



BOARDERS ILLNESS

POLICY

Date last reviewed: 04.06.18

Review Date: June 2021

Responsible Committee: Full Governing Body

Responsible person: Head of Residential Care

Boarders' illness policy:

At Hailey Hall School, the residential staff pride themselves on delivering the highest and best possible level of care for the young people who live there. However at times, we recognise that our boarders will become ill or may sustain an injury.

There are 3 fully qualified first aiders and additional staff who support in boarding are trained medication administrators on duty who also have a wealth of experience from working in previous medical environments. This is critical in assessing the medical needs of our young people in determining the level of care required.

Medication:

The care staff have received training in administering medication and will be able and responsible in giving medication to the residents. They will administer controlled drugs safely from the surgery, such as Straterra, Equasym and Circadin. This will be carried out at the times designated by the consultants who have prescribed them.

Sometimes it is necessary to administer pain relief medication such as Paracetamol or Ibuprofen when a young person is feeling unwell or have injured themselves.

These can only be dispensed if there has been written consent by the parents or carers that they are happy for us to carry this out. Care staff need to be aware of any allergies known or the contra indications of these analgesics and the signs and symptoms for any adverse reactions. They should act accordingly and follow first aid procedures if any such reactions occur.

Illness:

At times the young people in our care will become ill, particularly in the winter months when flu like viruses, diarrhoea and vomiting bugs are more prevalent. The residents are aware of what staff to approach if they do start to feel

unwell. The designated staff member will make an assessment of symptoms and decide on the best course of action. This may include ensuring fluids are maintained; medication administered and bed rest etc. The young person may require monitoring at regular intervals and assessments carried out at these intervals to determine any changes in condition and act accordingly.

Injury:

It is more than likely that young people in our care will incur an injury at some point. This may happen through a slip or fall or sports injury etc. As stated before a trained first aider will be called upon to assess the level of injury and determine the best course of action. This could range from applying a plaster, cold compress, tubi grip or sling etc. It may be that swelling could hamper the first aider from making an accurate assessment of the injury, to which we would refer them onto hospital for a clearer diagnosis. Parents will be contacted and asked to collect their child or meet them at the hospital and asked to stay at least for the next day while they rest. However the absence period may be longer depending on the severity of the injury and the recommendations from the doctors. In the event of a moderate or severe injury such as broken limbs, cuts (heavy bleeding), loss of consciousness, fits etc, an ambulance would be called immediately, first aid given and parents contacted. Head injuries will always be referred to parents /carers as is the day policy too. The boarder will be sent home to be seen and assessed by a medical professional before re-entry back into boarding.

Night times:

There is always 2 resident staff sleeping in the building every night close to the dormitories for easy access in case of emergency. There will be trained first aiders on duty as well as staff who can administer medications. Residents are aware of where they are located and what to do if they need assistance in the night. If a member of staff is woken by a resident due to illness, injury, bed wetting or any other problems, they will then contact the other member of staff on duty to assist in dealing with the young person. An assessment will be made and the best course of action/treatment taken. If the situation is serious

enough then emergency medical help will be called as well as parents/carers. If it is deemed safe enough to put the child back to bed, then appropriate steps will be taken to ensure they are comfortable for the duration of the remaining night. This could be extra blankets, medication, fluids, sick bowl etc.

Sending residents home:

It may be necessary at times to send young people to be cared for at home in times of injury or illness. If a child is assessed and deemed ill enough or injured enough to warrant continuous or intensive monitoring or treatment, then a decision will be made by the Head of Care or Deputy Head of Care to send them home. In extreme cases in the absence of both care managers the decision will be deferred to the Residential Child Care Officer with consultation with the Head Teacher. This decision will be made when possible by 21:00 at latest to reduce disruption to dormitories, routines and parents/carers. All factors will be taken into consideration before a final decision is made. It is found that these incidences are quite sporadic but necessary due to the needs of the young person and illness/injury.

Monitoring, evaluation and review:

The school will review this policy annually and assess its implementation and effectiveness. This policy will be promoted and implemented throughout the boarding side.