



## DAUNTSEY'S SCHOOL

### HEALTH AND WELLBEING

Dauntsey's supports young people with short and long-term health care needs and is committed to enabling pupils with health needs to maintain regular school attendance and participate in all school activities when appropriate.

Dauntsey's addresses pupils' health and wellbeing in a number of ways. These are integrated within the school's overall pastoral care and fall within the overall responsibility of the Deputy Head (Pastoral).

Care for pupils' health and wellbeing is provided primarily within the Medical Centre. This includes:

- The coordination of external appointments with medical and therapeutic services, such as physiotherapy and x-rays, out-patient appointments and follow-up clinics.
- The oversight and monitoring of individual care plans for pupils with chronic conditions.
- The oversight and monitoring of pupils with temporary disabling conditions, including injury.
- The organisation of routine vaccinations in accordance with the Department of Health/NHS guidelines. (Influenza vaccination is given during the Michaelmas Term to those for whom it is medically indicated. Immunisations for foreign travel are given when appropriate.)
- The education and support of pupils in respect of chronic health conditions and anaphylaxis.
- The coordination of paramedic support for Dauntsey's sporting activities, as appropriate.
- Support for House staff in respect of ongoing CPD (e.g. training in the use of Epipens).
- Medical support for Dauntsey's adventurous and sporting activities and trips away from the School.
- Coordination of pupil medicals, regular monitoring of height/weight for key groups, and the preparation of pupil Medical and Serious Medical Conditions Lists.

The Medical Centre can refer boarding pupils for routine (i.e. non-emergency) dental, orthodontic, ophthalmic or other specialist services. Parents may choose to organise such appointments independently (particularly for ongoing treatment) and are asked to abide by the school's stipulation that appointments do not cause pupils to miss other school commitments.

Home remedies, including over-the-counter medicines such as analgesia, can be provided by the Medical Centre. Records of the issue of OCMs are held at the Medical Centre as given in the Protocol given at Annex A.

Dauntsey's School provides Emergency First Aid training for staff, on a regular basis. Further information is set out in the First Aid Policy.

All members of staff who routinely deal with pupils are made aware and updated of those pupils who have potentially life-threatening conditions, and this information is contained in the Medical Conditions found in iSAMS. The "need to know" in these cases, in the best interests of pupil welfare, is considered to be such that it overrides ordinary medical confidentiality.

Staff are encouraged to seek training from the Medical Centre staff, as part of their CPD, to help support pupils with known medical conditions, which impact on their daily life in the School.

### **Nursing Staff**

The Medical Centre is staffed by a team of 8 Nurses, and a Medical Centre Assistant. There is 24 hour cover by a trained Health Care Professional in the Medical Centre during term time.

The school doctor visits up to twice a week and other visits are arranged as necessary for pupils to attend the doctor's surgery.

Out-of-hours cover is provided by Medivo who provide integrated and urgent care and provide out of hours care.

Upper School pupils routinely self-medicate prescribed medication, based on the assessment of the Medical Officer, and accordingly to guidelines (Appendix B) which are issued to pupils on receipt of their medication, except in very rare instances. Medication is given to pupils in the original labelled packet and it is their responsibility to take it as advised. Parents are not routinely informed by the Medical Centre team about prescriptions. Instead, pupils are encouraged, as appropriate, to keep their parents fully informed about their medical wellbeing, consultations and treatments.

Pupils in The Manor will have all their medicines held in The Manor Medical Centre and administered by a designated tutor who will then liaise with the nurse on duty at main school.

### **Liaising with Parents**

The School promotes on going communication with parents in order to ensure that the specific medical needs of all pupils in our care are known and met.

Parents of a pupil must inform the Medical Centre if their child has or develops a medical condition and, where appropriate, provide the School with appropriate medical evidence and / or advice relating to their child's medical condition.

Where appropriate, parents will be invited to consult with the school and relevant healthcare professionals in order to produce an Individual Health Care Plan (IHCP) for their child.

## **Consent for the Administration of Medicines and Medical Treatment**

We aim to promote and maintain a partnership of consent for the provision of medical care to pupils at Dauntsey's – between pupils, health professionals, parents and/or non-medical carers. We also encourage pupils to understand and take control of their own treatment, if able to do so.

Parents of all pupils at the school are required to complete the relevant parental agreement to administer medicine when the pupil starts at the school and this remains valid for the duration of the pupil's time at Dauntsey's.

However, where a pupil is considered to be Fraser competent, the school recognises that he or she is able to consent to his or her own medical treatment.

It is the school's normal practice to ask pupils to agree to keeping their parents informed about significant use of medications or treatments. If staff feel they need to discuss treatment with parents they should talk this through with the pupil concerned first.

The Medical Centre is responsible for maintaining and keeping records of consent.

### **Admissions**

The Medical Centre contains in-patient beds, for pupils needing overnight accommodation, and for pupils needing short term observation for minor illness. Pupils are permitted to rest in house for some ailments, based on the assessment, and on-going review, of the Medical Centre. In such cases there is close communication between the Medical Centre and the Housemaster/Mistress. Parents are informed of admission and have the option to take them home to recover.

When pupils are admitted to the Medical Centre from a House or any area of the school or playing fields:

- They should ideally be escorted by an adult or a responsible pupil.
- Warning of the admission should be made beforehand by telephone whenever possible.

Housemasters/Mistresses are always notified of the admission of a pupil by e-mail, and often by telephone as well. On discharge, either after full admission or lying down, the Housemaster/Mistress is informed.

All overnight admissions are notified to parents, usually by telephone, as soon as possible.

If day pupils are taken ill while they are in school, they must report to the Medical Centre who will contact the parents and arrange for them to go home if appropriate.

## **Medical Centre List**

A list of pupils who are ill, or absent from routine school activities, on account of illness, is maintained on iSAMS.

Pupils must obtain permission from the Nurse on duty before visiting in-patients.

## **Hospital Out-Patient and other appointments**

These are monitored by the Medical Centre and transport and escort arranged by them. Communications with pupils for these is by e-mail and a reminder slip.

## **Off-Games Notes**

These are issued from the Medical Centre for varying periods of time – they may specify or exclude specific sports. Only pupils in possession of a valid Off-Games note may be deemed to be ineligible to play sport. Off-Games notes should be shown by pupils to the teacher in charge of lessons or activities, such that absence from games can be recorded.

The expectation for pupils who are “off games” through injury in training in the immediate run-up to matches, is that they will travel with their teams, to act in support of their team mates.

The Medical Centre follows a specific protocol in respect of head injuries, in close liaison with sports coaches and based on MOSA and RFU guidance where sporting activity is concerned.

## **Medicals**

All new pupils’ parents complete a Medical Declaration Form on entry to the school. Parents are asked to indicate routine as well as serious medical conditions, past inoculations and vaccinations and their child’s existing GP.

All boarding pupils register with the school’s Medical Officer (via the new joiner forms from the Admissions Department) on their entry to the school.

Mouth guards for sport are obtained by pupils either prior to arrival at Dauntsey’s and it is the responsibility of parents to provide their children with correctly fitting mouth guards and to update these as appropriate (e.g. following orthodontic treatment).

## **Health Education**

Health Education and the promotion of healthy lifestyles are felt to be an important part of the work of the Medical Centre. Posters, pamphlets and other teaching aids are available and the nurses are happy to talk to pupils on any aspect of health.

Advice about sexual health, quitting smoking, nutrition, Gap Year safety, drug and alcohol misuse, skin care/sun care, and many other topics are available.

The Medical Officer, Senior Nurse and Counsellor are members of the School's Health Education Committee and contribute regularly to the School's PSHE programmes for pupils.

## **Counselling**

There is a pastoral/medical team to assist HMs and tutors if and when they require help with the management of pupils with emotional, behavioural or psychological problems. The Chaplain, Medical Officer, Nurse-Manager and Counsellor are all available for discussion about individual pupils.

The school Counsellors are Mrs Carol Coupe and Mrs Ruth Archer. Confidential appointments are offered five days a week. The Counsellor sees pupils by appointment, made through the Medical Centre or directly with them via e-mail or telephone. Pupils can self-refer or can be referred by Housemasters/mistresses or Tutors, by parents, friends or through the medical staff.

On arrival at the school, and as part of the induction process, all pupils have the chance to meet the Counsellor. This is done through small House groups. The Counsellor also visits Houses, and the service is advertised via House Notice Boards, wallet cards and leaflets.

Dauntsey's pastoral staff also meet with the Counsellor for guidance and advice on how to help pupils, both in the case of individuals, and also in respect of more general adolescent issues, as part of their ongoing CPD.

There is no charge to pupils/parents for counselling.

The Medical Centre and Counsellor offer CONFIDENTIAL pastoral support. This means that the consent of the pupil will be sought and, except in exceptional circumstances, obtained before any form of disclosure or referral. The Medical Centre team always encourages pupils to tell their parents and Housemasters/mistresses if they are in difficulties but must abide by their decision if they refuse to do so.

Consequently, it is important that Housemasters/Mistresses should feel able to refer parents to the Medical Centre if they find they do not have enough information about the pupil to answer parents' queries. They will have the full support of the Medical Officer in doing so.

The school's senior, confidential pastoral team, consisting of The Deputy Head (Pastoral), Medical Officers, Counsellors and Senior Nurse meet regularly to discuss individuals and issues, such that the holistic best interests of pupils can be met.

## **Urgent Problems on School Premises**

Occasionally urgent attention/first aid may be required outside the Medical Centre. If the nurse is required to attend outside the Medical Centre the nurse will be contactable by mobile phone.

Temporary closure of, and absence from, the Medical Centre by adult members of staff, during term time, will only take place in the most exceptional circumstances and the duration of any such closure kept to an absolute minimum.

The Health and Wellbeing Policy also includes the following Protocols:

- a. Protocol for the Administration of Medicines Record Keeping, Storage and Access.
- b. Protocol for Administering OCMs.
- c. Prescribed Medication Instructions.
- d. Protocol for Emergencies/Injuries.
- e. First Aid Protocol in the Event of Epilepsy.
- f. Protocol for Children with Diabetes Mellitus.
- g. Protocol for Pupils who need to Self Inject and Protocol for Needlestick Injuries.
- h. Protocol for with Pupils with Food Allergy.
- i. Protocol for Spillages of Blood or Body Fluids.
- j. Asthma Policy and Protocol.
- k. Dauntsey's Medical Centre COVID Protocol.

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## **A Protocol for the Administration of Medicines Record Keeping, Storage and Access**

### **Access to medication**

- The School requests that medication should only be taken at School if it is essential, and that it is where it would be detrimental to the pupil's health not to administer the medication during the School day. In respect of day pupils, where possible, medicines should be taken at home, before and after attending School.
- Where boarders require medication they must attend the Medical Centre, where possible.
- Where pupils must have access to medication, a request for medication should not be denied unless this decision can be justified.

All staff should know the correct procedures for pupils to obtain medication, and how to access the medicine cupboard in their area

### **Emergency medication**

- Emergency medication (e.g. Epipens, Asthma Reliever Inhalers, Hypostop). Pupils should carry these with them at all times. Spares should not be kept in locked cupboards but in a readily accessible place known to everyone concerned, including the pupil.
- In the event that named emergency medication is mislaid or unavailable, School Medical Centre staff can give it under their own protocol, and they should be contacted immediately.
- Members of staff in charge of School trips are advised to check that pupils are carrying emergency medication with them before leaving School.

### **Record-keeping**

- Where School staff administer medication, the Medical Centre keeps comprehensive individual treatment records for every pupil, recording dates and times of all medications given at the Medical Centre.
- Every Boarding House must keep a House Register of all medications and treatment given to individual pupils in the House. House records will be inspected regularly by Medical Centre Staff. Entries should always include:
  - Date and time
  - Drug and dose given
  - Reason for treatment
  - Name of member of staff giving drug
- School Trips: Staff are advised to note any treatments given as described above, so that details can be transferred to the pupil's main records.

- Emergency treatment for pupils. The Medical Centre must be informed immediately if there is any emergency medication administered to pupils, and this will be recorded on their main record.

### **Storage of medication**

The Medical Centre is fully equipped with locked medicine cabinets and a “drugs only” fridge that is checked daily to maintain temperature control.

- Medicines should be kept in the original pharmacy supplied box / packet, with detailed instructions for use. If a pupil has more than one medication, they should be in separate containers with specific instructions for the use of each medication. Prescription medicines should be clearly labelled with the name of the pupil and should only be administered to that pupil.
- A designated member of staff in every area supplied with medicine storage facilities should check expiry dates regularly once a month, and deliver drugs no longer needed or out of date to the Medical Centre for proper disposal.
- Pupils who self-administer medication will be permitted to have a supply that they store amongst their personal possessions.

### **Pupil’s own medicines brought into School**

When we are aware of a situation where a pupil is using their own medication, community safety must be discussed with the pupil, and their competence assessed. As far as possible, the pupil should be allowed to retain control of their medication and treatment but large quantities should be kept locked up, in the Medical Centre.

### **Administration of medicines**

Procedure for giving medication

- Check the pupil’s name. Never give a pupil someone else’s named medication.
- Check the expiry date on the medication.
- Check written instructions regarding dose, frequency of administration, or any special instructions provided by Doctor, Parents, Pharmacy or Medical Centre.
- If it is a new medication to the pupil discuss the instructions for use with them and make sure they know why they are to have it.
- Check their consent status. Ask the pupil when they last had any medication, and what it was, especially if giving analgesia. Be aware that they may have had medication from another source, including their own private supply.
- If a pupil refuses to take a named medication, do not force or pressurise them. Record the incident in the medicine record.

Named prescription or ‘over-the-counter’ medications



1. Parents are responsible for informing the School of any medication that their child has to take during the School day, giving written instruction for its use, and all prescribed medication must be in the original box/packet with a pharmacy label.
2. When a child needs supervision taking medication, they must attend the Medical Centre.
3. The Medical Centre decides when a pupil is able to carry their own medication. It is expected that most senior school pupils will be managing their own medication in this way.
4. Parents are informed that all pupils needing Asthma reliever inhalers, EpiPen emergency adrenaline or Hypostop/Glucagon emergency glucose must carry them on their person at all times during the School day. Stock emergency drugs are kept at the Medical Centre. Members of staff taking games, activity sessions or school trips have a particular responsibility to check that pupils are carrying their medication.

### **Giving non-prescriptive stock medicines**

#### General points

1. The Medical Centre should only keep stocks of medicines for use within the terms of this protocol. The short list of medicines supplied or recommended has been endorsed by the School Medical Officer as being safe and effective for treating minor ailments.
2. Any other medicines must be for individual named pupils and supplied by Doctors, Parents or Medical Centre Staff.
3. Stock medicines may be requested by pupils, or may be offered by staff on the advice of the Medical Centre to provide regular treatment during acute illness or following injury.

USE THE PROTOCOLS PROVIDED FOR THE USE OF EACH NAMED STOCK MEDICINE.

## **Emergency medication**

Procedures for giving emergency medications are included in the files about special medical needs, where there are also lists indicating which pupils carry emergency medication, and individual health care plans giving details of the emergency procedure for that pupil endorsed by the parents. If you require further training to enable you to look after one of these pupils, please contact the Medical Centre.

Housemasters/Mistresses, Tutors and Matrons may administer medications in order to act as any reasonable parent would. These detailed guidelines are to assist members of staff that are prepared to take on this role, and safety procedures described must be followed at all times.

Please contact Medical Centre Staff at any time for further advice, support or training.

## **Administration of medicines - School trips**

Teaching staff may choose to administer medications in order to act as any reasonable parent might while in loco parentis. These detailed guidelines are to assist members of staff that are prepared to take on this role, and the safety procedures described must be followed at all times.

Please contact the Medical Centre Staff for further advice, support or training.

## **Care of boarders who become unwell**

Boarders who become unwell will be assessed by the Medical Centre and an appropriate plan of care will be arranged.

Boarders are looked after in the Medical Centre where:

- There are separate male and female rooms.
- Each room has its own en-suite facilities.
- There is 24 hour cover by a qualified Health Care Professional.
- Pupils will be reviewed regularly by a doctor.
- Internet access and phones/laptops are permitted.
- Visitors are welcome at discretion of the nurse on duty.

Pupils are permitted to rest in house for some ailments, based on assessment and on-going review by House staff in close consultation with the Medical Centre.

## **Attending medical appointments**

Where possible day pupils are asked to arrange medical appointments outside of School hours. Where this is not possible, parents should notify the Housemaster/mistress of the details of the appointment so that the reason for the pupil's absence can be properly recorded.

If a boarder is required to attend a medical appointment during School time, the Medical Centre Assistant will attend the appointment with him or her.

## **Unacceptable practice**

Staff should use their discretion and training with regard to each individual pupil's medical needs, by reference to their IHCP as appropriate.

However, staff should be aware that the following practices are generally unacceptable:

- Preventing access to medication and relevant devices (such as inhalers), where this is reasonably required;
- Assuming that all pupils with the same conditions require the same treatment;
- Frequently sending pupils with medical conditions home or back to the boarding houses and/or unreasonably preventing them from taking part in normal School activities, unless this is provided for in the IHCP or by their medical advisors;
- Penalising pupils for their attendance record, if their absences are related to their medical condition (e.g. hospital appointments);
- Preventing pupils from drinking, eating or taking toilet or other breaks when required to enable them to manage their medical condition effectively;
- Preventing pupils from participating in, or creating unnecessary barriers to children participating in all aspects of School life or otherwise acting in a discriminatory manner.

## A PROTOCOL FOR ADMINISTERING OCMs

### OCMs

OCMs refers to analgesia such as paracetamol or ibuprofen.

When issuing medication, the following procedure should be followed:

#### Check

- whether the pupil is allergic to the medication
- whether the pupil has taken ANY medication recently, of any sort
- if so, what? (NB dosage and contra-indications)
- that the pupil has taken the OCM before and suffered no side effect
- the expire date on the medication

NB Any recent OCM issue to a pupil from the School source will be recorded on the pupil's medical documents.

#### Administer

- The pupil should take the medication under the supervision of the nurse.
- No more than the recommended dose of any OCM should be administered in one 24-hour period, and issued on a dose-by-dose basis

#### Record

Record the details of issue via medical records. Such a record is kept so that an audit trail of OCM administration is possible. Such records are liable to inspection by ISI and by the Headmaster or Deputy Head (Pastoral).

**PRESCRIBED MEDICATION INSTRUCTIONS**

**READ THIS CAREFULLY**

You have been given this because you have been prescribed medication by the School Doctor. It is important that you remember the following to make sure that you use the medication safely:

- Make sure the medicine has YOUR name on the box.
- Make sure that the label and the box show the same medication name (sometimes there may be more than one name on the box as drugs often have a “trade name” and a “proper” name – for example “Nurofen” is the trade name of ibuprofen. If in doubt check with the Medical Centre staff).
- Take the medicine according to the instructions on the label.
- If you are on any other medicines - especially herbal medicines or those that have been prescribed by someone other than the School Doctor – you should check that they are compatible with the new medicine. It is important to tell any doctor who is prescribing medicine for you what other tablets, inhalers etc. you are taking already.
  
- **DO NOT LET ANYONE ELSE TAKE OR USE YOUR PRESCRIPTION MEDICINE**
- You should keep it safe in your room in a locked drawer, box or cupboard.
- Read the leaflet included with the medicine carefully – it will tell you how to take it (for example – should it be before or after food) and what side effects may occur. If you have concerns having read the leaflet speak to the Medical Centre staff (but remember that the leaflet will list all possible side effects rather than those that you might reasonably expect to have).
- You are being trusted to look after this medication yourself and take it responsibly as prescribed. If you cannot do this (for example if you lose or offer to share your medication), or if your medication is on the Controlled Drugs list, then you will not be permitted to self-medicate.

Drug name: ..... Dose: ..... Frequency: .....

Drug name: ..... Dose: ..... Frequency: .....

Drug name: ..... Dose: ..... Frequency: .....

- I confirm that I have read the instructions issued with this medication
- I confirm that I understand the instructions
- I confirm that I am happy to self-medicate

Pupil Name: ..... Signature: .....

Nurse's Name: ..... Signature: .....

Date: .....

## PROTOCOL FOR EMERGENCIES/INJURIES (including on games pitches)

- For all situations outlined below, when the immediate accident has been dealt with: the pupil's Housemaster/Mistress and the Medical Centre must be informed as soon as possible.
- Subsequently an accident report form must be completed – see guidelines.

In the event of a clearly serious or life-threatening accident where it does not seem safe and reasonable to the first member of staff on the scene for the pupil to be taken to the Medical Centre, the following routine should be employed.

- The normal first-aid assessment of

AIRWAYS

BREATHING

CIRCULATION

Should be made and the pupil should not be moved unless this is necessary to prevent further injury or deterioration.

- Clothing should be loosened, and the patient should be kept warm.
- Nothing should be given by mouth.
- Help should be sought immediately as follows:
  - (a) Summon the duty paramedic (for sports injuries), and/or
  - (b) Phone 999 and request an Ambulance. Use the protocol for summoning emergency services.
  - (c) Inform the Medical Centre. They will ensure medical details of the pupil are available where necessary and attend incident if able.

If offsite the responsibility for summoning the Ambulance should lie with the senior member of staff at the site of the accident and **not** with the nurse in the Medical Centre.

In the context of games injuries in particular the following should be noted:

## Head Injuries

Head injuries occur in contact sports, especially rugby. Medical opinion is unanimous that any loss of consciousness whatsoever should oblige a player to leave the field and abandon that game. Any player suffering a knockout blow should therefore be observed during the following hours after an injury. The immediate management of a head injury in sport should be as follows:

1. If there is an impairment of consciousness such as a brief loss of consciousness or a period of confusion or disorientation, then that player should be removed from the pitch.  
In the rugby season the paramedic should be contacted. The player will be treated and observed for an appropriate period in the Medical Centre. If no paramedic is available the player must always be accompanied to the Medical Centre. The pupil will be admitted and observed for an appropriate period of time or transferred to The Emergency Department as required.
2. Any period of unconsciousness will disqualify the individual from contact sports. A strict protocol of assessment and graduated return to sporting activity, following a head injury will be followed. This is supported by MOSA and RFU guidelines. Further information can be found on the following link:

[http://www.englandrugby.com/mm/Document/MyRugby/Headcase/01/30/49/57/returntoplayafterconcussion\\_Neutral.pdf](http://www.englandrugby.com/mm/Document/MyRugby/Headcase/01/30/49/57/returntoplayafterconcussion_Neutral.pdf)

## Neck Injuries

The neck is particularly vulnerable to injury because of its extreme mobility. It is especially vulnerable in contact sports such as rugby (a collapsed scrum or high tackle, for example) and the potential ramifications of such injury are very serious. If there is any suspicion of a significant neck injury then the following is essential:

1. First the game should stop, and ideally the paramedic should be summoned.
2. Where a neck injury occurs in any other context, a similarly careful approach is required. The patient should not be moved unless they are in immediate danger or require resuscitation. In the event of moving the patient being necessary, neck stability should be maintained if at all possible, but such movement should be a last resort. In such an instance, or that of a patient who is disorientated and unable to obey commands to remain still, then summon help as soon as possible.



### Other Injuries

When a player has sustained an injury which clearly requires medical attention and he/she is able to walk satisfactorily, either he/she will be handed over to the paramedic or the teacher in charge of the situation must ensure that the player goes to the Medical Centre. The teacher will need to provide necessary information about the circumstances of the injury.

If a pupil has been injured in an away match, such that paramedic or Medical Centre treatment is required, he/she must be passed as 'fit to travel' by a competent medical person at the other school before return to Dauntsey's. The Medical Centre should be informed as soon as possible. He/she must be escorted to the Medical Centre immediately on return to Dauntsey's. Where such injuries require hospital treatment at the other school, it is imperative that the Medical Centre be informed on return to Dauntsey's, as there will often be follow-up treatment required (such as outpatient fracture-clinic appointments).

### First Aid/Emergency Communications

All teachers in charge of games sports teams must have, or have access to, a medical bag for treating minor injuries. All teachers must have a copy of the emergency telephone numbers. During the Autumn and Spring Terms there will always be a paramedic on duty for major games practices and fixtures. The paramedic has a mobile phone and this number should be immediately accessible. Ideally, teachers should have a mobile phone to hand, or at least be clear where the nearest available telephone is. (The paramedic's vehicle should always be prominently parked, and it is acceptable to send a runner to get them if no phone is available.) The number can be obtained from the Medical Centre.

## FIRST AID PROTOCOL IN THE EVENT OF EPILEPSY

1. **Keep calm.**
2. **Remove possible sources of danger.** If the child is in danger (e.g. near a swimming pool, a hot radiator) he or she should be moved. Furniture and dangerous objects should be moved out of harms way.
3. **Protect and turn the head to one side if possible,** to guard against the air passage being restricted by the tongue or regurgitated food.
4. **Phone Medical Centre** for nurse to attend.
5. **Let the seizure run its course.**
6. **Reassure the pupil** during the confused period after seizure.
7. **Allow a period of rest.** The child will probably feel very tired and confused.
8. In the event of any spillage of blood, or other body fluids the procedure set out by the Medical Centre must be followed.

## PROTOCOL FOR CHILDREN WITH DIABETES MELLITUS

Children suffering from Diabetes Mellitus are always on insulin. The pupil administers insulin themselves by injection 2-4 times daily or have an insulin pump. Provided that they are well and administer their insulin and then eat the correct diet there are usually no problems. However, a busy lifestyle sometimes results in them forgetting or not eating food after insulin and the most common complication is HYPOGLYCAEMIA – usually known as “going Hypo”. This is caused by an abnormally low blood sugar level. Diabetics should always carry glucose or some other form of rapidly absorbed concentrated sugar and you should find the pupils concerned do so. The symptoms of Hypoglycaemia vary from individuals but normally are some or all of the following:

SWEATING, TREMOR, APPREHENSION, WEAKNESS

Followed by

DIZZINESS, BLURRED VISION, DOUBLE VISION, HEADACHE, SLOWED REACTION, UNCOORDINATED MOVEMENTS and maybe TWITCHING.

If not treated UNCONSCIOUSNESS can occur.

TREAT as soon as possible (delay is very dangerous) by giving the patient concentrated sugar which can be glucose, sweetened fruit juice, coca cola, sugar in water or even just milk.

Treatment in the above way is normally successful. Help with drinking may have to be given. When this treatment has been administered then take to the Medical Centre. If unconsciousness does occur while attempting to treat, contact the Medical Centre or dial 999 if finding a known diabetic pupil unconscious.

In the event of any spillage of blood, or other body fluids, the procedure set out by the Medical Centre must be followed:

It is very important that the children concerned live as normal lives as possible.

## PROTOCOL FOR PUPILS WHO NEED TO SELF-INJECT

Dauntsey's will sometimes have pupils who need to inject insulin themselves. They will be encouraged to use the Medical Centre for storage and administration where this is practical. Those needing frequent injections will need to have equipment in their rooms. 'Sharps boxes' (for safe disposal of needles) should be supplied by the pupil or their parents in the first instance - but can also be re-supplied by the Medical Centre, Housemasters/Mistresses should seek advice, as necessary, from the Medical Centre in advance of a pupil's arrival at the School. Pupils (and their parents) should be made aware that they must take responsibility for avoiding injuries to others by using sharps boxes and not leaving injection equipment lying around. Cleaners, Matrons and other House Staff should be aware that there may be needles in the House, but the right to confidentiality of the pupil should be considered when making such information available, and consent obtained for this whenever possible.

If needles are found in or around the House they should be disposed of with care into a sharps box. If in doubt, contact the Medical Centre, but try to ensure that the needle is not left unattended where it might cause injury meanwhile.

## PROTOCOL FOR NEEDLESTICK INJURIES

**In the event of any needlestick injury  
contact the Medical Centre for advice immediately**

In the event of Needlestick injury:

- The injured party should encourage the wound to bleed, by running it under a tap or squeezing. Apply a clean dressing.
- Pupils and staff may attend the Medical Centre.
- If the "owner" of the needle can be clearly identified, then they should also attend the Medical Centre for blood tests – blood-borne conditions such as Hepatitis can take time to develop after inoculation, so we are advised to test the "owner" in the first instance.
- If the needle cannot confidently be traced to any pupil then the injured party may well be required to attend A&E for advice and testing.
- In the event of any spillage of blood, or other body fluids, the procedure set out by the Medical Centre must be followed.

## **Dauntsey's School**

### **Anaphylactic Shock Policy and Protocol**

Anaphylaxis is a severe rapidly progressive allergic reaction that is potentially life threatening. It may occur in a child or adult who is allergic to a specific food, drug or insect bite. The reaction causes substances to be released into the blood that dilate blood vessels and constrict air passages. Blood pressure falls dramatically and breathing becomes difficult. The amount of oxygen reaching the vital organs becomes severely reduced.

#### **Purpose**

To provide where practicable a safe supportive environment where students with anaphylaxis can participate equally in all aspects of school life.

To engage with students and parents of students with severe allergies in assessing risk and management strategies.

To ensure that School staff have the knowledge of how to respond to an anaphylactic reaction.

#### **Anaphylaxis Management**

The key to prevention of anaphylaxis in schools is good communication between parent and school. Each student will receive a medical declaration form prior to starting school, these are returned to the medical centre where any medical condition e.g. severe allergies are highlighted. The medical team will then contact parents to create an Individual Health Care Plan, the catering team along with relevant staff will also be informed. All students with severe allergies will have their photos displayed at various sites throughout the School, they will also be included on our medical condition list which is available for all teaching staff on the school computer system.

All pupils with prescribed auto injectors Epipen must always carry their medication with them. Day pupil's parents are responsible for supplying this along with a spare Epipen which we will keep in the medical centre while boarders supply will be maintained by the Medical Centre.

## **Staff Training**

All School staff are offered and encouraged to receive anaphylaxis management training especially staff who come in direct contact with pupils with severe allergies. They are also welcome to visit the Medical Centre where individual training is available.

## **Emergency Response**

Do not leave the pupil. Dial 576 for Medical Centre or mobile 07977 221297. Observe for signs and symptoms continually. Give allergy medication as prescribed Cetirizine/Epipen. Adrenaline Epipen should be administered as prescribed into the outer side of the thigh midway between the knee and hip. Keep pupil lying down with legs elevated if possible or pupil can sit upright to aid breathing if preferred. If unconscious lay on their side in the recovery position. Always dial 999 for an ambulance if adrenaline has been administered. Await ambulance, escort to hospital, contact parents, Housemaster/mistress and Head Master

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Nurse Practitioner Bsc (Hons)  
Medical Centre

Reviewed: February 2022  
Next Review: February 2023

## PROTOCOL FOR SPILLAGES OF BLOOD OR BODY FLUIDS

All staff must be aware that some body fluids **may** transfer infection:

- Blood
- Exudate or tissue fluid from burns/wounds
- Any other fluid if visibly blood stained
- Vomit

### SPILLAGE OF URINE/FAECES/VOMIT/BLOOD

- To allow staff to deal safely and appropriately with spillages.
- To minimise the risk to staff during and after clearance of the spillage.
- It is incumbent on all employees to be aware of this policy and their own responsibilities under it.

### Cleaning Procedure

#### **Wear appropriate protective gloves and use appropriately**

- Disposable cloths/paper towels.
- Appropriate disinfectant solution e.g. SCREEN or bleach/water solution.
- Waste bag.
- Remove as much of the spill as possible using paper towel.
- Place towels, plus gloves and any other equipment used in waste bag and seal.
- Keep staff and students clear from the area until completely dealt with.

Contact the Facilities Manager to arrange vacuum extraction of the area followed by steam cleaning.

Inform Medical Centre, who may offer additional advice in the event of a spillage of body fluids/blood.

## ASTHMA POLICY

Pupils are encouraged to take part in all activities in the School.

All parents will be asked prior to joining the school to complete a medical declaration form their son/daughter has asthma and any current treatment. The Nursing staff in the Medical Centre hold a record of all pupils with asthma. A copy of the updated list is on iSAMS. Details of treatment, when provided by the parents, are kept by the Medical Centre that is open 24 hours a day.

All pupils are responsible for their own inhalers. The Nursing Staff keep a spare Ventolin / Salbutamol inhaler for emergency use in the Medical Centre.

The sports staff are all aware of asthma management. The aim of total normal activity is the goal for all.

All staff have access to information on how to help a pupil who has an asthma attack and what to do in an emergency. This protocol is available on the Staff/information area of the intranet.

## ASTHMA PROTOCOL

If an asthmatic pupil becomes breathless and wheezy or coughs continually:

Keep calm.

1. Let the pupil **SIT DOWN** in the position they find most comfortable, which is probably upright and leaning forward over a desk. **DO NOT** make them lie down.
2. Let the pupil take their usual reliever treatment via a spacer – normally a blue inhaler. One puff with five breaths up to a maximum of ten puffs. If the pupil does not have their inhaler contact the Medical Centre for the emergency inhaler.
3. If the symptoms resolve after a period of rest the pupil can continue as normal.
4. If the symptoms do not resolve within 5 minutes contact the Medical Centre.



## WHAT IS A SEVERE ASTHMA ATTACK

Any of these signs mean severe:

The pupil is breathless enough to have difficulty in talking in sentences.

Poor peak flow reading.

Normal relief medication does not work at all. No relief after 6 puffs of Salbutamol

The pulse rate is 100 or more.

Rapid breathing of 30 breaths or more.

## ACTION

1. Administer reliever inhaler (blue). One puff with five breaths up to a maximum of ten puffs via spacer.
2. Call the Medical Centre on 576 or 07977 221297.
3. DO NOT lie the pupil down.
4. Dial 999 if they are:  
Unconscious.  
Severely distressed or cannot talk.  
Exhausted with the effort of breathing.
5. Mouth to mouth resuscitation should be given if the pupil is unconscious and NOT breathing.