE FIRST AIDER TO ARRIVE

- A boy must find an adult quickly to inform him/her what has happened and where.
- The adult must assess the extent of the injury.

- If the casualty cannot be moved, send a boy or another adult to summon a Matron. Stay with the casualty.
- If the casualty can be moved, he should be sent to the Matron accompanied:
If serious, by the member of staff in charge
If slight, by a boy
- An accident report form must be completed. See Accident Reporting below.

MEDICAL ALERTS

The Head Matron will inform all staff of any boys with ongoing medical conditions or those that need daily treatment at the beginning of each term during the Staff Meeting. A list of the boys with specific medical conditions is kept in the Medicine Room and the Staff Room. This is updated every term or more often if necessary and any developments in their condition are discussed at the Staff Meeting, which is held every Tuesday morning.

MEDICAL TREATMENT RECEIVED DURING THE HOLIDAYS

Parents are asked to inform the Head Matron at the start of term or the end of an Exeat if their son has received any significant medical treatment or any immunisations whilst at home. Day Boy parents must inform the class teacher.

PROVISION FOR SPECIAL DIETARY REQUIREMENTS

The school makes provision for special dietary requirements, whether for medical reasons or for religious reasons.

PROVISION FOR DISABILITIES

The school will endeavor to implement plans to meet the needs of a boy with disabilities.

April 2018