

MEDICAL AND FIRST AID

School Medical Officer	Dr T McCormack Robin Hood's Bay Surgery Whitby Group Practice Y022 4RA 01947 880230
School Nurse	Nurse L Searle
School Dentist (emergency only)	Dr C L Moloto Robin Hood's Bay Surgery 01947 890329
School Health & Safety Officer	Mr P Squirrell

Statement

The state of a child's health is the most important aspect of their welfare: Fyling Hall recognises that the health care of children living away from their parents requires particular vigilance. For this reason the school actively seeks advice from the School Medical Officer who, in turn, has an intimate knowledge of the local services and resources that are available including specialist paediatric colleagues whose expert advice may be sought.

New Boarding Pupils

All new boarding pupils are encouraged to register with the school doctor for the provision of medical services (GMS). This requires parents or legal guardians to fill in a registration form, questionnaire and have a current medical form available to pass on to the local practice.

Parents are asked if they would like their children to be registered with the school dentist.

All pupils will have an initial assessment with Nurse Searle which includes:

- height
- weight
- urine sample

Those children over sixteen will also receive a full assessment at Robin Hood's Bay Surgery.

Boarding staff will be made aware of any past or present medical problems including allergies that may be appropriate to the continuing care of a child unless parents insist on confidentiality.

Boarding Pupils

- At the beginning and end of each term every boarding pupil will be measured for height and weight.
- All medical notes for pupils will be kept separately from any other information regarding their school life and will be kept in the strictest confidence.
- Boarding pupils who require medical assistance from the local practice will be offered the opportunity to see a doctor of the same gender.
- A pupil's ability to consent to, or refuse medical or dental treatment will be acknowledged. This is based on so-called 'competency' and not age. The doctor, dentist or nurse administering treatment may have to judge the level of a pupil's competency and at times this may involve liaison with boarding staff.
NB - Pupils under the age of eight cannot be considered 'competent'.

Dental Work

The dentist at Robin Hood's Bay will only see children in an emergency. All parents are advised to register their children with their own dentist at their home. The children should receive regular dental check-ups during their school holidays.

Orthodontic treatment

If a boarder is receiving orthodontic treatment in the UK, they are advised to continue with the treatment at the practice near their home during their school holidays. If a boarder is receiving orthodontic treatment in Germany (UK forces), parents should contact Nurse Searle to discuss transfer of care to Scarborough hospital. Emergency orthodontic treatment is dealt with by a local emergency dentist.

Day Pupils

- It is probable that day pupils living within the locality will already be registered with a general practitioner. Although first aiders will always provide emergency treatment during school hours, it is expected that for routine medical matters the usual GP will be consulted.
- In the event of an emergency, which requires an ambulance to be called, parents will be informed immediately. Therefore it is essential that the school have a contact number for at least one parent of a child at ALL times.
- In the event of sickness during the school day parents will be phoned and children will remain in the office/staff-room area until they are picked up.

All Pupils

All pupils will be up-to-date regarding routine immunisations in accordance with schedules issued by the Department of Health. Those who are not fully immunised should receive appropriate immunisations as soon as practicable, both for their own protection and for that of the wider school community.

Staff

- a) From Monday - Friday one member of the resident team will be available during the school day to:
 - look after sick boarding pupils
 - arrange for pupils to visit local medical centres.
- b) Each night from 11pm to 8.30am a member of the resident team will be available to deal with emergencies including taking sick or injured pupils to hospital.
- c) Each day at 8.45am a member of staff will be available for pupils to consult regarding medical problems. This will take place in the school medical room where pupils may request privacy. This member of staff will deal with sick or injured children in one of four different ways:
 - advise pupils to go to bed
 - seek a second opinion from another member of the resident team
 - arrange an appointment for the pupil to see a professional
 - administer basic first aid.
- d) On finding out that a pupil is not available to attend school, either through a phone call or from a resident member of staff, all teaching staff will be notified in writing on the staff notice board.
- e) In the event that a pupil is feeling ill they should go to the office where they will either have their parents contacted and be sent home, or be placed under supervision in the school medical room (where it is thought a child needs to be isolated) or sent to bed (school convention is for boarding pupils to stay in their own bed and be checked by a member of staff throughout the day).

Administration of Prescribed and Non-prescribed Medication by Staff.

This policy must be accepted and understood by staff, pupils and parents to ensure that the administration of medication takes place safely and properly.

- a) With prescribed medication, the prescriber - either doctor or nurse - will have selected the drug in question having due regard to so-called indications, contra-indications, side effects and dosage. Subsequently it is vital that staff administer medication exactly as indicated by the label on the packet. In the event that medication needs to be taken during the school day this will be the responsibility of the member of the resident team.
- b) Any medication bought over the counter must, again, be administered exactly as stated on the label of the packet and a careful note made in the Daily Medical Diary so that on consultation with this diary another member of staff will know exactly how much of a certain medicine has already been taken by an individual.
- c) In the event of a member of staff being uncertain as to whether or not to administer medication they MUST NOT do so, but should refer to the school nurse or senior member of staff.
- d) Children at Fyling Hall will under no circumstances be given medication to be taken at a later time or date:
EXCEPT:
 - Children over 16 years of age.
 - Children who are 15 or under who have made a recorded agreement with the school nurse.
 - Children who use any form of Asthma Inhaler.
 - Children who need regular medication such as diabetics or epileptics.
 - When it is deemed that a child is 'competent'
- e) Some medication may be supplied in bulk dosage by the local surgery and under these circumstances a recommended dosage will be given at the time of dispensation. This should be administered according to this policy.
- f) All medication - either prescribed or non-prescribed - that is administered to children will be recorded in the Daily Medical Diary located in the Medical Room.
- g) A list of pupils at the school that are allergic to certain medication will be pinned up on the Medicine Cupboard and should be referred to at all times.

Administration of Medication to Daily Pupils (Junior School including EYFS)

When a child comes to school with medication to be administered, the School Nurse is informed by the Form Teacher. The School Nurse will liaise with the child's parent/next of kin to check why the child requires medication. The prescribed medication will then be administered, at the time as per instructions, by the School Nurse.

If a child becomes unwell during the day displaying symptoms which can be headache, earache, stomach ache or nausea/sickness, the parent/next of kin will always be contacted by the School Nurse/Form Teacher. Following discussion with parent/next of kin and verbal permission given on the telephone Calpol elixir will only be given to the child. This is recorded by the School Nurse in her register, which is kept in her office.

Should the child's symptoms become worse they may be taken home and collected by the parent/next of kin from either the School Nurse's office or the Form Teacher's room.

Administration of Medication to Daily Pupils (Senior School)

If a pupil feels unwell during the school day, initially they are sent to the School Nurse for assessment. Following this, and if the School Nurse feels that it is appropriate, they may be given an analgesia only e.g. Paracetamol. This is given in line with their age and as per the British National Formulary. Should their symptoms become worse the parent/next of kin will be contacted and asked to take them home. They will be collected from either the Nurse's Office or the School Office.

Pupils who come to school with medication, as prescribed by their Doctor, will be administered either by the School Nurse or depending on their age and ability under the guidance of the School Nurse. If the parents/next of kin have requested alternative arrangements this will be adhered to.

Accidents

- a) Any accident that occurs on the site of Fyling Hall School to any persons - pupils, staff, domestic staff, gardeners, maintenance team, outside contractors, visitors, visiting teams, parents or members of the general public - MUST be recorded in a school accident book. The main one is in the school office although there are others in key areas of the school.
- b) There are medical boxes available for use in key areas of the school and various members of staff are trained first aiders - see notice FIRST AID.
- c) In the event of an accident occurring: **IF YOU THINK AMBULANCE - PHONE AMBULANCE, 999**
- d) If a child needs an ambulance make sure next of kin is informed as soon as possible.
- e) If an accident is not serious try and locate a first aider to assess the casualty. Pupils should report to the office - office staff will locate resident member of staff who is on medical cover.
- f) In the event that a child is burnt and the source of heat is a chemical or is unknown the school Health and Safety Representative must be informed immediately.
- g) Parents will be informed by the office/house staff if an accident has occurred. In the event of the accident being a major one, it is appropriate for senior management to make contact with the parents.
- g) An additional policy is available for sports and outdoor activities.

Reporting of Injuries, Diseases and Dangerous Occurrence Regulations

In the event of death, serious diseases, serious accident or an incident occurring on the site of Fyling Hall School that could have resulted in one of the above, the Health and Safety Representative must be informed immediately so that it can be properly reported to the Health and Safety Executive (tel 0845 3009923).

Hygiene

- a) An acceptable level of hygiene should prevail in all parts of the school.
- b) The School Medical Officer will be available to advise the school on all matters concerned with hygiene.
- c) The School Medical Officer will make an annual inspection of food preparation areas, dining rooms, dormitories and washing facilities and advise the school accordingly.

Parents

Any parent or member of the school who does not agree with this policy as a whole or certain aspects of the document may wish to consult with the school Health and Safety Representative to agree a separate means of dealing with medical matters regarding themselves or their children.

Confidentiality

Any parent or guardian who wishes to contact the School Medical Officer can do so in complete confidence: 01947 880230

Overseas Pupils

We understand that all pupils resident overseas will be treated by the National Health Service whilst registered as boarders at Fyling Hall.

Routine Check-ups

Parents are strongly encouraged to arrange for all routine check-ups and treatment to be undertaken during school holidays, especially dental checks and eye testing.

Charges

Our charging policy is as follows:

- a) Parents will **not** be charged for:
 - Pupils taken to the Accident and Emergency Departments of the local hospitals.
 - Primary Care visits to Robin Hood's Bay Surgery.
- b) Parents will be charged for accompanied visits using school transport for routine appointments, i.e. GP referrals and for out-patient appointments. Whitby visits are billed @ £10 and Scarborough @ £15. Visits to regional hospitals are charged pro-rata.

Sick Pupils in Bed

Whenever a pupil is ill in bed they are to have a clipboard with a 'sick pupil' form beside them. Both clipboard and forms can be found on top of the grey filing cabinet in the office. Pupils must be checked at least once per hour.

First Aid Risk Assessment

This assessment has been prepared in conjunction with the *Guidance On First Aid For Schools*, document issued by DfEE. Fyling Hall School is a self contained boarding school where adjoining buildings are in close proximity to each other. It educates pupils from 5 to 18 years of age and during the day can have up to 280 people on site, out of normal office hours this number falls to just over 100. The Governing Body of Fyling Hall School recognises its responsibility under the **Health and Safety at Work Act 1974 (HSWA)** for ensuring the school has an effective health and safety policy, this document forms part of that policy. It deals specifically with first aid provision at Fyling Hall School.

This assessment sets out the actions Fyling Hall School needs to take to fulfil its responsibilities under the **Health and Safety (First Aid) Regulations 1981**. For the purpose of this assessment the duty of care is extended to everyone on site, not just employees, as per Health and Safety Commission (HSC) guidance. It is

envisaged that this document fulfils the requirements under the **Management of Health and Safety at Work Regulations 1992**.

Insurance

Where an employee acting in the course of their employment administers First Aid assistance to another employee or other person in the charge of the School, such as a pupil, they will be indemnified by the liability insurance for a claim of negligence relating to injury or loss caused by their actions, provided that:

- they are a School officially designated First Aider with a current valid First Aid at Work Certificate and have attended relevant refresher training
- the relevant protective equipment is used
- the First Aider is adhering to protocols and acting within the limitations of their training
- the First Aider is acting in good faith.

Numbers of First Aiders

The school considers its site to be a medium risk place of work within the parameters of the *Guidance On First Aid For Schools* document. The school should have 6 first aiders on site during office hours and 3 at other times. This ensures 1 first aider for every 50 people on site. In addition to this Fyling Hall School employs 1 full time nurse who is on call outside normal hours. The school will have a first aider on site at all times when there are pupils and staff present.

Selection of First Aiders

First aiders are selected in accordance with the *Guidance On First Aid For Schools* document (see below).

First Aid Equipment

First aid boxes stocked as per *Guidance On First Aid For Schools* document are situated around the school and in all areas where there is an increased risk of injury including, labs, kitchen, workshop, grounds staff area, sports department. All first aid boxes are checked fortnightly by the school nurse and restocked accordingly.

Off-site provision of first aid

The first aid needs of an "off site visit" are assessed in the trip risk assessment in conjunction with the health and safety officer. The school mini-buses have stocked first aid boxes in accordance with the *Guidance On First Aid For Schools* document.

Contacting First Aiders

A list of all qualified first aiders is included in every first aid box; a list is also displayed in increased risk areas.

First Aid Accommodation

Fyling Hall School has a fully equipped first aid room specifically designed for the provision of first aid and weekly clinics, this room fulfils the schools obligation within the **Education (School Premises) Regulations 1996**.

Hygiene/Infection control

All staff have access to personal protection equipment (PPE) when dealing with blood or other body fluids and disposing of dressings or equipment.

Reporting Accidents and Record Keeping

Fyling Hall School understands its responsibilities with regards to the **Reporting of Injuries, Diseases and Dangerous Occurrences regulations 1995 (RIDDOR)** this is undertaken jointly by the school nurse and the Health and Safety Officer. Accident books are kept at several locations throughout the school and the completed forms are filed by the school nurse and regularly reviewed by the health and safety officer.

The Health and Safety (First Aid) Regulations 1981 require employers to provide trained persons, equipment etc, to deal with First Aid emergencies and ill health occurring at work. Facilities must be provided to ensure that First Aid is rendered to employees, visitors, service users (including pupils), volunteers, agency staff etc, if they become ill or are injured at work or under the jurisdiction of the School on or off site.

First Aid is provided to

- preserve life
- limit the effects of the condition
- promote recovery.

First Aid should be provided where a person will need further medical treatment until such help arrives, and for the treatment of minor injuries. It should be noted that the treatment of minor illnesses, by the administration of tablets or medicines, falls outside the definition of First Aid.

Definitions

A First Aider is a person who has attended, successfully completed and has a valid certificate for the 4 day 'First Aid at Work' training.

First Aid means the following:

- cases where a person will need help from a medical practitioner or nurse, treatment for the purpose of preserving life and minimising the consequences of injury and illness until such help is obtained,
- treatment of minor injuries which would otherwise receive no treatment or do not need treatment by a medical practitioner or nurse.

Service User means a person or organisation using the School.

Responsibilities of the Employer

The responsibility of the Employer is to:

- establish the First Aid need by risk assessment
- identify suitable employees who are willing to undertake First Aid training and annual refresher training
- provide adequate First Aid equipment and facilities
- inform employees and site facilities managers of the location of the First Aid personnel and equipment available to them in their working environment. This will be in the form of a standard notice which will be displayed on the advice of the H&S officer
- ensure the First Aiders maintain their First Aider or Appointed Person status by attending annual refresher training.

The responsibilities listed above have been delegated to the Headmaster for him to discharge them in the appropriate manner.

There is a register for maintaining an up to date record of personnel trained in First Aid which informs the Headmaster when staff require refresher/re-qualification training.

Identification of Suitable Employees

The Headmaster must ensure that the candidates for First Aid training are physically and educationally suited and are willing to undergo training and act as a qualified First Aider.

The Headmaster must ensure that candidates are fully briefed on the role and requirements of being a First Aider. They must understand the health risks associated with rendering First Aid and be prepared to receive appropriate health and immunisation advice.

Role and Responsibilities of First Aiders

The First Aiders role includes:

- the administration of First Aid, up to but not exceeding the level of their training
- ensuring that any incident and treatment given is recorded in suitable local register
- reporting immediately to the Headmaster, by telephone, all incidents requiring the attendance of a pupil, member of staff or any person at the hospital. Please refer to the document 'Reporting of Injuries, Diseases and Dangerous Occurrences Regulations' for full details of the procedures for incident reporting and investigating
- ensuring that all spillages of body fluids are cleared up promptly
- ensuring, in liaison with management that appropriate documentation is completed and that reportable accidents are reported to the line manager as soon as possible after dealing with the immediate effects.

The First Aider's responsibilities include:

- ensuring their own recommended immunisations/injections are up to date
- reporting any illness or injuries which would preclude their abilities to administer First Aid, to local management to arrange alternative cover.

First Aiders should also have a responsibility to attend refresher training.

Responsibilities of the Training Provider

All First Aid training will be carried out by the St. John's Ambulance.

Use of the 'Epi Pen'

Members of staff who have been trained in the use of the 'Epi Pen' whether by a parent, user or medical staff, will also be covered provided that:

- the member of staff is adhering to protocols and acting within the limitations of their training
- that the member of staff is acting in good faith.

First Aid Training

First Aid at Work

This is the principal First Aid course, which covers a wide range of situations from low to high risk. On successfully undertaking training and passing a written and practical assessment, the person will be issued with a First Aid at Work Certificate valid for three years. This qualification is renewable within the valid time of the certificate. Once the certificate date has expired the person will need to attend the full First Aid at Work course. This course takes place over four days (24 hours tuition).

First Aid at Work Refresher

This training re-qualifies holders of a First Aid at Work Certificate providing they pass their written and practical assessment. Those who wish to renew their certificate must do so before the three year expiry date, ideally 2 years 10 months. This course takes place over two days (12 hours tuition).

First Aid Equipment and Facilities

First Aid Facilities

An appropriate environment to render First Aid or allow a person to rest (minor illness) must be provided. This environment should be private, allow access to hand washing facilities, drinking water and toilet facilities and should enable the casualty to sit or lie down as needed.

First Aid Equipment

A minimum of one First Aid box of appropriate size should be provided for each establishment and/or building and any School vehicle. Passenger carrying vehicles (PCV) and minibuses must carry First Aid kits that comply with PCV and Minibus Regulations. Each First Aider should have their own First Aid kit for rapid access in an emergency situation.

All First Aid kits/boxes should be identified by a white cross on a green background and contain the following minimum items:

- 1 guidance card
- Sterile dressings, 6 small, 6 medium and 2 large
- 20 Individually wrapped sterile adhesive dressings (blue detectable in food preparation areas)
- 2 Sterile eye pads
- 4 Triangular bandages
- 12 Safety pins
- 2 Disposable gloves
- 1 x 300ml bottle of sterile water or normal saline should be supplied where tap water is not available
- Individually wrapped moist wipes could be supplied where tap water is not available
- 1 pair scissors (First Aid Type)
- 1 roll micro pore tape
- 1 resuscitation mouthpiece
- Pencil and paper

Quantities should be decided upon in the light of risk assessment, taking into account the number of staff and pupils.

There must be no medication within the First Aid kit/box, and administration of medication in a First Aid situation is not part of the First Aider's role.

Bleach (Sodium Hypochlorite), or one of the available proprietary combined soak and disinfectant products, should be available in the workplace for cleaning up spillages of body fluids, but should not be located with, or in, the First Aid box. Clinical disposal bags should also be provided.

Immunisation Recommendation for First Aiders

The following information provided as per the current Occupational Health and Welfare Service policy.

Tetanus

Immunisation is recommended to the entire population, and by school leaving age most people will have received five doses of Tetanus immunisation. Those who have not received immunisation in childhood should receive a course of three immunisations with booster doses every 10 and 20 years. Booster doses are not required where individuals have had a total of five immunisations against Tetanus in their lifetime, except at the time of a tetanus-prone injury.

Hepatitis A

Immunisation is recommended for employees working in residential care with clients who have learning disabilities, and for workers exposed directly to sewage or other human faecal matter.

Hepatitis B

Immunisation is now recommended for employees where risk assessment shows a reasonable risk of exposure to used needles, human bites, or to any human body fluids other than saliva, urine of faeces.

Immunisation is therefore recommended for:

- Staff employed in residential facilities for the care of children and adolescents
- Staff having regular physical contact with children or adults with learning disabilities
- First Aiders

The immunisation programme consists of three doses of vaccine and a blood test following these to determine if immunity has been established. There are a small percentage of people who even though they receive the vaccine, do not acquire immunity.

It is recommended that individuals seek immunisation through their GP. In some circumstances there may be a charge for the vaccine and subsequent tests, which case the employer should reimburse First Aiders.

Qualified First Aiders

Name	Post	Certificate Valid Until
Miss Adele Gilmour	Head of Girls	November 15th 2012
Mr Steven Allen	Head of Boys	March 29th 2013
Mr Bernie Weekes	Biology Teacher	March 15th 2013
Miss Wendy Bulmer	Riding Instructor	October 20th 2013
Miss Kirsten Sutherland	Matron	April 23rd 2014
Mrs Susan Lonsdale	Cook	March 27th 2014
Mrs Ruth Stamp	Matron	May 21st 2014

Mr David Perry	Resident Tutor	June 18th 2014
*Mrs Amanda Freer	Early Years first Aid	February 6th 2012
Mrs Catriona Spagnuolo	Careers	June 18th 2012
Miss Emma Anders	Assistant Matron	June 18th 2012
Mrs Heather Barker	English Teacher	April 20th 2013

* Paediatric First Aider

This training must be updated every three years.

Spillage of Bodily Fluids

When you provide First Aid or when you clean an area or handle any items soiled with blood or bodily fluids (urine, vomit, blood, faeces, semen) please take precautions to protect yourself and others from infection. Always follow these simple steps when you clean up after blood/body fluids spills:

Equipment

- Paper towels
- Plastic garbage bags
- Eureka body spill granules (for big spills)
- Disinfectant (bleach 1:10 dilution)
- Mop & mop bucket
- Spray bottle

Protective apparel

- Non-allergenic gloves
- Eye/face protection (plastic goggles)
- Protective gowns or aprons

Policy/Procedures

Spill clean-up materials are located in Woodside, Ramsdale, Mulgrave, the Laundry and the Nurse's Office along with a copy of this document.

- 1) Put on protective gear. If it is possible that blood or bodily fluids may spray or splatter, wear protective eye covering (plastic goggles). Put on non-allergenic gloves. If there is a possibility that your clothing may become soiled, put on a protective gown (as when handling laundry or soiled clothing). Keep the scene clear of people.
- 2) Get a bucket or spray bottle, bleach, and paper towels or a mop to clean the floor and other areas. If the area is large, put 1 cup bleach in a gallon of cool water (hot water destroys the bleach). Spray the area with this solution. If the area to be cleaned is small, you can make a solution of bleach and cool water in a quart spray bottle. Use 1 teaspoon of bleach per quart. This bleach solution must be discarded after 24 hours. It is recommended that a fresh solution be mixed up every time it is needed.
- 3) Blot up as much of the spill and the bleach solution as possible with paper towels. If there is a large volume spills or vomit, use Eureka body spill granules to absorb. Dispose of these materials in a plastic garbage bag.
- 4) If you used a mop, rinse the mop in bleach solution and allow it to dry. Dump the leftover solution down the drain or toilet. DO NOT use a sink that is normally used for food preparation.
- 5) Pick up any soiled debris (clothing, bedding, towels, or bandages) and place in a black bag. If you are finished cleaning, remove your protective gear and gloves and put them in the black bag. Tie off the garbage bag and place it in the regular trash. Only very large spills need to be placed in special biohazard bags and disposed of by an approved facility.
- 6) Wash your hands thoroughly. Re-stock the clean-up kit (see the Nurse or the Head of Cleaning). If you have had significant exposure to bodily fluid (needle stick or contact with mucous membrane or non-intact skin) see the school nurse immediately.

Arrangements for Pupils with Specific Medical Conditions

Anaphylaxis

Signs and Symptoms (could be all of these or just 1 or 2)

- 1 Urticaria (nettle-rash) over the body
- 2 Difficulty in swallowing/ speaking, breathing
- 3 Swelling of lips/mouth/throat
- 4 Asthma-like symptoms
- 5 Rapid pulse
- 6 Nausea/vomiting
- 7 Sense of impending doom
- 8 Collapse/unconsciousness

Procedure

- 1 Keep calm and assess the situation
- 2 If patient feeling faint or weak, lie them down & elevate legs
- 3 If signs of vomiting lie them in the recovery position
- 4 If having difficulty breathing, they might feel more comfortable propped, sitting up
- 5 If symptoms potentially life-threatening – administer Epipen into pupils outer thigh (through clothing if necessary) NB Note time this was administered

- 6 Seek medical attention by calling the school nurse (int 129) or an ambulance (999). DO NOT LEAVE PATIENT UNATTENDED

Asthma Attack

Signs and Symptoms

- 1 Normal relief medication does not work
- 2 Pupil is breathless enough to have difficulty in speaking properly
- 3 Pulse rate is 120 per minute or more
- 4 Rapid breathing of 30 or more breaths per minute

Procedure - In School

- 1 Keep calm. It is treatable
- 2 Let the pupil sit in the position he/she finds most comfortable. Do not make the pupil lie down
- 3 Let the pupil use his/her usual reliever treatment, e.g. 2 puffs of their Ventolin/Salbutamol (blue) inhaler
- 4 Seek medical attention by calling the school nurse (129) or an ambulance (999). DO NOT LEAVE PATIENT UNATTENDED

Procedure - Outside School e.g. away sports fixtures

- 1 Keep calm - it is treatable
- 2 Let the pupil sit in the position they find most comfortable. Do not make them lie down
- 3 Let the pupil use their usual reliever treatment, e.g. 2 puffs of their Ventolin/Salbutamol (blue) inhaler
- 4 If symptoms disappear/improve no further immediate action is necessary, but pupil should be observed and sent to the school nurse on return. If involved in sport at the time of the attack the pupil should take no further part
- 5 Medication may be repeated after 5 - 10 minutes if necessary
- 6 If normal medication has no effect - call nurse to come immediately
- 7 If doctor not immediately available - take to nearest casualty department - if necessary call ambulance
- 8 Note: usual reliever inhaler can be used up to four times every 5 - 10 minutes in an emergency

Diabetes

Signs & Symptoms of Hypoglycaemia – low blood sugar

- 1 Hunger, sweating
- 2 Trembling, shakiness.
- 3 Drowsiness, irritability
- 4 Rapid pulse.

Procedure - Hypoglycaemia

- 1 Keep calm - it is treatable
- 2 Give pupil something sugary i.e. a drink of Lucozade, sports drink, Coca-Cola, pupils own glucose tablets x 3, pupils own GlucoGel
- 3 This may be repeated after 15 minutes if patient still feeling unwell
- 4 Contact the school nurse for advice
- 6 IF UNCONSCIOUS put into recovery position and contact the nurse (or an ambulance in her absence). DO NOT LEAVE UNATTENDED

Signs and Symptoms of Hyperglycaemia - high blood sugar

- 1 Vomiting/nausea
- 2 Stomach pain
- 3 Drowsiness or confusion
- 4 Dehydration
- 5 Rapid, weak pulse
- 6 Hyperventilation: deep and rapid breathing
- 7 Blurred vision
- 8 Fruity smell on breath like pear drops/nail polish remover
- 9 Leading to unconsciousness

Procedure - Hyperglycaemia

- 1 Call an ambulance immediately.
- 2 Contact the school nurse but DO NOT LEAVE PATIENT UNATTENDED
(Note: Hyperglycaemia can develop into ketoacidosis. This is a serious condition which can induce a coma and result in death.)

Epilepsy

Signs & Symptoms

- 1 Loss of consciousness, body stiffens and falls to the floor
- 2 Jerking movements
- 3 Blue tinge around mouth area
- 4 Loss of bladder and /or bowel control may occur
- 5 After a minute or 2 the jerking movements lessen and stop and slowly consciousness returns

Procedure

- 1 Keep calm. Continually reassure the patient
- 2 Protect the person from injury removing harmful objects nearby
- 3 Safeguard airway but do not restrain the patient in any way
- 4 If possible place in recovery position as soon as is possible
- 5 Contact the school nurse but DO NOT LEAVE PATIENT UNATTENDED

Updated: 6 January 2012 by L Searle
Reviewed: 7 January 2012 by K D James
To be reviewed by 1 January 2013