



Medical Care & First Aid Policy

Applies to	All students in college and boarding premises
Author(s)	Terri Al-Rabee
Approved by	I certify I have reviewed this policy and verify that to the best of my knowledge it reflects current legislation and is in accordance with the wishes of the Principal and Governors. Paul Ludlow (Principal Head of Boarding and Welfare)
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Rationale

The Medical Care & First Aid Policy aims to ensure that every student, member of staff and visitor to the Colleges and/or the boarding facilities, receives appropriate first aid (and if a student, Medical Care) in the event of illness or an accident.

First aid within college is administered by qualified first-aiders or the Nurse. In the event of an accident all members of the college community should be aware of the support available and the procedures available to activate this.

All House Parents working within the boarding houses, who act ‘in loco parentis’, are trained in first aid and the college’s medical procedures.

All College staff should have at least a simple knowledge of basic first aid, so that they are able to recognize a situation where medical advice and expert attention are required. All staff are expected to act in a way that a responsible parent might when an accident occurs, but this does not require them to have any special medical knowledge or training, any more than would be expected of a reasonable parent. However, the nurse will provide some basic training for dealing with simple health care needs. All staff also have access to on-line basic first aid training via the college web based training package supplied by EduCare.

Students may need medical care during their stay at College. This policy ensures that there are clear guidelines and boundaries in the following areas:

- Medical Care offered by the Colleges
- Confidentiality

- Documentation
- Working with parents
- Procedures for Students reporting sickness
- Administration of/ Record Keeping of Medicines/Disposal of Medicines
- Health Care Plans

Aim

To work in partnership with parents/guardians/agents, students and fellow professionals to ensure that students who require medical treatment are able to undertake treatment in a safe and secure environment, which allows the student to continue to make progress with their education.

This policy contains the following appendices:

- Health plan template
- Homely Guidance and contra-indications
- Good Hygiene Advice
- Helpful organisation contacts
- Medical Emergency Flow Chart

Confidentiality

In accordance with the Nurse's professional obligations, medical information about our students, regardless of their age, will remain confidential, unless there is a safeguarding concern, in which case the Nurse would follow the college safeguarding policy.

In providing medical care for a student, it is recognised that on occasions the Nurse may liaise with senior staff (in particular the Principal Head of Boarding and Welfare), other staff and parents/guardians/agents, and that information, ideally with the student's prior consent, will be passed on as necessary. With all medical and nursing matters, the nurse will respect a student's confidence except on the very rare occasions when, having failed to persuade that student, or his or her authorised representative, to give consent to divulgence, the nurse considers that it is in the student's better interests or necessary for the protection of the wider College community, to breach confidence and pass information to a relevant person or body.

Documentation

Each contact and communication with a student/or member of staff regarding a student will be documented on SIMS by the Nurse, House Parents and College staff email any medical issues to the Nurse to be added to SIMS by the Nurse. The student's medical file and any other relevant medical documentation will be kept in a locked filing cabinet in the Medical Room in the boarding house. Access to these records is available to the Nurse and named members of staff only. All former student files are kept until at least the 25th birthday of the student concerned.

When students join the College they complete a College medical questionnaire including significant past and current medical problems, any on-going treatment, allergies and the dates and details of all immunisations, if known. This information is also included in the NHS surgery medical questionnaire.

Working with Parents

The College and parents/guardians/agents should work together to ensure that all relevant information with regard to a medical condition which may affect a student, is passed on to all concerned. Information will only be requested from parents when it is necessary to ensure the health and safety of the individual student and/or his/her peers at College. The confidentiality of a student's medical records will be respected.

Parents/agents/guardians should provide the College with adequate information about the student's medical condition, treatment, or any special care needed at College. They should, in partnership with the Nurse/Pastoral Team, reach an agreement on the College's role in helping to address the student's medical needs.

The cultural and religious views of families will always be respected. Parents/agents/guardians will be asked for the following information about medication:

- name of medicine
- dose
- method of administration
- time and frequency of administration
- other treatment which may involve College staff or affect the student's performance during the college day
- side effects which may have a bearing on the student's behaviour or performance at College

Parents should advise the College of any changes in the medication administered to their son/daughter at the earliest opportunity.

The College Medical Service

The College uses a local GP surgery and a private doctor for its medical needs along with the College nurse. Students studying with the College are registered with the College GP when they arrive.

The college supports students with medical conditions. Those who come into contact with the student will be apprised of the nature of the condition, and any actions with regard to medical care, when appropriate. The student's parents/guardians/agents and health professionals will be asked to provide support and information. All staff members, who have contact with the student, will be informed of the possibility of an emergency arising and the action to take if one occurs. If in doubt about any of the procedures, the member of staff should check with the Nurse/Pastoral Team who may in turn contact the parents or a health care professional before deciding on a course of action.

Procedures for Students to Report sickness in Accommodation time

The College Nurse is based within the boarding department and available to staff via a dedicated mobile phone number. Each morning the Nurse will hold a surgery in Princess Beatrice House for boarding students. Students are asked to report to the nurse when they are sick, unless the nurse is off duty in which case they should report to a House Parent. The Nurse also holds surgery within the second boarding house, Fulham Palace Studios. All House Parents are trained First Aiders. In order for any student absences to be authorised, boarding students are asked to report sickness by 08.00.

Procedures for Students to Report in Sick in College time

If students feel unwell during the College day they must report to the College reception who will contact the Nurse or a First Aider. If the Nurse authorises it, residential students may be allowed to return to the accommodation to be supervised/monitored by the Nurse/Medical Assistant or House Parent.

Sick compulsory school age (CSA) students will need to be escorted to the accommodation by college staff/House Parent/ Nurse depending who is available. The College reception staff would need to lead on identifying the staff member. If deemed suitable, a taxi could be used by college to transport a student to the accommodation who will then be met and supervised by a House Parent.

General Procedures for Students Reporting Unwell

The Nurse/First Aider will assess the student's medical condition and arrange appropriate medical care for the student. In the Medical Room, the student will be assessed and either:

- return to class – if considered well enough.
- stay in the accommodation – teaching and house staff will be informed.
- GP appointment – arranged by the Nurse/House Parent.
- private doctor appointment – this will be booked by the Nurse. As costs may be incurred, written consent must be received from the parent / guardian or agent before booking.

The College reserves the right to insist that students attend an NHS Doctor to enable proof of sickness if their condition is such that they may be absent for longer than three days. Any other alternatives provided by a student may not be accepted when not reinforced with a valid NHS Doctor's certificate. Therefore ALL students should ensure they are registered with an NHS Doctor or are able to pay privately.

Medicines in the Medical Room

Medicines in the Medical room are kept within a secure, locked cupboard and a locked refrigerator is available. The Nurse keeps a list of non-prescription medication that is stocked in the Medical room and records details of administration - date, name and dosage.

Administration of Medicine

It is important that students who need to take medication at College are involved as closely as possible in the arrangements made for them. When making arrangements for medical care at College the following is taken into consideration:

- Independent management of needs
- Staff administration of medication

Staff will assist students with their medical needs after consultation with the Nurse and the Head of Boarding, if a boarding student. The Nurse/Head of Boarding will agree the administration of medication and undertake a risk assessment as to whether a student is competent to self-medicate after adequate consultation with parents/guardian/agent and student. The Principal Head of Boarding and Welfare will supervise these arrangements.

No staff member should enter into individual agreements with parent/guardian or student.

For most, this will be for a short period on antibiotics or applying a lotion. In some cases, there may be a long term need for students to take medication. Students will be allowed to take medication during College hours as well as in the evenings and at night in order to minimize the disruption which could be caused by illness and allows their education to proceed at a steady rate alongside their peers.

Information about an individual student's medical condition and related needs will only be disseminated to those staff required in order to ensure the student's wellbeing. Information can only be passed on with the consent of parents.

Details will be completed in the College medical files for each student receiving medication.

Controlled Medications

A risk assessment and health plan will be implemented for students who receive 'controlled' medications. This plan will include the following information:

- Name of medication/s
- Details of dosage and times for administration
- Side effects of medication/s
- Staff involved in administration or supervision of medication
- Safe storage/control of control medications

There are strict regulations regarding the management of controlled medications and the following procedures will be put in place.

- Staff handling controlled medication will be trained and managed by the Nurse in the safe handling and management of this medication
- At all times two staff will administer controlled medications
- Controlled medications administration will be recorded in a bound meds book under the supervision of the Nurse
- Medication will be kept in a locked medication locker which is accessed by authorised staff only.

Health Plans

The health plan of medication administration will be reviewed with the student and Nurse, at set intervals, to ensure the student's medical needs are being met. Any changes to the plan will be updated in the student medical files and on SIMS and the appropriate staff informed by the Nurse/Head of Boarding, if a boarding student.

Medication Storage

Advice on the storage of medicines will be sought from a qualified pharmacist when required. A secure location will be available in the accommodation/college as well as refrigeration when required. Medicines may be potentially harmful to anyone for whom they are not prescribed. The College acknowledges that it has a duty to ensure that risks to the health of others are properly controlled.

When a medicine requires refrigeration it can be kept in the refrigerator in the Medical Room. To avoid confusion medicines should be kept in a container that is clearly labelled with the student's name, date of birth and name of the medicine. Members of staff who use the refrigerator must be made aware of the importance of keeping the medicine safe and secure.

Epipens/Inhalers

Students will carry their own inhalers/ Epipens with them. However, a spare inhaler/Epipen should be kept in case of emergency in both the College/under 18 boarding house reception, in a secure but assessable location. Spare inhalers/Epipens will be clearly labelled with the student's name and must not be used for any other student. All Colleges and Boarding Houses also keep a generic auto-injector which can be used with the guidance of an Emergency Health Professional.

Emergency Medical Procedures

The Nurse and the Head of Boarding will ensure that all staff know how to call the Emergency Services. Names of staff qualified to administer First Aid will be posted in all departments of the College.

In an emergency, students should have prompt access to their medicine. This should be done in consultation with the duty member of staff, if out of College hours, or the Nurse/Head of Boarding. The emergency will be recorded and emailed to the Nurse and Principal Head of Boarding and Welfare. The Nurse will action as appropriate.

All staff should be familiar with the normal procedures for avoiding infection and will follow the basic hygiene procedures detailed in the Infection Control Guidelines issued in January 1997.

If there is a medical emergency or emergency accident the member of staff should contact reception and phone 999 immediately, giving as much detail as possible.

A student who is 18 years of age or under and is taken to hospital by ambulance will be accompanied by a member of staff who will act in loco parentis.

If a student is taken to hospital during College hours:

- Immediately inform the Nurse/Head of Boarding (if boarding student)/Principal Head of Boarding and Welfare/Vice Principal/Principal
- The College will then undertake to inform the parents/guardian/agent and keep the parents/guardian/agent updated.
- Each student will have a "Grab sheet" which will be kept in College/ Boarding House, in a locked filing cabinet. This will contain essential information which may be used to communicate with the Emergency Medical Services in the event of an emergency (in accordance with The Data Protection Act 1998).

If a student is taken to hospital during accommodation hours (Monday – Friday 1730-0830/ all day Saturday and Sunday) then staff should call and inform the senior manager on call before parents/agents are contacted.

When a boarding student is taken to hospital by a member of staff, they should also take with them all medication the student is currently taking. **The College will call the emergency services if required and inform the parents. STAFF MUST NOT COMPEL A STUDENT TO TAKE MEDICATION**

Medication should be taken to College only when it is needed. Often medication can be prescribed in dose frequencies, which enable it to be taken outside College hours.

Non-prescribed Medicines

Students may ask staff for pain killers (analgesics) in boarding (Paracetamol). All OTC (over the counter) homely medications must be recorded in the medications' book which will be kept with the homely remedies.

Before giving non-prescribed medication to any student, members of staff must ask if the student has taken a previous dose or any other medications, whether the student is allergic to any drug, or whether the medication may react with another medication being taken. For students who are under 18, the College will send a College-Parent Agreement Form to the parents which should be signed and returned or apply the Gillick law and assess if the student is competent to decide to take the medication.

No student under 18 should be given medication without his/her parent's written consent or the consent of the Nurse. Written parental permission is obtained in advance for the administration of first aid and appropriate non-prescription medication to boarders, and to seek medical, dental or optical treatment when required. This requirement is without prejudice to the right of a 'Gillick-competent' boarder to give or withhold consent to medical treatment or to seek medical advice or treatment in confidence.

Prescribed Medicines

Any member of staff giving prescribed medicines to a student should observe the following procedure in cooperation with a colleague:

- confirm the student's name agrees with that on the medication
- check the written instructions provided by the parents or doctor
- confirm the prescribed dose
- check the expiry date
- complete records and copy the Nurse

Boarding staff record medication given in the medication book, which is checked weekly by the Nurse. The Nurse ensures this information is recorded on SIMS and on student medical file.

Disposal of Medicines

Any medicines requiring disposal need to be disposed of at the local pharmacy. All medicine disposals need to be recorded in the disposal of medication log book kept by the Nurse. The log needs to state the following:

- Date
- Name of medicine
- Amount of medicine being disposed of
- Name of chemist where medicine has been disposed
- Signature of Disposer

Sharps boxes should always be used for the disposal of needles. Sharps boxes can be obtained through the contracted hygiene services of the College and need to be disposed of through this service. Empty medication bottles and packets may be disposed of at the local pharmacy.

Health Care Plan

The main purpose of an individual health care plan for a student with medical needs is to identify the level of support that is needed. Not all students who have medical needs will require an individual plan. An individual health care plan clarifies for staff, parents and the student the help that can be provided. It is important for staff to be guided by the health care professional involved. The Nurse and Head of Boarding should agree with

parents or the student how often they should jointly review the health care plan. Staff should judge each student's needs individually as young people vary in their ability to cope with poor health or a particular medical condition. Developing a health care plan should not be onerous, although each plan will contain different levels of detail according to the need of the individual student. A detailed risk assessment will always be completed as part of the care plan.

In addition to input from the school health service, the students' GP or other health care professionals (depending on the level of support the student needs), those who may need to contribute to a health care plan include:

- The Principal/Vice-Principal/ Nurse/ Principal Head of Boarding and Welfare/Head of Boarding
- The Parent/Carer/Guardian/Agent/Student (if appropriate)
- House Parents/ Tutor
- Staff who are trained to administer medicines
- Staff who are trained in emergency procedures

Appendix 1

First Aid Guidance

Rationale

The College is keen to promote best practice in all areas of health and safety. We regard this as a priority since we aim to put the welfare of our students and staff at the centre of all we do; the safety of parents, visitors, contractors and others with whom we deal is also of great importance to us.

Every employee, whether involved in teaching, administration, maintenance or another role, can play his or her part in bringing this about. Please read carefully the whole of this Policy, which outlines the College's responsibility to provide adequate and appropriate first aid to students, staff, parents and visitors and the procedures in place to meet that responsibility. The policy will be reviewed annually.

Aim

- to ensure that first aid provision is available at all times while students and staff are on College premises, and also off the College premises whilst on College visits;
- to ensure that the first aid arrangements are based on a risk assessment of the College.

Objectives

- to appoint the appropriate number of suitably trained people as Appointed Person/s and First Aiders to meet the needs of the College;
- to provide relevant training and ensure monitoring of the training needs;
- to provide sufficient and appropriate resources and facilities;
- to make the College's first aid arrangements available for staff and parents on request;
- to keep accident records and to report to the HSE as required under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.

Responsibilities

The proprietors (Chelsea Independent College and Astrum Education) are responsible for the health and safety of their employees and anyone else on the premises. This includes the Principal, teaching staff, non-teaching staff, students and visitors.

The proprietors must ensure that a risk assessment of the College is undertaken and that the appropriate training and resources for first aid arrangements are appropriate and in place.

The proprietors should ensure that the insurance arrangements provide full cover for claims arising from actions of staff acting within the scope of their employ.

The Principal is responsible for putting the policy into practice and for developing detailed procedures. He should ensure that the policy and information on first aid is available for parents on request.

Teachers and other staff are expected to do all they can to secure the welfare and safety of the students and must be fully aware of and familiar with the College's medical care & first aid policy and basic first aid.

Appointed Person/s

Reception staff, Appointed College Staff, the Nurse and the Duty House Parent in Boarding Accommodation

The appointed person need not be a First Aider, but should have undertaken emergency first aid training. She/he will be responsible for:

- taking charge when someone is injured or becomes ill;
- ensuring that an ambulance or other professional medical help is summoned is appropriate.

First Aiders

- A list of First Aiders is displayed around college and in the boarding accommodation.

The first aiders are responsible for:

- giving immediate help to casualties with common injuries or illness and those arising from specific hazards at College whilst keeping everyone involved safe;
- where necessary, ensuring that an ambulance or other professional medical help is called.

First aiders must complete a training course approved by the HSE. Refresher training is required every three years.

Re-assessment of First Aid Provision

As part of the College's monitoring and evaluation procedures:

- the Principal and the Principal Head of Boarding and Welfare shall review the College's first aid needs following any changes to staff, building/site, activities, off-site facilities, etc;
- Reception and Nurse monitors the number of trained first aiders, alerts them to the need for refresher courses and organises their training sessions;
- Reception and Nurse also monitors the emergency first aid training received by other staff and organises appropriate training;
- Reception and Nurse checks the contents of the first aid boxes monthly;
- Reception and Nurse ensure that first aid notices are located in every room in the College detailing where the first aiders and appointed persons are located and where first the first aid boxes are located.

Arrangements should be made to ensure that the required level of cover of both first aiders and appointed persons is available at all times when people are on College premises

First Aid Materials, Equipment and Facilities

Reception with support from the Nurse must ensure that there is appropriate number of first aid containers available according to the risk assessment of the site.

All first aid containers must be marked with a white cross on a green background.

Responsibility for checking and re-stocking the first-aid containers is that of Reception or the person designated by the Principal.

Illness

Any student who becomes unwell in College, must be sent to reception to be seen by a first aider or to consult the Nurse. (First aiders do not give tablets or medicines to treat illness.) If the Nurse is unavailable, the First

Aider may send the student to the pharmacy to speak to the Pharmacist for further medical advice/treatment. If the first aider decides that the student should be sent home or return to the boarding house, the parent/guardian (House Parent if a boarding student) must be contacted to be made aware of the situation. It is then up to the parent to decide how the student should get home i.e. the parent themselves will collect them, arrange for a responsible adult to collect them or they will make their way home by public transport.

If a boarding student arrangements for transportation to be arranged with Nurse/House Parent/college reception staff.

Student Medication

If a student requires the college to keep any medication safe, this must be given to reception in college, Nurse or House Parent. The College must have a letter or email from the parent/guardian giving permission for the College to keep hold the medication and give it to the student when required.

Infection and Hygiene control

The first aider should take the following precautions to avoid risk of infection:

- cover any cuts and grazes on their own skin with a waterproof dressing;
- wear suitable disposable gloves when dealing with blood or other bodily fluids;
- use suitable eye protection and a disposable apron where splashing may occur;
- use devices such as face shields, where appropriate, when giving mouth to mouth resuscitation;
- dispose of all waste safely in a biohazard bag;
- wash hands after every procedure.

In addition, first aiders should not breathe, cough or sneeze over a wound when they are treating it.

If the first aider suspects that they or any other person may have been contaminated with blood and other bodily fluids which are not their own, the following actions should be taken without delay:

- wash splashes off skin with soap and running water;
- wash splashes out of eyes with tap water or an eye wash bottle;
- wash splashes out of nose or mouth with tap water, taking care not to swallow the water;
- record details of the contamination;
- report the incident to Reception and take medical advice if appropriate.

Visits and Events Off-site

Before undertaking any off-site events, the member of staff in charge of the trip will assess the level of first aid provision required by undertaking a suitable and sufficient risk assessment of the event and persons involved including checking the alleges list. When appropriate a portable first aid kit will be carried which may include an emergency generic inhaler or epipen. These are only to be used in the instance of the student who is a known asthmatic or epipen user.

Please see separate Educational Visits Policy for more information about the College's educational visit requirements.

Reporting and record keeping

All members of the College community should report any accident or incident to Reception if the incident occurred in college time or the Head of Boarding in boarding time, however minor, as soon as possible after it has occurred. When an injured person is unable to complete their own details of the accident, then the appointed person/first aider should complete this on their behalf.

Reports must contain:

- the date, time and place of the event;
- details of those involved;

- a brief description of the accident/illness and any first aid treatment given;
- details of what happened to the casualty immediately afterwards – for example: ‘went to hospital, went home, resumed normal activities, returned to class’;
- quote the student and, if possible, ask the student to sign to show we have given the appropriate care/advice.

The Principal and the Principal Head of Boarding and Welfare should be informed if the incident is at all serious or particularly sensitive. The Nurse must be notified of all accidents.

The appointed person must inform the parent/guardian if the student requires hospital treatment.

Statutory requirements, under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR), dictates that *some* accidents must be reported to the HSE.

The proprietors must keep a record of any reportable injury, disease or dangerous occurrence. This must include: the date and method of reporting, the date, time and place of the event, personal details of those involved and a brief description of the nature of the event or disease. This record can be combined with other accident records.

Accidents Which Must Be Reported to HSE:

Involving employees or self-employed people working on the premises:

- accidents resulting in death or major injury (including as a result of physical violence);
- accidents which prevent the injured person from doing their normal work for more than three days.

(For definitions, see HSC/E guidance on RIDDOR 1995, and information on Reporting College Accidents.)

Involving students and visitors:

Accidents resulting in the person being killed or being taken from the site of the accident to hospital, and the accident arises out of or in connection with work, for example if it relates to:

- Any College activity, both on or off the premises;
- The way the College activity has been organised and managed;
- Equipment, machinery or substances;
- The design or condition of the premises.

HSE must be notified of fatal and major injuries and dangerous occurrences without delay by telephone and be followed up in writing within 10 days on HSE form 2508.

The Principal is responsible for ensuring this happens.

The Principal must ensure the RIDDOR Form on-line is completed:

<http://www.hse.gov.uk/riddor/index.htm>.

Accidents and incidents can also be reported over the telephone on 0845 300 99 23 (Monday to Friday 8.30am to 5.00pm).

Record Keeping

Statutory accident records: The proprietors must ensure that readily accessible accident records, written or electronic, are kept for a minimum of three years.

College's central record: This can be combined with the RIDDOR record and the Accident Book, providing all legislation requirements are met.

Identification and Treatment of students with particular medical conditions

Parents complete a medical form at Registration. The original is kept in the student's file and a central list of all students' medical conditions and any particular requirements are kept at the College Office. Medical conditions will also be recorded on the SIMS which college and boarding staff can access.

The Nurse will make all relevant college and boarding staff aware of any student with serious or life threatening medical conditions.

The information held by the College will include a record of Students who need to have access to asthma inhalers, epipens, injections or similar, and information regarding relevant parental consent, as well as a record of dispensation of medication (name of student, name of medicine, date, time, dosage, signature of person who supervised).

Where appropriate, individual Students will be given responsibility for keeping such equipment with them if a parent/guardian consents to the student carrying his/her own medicine. This will be reviewed on a regular basis.

The college/boarding will retain an inhaler or Epipen for each student who is deemed not to be sufficiently competent to carry these themselves.

Reviewing and monitoring

On a monthly basis the Nurse compiles a formal report for the Principal Head of Boarding and Welfare who reports to the Governing body on all student welfare and safeguarding concerns and needs.

Reviews on the first aid procedure are required to be carried out at least annually. Recommendations on measures needed to prevent or control identified risks should be reviewed by the Nurse and are forwarded to the Principal Head of Boarding and Welfare and the proprietors.

Appendix 2
PROTOCOL FOR HOME REMEDIES

Guidance

Only the Nurse will have access to the full range of homely remedies listed below. House Parents will only have access to Paracetamol. No home remedies are available to college staff.

This is a list of medication that can be administered to students that have not been prescribed by a doctor. The aim of these guidelines is to provide safe treatments for commonly presented conditions. This policy does not supersede the need to contact a doctor by any member of staff if they are unsure or there is any doubt about the condition being treated. Administration of these remedies should be given in accordance with the patient information leaflets provided in each pack, taking into account that there are no contraindications or previous allergies to the medication. Any medication administered must be clearly recorded on SIMS and the College Nurse informed of the time and dose that the medication was given.

Homely Remedies

CONDITION	TREATMENTS
Muscular Pain Relief, anti-inflammatory	Paracetamol, Ibuprofen
Allergy relief, Hayfever	Allergy and Hayfever relief
Rehydration	Rehydration treatment
Minor cuts and grazes	Plasters

Paracetamol

When it can be used	Pain relief for mild to moderate pain, pyrexia (fever)
<u>Do not give</u>	In conjunction with other medicines containing Paracetamol

Treatment to be given

Name of Medicine	Paracetamol 500mg
Dose	1 to 2 tablets
Route	Oral
Frequency	Four to Six hours between doses
Max dose in 24 hrs	4g (8 tablets)
Follow up	Inform Nurse/GP if symptoms persist
Warning/Adverse reactions	Side effects rare – rash, blood disorders, liver damage in overdose

Ibuprofen

When it can be used	Pain relief for mild to moderate pain, migraine, musculoskeletal pain.
<u>Do not give</u>	Asthma, pregnancy, known hypersensitivity to aspirin, ibuprofen or other NSAID. Current or previous history of dyspepsia or peptic ulceration, patients taking oral anticoagulants, warfarin, heparin, aspirin or other NSAIDs, patients taking lithium, methotrexate, tacrolimus, ciclosporin, and patients with known severe cardiac disease, heart failure, oedema, hypertension or renal impairment

Treatment to be given

Name of Medicine	Ibuprofen 200 mg tablets
Dose	200mg – 400mg
Route	Oral
Frequency	Every 8 hours
Max Dose in 24 hrs	6 x 200mg tablets
Follow up	If condition worsens or symptoms persist then Seek further medical advice from the Nurse/GP
Warnings/Adverse Reactions	Discontinue if indigestion or other gastro – intestinal symptoms develop e.g. haematemesis (blood in vomit)
Advice to student	Take medicine with or after food or milk. Ibuprofen may be taken with Paracetamol if necessary. Advise Students not to take other Non-Steroidal anti – inflammatory (NSAIDS) containing products at the same time.

Hayfever and allergy relief

When it can be used	Symptomatic relief of allergy such as hayfever, urticaria
<u>Do not give</u>	Kidney problems, pregnant or breastfeeding

Treatment to be given

Name of Medicine	Hay fever and allergy relief tablets
Dose	One tablet daily
Route	Oral
Frequency	Once daily
Max dose in 24hrs	1
Follow up	If no relief, refer to Nurse/GP
Warnings/Adverse Reactions	Rare – headache, dizziness, dry mouth, drowsiness, stomach or intestinal discomfort

Rehydration

When it can be used	To replace salts after diarrhoea or excessive vomiting
<u>DO NOT USE</u>	Ask Doctor or pharmacist if suffering from intestinal obstruction, inflammatory bowel disease, diabetes, kidney or liver failure or on a low potassium or sodium diet

Treatment to be given

Name of medicine	Rehydration treatment
Dose	1 – 2 sachets with 200ml of water after each loose motion
Route	Oral
Max Dose in 24 hrs	6
Warnings/Adverse reactions	Rare- Allergic reaction
Follow Up	If symptoms persist, medical advice must be sought from Nurse/GP
Advice to Student	If vomiting is present the solution should be given in small frequent doses in sips

Appendix3

GOOD HYGIENE PRACTICE

For more advice, contact your local Health Protection Unit or school health service.

- Hand washing is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and vomiting and respiratory disease. The recommended method is the use of liquid soap, water and paper towels. Always wash hands after using the toilet, before eating or handling food, and after handling animals. Cover all cuts and abrasions with water proof dressings.
- Coughing and sneezing easily spread infections. Students and staff should be encouraged to cover their mouth and nose with a tissue. Wash your hands after using or disposing of tissues. Spitting should be discouraged.
- The use of antibacterial gel is encouraged and dispensers are placed at strategic places around college and the accommodation.
- Cleaning of the environment, including tools and equipment should be frequent, thorough, and follow national guidance e.g. use colour coded equipment, COSHH, correct decontamination of cleaning equipment. Monitor cleaning contracts and ensure cleaners are appropriately trained with access to Personal Protective Equipment PPE (see below).
- Cleaning of blood and body fluid spillages. All spillages of blood, faeces, saliva, vomit, nasal, and eye discharges should be cleaned up immediately (always wear PPE). When spillages occur, clean using a product which combines both a detergent and a disinfectant. Use as per manufacturer's instructions and ensure it is effective against bacteria and viruses, and suitable for use on the affected surface. NEVER USE mops for cleaning up blood and body fluid spillages use disposable paper towels and discard clinical waste as described below. A spillage kit is available for all bodily spills.
- Personal Protective Clothing (PPC). Disposable non powdered vinyl or latex free CE marked gloves and disposable plastic aprons, must be worn where there is a risk of splashing or contamination with blood/body fluids. Goggles should also be available for use if there is a risk of splashing to the face. Correct PPC should be used when handling cleaning chemicals.
- Laundry should be dealt with in a separate dedicated facility. Soiled linen should be washed separately at the hottest wash fabric will tolerate. Wear PPE when handling soiled linen. Soiled children's clothing should be bagged to go home, never rinse by hand.
- Clinical waste. Always segregate domestic and clinical waste in accordance with local policy. Used sanitary products, gloves, aprons and soiled dressings should be stored in correct clinical waste bags in foot operated bins. All clinical waste must be removed by a registered waste contractor. All clinical waste bags should be less than 2/3rds full and stored in a dedicated, secure area whilst awaiting collection.

SHARPS INJURIES AND BITES

If skin is broken, make wound bleed/wash thoroughly using soap and water. Contact GP or go to Accident and Emergency immediately. Complete an Accident/Incident form.

Appendix 4

HELPFUL ORGANISATION CONTACTS

Allergy UK

Allergy Help Line: (01322) 619864

Website: www.allergyfoundation.com

The Anaphylaxis Campaign

Helpline: (01252) 542029

Website: www.anaphylaxis.org.uk and www.allergyinschools.co.uk

Association for Spina Bifida and Hydrocephalus

Tel: (01733) 555988 (9am to 5pm)

Website: www.asbah.org

Asthma UK (formerly the National Asthma Campaign)

Advice line: 08457 01 02 03 (Mon-Fri 9am to 5pm)

Website: www.asthma.org.uk

Council for Disabled Children

Tel: (020) 7843 1900

Website: www.ncb.org.uk/cdc/

Cystic Fibrosis Trust

Tel: (020) 8464 7211 (Out of hours: (020) 8464 0623)

Website: www.cftrust.org.uk

Diabetes UK

Care line: 0845 1202960 (Weekdays 9am to 5pm)

Website: www.diabetes.org.uk

Department for Education

Tel: 0870 000 2288

Website: www.dfes.gov.uk

Department of Health

Tel: (020) 7210 4850

Website: www.dh.gov.uk

Disability Rights Commission (DRC)

DRC helpline: 08457 622633

Textphone: 08457 622 644

Fax: 08457 778878

Website: www.drc-gb.org

Epilepsy Action

Freephone Helpline: 0808 800 5050 (Monday – Thursday 9am to 4.30pm, Friday 9am to 4pm)

Website: www.epilepsy.org.uk

Health and Safety Executive (HSE)

HSE Infoline: 08701 545500 (Mon-Fri 8am-6pm)

Website: www.hse.gov.uk

Health Education Trust

Tel: (01789) 773915

Website: www.healthedtrust.com

Hyperactive Children’s Support Group

Tel: (01243) 551313

Website: www.hacsg.org.uk

MENCAP

Telephone: (020) 7454 0454

Website: www.mencap.org.uk

National Eczema Society

Helpline: 0870 241 3604 (Mon-Fri 8am to 8pm)

Website: www.eczema.org

National Society for Epilepsy

Helpline: (01494) 601400 (Mon-Fri 10am to 4pm)

Website: www.epilepsynse.org.uk

Psoriasis Association

Tel: 0845 676 0076 (Mon-Thurs 9.15am to 4.45pm Fri 9.15am to 16.15pm)

Website: www.psoriasis-association.org.uk/

Sure Start

Tel: 0870 000 2288

Website: www.surestart.gov.uk

Mind

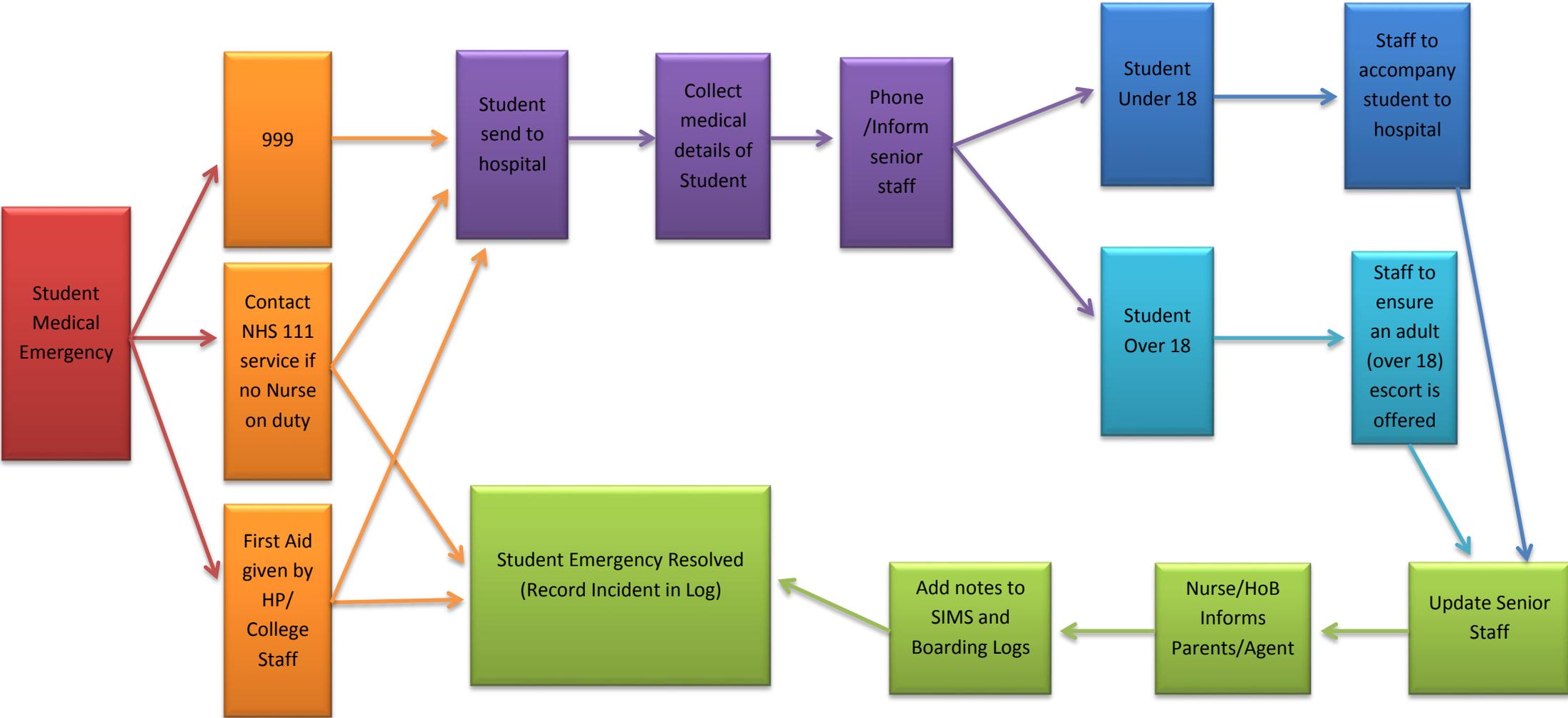
Mental health - <http://www.mind.org.uk/>

Mental health for young people - <http://www.youngminds.org.uk/>

Sexual health - <http://www.nhs.uk/Livewell/Sexualhealthtopics/Pages/Sexual-health-hub.aspx>

Appendix 5

MEDICAL EMERGENCY FLOW CHART:



APPENDIX 6

Basic First Aid

Knowing what to do in an emergency is vitally important. Consider undertaking first aid training and familiarise yourself with how to deal with some of the more common situations. If someone is injured, the following steps will keep them as safe as possible until professional help arrives:

- keep calm;
- if people are seriously injured call 999 immediately; contact the appointed person and first aider;
- make sure you and the injured person are not in danger;
- assess the injured person carefully and act on your findings using the basic first aid steps below;
- continue to monitor the injured person's condition until emergency services arrive.
- complete an accident form where necessary and log all accidents/incidents on SIMS/ boarding logs

Unconsciousness

If the person is unconscious with no obvious signs of life, call 999 and ask for an ambulance. Alert the appointed person and/or first aider. If you or any bystander has the necessary skills, give them mouth-to-mouth resuscitation while you wait for the emergency services.

Tilt their head to open the airways and check the casualty is breathing normally if they are breathing normally, put into the recovery position. Check their circulation and monitor breathing.

Bleeding

To control severe bleeding by applying firm pressure to the wound using a clean, dry dressing and raise it above the level of the heart. Lay the person down and reassure them, examine the wound, look for foreign objects, **DO NOT REMOVE**, elevate the wound above the level of the heart, using gravity to reduce the blood flow, apply direct pressure over the wound, pressure should be continuously applied for 10 mins. Keep them warm and loosen tight clothing. Alert the appointed person and first aider who will then call 999 if necessary.

Burns

For all burns, cool immediately with preferably running water for at least 10 minutes, or until the pain has eased. If possible remove any constricting items, rings, watches as the area may start to swell. Any clothing which is not stuck to the burn. Only apply a non stick dressing or cling film. Keep patient warm and alert the appointed person and first aider who will then call 999 if necessary.

Broken bones

Try to avoid as much movement as possible and alert the appointed person and first aider. Call 999 for an ambulance, if there is a suspected head, neck or spinal injury, if the casualty has difficulty breathing, there is a deformity, irregularity or unnatural movement of the limb, a bone has come through the skin.

APPENDIX 7

Asthma Advice

Asthma is caused by the narrowing of the airways, the bronchi, in the lungs, making it difficult to breathe. An asthmatic attack is the sudden narrowing of the bronchi.

Symptoms include attacks of breathlessness, coughing and tightness in the chest and difficulty in breathing.

Individuals with asthma have airways which may be continually inflamed. They are often sensitive to a number of common irritants, including grass pollen, tobacco fumes, smoke, glue, paint and fumes from science experiments. Animals, such as guinea pigs, hamsters, rabbits or birds can also trigger attacks.

WHAT TO DO IN THE EVENT OF ASTHMA ATTACK

1. keep calm – it is treatable;
2. let the person sit down: do not make him lie down; loosen any tight clothing around the neck
3. let the person take his usual treatment – normally a blue inhaler, 2 x puffs;
4. alert a first aider;
5. wait 5 to 10 minutes;
6. if the symptoms are relived, the person can go back to what s/he was doing;
7. if the symptoms have improved but not completely disappeared, summon a parent or guardian and give another 2 x puffs of the inhaler while waiting for them to arrive.

SEVERE ASTHMA ATTACK

A severe asthma attack is when normal medication does not work at all.

The person is breathless enough to have difficulty in talking normally, there may be discolouration of the skin (blue/grey) around the mouth. Therefore:

1. call an 999 immediately;
2. the appointed person or first aider will inform a parent or guardian;
3. keep trying with the usual reliever inhaler, 1 puff every 1 minute and do not worry about possible overdosing;
3. fill in an accident form (as an ambulance has been called) and record on boarding logs and SIMS.

IF IN DOUBT TREAT AS A SEVERE ATTACK

APPENDIX 8

Epilepsy/Seizure Advice

There are many things that can cause a seizure, such as epilepsy, a lack of oxygen to the brain, head injury or the body temperature becoming too high.

Epilepsy is a tendency to have seizures (convulsions or fits). There are many different types of seizures; however a person's first seizure is not always diagnostic of epilepsy.

WHAT TO DO IF A PERSON HAS A SEIZURE

1. Keep calm. Ensure the person is not in any danger from hot or sharp objects, or electrical appliances.
2. Protect the head with a folded coat or your hands, loosen any tight clothing around the neck to aid breathing
3. let the seizure run its course. Make a note of when the seizure began;
4. do not try to restrain convulsive movements;
5. do not put anything in the person's mouth, especially your fingers;
6. do not give anything to eat or drink;
7. do not leave the person alone;
8. remove everyone from the area and send a responsible student to the College office for assistance;
9. if the person is not a known epileptic, if the seizure is longer than 5 minutes or there is apparent injury, an ambulance should be called immediately;
10. if the person requires medication to be given whilst having the seizure, then a first aider or the appointed person must administer this, if possible always refer to medical care plan.

AFTER THER SEIZURE

11. Check airway and breathing, if breathing normally, put the person in the recovery position. Continue to monitor until the emergency services arrive or the casualty has recovered fully;
12. the person caring for the person during the seizure should inform the parents or guardian as they may need to go home and if not a known epileptic they must be advised to seek medical advice;
13. fill in an accident form, record on SIMS/boarding logs.

APPENDIX 9

Anaphylactic Shock Advice

Anaphylaxis is an acute, severe reaction needing immediate medical attention. It can be triggered by a variety of allergens, the most common of which are foods (peanuts, nuts, cow's milk, kiwi fruit and shellfish) certain drugs such as penicillin, and the venom of stinging insects (such as bees, wasps and hornets). In its most severe form the condition is life threatening.

Symptoms:

- itching or a strange metallic taste in the mouth;
- hives/skin rash anywhere on the body, causing intense itching;
- angioedema – swelling of lips/eyes/face; IN THIS CASE CALL FOR AN AMBULANCE
- swelling of throat and tongue- causing breathing difficulties/coughing/choking; IN THIS CASE CALL FOR AN AMBULANCE
- abdominal cramps and vomiting;
- low blood pressure – person will become pale/floppy;
- collapse and unconsciousness; IN THIS CASE CALL FOR AN AMBULANCE
- difficulty breathing. IN THIS CASE CALL FOR AN AMBULANCE

Not all of these symptoms need to be present at the same time.

First Aid Treatment:

- oral Antihistamines;
- injectable Adrenalin (Epipen).

WHAT TO DO IN THE EVENT OF AN ANAPHYLACTIC REACTION

1. DO NOT PANIC;
2. Call 999
3. Sit/lay the casualty down, they may feel light headed or faint
4. stay with the person at all times and send someone to the College office to alert the appointed person or a first aider;
5. treat the person according to their own protocol which will be found with their allergy kit. If they are not able to administer their medication themselves, those who are trained can give it to them;
6. contact the parent or guardian;
7. Continue to monitor the airway and breathing. If the casualty becomes unconscious and not breathing, commence CP
8. The dose of adrenaline can be repeated at 5 minute intervals if there is no improvement or symptoms return
9. if you have summoned an ambulance fill in the allergic reaction report and give it to the ambulance crew with the used Epipen;
10. fill in an accident form, record on SIMS and boarding logs.

APPENDIX 10

Diabetes Advice

Diabetes is a condition suffered by a person who does not produce enough of a hormone called insulin.

Low blood sugar is dangerous because brain cells, unlike other cells in the body, can only use glucose (sugar) as their energy supply, so the brain is starved.

WHAT TO DO IN THE EVENT OF A HYPOGLYCAEMIC ATTACK (low blood sugar)

1. DO NOT PANIC;
2. notify the Nurse or first aider;
3. if the person is a known diabetic help them to increase their sugar intake with glucose sweets, sugary drink, chocolate or anything that has a high concentration of sugar;
4. If the casualty recovers quickly, give them more food/drink
5. Stay with them until they are fully alert and conscious
6. If the casualty does not respond to treatment within 10 minutes or they are unmanageable or become unconscious call 999/112 for help
7. If the casualty becomes unconscious maintain airway and breathing, place them in the recovery position and continue to monitor until Emergency Services arrive
8. Lucozade will be kept in the Nurse room;
9. notify the parent or guardian;
10. fill in an accident form, boarding logs and SIMS

WHAT TO DO IN THE EVENT OF HYPERGLYCAEMIA ATTACK (too much sugar)

This condition takes a while to build up and you are less likely to see it in the emergency situation at College. If not,

1. call 999;
2. monitor airway and breathing and place them in the recovery position, continue to monitor until Emergency Services arrive, record vital signs.

Appendix 11

Health Care Plan

Student Name:

D.O.B:

Gender:

Residence:

Named Health Co-ordinator:

Family Contact information on SIMS

Medical Diagnosis/Condition (include medicine prescribed):

Medical Professional Contact:

Name:

Number:

Address:

ASSESSMENT

Medical needs

Symptoms

Daily Health Plan to be implemented/By Whom

Potential Complications and Emergency Situation:

Agreed Actions to take:

By Whom:

Review due:

By:

Date reviewed:

Outcome of review:

Date of Plan:

Review Date:

Date Reviewed:

By: