



Rugby School

Medical Care Policy

November 2020

Responsibility for updating this policy: Deputy Head Pastoral

This Policy sets out the School's arrangements for medical care.

Nursing and Midwifery Council (**NMC**) Code of professional Conduct
The National Institute for Health and Care Excellence (**NICE**)
Royal College of Nursing (**RCN**)
General Medical Council (**GMC**)
Boarding School Association (**BSA**)
Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (**RIDDOR**)
Public Health England
NHS.co.uk
Medical Officer of Schools Association (**MOSA**)
British National Formulary (**BNF**) for Children

In addition to arrangements to cover medical emergencies and the provision of first aid for students, members of staff and visitors the School also makes arrangements for routine healthcare and minor illness treatment for boarders at all times (to include medical, counselling, physio and podiatry and the administration of medicine and travel vaccines) which are set out below.

The Nurses also work under the clinical governance, policies and guidance from The Revel Surgery.

This Policy pays regard to the following school policies:

- Eating Distress Policy
- Educational Visits Safety Manual
- First Aid Policy
- Smoking, Alcohol and Drugs Policy
- Student Mental Health & Emotional Well Being Policy

A full copy of the medical care policy including procedures and guidelines is available on request.

Terminology

The School Medical Centre is known as The San Medical Centre

COVID-19

The COVID-19 pandemic has affected our current working practice and the situation is ever evolving. Please see the COVID-19 student response handbook for the latest guidance

The San Medical Centre

The medical centre is located at 2 Hillmorton Road, beside Dean House.

The GP services are provided by The Revel Surgery.

Dr Hannah Collier is the lead GP. She is supported by Dr David Pearce, Dr Linda Perry, Dr Steve Brown and Nurse Practitioner Gail Plester.

There is a GP on-site for appointments Monday and Friday morning, as well as, Tuesday, Wednesday and Thursday afternoon. There is a registered nurse on duty whenever the medical centre is open. The nurses have access to the School doctors for guidance and consultation.

Students who are not registered will be seen for urgent care and first aid requirements only.

All appointments are offered either via telephone, video call or face to face following COVID -19 guidelines

The San opening hours are:

Monday – Friday: 08:00 – 19.00

Saturday: 08:00 – 19.00

Sunday: By appointment only

Contact details: Sannurses@rugbyschool.net

Senior School Nurse

Tel: 01788 556199

Sarah Harris

Deputy Lead Nurse

Karen Miles

School Nurses

Sam Hazelgrove

Sarah Reynolds

Rachel Epton

Administrator

Leanne Stacey

School Doctors

Dr Hannah Collier

Dr David Pearce

Dr Linda Perry

Dr Steve Brown

Nurse Practitioner

Gail Plester

Revel Surgery

Tel: 01788 832994

The medical centre can state whether a student attended for an appointment but no further information will be shared without explicit student consent unless there is a safeguarding concern

Provision of information

This Policy is available on the Parent Portal to which all new and existing parents have access.

The parents of all new students **must** complete the Essential Medical Information for all New Students before their son/daughter joins the School. **Failure to do so WILL result in the student not being permitted to participate in sports or social activities for their safety.** This form is kept in the individual student's record within the medical centre and in their House.

The form requests personal details including the student's NHS number and immunisation record. The form also seeks information about the student's medical history, details of those with parental responsibility and contact details. Any confidential information is sent directly to the medical centre.

It is very important that parents let the School know if their child has any significant health conditions or severe allergic reactions to particular foods, medicines, insect bites or otherwise before they join the school.

Parents must also inform Matron if their child has been prescribed medication to be administered at School.

Parents must also inform the House team/medical centre if there are any changes or update to medical information provided for the student.

Medical Team Confidentiality

In accordance with the Doctor's professional obligations and the Nurses Code of Professional Conduct, medical information about students, regardless of their age, will remain confidential.

The medical team is in a privileged and difficult position with regard to issues of confidentiality. On the one hand they are contracted to the School to provide a range of medical and nursing services yet on the other hand they have their own professional obligations and standards to uphold. The sharing of information needs to be judged against their obligations to the students and the School's "need to know". This is particularly sensitive in a boarding school where staff are acting in loco parentis and are expected to be in possession of information about students for whom they have responsibility.

For both doctors and nurses, clear guidelines are laid down regarding their obligation to maintain professional confidentiality. In essence, the medical staff owe confidentiality to their patients, although there are clearly defined circumstances in which confidentiality may be breached. Some situations where confidential information may be disclosed to a third party may include:

- When the patient or their authorised representative gives informed consent.
- When the information is passed between members of a health care team looking after that patient and when sharing information is judged to be in his/her best interests. In School, the team might consist of the doctor and his/her medical partners, school nurses, the physiotherapist and the Counselling service. Additionally some members outside the health care profession might be involved, including Hms and Matrons providing pastoral care or likely to administer medication or treatment. It is the Doctor's responsibility to ensure that the patient and parents understand why and when information might be disclosed to any team member. All team members must maintain confidentiality.
- When a medical emergency means consent can't be obtained.
- When it is considered that disclosure without the patient's consent is in their medical interests. Illness, mental incapacity or immaturity may mean that the patient is unable to give valid consent and if the patient will not allow the involvement of an appropriate third party, the Doctor may disclose relevant information. The patient must be informed before disclosure.
- When it is believed that the patient is a victim of abuse.
- When it is judged that disclosure is in the public's interests and failure to disclose might expose a patient or others to risk of death or serious harm.

- When satisfying a statutory requirement e.g. notification of a communicable disease.
- When ordered to do so by a court.

Healthcare

All boarding students must be registered on the list of the Revel Surgery and day students may opt to register too (see Standard Terms and Conditions 7.2).

The provision of medical care at the School is co-ordinated via the Medical Centre

The medical centre arranges for routine medical care, medical treatment, counselling, physiotherapy and podiatry, administration of medicines and travel vaccines for students registered with the Revel Surgery. There may be a cost incurred for specialist private treatment and travel vaccines not covered by the NHS. Day students can access counselling, private physiotherapy and podiatry and emergency medical care.

Boarders can choose whether or not they are accompanied by staff when being seen for medical treatment and wherever possible the School will enable students to see either a male or a female doctor as they choose.

The School will also ensure that boarders who are ill are regularly checked and adequately looked after in house and able to summon assistance when required.

All new students will have a School Medical and Health Interview. This is performed by the School Nurses.

Routine childhood immunisations are provided the South Warwickshire Immunisation team as per the Department of Health routine immunisation schedule following communication with parents. The medical team will liaise with parents and administer any vaccinations required to students with an uncertain or incomplete immunisation status who are registered with the Revel surgery.

Boarding House Healthcare Arrangements

The School ensures that boarders are able to summon staff assistance readily and rapidly when ill or injured, day and night. There is guidance on signs and symptoms of meningitis and sepsis and managing minor illness and minor injury which is available to house staff.

Boarding Houses have call buttons located in all bedrooms to enable students to summon emergency assistance. These are linked to resident staff in the House and all students are encouraged to use them should they require assistance, if necessary, during the night.

All boarding Houses have a resident Matron who is a student's first point of contact if they are ill or sustain an injury overnight.

Matron will assess the student and look after them accordingly. The Matron will contact 999 or 111 as necessary. Matron must inform the Hm if an ambulance is called and will judge whether to inform the Hm of other illness or injury occurring during the night.

If the medical centre is closed and a student presents with illness or injury requiring medical assessment or treatment, the out-of-hours services should be contacted by 111 or dial 999 in an emergency.

An unwell student will be monitored by Matron throughout the night and reassessed accordingly. The sick bay will can used to house unwell boarders.

If Matron has to leave the House for any reason then she will leave a notice giving contact details in the case of an emergency on her office door.

On the night that Matron is off duty, the Hm or DhM should be the first point of contact if illness or injury occurs. They will follow the same procedure as for Matron described above, unless a Bank Matron has been called in to monitor an ill student overnight

The Bank Matrons have received training in all the procedures which are relevant to covering the full time Matron or Deputy Matron. A Bank Matron is always on call to provide cover in the boarding Houses on a Saturday night if necessary. A list of those available is published to Houses on a weekly basis and telephone numbers provided. HMs can request a bank Matron should they feel that this is necessary.

There should be a full handover between staff on duty outlining those students who are ill or injured or have new medical guidelines as staffing changes.

The Matron must inform the House catering staff of any student with a food allergy.

Staff taking students on trips must follow the guidance in the Educational Visits Manual and ensure they have checked iSAMS for medical conditions. Expedition leaders should be given any relevant up to date information from iSAMS or the Matron and provided with medication as necessary.

Administration of Medication

The school has an Administration of Medicines Protocol that staff administering medication work from. A full copy of this is available on request. The aim of the protocol is to ensure the safe storage and administration of medication to students.

All medications are kept in a locked cupboard in a room not normally accessible to students either in boarding houses or in the medical centre. Medicines that require refrigeration are kept in a locked medicine fridge in the medical centre. In the houses medicines that require refrigeration are either kept in a specific medicines fridge or in a separate named container in the House fridge.

Controlled Drugs

Controlled drugs (CDs) are delivered and stored in the medical centre until required in the boarding House. Within the School CDs are kept in a locked metal box within a locked cupboard. Only a limited number of staff have a key to access the CDs.

Controlled drug delivery, administration and disposal is documented in a bound record book with numbered pages. There is a separate page for each drug, dose and person. Each boarding House holding controlled drugs requires a record book. Ideally two members of staff should be present when administering the controlled drug to a student to sign the record book, but knowing this is not

always possible, the staff member and student should sign to say medication has been administered. The amount of medication taken and quantity remaining needs to be documented.

When controlled drugs are needed at home over a School holiday they must be signed out the boarding House record book by a staff member and parent/guardian/student. Controlled drugs returned to the boarding House must be signed into the record book. The quantity of medication returned must be documented accurately with two signatures.

Homely remedies in Houses

Stocks of paracetamol, ibuprofen, cetirizine, cough linctus, peptac and strepsils are supplied by the Revel pharmacy. A record is kept in Houses which includes the amount issued, issue date and expiry date.

Non-Prescribed Medications ('Over the counter' Medicines)

Each House has a range of over the counter medication that is kept in a locked cabinet in matron's office. These are available to boarding students and day students. Parents have signed or withheld consent for their son or daughter to be given non-prescription medication from the approved list on the essential medical information for all new students form. Administration guidelines for House staff have been written to ensure that medication administered in House are given safely and a record is kept.

Prescribed Medications

Medication prescribed by a doctor should be administered according to the instructions on the individual medication and **only given to the named student to whom it has been prescribed**. They should be kept in their original container. The original dispensing label must not be altered except by a Doctor. Guidelines for administration are the same as for non-prescribed medications once it has been confirmed it is the students named medication. Administration guidelines for House staff have been written to ensure that prescription medication administered in House are given safely and a record is kept.

Parents of day students who bring prescribed medication to School should give written instructions on when to administer. If the day student will be self-administering then they should complete a self-administration form with their matron. The medication must be in its prescription container. Parents are not routinely informed by the San about routine prescription. Students are encouraged, as appropriate, to keep their parents fully informed about their medical wellbeing, consultations and treatment.

Medication brought into school by the students

A record will be kept of any medications that the students bring into school and medication should be handed in. It is the school's policy that the students do not have their own medications unless they are prescribed, but some always will. If a student arrives at school with a non-prescribed medication given to them by their parents for a short-term condition (e.g. Lemsip) a self-administration form must be completed before the student can take this.

There are risks that prescribed medications will interact with medications purchased over the counter and cause harm or that herbal or traditional medications could interact with prescribed or over the counter medications.

Over the counter medication should never be given to a student who has taken his or her own medicine without further guidance from the school Dr, nurse or a pharmacist.

Overseas students and medication

Overseas boarders are asked not to bring their own medication into School, unless prescribed. Where the prescribed drug is not available in this country parents are asked to give written consent to a prescription of a UK equivalent to be made available. Where this is not possible, a supply brought in by the child with an English instruction of the dose, administration, cautions etc. which the School doctor will check.

If the medicine is an unlicensed medication in injectable form, the School nurse can only administer under the direction of the School doctor.

Self-administration of medications

Competent students are actively encouraged to take responsibility for the administration of their own prescription medications. Boarders assessed as competent to self-medicate must complete a self-administration form with House staff and may store their own individual medicines in their personal lockable storage.

For emergency medication, such as adrenaline devices and asthma inhalers, it is particularly beneficial for students to administer their own medication. The student should be aware that they must keep their medicines in a secure place, and not give their medication to anyone else, even if they have the same symptoms.

Arrangements for students with individual care plans

Students with specific medical conditions or chronic conditions, e.g. diabetes, epilepsy, life-threatening allergies, severe asthma, have an individual care plan, a copy of which is kept in the House and the San.

Each department is sent a list of students with anaphylaxis or significant medical conditions and all existing medical conditions are recorded on iSams in the Advent term. Updates are sent as required during the school year.

Staff are updated about students with specific medical needs, at the beginning of term staff meetings or during the term if any changes.

Care plans are reviewed annually or sooner if any changes to care. These are shared with House staff.

There is an anaphylaxis protocol in place outlining the procedures in place for caring for these pupils. This is available on request.

Consent for treatment

Parental consent is sought for specialist treatment (NHS and private), for emergency treatment, first aid, routine and travel immunisations and any non-prescription medication deemed necessary from the approved House list.

However, students may consent to his or her own medical treatment and/or to the administration of medication where medical staff consider they are sufficiently responsible and have sufficient understanding and intelligence to do so.

Reporting and record keeping

A written or electronic record is kept of any accident or incident involving injury or requiring first aid (however minor), any significant illness or whenever medication or other treatment has been provided by the School.

These circumstances must be fully and accurately reported on the appropriate form as soon as possible after the event and, where appropriate, detailed statements should be obtained from witnesses.

Accident books are available in Houses and accident (incident) forms are also obtainable from the Intranet.

Completed forms should be passed to the Health and Safety Officer who should investigate the accident if appropriate and report to the Chief Operating Officer. He should also make an entry in the accident register, which is held in the Bursary.

Copies of the Accident form should be sent to the San as soon as possible for reference.

The Health and Safety Officer is also responsible for reporting to HSE accidents/incidents that fall within the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013(RIDDOR).

Boarding House student records

Student records:

Each student in the House has an emergency grab sheet, which is stored in a safe place accessible to the Hm, DhM, Matron and Deputy Matron.

This grab sheet contains all relevant health information for use in an emergency and should include the following:-

- Name and Date of Birth
- NHS Number for boarders
- GP's name and contact details
- Contact details of parents and guardians
- Information extracted from the Medical Information Form by Matron concerning allergy, asthma or other chronic medical condition.

Whenever Matron/Deputy/Hm/Dhm or any member of staff deals with a student with a medical concern, a record of this must be kept. The record should include the name of the student, the time of the consultation, the nature of the concern and details of any action taken, including any medication administered. The record should be made and signed by the staff member involved. This information should be transferred as soon as possible to the individual student's health and medication record.

Records of any healthcare provided are kept for each student. Electronic record keeping has been introduced this year using iSams medical centre module and paper records are being phased out. Any paper records are kept in a locked draw in the house.

The record should contain:

- The Medical Information Form
- All additional health information from parents, sports staff or Medical Centre. This could be e-mails, letters or records of telephone conversations.
- Health and medication records showing date, time, dosage or medication given by staff.
- Incident Report forms if student has been involved in any accidents.
- Self-administration of medication assessment forms.
- If parents have not consented to medication from the House list being given

Record of medical concerns

A record of medical concerns must be held in each House, listing students with important medical conditions.

An Individual Care Plan for students with an anaphylactic reaction or serious chronic health condition should be readily available to all House Staff. Staff will be made aware of students with an Individual Care Plan.

Counselling

In addition to the medical care services offered by the medical team, the School also has a Counselling Service.

Contact details: timetotalk@rugbyschool.net

Emotional Wellbeing lead Tel: 01788 556299
Mikala Torrance Mobile: 07584 481068

Counsellors
David Woodall
Frances Viggers
Les Noble
Elaine Wright

Students can be referred to the School Counsellors through various routes:

- Self-referral via email to: timetotalk@rugbyschool.net
- Via medical team
- Via House staff eg. Matrons, Hms or Tutors
- Via Senior Management Team, in the case of behavioural discipline situations
- Via other students.
- Via parents.

There can be many reasons for a student referral for example: anxiety, low mood, sleep difficulties, home sickness, stress, bereavement, bullying, workload, relationship and family concerns. This list is not exhaustive.

Information about the counselling service is posted in the Houses on notice boards stating times and contact details.

The counselling team will meet all new students, as part of the induction programme, they will explain the role and the reasons that a student may want to engage with counselling, together with information about how to access this confidential service.

Counselling team confidentiality

1. Confidentiality is vital to the good working of any counselling service. As with medical consultations, students/staff need to feel that anything they disclose will be treated in confidence otherwise faith in the service will be damaged and the operation rendered ineffective. The medical centre is a confidential area for all the students. Information will be shared with other members of the medical team on a need to know basis.
2. Confidentiality does not extend to disclosures which reveal possible harm to the individual concerned or to others.
3. The Counsellors make the above policy clear to all students in a written statement which the student signs before commencing their initial session.
4. Where issues do not impinge on the day to day wellbeing of the student or on others in the School, the information will be treated in confidence. For example, a student with an eating disorder may well divulge personal information to the Counsellors. The Hm and designated safeguarding leads need only know that the student is safe and that progress is being monitored.
5. Where the behaviour of a student is having an adverse effect on the community, in lessons, socially or in the House, information may be shared on a “need to know” basis. In these cases, conferences with parents may be arranged to discuss the background to the problems manifesting themselves at School. The Hm and other key pastoral staff as necessary will be party to these discussions and will therefore acquire information which needs to be treated in confidence.
6. Where possible, students should be informed of formal discussions taking place which concern them. Contact with parents will usually be made, with the permission of the student concerned, unless there is reason to assume that such information would have a significantly damaging effect. Internal pastoral meetings, however, may be convened in order to pool knowledge about an individual student and to guide those with care of the student in how to move forward. In these cases, students will not necessarily be informed.
7. In order to provide “joined up” care within the School, meetings are held once a term between the medical team, including School doctors, the senior nurse, the Counsellors, the Designated Safeguarding Lead (DSL) and the Deputy DSLs. Sub sets of this group may meet at other times as appropriate. The DSL also meets with the Counsellor on a regular basis to discuss the progress of students causing concern and to decide on suitable courses of action. The DSL will record briefly agreed action plans and follow up to make sure that they have been put into effect.
8. The role of the Counsellors and medical centre staff is not disciplinary, but circumstances may involve the Counsellor in helping to negotiate behavioural contracts with students and the Counsellor may be involved in meetings with parents and the student concerned to set behavioural parameters. Under such circumstances, the Counsellors should only divulge information as necessary and normally as agreed in advance with the student.
9. A Clinical Psychologist/ psychiatrist may be asked by the School to undertake an assessment of particularly vulnerable students. General conclusions from such consultations should be

discussed with the Counsellors and DSL, providing sufficient information to answer the School's concerns. The information should not be divulged to parents without the permission of the student in question.

10. Child Protection issues will be referred to Warwickshire Safeguarding as appropriate.

Infection control

In order to avoid the risk of infection, those providing medical care or first aid should cover any cuts and grazes and use gloves from medical kits when there is a risk of contact with blood or other bodily fluids. Dispose of blood stained items in yellow clinical waste bags. Clinical waste should be disposed of using the clinical waste facilities operated by the San.

Wherever splashing is possible, they should also use eye protection and a disposable apron.

Use devices such as face shields when giving mouth to mouth resuscitation, where appropriate.

Staff should wash their hands regularly and at least after every procedure and between patients.

- in the event of contact with blood or bodily fluids other than their own, staff should, without delay:-
- wash splashes off their skin with soap and running water
- wash splashes out of their eyes with tap water or an eye wash bottle
- wash splashes out of their nose or mouth with tap water, taking care not to swallow the water
- use spillage kits which can be found in the Houses and Departments.

They should then record details of the contamination and report the incident to the San and take medical advice if appropriate.

All usual waste should be disposed of by 'double bagging' and place in normal refuse. Clinical waste should be disposed of using the clinical waste facilities operated by the San.

Health Education

The nurse team assist the School in providing health education in matters such as smoking, alcohol, drug misuse, breast and testicular cancer awareness and sex education as part of its PSHE programme. The School also has a separate policy on Smoking, Alcohol and Drugs. The Medical Centre provides a confidential Smoking Cessation Service.

The nurses and counselling team support the house team with the management of health conditions and house staff are asked to complete specific eLearning on health and emotional wellbeing:

Dental Care

Routine dental treatment should be arranged at home. The NHS rarely covers emergency dental treatment but the medical centre has a list of local dentists who will provide private emergency dental or orthodontic treatment. There is usually a cost for emergency dental care.

Eye Care

Routine appointments with an optician should be arranged at home on an annual basis. In an emergency the medical team has a list of local opticians who can be accessed as needed.

Physiotherapy

All students can be referred to the NHS physiotherapy service if needed. This service is free but there is often a long waiting list. Matron or parents accompany students to appointments.

The sports department employs a physiotherapist for the sports scholars to access as part of their scholarship.

Rugby Physio Service provides private physiotherapy appointments at school with appointments to compliment the school day. The service is covered by most medical insurance companies or can be self-funded. Referrals are accepted from the school doctor, consultants and self-referrals, although most insurance companies require a referral from a doctor to meet their requirements.

Intimate Care Policy

Rugby School is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times. The School recognises that there is a need to treat all children with respect when intimate care is given and the child's welfare and dignity is of paramount importance. The safeguarding guidelines should be followed at all times.

Intimate care is defined as any care which may involve washing, touching or carrying out an invasive procedure (such as cleaning up a student after they have soiled themselves) to intimate personal areas. Another example may be where a member of staff is required to clean or shower a student after an incident involving alcohol. Where appropriate a second adult should be present or aware. It is essential to record/document occasions where intimate care has been provided.

First aid

The School's First Aid Policy outlines the responsibility of the School to provide adequate and appropriate first aid to students, staff, parents and visitors; and the procedures in place to meet that responsibility, both on and off site. The School's Educational Visits Safety Manual also provides information about off site first aid cover and emergency procedures.

All first aid and minor illness treatment is given at the School by competent designated staff as set out in this Policy and the School's separate First Aid Policy.

First aid boxes are provided in every building of the School as well as on School minibuses. In addition medical bags are provided to sports staff for use in games practices and matches. San staff are responsible for replenishing sports staff stock upon request. Houses and departments are responsible for replenishing their first aid supplies.

Sports Cover

Tuesday, Thursday and Saturday afternoon cover on the sports field will be covered by either by 'Medivent' paramedics or the School's Casualty Officers (who are members of staff with responsibility for providing cover).

The Casualty Officers are visible and known to all staff who are taking games on Tuesday, Thursday and Saturday afternoons.

Concussion

The RFU brought in strict guidelines to be followed after having a head injury, which is adhered to by Rugby School.

All students are assessed on Day 0 & Day 1. If they have symptoms they are seen by the school doctor and rested for a minimum of 2 weeks. On day 14 they are seen by the school nurse and school doctor again and if they are fit they are then referred for graduated return to play with the school physiotherapist or conditioning coach. After this, they are seen by the school doctor again to be assessed and signed back onto games if well. The earliest the student is returned to games is 23 days after injury.

Medical emergencies

In the event of illness or accident involving a student, member of staff or visitor, the appropriate steps to be taken will depend on the level of severity of the person's condition, the availability of help and the skills of those on hand.

FOR IMMEDIATE OR EMERGENCY MEDICAL ATTENTION, STAFF SHOULD RING 999 FOR AN AMBULANCE.

Serious accidents or sudden onset of illness causing significant concern

- Dial 999 immediately without contacting the medical centre for advice
- In the case of an accident the casualty should not be moved unless they are in danger
- The casualty should be kept warm, comfortable and reassured
- Students should always be accompanied to hospital and any member of staff may be called upon to do this as a matter of urgency
- One of the Deputy Heads, will arrange to support the member of staff accompanying the student if necessary
- The medical centre should be informed
- The Head or Deputy Head Pastoral, in his absence, should be informed of any serious accident or sudden onset of illness if the injury involves a student or member of academic staff; or the Chief Operating Officer in the case of support staff or visitors
- The Hm should be contacted in the event of injury or illness to a student and will contact the student's parent/guardian
- In the case of a Road Traffic Accident the Police should be called

Other accidents or illnesses of a serious nature

- Consider calling an ambulance if you are at all concerned.
- Contact the medical centre for advice. It may be possible for a School Doctor to visit if the patient is a student, in line with normal NHS GP provision.
- The patient should be accompanied to the medical centre where possible or to the nearest Boarding House.
- Outside medical centre hours contact NHS Warwickshire Out-of-Hours Service telephone: 111, or consider accompanying the patient with severe illness and injury directly to UHCW – Coventry or patients with less severe illness and injury to the nurse lead Urgent Care Centre at St Cross Hospital, Rugby.
- The Hm/Matron should be informed in the event of injury or illness to a student and will then contact the student's parent/guardian.

Minor illnesses or accidents

Minor illnesses or accidents involving students

If the incident occurs in a day or boarding House, students should in the first instance, see Matron or the Deputy Matron who will treat the condition or, if necessary, will arrange for the student to be accompanied to the medical centre.

If the incident occurs on the School campus, the student should be accompanied to see their House Matron or taken directly to the medical centre. Where minor incidents occur in School buildings other than day or boarding Houses, first aid may be given in accordance with the School's First Aid Policy, but only as far as knowledge, training and skills permit.

The Hm/Matron should be informed in the event of injury or illness to a student and will then contact the student's parent/guardian.

Minor accidents involving staff or visitors

The person concerned should be accompanied to the medical centre.

If outside the medical centre opening hours first aid may be given in accordance with the School's First Aid Policy, but only as far as knowledge, training and skills permit. If first aid is rendered, treatment given should be documented and shared with the Health and Safety Officer.

Review

This Policy (and the related Policies referred to), the procedures relating to Medical Care at the School, the provision of that care and the maintenance of non NHS records will be regularly reviewed by the Deputy Head, pastoral.

Authorised Student Pastoral Welfare Committee:

Date:

17 November 2020