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## **BOARDING STAFF HANDBOOK**

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#### **CUNDALL MANOR SCHOOL BOARDING PRINCIPLES:**

- To safeguard and promote the welfare of each boarder by trying to meet
- his/ her intellectual, emotional, social and physical needs.
- To provide an environment in which all students feel valued and where equality of opportunity exists.
- To provide a boarding experience that will be complementary to the home experience and wherever possible to nurture a warm, caring, family environment.
- To promote an atmosphere of tolerance, trust and mutual respect.
- To provide opportunities for responsibility and leadership.
- To provide a standard of accommodation that is comfortable and suited to the needs of boarders, according to age and maturity.
- To establish and maintain supportive links with parents and guardians.
- To encourage boarders to achieve a healthy lifestyle.
- To acknowledge the right to privacy of boarders and staff within the Boarding House.
- To ensure there is equality of opportunity and respect for all boarders, regardless of ethnicity, culture, gender or disability.

## STATEMENT OF PRINCIPLES AND AIMS

We exist to provide our boarders with -

#### Accommodation

We provide accommodation and support services for weekly and paying flexi-boarders. This provision includes their bed, dedicated furniture and storage space, access to washing and toilet facilities and the services of the school laundry. We very occasionally offer basic provision to non-paying day pupils who stay in boarding immediately before or after late night/early morning school trips or engagements – including sport fixtures – although in such instances the pupils are encouraged to bring with them their own bedding and do not ordinarily have the use of the school laundry.

## **Sustenance**

Hot meals are supplied by the kitchens at least twice a day; all breakfasts have a cooked element as part of the choice available.

Food is provided for those arriving late and missing meals due to activities. Packed meals are provided for those on weekend and other trips as required. Juice, biscuits and fruit are provided as part of the school day at 11.00am and 2.55pm on weekdays, with toast and hot drinks served at 8.15pm. A ready supply of fresh fruit is available at all times.

All parents complete a child information sheet as part of the sign up procedure. This includes any details which are specially food related such as allergies and intolerance the school ensures the kitchen staff are aware of such individual needs.

# **Encouragement & support**

We actively promote the development of co-operative, mutually respectful and supportive relationships between boarders and between boarders and staff, with the staff available to boarders at all times and an independent listener available outside the school. Staff must be routinely vigilant in supervising inter-personal relationships within the boarding house but should never intrude into individual relationships unless there is material cause for concern, with any such approach being made confidentially and discreetly.

## A safe living environment

High routine standards of cleanliness and regular cleaning routines are integral to the maintenance of a safe and healthy living environment. Any necessary repairs should be promptly reported to the Bursar who will ensure appropriate budgetary provision is made and that the site team deal with the issue at hand.

All of the School's health and safety policies as detailed in this handbook - must be enforced within the House.

Fire and other potential hazards are subject to regular Health and Safety risk assessments by the Bursar.

At all times at least one member of the house staff on duty must be first aid qualified, and any member of staff not so qualified will be expected to undertake appropriate first aid training.

#### Relaxation

The School has 28 acres of grounds, a sports hall, tennis court and pitches for games. All are available for the use of the boarders, though several are only available when supervised by a member of staff. Boarders have access to computer facilities – including screened access to the internet - in the IT suite, and a TV, video and DVD player in the Boarders Common Room, which also hold our own stocks of games, videos and other entertainment. A wide range of books are also available in the School Library, to which the boarders have controlled access.

## A spirit of trust

The whole basis of good boarding provision is the quality of the relationships and the atmosphere within the House. Rules are given to help pupils and staff to live together, safeguarding everyone's rights. Boarding staff should endeavour to create a spirit of mutual trust with the boarding pupils.

#### **BOARDING AND THE CHILDREN'S ACT**

Cundall Manor recognises that, under the terms of Section 87 of The Children's Act (1989) - *Welfare of Children Accommodated in Independent Schools* - the school has a statutory duty to safeguard and promote a child's welfare by ensuring protection against significant harm or neglect.

This statutory duty of care is geared to the individual child, not to the majority, and recognises each child's right to live his or her life free from abuse of any type. Every child in the Boarding House has the right to develop academically, socially, morally and culturally in an atmosphere of encouragement and trust. The school further recognises that all pupils are equal participants deserving of equal opportunities, and care should be taken not to allow the majority to fade into the background by devoting 80% of time to 20% of the pupils.

The school also understands that the Local Authority Social Services Department must take such steps as are necessary to determine whether this duty of care to the individual is being carried out.

The Act applies to all children who are accommodated at school, not just the boarders who are ordinarily resident. It is worth noting that this duty of care extends to visiting children, since it is the school that is doing the accommodating for that period of time.

The Act addresses the question of physical restraint. In the very rare cases where this may prove necessary, Cundall Manor's policy is as follows:

A member of staff of a school may use, in relation to any pupil at the school, such force as is reasonable in the circumstances for the purposes of preventing the pupil from doing (or continuing to do) any of the following: causing personal injury to, or damage to the property of, any person (including the pupil himself), or engaging in any behaviour prejudicial to the maintenance of good order and discipline at the school or among any of its pupils, whether that behaviour occurs during a formal teaching session or otherwise.

### THE ROLE OF THE HOUSE PARENTS

There are two House Parents who currently share responsibility for the boarding house. Gary Coates and Julie Conway are both experienced qualified teachers.

## In outline

House Parents are jointly responsible *in loco parentis* for safeguarding and promoting the welfare of all boarders in their care. Responsibilities can be usefully categorised according to the five "outcomes for children" detailed in the "Every Child Matters: Change for Children" report by the Department for Children, Schools and Families, first published in 2003 and revised in 2008, and against which the boarding house is ultimately assessed.

- 1. Providing and maintaining a system of welfare provision and support to which all boarders have equal access and which provides for their physical, mental and emotional health.
- 2. Providing an environment where the boarders are safe from accidental injury, safe from bullying, discrimination or any other form of maltreatment, safe from anti-social

- behaviour both within school and beyond, and where they feel secure, cared for and loved
- 3. Helping the boarders to develop personally and socially, and to enjoy school by stretching themselves academically and participating in the recreational opportunities the school provides.
- 4. Helping the boarders to make a positive contribution to their community, to develop positive and healthy relationships within that community and beyond, and to develop self-confidence in their approach to significant life changes and challenges.
- 5. Helping the boarders to secure economic well-being by helping them to prepare for life beyond school, whether this is through further education, employment, or training.

#### **HEALTH**

## Our family system: peer-to-peer and intergenerational support

Children placed in boarding schools are being separated from the most important group to which they will ever belong and which ordinarily would exercise the single most decisive influence over their development as individuals – their family. This influence is exercised through unique patterns of inherited outcomes and biological and socio-environmental relationships that form a complex and natural "living paradigm" for overt and cognitive learning, from which the child will develop a set of reference points to which he or she will continually return. Denying or masking these reference points through institutionalization that subjugates individual child/adult relationships will weaken the child's ability to develop personal living rules from which any genuine sense of personal independence can emerge. The significance of the family is such that, when denied it, children will instinctively seek to replicate in the environment around them the security and affirmation it provides; and this leads to many of the difficulties routinely associated with more traditional models of boarding: cliques, bullying, unofficial hierarchies, etc.

At Cundall, staff strive to ensure each child remains free and incentivised to develop a personal framework - of life skills, social skills, communications skills, notions of personal contribution and responsibility, recognitions of the community and their responsibilities towards it – by actively and consciously promoting emotional and social health and wellbeing through the key relationships established within the boarding family. This concerns not simply the relationships between individual boarders, but – critically – the inter-generational relationships each boarder enjoys with each member of staff.

The truth is that children can only learn independence from positions of strength and security, and it is developing this – over a continuum originating in the moment the child accepts that he or she can be dependent upon and trust fully in House Parents acting *in loco parentis* - that should be the principal and immediate concern of all house staff; building an atmosphere of trust and a sense that care is unconditional should be a pivotal objective.

Fundamentally, boarding staff should strive to replicate as closely as possible the behavioural contexts and environment of the home - including quasi-parental relationships proxying those that develop naturally within the traditional family unit - with the twin objectives of minimising the socio-emotional cognitive deficit attributable to separation from families, and promoting elements that naturally support health and innate cognitive development. Our approach is highlighted in several material distinctions that can be drawn between Cundall practice and that found in more traditional, institutional models of boarding.

- Regular and consistent one-on-one contact with each boarder is paramount group addresses are infrequent. The "many-to-one" prescriptive relationship to the school that typifies more traditional boarding models forms no part of Cundall house culture.
- Visible efforts are made to get involved with every boarder individually working, worrying and problem-solving with them.
- We've hidden the rules in favour of encouraging self-regulation through individual tacit recognition of boundaries.
- Titles, hierarchies and formal structure have been removed: school prefects are acknowledged but their executive authority isn't there are no lines, no sanctions any more than the children would find at home;
- Disciplinary action is discreet, specific and contextualized.
- Everything is flexible and open for discussion the children are routinely involved in all decisions and kept informed about developments having a bearing on the house.
- The level and frequency of contact with parents is monitored and maintained.
- Staff should recognize the importance of security in early dependence this represents the founding stone of the independence and resourcefulness we want the children to develop and take from boarding, so we work hard to help the children see that they can depend on our support.
- Regular communication amongst staff is emphasized in the interests of supporting both children and staff. This "web of human relationships" is the essence of good pastoral care.

# Additional guidance for House Staff:

#### Medication

There is a separate school policy document outlining the medication policies followed in the boarding house, and all staff should read and be familiar with the contents. A summary of the key aspects of direct relevance to House Tutor's daily duties follows but should not be considered exhaustive.

Boarding House staff must recognise their own limitations in making medical diagnoses or failing to act after reports of accidents. The school doctor Dr Penny McAvoy (tel 01765 692366) - as well as the qualified first aiders on the school staff - are readily available for consultation and should be consulted when in doubt. Non-medical boarding staff are advised not to give any form of medication without consultation with the School Matron. In addition to this boarders have access to local dental, optometric and other specialist services or provision as necessary.

Household remedies and non-prescription medication may be administered 'in loco parentis' and strictly in accordance with manufacturer's instructions and guidelines, but only after a pupil's medical record has been checked for known allergic reactions etc and a Permission to Administer Medicine Form has been signed by the parent or guardian.

The time, date and dosage of any medication given, along with the signature of the staff member, must be recorded in Medical Administration Register (MAR). IF IN DOUBT CONSULT A MEDICAL PRACTITIONER. Courses of prescribed medicines must be kept in the School Sickbay Room and only issued according to the prescribing doctor's prescription. When resident staff are required to administer tablets the following guidelines must be followed:

- 1. Ensure that the pupil is either permitted or required to take the tablet(s).
- 2. Ensure that the pupil is given only one dose at any one time.
- 3. Ensure that the tablet(s) are swallowed in the presence of the staff member and not taken away.
- 4. An entry is made in the MAR.

Any boarder unable to attend school due to ill health should remain in their own dormitory or be removed to the sickbay as the House Tutor/ School Matron sees fit. Where there is any doubt as to the seriousness of the condition parents must be contacted or expert medical advice sort.

When any staff member is roused in the night by a pupil complaining of ill health, or a room-mate reports such a problem, they must respond immediately and investigate. A telephone call to the Casualty Department, The Friarage Hospital (tel: 01609 779911) is the recommended first point of contact where help or advice is needed. In the case of an emergency the Housemaster/ School Matron must be informed. In the case of a boy and girl both being ill at the same time follow the Head will use the Head's House to ensure separation.

All accidents and injuries beyond the trivial must be recorded in the Accident Book, as must the action taken.

# Health: specific guidance to be given to boarders

All medicines must be handed in to the school office, School Matron or Housemaster whenever they are brought into school. All medicines, including homeopathic medicines, must be kept locked away in a metal medicine cabinet in Sickbay. Access to this is via the School Matron or a member of the duty staff who will record what they have given each pupil in the MAR in sickbay.

If a boarder wishes to report sick, he or she must follow the sickness procedures laid down below.

Either report to the School Matron at the appropriate time OR inform the duty House Parent that he/she does not feel well enough to go to the School Matron. The House Parent will then advise the School Matron and contact the school office in order that appropriate notice can be made at Form registration. Pupils should make every effort to go into school if it is at all possible to do so. Under no circumstances can pupils simply declare that they are sick and miss school or any other commitment WITHOUT permission from the School Matron or the Housemaster.

#### **SAFETY**

#### **Child Protection**

Refer to the School Child Protection Policy

Also available to Staff via Cundall Manor Staff Shared Area and to parents via the website and on request

#### Rationale

Our school believes that pupils have a fundamental right to be protected from harm and that they cannot learn unless they feel secure. We also believe that all staff working in school have a right to personal support and guidance concerning the protection of pupils.

There are six main elements to our policy:

- 1. The school's policy and procedures for dealing with concerns about a child, in accordance with North Yorkshire's agreed inter-agency procedures
- 2. The school's arrangements for handling allegations of abuse against members of staff, volunteers and the Head.
- 3. The designation of members of staff with status and authority to take responsibility for child protection matters.
- 4. The training of the designated person, staff, volunteers and the Head.
- 5. Arrangements for reviewing the school's child protection policies and procedures and of the efficiency with which the related duties have been discharged, including swift remediation of deficiencies
- 6. The operation of safer recruitment policies (separate document)

We recognise that because of the day to day contact with children, school staff are well placed to observe the outward signs of abuse. The School will therefore:

- Establish and maintain an environment where children feel secure, are encouraged to talk and are listened to;
- Ensure children know there are adults in the school whom they can approach if they are worried;
- Include opportunities in the PSHE curriculum for children to develop the skills they need to recognise and stay safe from abuse.

In formulating this policy the School has had due regard for the guidance entitled 'Safeguarding Children and Safer Recruitment in Education' published by the DfES, which came into force 1 January 2007, and 'Guidance for Safer Working Practice for Adults who work with Children and Young People 2007' together with the Boarding Schools National Minimum Standards. In addition we have consulted 'Working Together to Safeguard Children' (2006).

#### The means

The means by which the School seeks to meet the aims set out above include:

- Rigorous recruitment procedures to ensure that all appropriate checks are carried out on new staff and volunteers who work with children, including Criminal Record Bureau and List 99 checks;
- Procedures for dealing with cases of reported or suspected abuse);
- Procedures for dealing with allegations of abuse against a member of staff and volunteers
- One designated senior member of staff (Mrs Amanda Kirby) to take lead responsibility at Cundall Manor School in dealing with child protection issues, including those affecting pupils in the EYFS. Liaising with other agencies where necessary (and in their absence

Pupils feel valued, respected and part of an environment which promotes the development of self-esteem;

- There is an openness (within the structures of the Law and when it is not counter to the interests of the child) on the part of the School with families, the wider community, and agencies responsible for safeguarding and promoting a child's welfare;
- All pupils have access to an Independent Listener: Rev Alison Askew 13 The Croft, Kirby Hill, Boroughbridge, YO519YA (01423 326284) and are made aware of the help on offer from independent services such as Childline;
- Accessible complaints procedures are in place which are clear, effective and child friendly;
- There is respect for race, culture, religion, gender, sexuality, age and disability within the ethos of the School.
- School policies on Anti-Bullying, Equal Opportunities, Discipline, Special Educational Needs, Disability and Health and Safety are set out in the Staff Handbook and are available to parents on request.

# Action to be taken in cases of suspected child abuse

## Introduction

The following sections give details of the nature and symptoms of abuse, the school's procedures which should be followed by staff who become aware of or suspect abuse and of the subsequent involvement of the North Yorkshire Child Protection Committee; however, the school has a role in the safeguarding of children by the prevention of abuse and neglect and this has been well summarised by the NYCPC in its "Procedures and Practice Guidance" from which I have taken the following extract:

"....All schools and colleges have a pastoral responsibility towards their pupils. They can play a part in the prevention of abuse and neglect, through their own policies and procedures for safeguarding children, and through the curriculum. All schools and colleges should create and maintain a safe environment for children and young people, and should be able to manage situations where there are child welfare concerns. Children can be helped to understand what is and what is not acceptable behaviour towards them, and taught about staying safe from harm, and how to speak up if they have worries or concerns. The curriculum can also play a preventative role in developing awareness and resilience and in preparing children and young people for their future responsibilities as adults, parents and citizens......"

All members of the school staff, including administrative and pastoral, should be alert to the possibility of signs of abuse by a parent, sibling, other relative, teacher, carer, acquaintance or stranger. They must also be aware of the school's procedures in such cases and the requirement to report their suspicions, however tenuous, to the Designated Person or in their absence the Head or Deputies.

## Abuse may be indicated by:

- a. *Physical Injuries*: injuries which should be considered suspicious include: burns, bitemarks, bruises to the cheeks and mouth, bruising inside the ear, black eyes, damage to the mouth, unexplained drowsiness.
- b. *Physical Neglect and Failure to Thrive*: poor height and weight compared to that expected for the child, enlarged abdomen, thin lack lustre hair, circulatory changes (cold and swollen hands and feet), scavenging for food, air of dejection, apprehension or submission in a child.
- c. Repeated Injuries and Consultations: A child who attends clinics, surgeries or hospital casualty departments repeatedly with inadequately explained injuries should alert suspicion. Frequent attendance at clinics and surgeries with minor health problems may also be a sign that parents are having difficulty in coping with their child.
- d. *Sexual Abuse*: Disclosure by a child of a possible incident of sexual abuse or presentation of the child with a genital injury or infection must invite suspicion. Apart from these clear indications, there are few symptoms and signs which on their own indicate the strong possibility of sexual abuse. However, the following list will be helpful in deciding on the level of suspicion:
- e. *Emotional Abuse*: In order to establish the possibility of emotional abuse there is a need to demonstrate both that parents are not loving the child and that this is affecting the child's behaviour and emotional development. Infrequent unkind acts by a parent are not emotional abuse, nor is difficult behaviour in a child usually due to emotional abuse. However, sustained unkindness towards a child combined with difficult behaviour or excessive withdrawal by the child raises the possibility of emotional abuse. Examples of sustained active unkindness are ridiculing a child, humiliating a child, scapegoating a child, punishing for normal and desirable behaviour. Examples of sustained passive unkindness are failure to give praise or affection, failure to provide consistent discipline, failure to recognise that the child has needs which on occasions override the needs of the parents.

#### Identifying abuse

Serious suspicion of child abuse should be aroused when the child makes a clear, unambiguous, verbal allegation of abuse. If this is a spontaneous allegation it would be most unusual for this to be fabrication. Exceptions to this might be where a spontaneous allegation is made following access visits to which the child is known to be antagonistic for other reasons; or if allegations are made by an adolescent caught up in a parental dispute such as a divorce or custody proceedings. This could reduce suspicion to a moderate level.

# *Moderate* suspicion should be aroused when a child:

- Makes a verbal allegation of abuse, but in ambiguous terms so that it is not clear precisely what sort of experience the child is describing.
- Is sexually provocative to adults or reveals detailed knowledge of sexual matters in conversation, fantasy, or drawings, or appears preoccupied with sexual fantasies and behaviour. It should, however, be remembered that most normal children are curious

about sexual matters and this will be reflected in their play but in younger children there will not be detailed knowledge of adult sexuality nor will such children be preoccupied with the topic.

- Responds to questioning by describing sexual abuse but has not made a spontaneous allegation. In such a situation, suspicion would become serious if spontaneous extension of the description of the occurrence was provided together with convincing circumstantial details.
- Shows a specific fear e.g. of a father, step-father or older sexually mature brother or other adult.

Mild suspicion should be aroused by a child who:

- Shows a behavioural or emotional disturbance for which no other obvious cause is present.
- Shows unexplained changes of behaviour.
- Is fearful of men.
- Makes a suicidal attempt for which no obvious cause is detected.
- Runs away from home when there is no obvious cause.

It should be noted that child sexual abuse may be a causal factor in any child disturbance. It should be routinely included in the check list of possible indicators along with the more usually considered stresses (e.g. school failure, undue parental pressure to succeed, adverse temperamental characteristics in the child, disharmonious family relationships or brain disjunction).

# Confidentiality

It is of the utmost importance that anyone concerned with a suspected case of abuse maintains confidentiality at all times on a "need to know" basis. The Designated Person should be informed by the person suspecting abuse. The Head and the Designated Person will discuss who else should be informed within the school.

## WHAT TO DO IF ABUSE IS SUSPECTED

When a member of staff sees a sign which may be a cause for concern (s)he should seek any information from the pupil with tact and sympathy.

If a pupil makes an accusation of abuse to a member of staff, that member of staff should act in the following way:

## Listen to the pupil;

limit any questioning of the pupil to the minimum necessary to seek clarification only, strictly avoiding 'leading' the pupil by making suggestions or asking questions that suggest an answer. (Do not ask questions like 'did s/he do ...... to you? using instead a minimum number of open questions of the 'Tell me what happened', type).

- Reassure the pupil;
- make a written record as soon as possible after the conversation noting the time, date, place, people present, what was said and pass the record to the Designated Member of Staff as soon as possible;
- do not promise confidentiality; reassure the pupil that any information will be treated
  with the utmost sensitivity and will only be disclosed to those people who need to know
  about it;

- do not inform the parent at this stage;
- do not make any detailed physical examination nor initiate an examination by any other agency other than in an emergency;
- if the abuse is by one or more pupils against another pupil guidance should be taken from the school's anti-bullying policy especially when there is reasonable cause to suspect that a child is suffering or likely to suffer significant harm;
- inform the Designated member of Staff without delay;
- once the Designated Member of Staff has been informed, the Headmaster will be notified immediately and a decision made as to what, if any, further action should be taken with regard being given to NYACPC procedures. Any allegation or suspicion of abuse will be referred to the NYACPC Children's Safeguarding Unit within 24 hours for initial discussion, and thereafter, for the services to be free to carry out, if deemed appropriate, a child protection investigation rather than an internal investigation by the School. If an accusation involves the Designated Member of Staff, the Headmaster should be notified directly. If an allegation involves the Headmaster, then the Deputy Head should notify the Chairman of Governors.

All information can be accessed via

North Yorkshire Children's Social Care:

Email:

Emergency Duty Team

www.sa
0845 03

social.ca
0845 03

(for evenings, weekends and bank holidays):

www.safeguardingchildren.co.uk 0845 0349410 social.care@northyorks.gov.uk 0845 034 9417

In addition any serious incidents relating to the childcare of any pupil who is a boarder will be reported by the Designated member of Staff, Mr John Sample, to the National Business Unit of Ofsted, initially by telephone (08456 40 40 40) and thereafter by completing and sending by post a notification form, a copy of which can be downloaded from the NBU website at Ofsted: www.ofsted.gov.uk. These additional steps take account of the guidance issued by Ofsted in its booklet 'The regulation and inspection of children's social care from 1 April 2007.'

## WHAT TO DO WHEN DEALING WITH ALLEGATIONS OF ABUSE AGAINST TEACHERS AND OTHER STAFF

# This guidance relates to:

- the Children Act 1989;
- section 175 of the Education Act 2002 (local authorities, governing bodies of maintained schools and institutions in the further education sector);
- section 157 of the Education Act 2002 and the Education (Independent School Standards) (England) Regulations 2010
- the Children Act 2004;
- section 11 of the Children Act 2004 (other agencies); and
- sections 141F, 141G and 141H3 of the Education Act 2002
- Dealing with Allegations of Abuse against Teachers and Other Staff (revised Oct 2012) to replace Chapter 5 of SCSRE

This policy follows the statutory guidance from the Department for Education. This means that the school must have regard to it when carrying out duties relating to handling allegations of abuse against teachers and other staff. This guidance relates to all adults working with children and young people, whether in a paid or voluntary position, including those who work with children on a temporary, supply or locum basis.

Cundall Manor School has a duty of care to their employees. They should ensure they provide effective support for anyone facing an allegation and provide the employee with a named contact if they are suspended.

This guidance is about managing cases of allegations that might indicate a person would pose a risk of harm if they continue to work in regular or close contact with children in their present position, or in any capacity. It should be used in respect of all cases in which it is alleged that a teacher or member of staff (including volunteers) at Cundall Manor School has:

- behaved in a way that has harmed a child, or may have harmed a child
- possibly committed a criminal offence against or related to a child
- behaved towards a child or children in a way that indicates he or she would pose a risk of harm if they work regularly or closely with children.

It is essential that any allegation of abuse made against a teacher or other member of staff or volunteer is dealt with very quickly, in a fair and consistent way that provides effective protection for the child and at the same time supports the person who is the subject of the allegation.

The framework for managing cases of allegations of abuse against people who work with children is set out in *Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children* (March 2010) which provides an overview of how allegations should be handled. It is relevant for the purposes of s.157 and s.175 of the Education Act 2002.

Allegations of abuse must be taken seriously, but schools should ensure they deal with allegations quickly in a fair and consistent way that provides effective protection for the child and supports the person who is the subject of the allegation. Every effort must be made to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated. Suspension must not be used as an automatic response when an allegation has been reported.

Pupils that are found to have made malicious allegations are likely to have breached school behaviour policies. The school may therefore consider whether to apply an appropriate sanction, which could include temporary or permanent exclusion (as well as referral to the police if there are grounds for believing a criminal offence may have been committed).

The school's behaviour policy sets out the disciplinary action that will be taken against pupils who are found to have made malicious accusations against school staff if an allegation is made against a teacher the quick resolution of that allegation should be a clear priority to the benefit of all concerned. At any stage of consideration or investigation, all unnecessary delays should be eradicated.

In response to an allegation staff suspension should not be the default option. An individual should only be suspended if there is no reasonable alternative. If suspension is deemed appropriate, the reasons and justification should be recorded by the school and the individual notified of the reasons.

Allegations that are found to have been malicious should be removed from personnel records and any that are not substantiated, are unfounded or malicious should not be referred to in employer references.

All allegations should be reported straight away, normally to the Headmaster. In the absence of the Headmaster then allegation should be reported immediately to Sir Thomas Ingilby, Chair of Governors, or where the Headmaster is the subject of the allegation or concern. Procedures should also include contact details for the local authority designated officer (LADO) responsible for providing advice and monitoring cases.

The Headmaster should immediately consult the Local Authority (LA) Designated Officer

The Headmaster should immediately consult the Local Authority (LA) Designated Officer if it is alleged that a member of staff, volunteer, supply worker or other contracted employee, has:

- behaved in a way that has harmed a child, or may have harmed a child
- possibly committed a criminal offence against or related to a child
- behaved towards a child or children in a way that indicates s/he is unsuitable to work with children

The accused person should then be told about the allegation as soon as possible. This may be delayed if police or social care need to be consulted to agree what information can be disclosed.

If there is cause to suspect a child is suffering or likely to suffer significant harm, a strategy discussion should be held, which will include Social Care, the Police, LA designated officer, Headmaster, Chair of Governors and other relevant agencies. A strategy discussion considers not only the children directly involved in the allegation but also any other children who could be at risk of significant harm, it could therefore include your own children and any other children with whom you have contact.

If the threshold for significant harm is not met, but a criminal offence may have been committed, an initial evaluation, which is similar to a strategy discussion, should take place with the police, LA designated officer, Headmaster, Chair of Governors and other relevant agencies.

The aim of these discussions is to share relevant information about the allegation and to determine whether an investigation needs to be conducted and if so by whom. They are not part of any disciplinary procedure and you will not be invited to attend. If the allegation is about physical contact, the strategy discussion or initial evaluation with the police should take account of the fact that staff are entitled to use reasonable force to control or restrain children in certain circumstances.

# **School Bullying**

Refer to the School Bullying Policy

Bullying in any of its many guises is forbidden and the staff must act promptly against it.

General Awareness

Staff should be watchful for bullying. Signs might be:-

- deterioration of work
- spurious illness
- isolation
- the desire to remain with adults
- erratic attendance

Every member of staff must accept the responsibility to act if they observe bullying. Staff must ensure that all accessible parts of the school are patrolled during break/lunchtime, including toilet areas, cloakrooms, stairways, etc.

#### *Immediate Action*

- Listen carefully to reports of bullying and record any incidents
- Offer support to the victim.
- Report the incident as soon as possible and certainly within the same school day, to a
  member of the school Senior Management Team (SMT) The Headmaster, Deputy
  Heads or Director of Studies

#### Further Action

A member of the SMT will interview both the victim and the accused and make a written record of events. Other witnesses will be interviewed to attempt to verify statements. Depending upon the severity of the problem, in the judgment of the member of the SMT involved, the following actions may be taken:

- Both parties counselled about anti-social behaviour which might lead to bullying or be the cause of stress or ill feeling.
- The matter referred to the Headmaster in cases of repetition of anti-social behaviour or where serious bullying is suspected.
- The Headmaster or Deputy will be responsible for contacting the parents of the pupils involved. In serious or repetitive instances the bully may be asked to leave the school. In cases where a formal warning is issued the incident will remain 'active' in the pupil's file for one year.

In all but the most trivial of cases the whole staffroom will be informed, by written notice or special meeting, of the nature of the problem and the action taken.

## **Counselling**

The House Parent should be the first line of recourse and defence for all the boarders. However, in some situations, a distressed boarder might find it difficult to seek help. Staff should therefore be alert for clues' to a pupil's distress:

- be aware of the pupils' moods and changes in mood
- notice the timing of particular moods
- talk to colleagues
- build up a picture of pupils.

House Parents should always try to be "approachable" to pupils - children don't learn from people they don't like, and equally they don't approach people that do not have their respect. However, over familiarity should be avoided.

If it becomes necessary to meet privately with a pupil either to pursue concerns raised in the House Parents minds or in response to a request from the pupil, then the following guidelines should be borne in mind.

Qualities which a pupil will be seeking in a confidant:

- trustworthiness
- discretion
- open mindedness

- sympathy
- non-judgmental
- someone who shows them respect.

Trustworthiness is absolutely key - if a boarder thinks his or her confidence has been betrayed then the relationship can be destroyed. However, it is important to emphasise that there are certain areas where the school has a legal obligation to alert third party agencies, and when presented with such a case the House Tutor must warn of the possibility of non-confidentiality at the outset. The following situations fall into this category.

- Abuse
- Pregnancy
- Theft
- Bullying
- Drugs
- Medical

The House Parent should therefore inform the pupil that it may be necessary to involve senior staff, who may in turn bring in outside agencies. Try to maintain the trust and the relationship. If the pupil "clams up" after the warning about possible non-confidentiality, then follow it up – do not let matters rest there; senior staff should also be informed. Remember: the inter-generational relationship within the boarding house is absolutely key.

# The Counselling Session itself

This may begin on a very informal basis but the following guidelines should be adhered to.

- Non-vocal communication is said to convey 70% of the information!
- The purpose of all counselling sessions is ultimately to help people to help themselves
- Make notes: date, day, time but FACTS ONLY not opinions; so:
  - o "Mary said '...'", or "Mary was crying" NOT
  - "Mary looked fraught ..."
- Get the pupil to agree the note is possible
- Dynamic reflection is critical: pick out important aspects and check them out: "Did I get that right?" Ask yourself What are they trying to say? (If necessary say it back to them)
- Summarise at several stages ("Lets see where we've got to")
- Ask OPEN ENDED questions, not questions that will permit a simple yes or no answer
   so rather than
  - o "Are you looking forward to ...?"
  - o "Did you like..."
  - o "Did you do..."
  - o "Is it because of..."
- try the following:
  - o "How do you feel about ...?"
  - o "What do think about ...?"
  - o "Explain ..."
  - o "Describe ...?"
- Remember to use SILENCE and to take time.
- A self-disclosure by the staff member can often be a very good way to get children to talk about themselves

# **Additional safety polices**

## Fabric maintenance

Staff should routinely check the furniture, fittings and fabric of the boarding houses for damage and danger to the boarders as part of their daily activity. Items requiring remedial action should be reported to the Bursar immediately.

## **Electrical Equipment**

If electrical equipment is brought to the Boarding Houses then it must have the relevant up-to-date safety checks (Portable Appliance Test certificate or a means of proof that the appliance is less than 12 months old.) If the relevant documentation cannot be presented to the Housemaster/Housemistress, a PAT test will be arranged. Unsuitable electrical equipment will be confiscated and returned to parents.

Pupils are not allowed to bring kettles, fridges, televisions or other high rated electrical items as these can overload the house systems.

# **Fire Safety**

The following paragraphs detail the fire and emergency evacuation procedures for the boarding area. This procedure is to be followed during any period when boarders are under the control of boarding staff (i.e. between 17.00 and 08.30 Monday to Saturday. At all other times the main school procedures shall apply. Staff must ensure that they are familiar with these procedures and act upon the requirements.

#### ACTION WHEN THE FIRE ALARM SOUNDS

All occupants are to exit the building by the nearest available escape route, closing all doors behind you. Make your way to the muster point in the Gym Each member of the duty boarding staff (Duty House Tutor) is to sweep one boarding floor to ensure all children have left the building. A house parentshould ensure that the Boarding Register is collected before leaving the boarding house. Once all of the pupils and staff have been mustered in the school gym the House Tutor will then follow the instructions below for the operation of the Fire Alarm.

- Observe the fire alarm panel and identify the location of the sounding detector.
- If safe to do so go to the detector and check if there is a fire.
- If there is a fire immediately call the Fire Brigade by dialling 9-999.
- If there is no fire reset the alarm.
- Do not allow anyone to re-enter the building until the alarm has been reset. DISABLED PERSONS: it is the responsibility of the Duty House Tutor to ensure any disabled persons are evacuated via the nearest accessible route.

#### 2. ACTION ON DISCOVERING A FIRE

Close the door on the fire and activate the Fire Alarm by breaking the nearest Break Glass. Call the Fire Brigade by dialling 9-999. Attack the Fire if possible but do not take any personal risks.

#### 3. ROLL-CALL

Before 8.15pm a member of the duty staff will bring the Boarding Register and check list out to the assembly area and check that all registered occupant are present. After 8.15pm Houseparents will collect the register. The register should include details of any visitors to the Boarding House and off duty resident boarding staff.

### 4. FIRE DRILLS

Boarding house fire drills will be carried out periodically and recorded in the log maintained by the Bursar and in the Boarding register. It is usual to have a minimum of one each school term, alternating between in and out of school-day periods.

# 5. ABSENCES Refer to part 3.

#### 6. VISITORS AND CONTRACTORS

All visitors and contractors out of school day hours must report to the Duty House Staff member on arrival in the boarding house, and before leaving the premises, and have their details added to the register.

In the event of a fire evacuation the person hosting the visitor is responsible for escorting him/her to the fire assembly point.

Contractors, working on the premises, shall be informed of the fire and emergency procedures that apply:

- Action to be taken on hearing the fire alarm or discovering a fire
- Fire evacuation procedures including means of escape, location of fire assembly points and name of person in charge of evacuation procedures.
- The location of fire fighting equipment and fire alarm call points in relation to the area of work.

Contractor's employees working on the premises when full time staff are absent (e.g. holidays, at night or at weekends), shall have adequate fire evacuation arrangements in place and will know how to call the fire & rescue service.

The risk of fire arising out of the work of any contractor at the premises must be assessed (use of contractor hazard exchange form/checklist) and appropriate precautionary measures put in place. Any hot work activities shall be closely monitored using the Hot Permit to Work system.

Persons who organise evening events must be informed or given written instructions as regards what action to take in the event of discovering a fire or on hearing the fire alarm sounded.

## 7. EVACUATION ROUTES

Evacuation routes will be kept free from obstruction and adequately and clearly marked. Sufficient notices are displayed at appropriate places, including each bedroom and by each fire call point. These will indicate the action to be taken on discovering a fire or upon hearing the fire alarm.

#### 8. FIRE ALARM TEST

The Fire alarms are tested each Tuesday at 8.30am

### 10. FIRE FIGHTING EQUIPMENT

Fire fighting equipment will be examined and tested at least once a year by a competent service engineer. Fire fighting equipment should only be used by staff trained in its use and only when safe to do so.

## Safety: specific guidance to be given to boarders

Pupils must carry out the instructions given to them by members of staff and older boarders acting with the knowledge and consent of members of staff.

Younger pupils should be supported by older boarders who must set a good example in regard to manners, attitude and behaviour.

Bullying, either physical or mental, is not tolerated in any of its forms; neither is theft or sexual harassment. Violation of these particular rules will result in severe punishment, which may include expulsion from the school.

Boarders MUST notify House staff whenever they leave the House for any reason; the details must be recorded in the boarding register. Staff must know where everyone is at all times to ensure that any boarder can be located promptly should the need arise, and to prevent unnecessary delays or uncertainty in the event that the building has to be evacuated.

# Pupils who have had an accident and/or damaged something

Pupils must notify a member of staff IMMEDIATELY. This is vitally important as to how it will be treated. If a pupil owns up to it the staff member will look at the damage and assess whether it is:

- a genuine accident (the pupil may be charged something towards the cost of replacement);
- an accident caused by carelessness (the pupil will probably be charged);
- a deliberate act (the pupil will certainly be charged and admonition and the parents necessarily notified but credit will be given for owning up).

## **ENJOY AND ACHIEVE**

#### **Boundaries & rules**

For the house to function safely and securely – and for the children to be able to develop naturally - sound foundations represented by clear behavioural boundaries known and recognised by every member of the house are essential. The children's natural instincts will invariably lead them to test their boundaries, which – with appropriate responses and encouragement from us - will hopefully come to be used as personal reference points which will positively influence their enjoyment of, and achievement in, both boarding and school. So whilst the traditional enforcement of rules through systematic policing and sanctions would run contrary to the spirit of mutual trust essential to the atmosphere of openness and tolerance desired for the Cundall Manor boarding house, these boundaries nonetheless represent markers for the staff to guide and encourage the personal, cultural and socio-emotional development of boarders. One "rule" will never "fit all", and staff should always be sensitive to individuals, circumstances and context when boundary issues arise, and at all times deal with matters discreetly and confidentially.

It should also be borne in mind the layout of the Cundall Manor boarding house – with the principal social areas located on the a floor mixed with both girls and boys— is such that there are some areas where clear rules must be enforced. Whilst there may be special occasions when these particular rules can be relaxed, the absolute need to maintain a sense of privacy must never be compromised.

## Our code of behaviour: the boundaries

Our general premise is that the socio-emotional cognitive development of boarders should be promoted as naturally as it would within the family. This means a "light touch", and the encouragement of the tacit recognition of appropriate behavioural boundaries. However the general principles of what is and is not acceptable merit explicit statement, and to this end any behaviour which might be reasonably considered ill-mannered or antisocial should not be tolerated and offenders should be told that it is unacceptable.

Any "serious" crimes - e.g. stealing, smoking, bullying, malicious damage - must be recorded on an Incident Report Form and passed on to the relevant Head of Station and Deputy Head. The word 'bullying' must be interpreted widely, but whilst behaviour such as malicious 'queue jumping' for meals need not be the subject of a written report it should not be tolerated by staff. All reports by pupils of bullying must be acted upon promptly by staff according to the procedures for bullying outlined in this handbook.

#### Our fixed rules

Whilst the emphasis is upon a light touch and self-management according to our code of responsible and acceptable behaviour, we do have certain "non-negotiable boundaries". These are few, but necessarily important and material to the maintenance of our ethos of mutual understanding and respect.

- No boys allowed in girls' rooms, nor girls in boys'.

  Our default position. However, it must be recognised that the situations this rule implicitly guards against do not constitute the sole reasons why a boy might wish to visit a girl's room and vice versa, and tolerance and trust should be allowed where the visitor has shown due respect for and an understanding of the need for such a prohibition; so if the visitor has a genuine reason to be there beyond simply occasional socialising (perhaps to borrow something), does not unnecessarily delay his or her departure, and ensures that the door is kept open for the duration of the visit, this need not be interpreted as a breach of the rule. However, staff should be aware of those boarders regularly testing the boundary, and early steps taken to remind them of the reasons why such a rule exists.
- Senior pupils going "out" during the working week is not permitted unless the circumstances are exceptional and they are supervised by a parent and all have their own parent's permission.

#### **Activities & entertainment**

Major cultural festivals are celebrated in the house. Boarders will have the opportunity to participate in evening activities run by the duty staff until 20.00

### **Induction of new boarders**

It is clearly desirable that every new boarder is made to feel welcome from the moment they arrive; they must be helped to feel at home and given every reason to look forward with enthusiasm to life at Cundall Manor, shedding as soon as possible the inevitable concerns about leaving their own homes and families.

Accordingly a balance must be struck between the need to formally introduce the routines and practices of the house, and the need to avoid intimidating the newcomer with any sense of rigid formality and institutionalisation.

New boarder induction should ideally take the following format.

- The new boarder should where possible, be met and welcomed by one of the House Parents, who will take them up to the boarding house and introduce all resident staff members.
- The new boarder should be shown to their bedroom and provided with plans of the school and grounds. As part of the induction procedure for all pupils, the new boarder should be paired with an established pupil from the first day of term this "buddy" should be appointed before the new boarder arrives or as soon as practicable thereafter, with his or her role being fully explained.
- A copy of the "Boarders' Handbook" (pupil version) should be provided, and the contents briefly described; the new boarder should be encouraged to ask any questions. The Fire/Evacuation drill in particular should be highlighted.
- If necessary and only if there are reasons to suspect reassurance is needed on this point it should be explained that no form of "Initiation Ceremony" is tolerated in the school and that under no circumstances should a new boarder allow him/herself to be induced to participate in such activity; instead it must be reported immediately to a staff member.
- Access to telephones and the Internet should be explained.
- The boarding house's provision for the safe storage of valuables should be explained, and spare pocket money/passports collected for safe keeping.
- The role of the "independent listener" should be explained.
- Any special dietary requirements for the new boarder should be noted and passed to the Catering Manager.

The final element of the induction procedure should be a guided tour of the school, including the grounds and sports facilities as weather permits. Depending on age, the "buddy" should be asked to take charge of this.

Staff should also ensure that overseas pupils hand their passports to the School Office on arrival – this is a requirement of the UK Immigration & Border Control Service. Passports and all other significant personal paperwork should be retained in the school safe. When the pupil is ready to leave the passport will be handed back on the day of departure. It is the boarder's own responsibility to ensure that he/she has collected his/her passport from the school office.

## Dealing with boarders' worries & complaints

If a boarder is concerned or anxious about anything then clearly he or she will be unable to enjoy life in the house and will be very unlikely to achieve his or her full potential, either academically or personally. Boarding House staff must make themselves familiar with the pupils' rights to express these concerns and where appropriate make formal complaints, and must acting according to the procedures set out below. In all such matters House Tutors should always proceed with the assumption that the pupil is telling the truth - it is the role of the Head or Deputy to check on the veracity of what a pupil has said. It is particularly important that staff ensure all boarders fully understand what they should do in the event they feel particularly worried about something, and also what they may do if they wish to complain about how they are, or have been, treated. There are two things to be emphasized:

- 1. a boarder may wish just to talk to someone; or
- 2. they may wish to make a complaint.

What should they do if they just want to talk to someone?

Firstly, they have close friends who may be able to help, or an older boy/girl to whom they feel they can turn. The House Tutors should always be ready to help, and they may turn to any other member of staff they know and with whom they feel they can comfortably talk.

There may be times when they feel they can't talk with a member of staff – this is perfectly all right. In such circumstances they can talk, telephone or write to any of the following:

- Their parents
- The school's "independent listener", Rev Alison Askew of 13 The Croft, Kirby Hill (tel. 01423 326284)
- The School Doctor. Dr. P. McAvoy (Tel 01765 692366)
- Childline (Tel 0800 1111)

Staff should be aware of the kinds of things that can lead to a boarder becoming upset or unhappy. These include:

A perception of unfair treatment – including verbal abuse - by a member of staff in school or in class.

- The belief that a punishment was unjust or in some way not right.
- A Prefect or senior has treated them unkindly.
- They are being bullied.
- They find it difficult to make friends.
- They feel discriminated against because of gender, colour or race.
- They feel that no-one understands the difficulties they are having with some of their work.
- Someone has made suggestions they feel are not right.
- They feel the food they get is not as good as it should be.
- Someone is making fun of them.
- They feel there isn't enough respect for their privacy.
- Someone has taken something and hasn't returned it.
- They think they are being badly taught and aren't getting a fair deal.
- Or anything else they think is wrong.

What should happen if they want to make a complaint about something?

The first thing they should do is to speak to any member of staff they feel they can trust (e.g. House Tutor, Form Tutor, or Head of Station); they can have a friend with them if they wish – another pupil or another member of staff. If they wish to speak to someone outside of the school, Rev Alison Askew of 13 The Croft, Kirby Hill, Boroughbridge has agreed to act as the school's "independent listener" and is available to speak to any pupil who might wish to do so. Soon after joining Cundall new boarders will have the opportunity to meet Rev Alison Askew. Her telephone number is 01423 326284 and can be used at any time.

If the matter can't easily be settled to their satisfaction then they can make the complaint formal. This can be done in writing, addressing the letter to the Headmaster, or orally by telling the member of staff they have spoken to about the problem.

1. The complaint will be entered in the COMPLAINT BOOK held by the Head.

- 2. They will get a note from the Head saying that he has seen the complaint and that it will be attended to within two school days of them making the complaint. Then they will be asked to talk the matter through with either the Deputy Head or the Head, and they can have a friend with them who may be another pupil, a member of the house staff, their form tutor or any other member of staff. If, within two more days, they have not had the matter satisfactorily sorted out, they may contact any of the people whose names are listed above.
- 3. Whoever they contact will speak to them at the school, again they can have a friend with them and will advise them about what course seems sensible. At this stage it will be up to them to make a decision acting on the advice they have been given.

## **Supervision**

For much of the time the role of House Parent is supervisory but this must be done with some vigour - i.e. staff should move about the building and grounds from time to time. Misbehaviour when found must never be ignored or the staff member's authority is lost.

## **Discipline**

The general rule whenever a House Parent is obliged to admonish or warn a boarder for breaches of a recognized boundary is that this should be done firmly but discreetly, and not – unless the circumstances dictate otherwise, for example if another boarder has been directly prejudiced by the behaviour – in view and earshot of other boarders. Sanctions are to be used only as a last resort – for repeated breaches, willful ignorance of a boundary issue, or willful disobedience – and should be "targeted" to the individual: that is, there is no policy approach to sanctions, and the House Parent should use experience and instinct when deciding upon a course of action. Early bed-times, withdrawal of computers, enforced daily chores are all possibilities.

Serious breaches of discipline should be recorded on a Pupil Incident Report, which must be passed to the pupils Head of Station and the relevant Deputy Head. The use of restraint follows the whole school behaviour policy.

A copy of the wider school disciplinary procedure is included in the appendices to this handbook.

#### Searches

Where an item has gone missing it may be necessary to search pupils' bedrooms and belongings. In this circumstance the pupil concerned must be present during the search and his/her possessions must be respected. A search involving a very small number of pupils may be considered to be intimidatory and to presume a person's guilt before proof is found - if it is found! Consequently this should be done only in exceptional circumstances. Pupils may be asked to turn out their pockets or to open locked boxes, but 'body searches' or 'frisking' should never be carried out.

Staff should treat the pupils with courtesy and consideration at all times and expect the same from the pupils in return.

Boarders have a right to a reasonable amount of privacy and staff should respect that right - see "Policy on Privacy and Confidentiality" in this Handbook.

Staff should get to know the pupils including their home circumstances, family background, medical problems etc. Problems such as homesickness - which can recur even for experienced boarders - should be dealt with sympathetically.

If a complaint about one member of staff is made to another, the member of staff receiving the complaint must report it to a Deputy Head or the Headmaster as appropriate. If this results in a reprimand for the staff member that person must not show any bias towards the plaintiff - to do so would constitute a major breach of professional standards, and disciplinary action would follow against the staff member.

# Enjoy & achieve: specific guidance to be given to boarders

The Key Principles of Boarding – the 'do's and the 'don'ts'!

#### The 'do's:

- Be committed to your work and all that the school and your house are involved in. Commitment to communal activities is particularly important because without your participation the activity would not go ahead and be lost to everyone.
- Have consideration for other people at all times (i.e. pupils, teachers, office, cleaning and kitchen staff as well as visitors). Good manners and courtesy are essential in any close community and are expected at all times.
- Make sure you know all health and safety regulations and that you report anything or anyone that breaks these regulations.
- Have the highest standards of personal cleanliness and organisation (you and your area must be tidy at all times).
- Talk to staff or prefects if you have a problem or if you think someone else has a problem.
- Always think about OTHER PEOPLE first. In that way conditions will be better for everyone.

#### The 'don't's:

- Try to get round your school and house commitments to suit yourself.
- Do anything that infringes the rights of others i.e. play overly loud music, try to dictate what is on TV, etc.
- Make unnecessary mess in any area and expect someone else to tidy up after you.
- Do anything that could injure anyone else either physically e.g. trip people intentionally or mentally e.g. call others names, or threaten them.
- Damage school or anyone else's property or engage in any act that may cause damage to property.

Boys should not go into the girls' rooms, nor enter the bedrooms of other boys without permission. Girls should not go into the Boys' rooms, nor enter the bedrooms of other girls without permission.

# MAKING A POSITIVE CONTRIBUTION The importance of the inter-generational relationship

It is important that the House Parents fully engage with the boarders on an individual level. These intergenerational relationships within the house serve as important proxies for those that the children would otherwise utilise for guidance and support at home, and the openness and trust shown by the House Tutors will have a material bearing upon the

children's readiness to engage with the world around them and to develop personally and socially within it. In many ways, the contributions made by the individual boarder to the community of the house will be heavily influenced by the explicit and tacit guidance derived from the adult role models within the house.

However, it must be remembered that whilst the House Parents are *in loco parentis*, we are not actually the parents, and certain obligations to both child and natural parent must be uppermost in our minds.

#### Parental contact

The boarders must be made fully aware that they are able to contact their parents whenever they wish, and whilst there is a point where the frequency of such contact might begin to make things difficult for both parties it remains true that regular contact is an essential contributor to each individual child's emotional wellbeing. However at the other end of the scale it's worth reminding ourselves that, sometimes, settled and happy boarders don't always think to pass on good news, so we should try to ensure this happens and, where the opportunities present themselves, do so ourselves. The boarding mobile phones are most commonly the preferred and provision should be made for the children to make any such calls in privacy if they so require.

It is important to note that as we are a weekly and flexi boarding community then arrangements for individual boarding will change throughout the course of the term. Any changes to the form completed by the parent to their child's boarding arrangements must contact the school office so that it can be recorded in the Boarding Register.

## **Privacy & confidentiality**

Whilst transparency with parents is essential, staff must also respect the privacy and confidentiality of pupils and be sensitive to the needs of those pupils. Where functional intergenerational relationships exist then boarders are likely, from time to time, to seek the guidance and informal counsel of House Tutors, in the same way they would naturally seek such support from their parents at home. Trust is necessarily an integral component of every such relationship, and staff must adhere to the following guidelines governing every boarder's right to privacy and confidentiality.

- Private details of pupils' home-life, health etc. should never be discussed with other staff in public places where they may be overheard; neither should they ever be discussed with other pupils.
- A proper professional relationship of mutual trust and respect should be built up between staff and pupils such that pupils should be able to speak to any member of staff if they wish to discuss personal problems. Under no circumstances must a staff member exchange "gossip" with a pupil.
- Staff are expected to maintain confidentiality with personal information given them by pupils except in cases where the health and safety of the pupil is at risk. In such cases the pupil must be informed that confidentiality cannot be maintained, it would be against the law to do so, and the appropriate higher authority e.g. the Headmaster, School Doctor, Independent Person, informed without delay. If the staff member is in any doubt about the severity of that risk then higher authority must be consulted.
- Proper courtesy must be shown to pupils in regard to their physical privacy.

- Staff should knock and delay entering a pupil's bedroom if the door is not immediately opened to him/her; similarly when entering a toilet or shower area.
- Staff should enter bedrooms only if there is a reason, e.g. to speak to a pupil or group of pupils, to investigate antisocial behaviour, to hurry them on, to get them up, etc.
- Staff should check regularly for any damage to toilet cubicle locks, windows etc. and report any damage immediately to the Bursar.
- Searches are an invasion of privacy and should be carried out as detailed in the earlier section 'searches'.

# Uniform

The only jewellery permitted with school uniform is a wristwatch and for girls only, plain ear studs. Make-up is permitted for girls in Upper School, but should be moderate and discreet. After school casual clothes may be worn.

There must be no mixing of school uniform and casual wear at any time.

All Girls up to Form 6 with long hair must wear it up during the school day. Upper School Girls must be able to tie hair up when required during the school day. Boys' hair should be at an acceptable length. Dyed hair is not permitted.

Smoking is unhealthy and antisocial and is FORBIDDEN, as is the possession and use of alcohol and illegal substances.

## Clash of commitments

In a busy school this is a problem quite commonly met by the pupils. At times pupils may well be told to do two things by two different members of staff at the same time. It may be that they have a commitment they have agreed to, and are then given something else to do. The following principles and procedures apply.

- As soon as they are aware of the clash they should see the members of staff involved.
- Calendared commitments have priority over NON calendared ones.
- County representation has priority over school representation but school must be informed well in advance.

As a general rule the following are the list of priorities:

- School commitments *e.g.* team fixtures.
- School Activities, e.g. play rehearsals, orchestra practice.
- Out of school activities (unless pupils are participating in county teams, see above).

If any problems remain after discussions along the lines indicated above a House Tutor or a member of the SMT should be consulted.

#### Beginning/end-of-term arrangements

The House Tutors should be made aware of departure dates, times and destinations in advance of departure. Boarders should only arrive before the arrival day and/or depart before the departure day under exceptional circumstances. Permission to do so can only be given by the Headmaster and there is a procedure to follow.

Pupils who arrive early or depart outside the term dates must stay with their guardians. Pupils cannot assume that the school will be staffed and that they can stay. Dates are given for 'boarders return' and 'term ends', they must be used.

Permission to Leave Early

If a pupil wishes to leave earlier he/she will need to have permission in the form of an email or letter from his/her parents giving reasons why they need to leave early.

# The boarders' annual survey

If the boarders' are to be encouraged to make individual positive contributions, then their views must be actively sought and listened to as a matter of course. In short, they must feel involved: they must be encouraged to take ownership of the house – it is their "home" during term time. It is therefore worthwhile formally soliciting their views periodically, and every year – typically in the second half of Lent term – a survey is carried out in which the boarders are invited to present their views on how things have been going in the house. [Note that this is now an Inspection requirement.] These surveys are anonymous and formatted in such a way as to ensure that the views of every child – regardless of age – are equally weighted.

## Positive contribution: specific guidance to be given to boarders

All clothing brought to school is your personal responsibility, and should be clearly marked with name tapes, and footwear named with an indelible marker. Other items should also be clearly named, especially calculators etc. Pupils should not borrow clothes from others and must never share tooth brushes or razors with other pupils.

#### **ECONOMIC WELLBEING**

One of our key objectives as House Tutors is to prepare our boarders for life beyond school. One aspect of this is to ensure they have an understanding and appreciation of the importance of living in decent homes and sustainable communities, with appropriate access to education and transport, and where prices *and values* of material goods are properly attributed.

Such lessons start within the house. Resident boarders should be encouraged to appreciate these facilities and take ownership and personal responsibility for them in the same way that they must accept personal responsibility for their economic and domestic situation when they leave.

#### Accommodation

Floor plans of the boarding accommodation are included in the appendices to this handbook.

## **Bedrooms**

The accommodation is arranged on two floors. On the first floor there are three girl's rooms, one boys' rooms and a common room. On the second floor there are four boys' rooms.

## Common/social areas

There is one principal common area – the common room on the first floor. Staff must be aware that it is a social area for both sexes ensuring therefore that it is adequately supervised.

A second common room is provided for the boys on the second floor.

#### Showers & washrooms

The girls' rooms on the first floor has integral wash room facilities including showers, bath, toilets and hand basin facilities. The boys' room on the first floor are served by separate wash rooms with showers, hand basins and toilets.

On the second floor there are toilets and a shower room serving the boys rooms.

In 2012 the washing facilities for the girls were improved, the next stage for development in the boarding house is up upgrade the boys washroom facilities in Summer 2013 – See Whole School Development Plan.

## Areas for private discussions

Naturally any boarder is entitled to invite anyone from the same floor into his or her room at any time. However, girls may not invite boys into their rooms, nor boys invite girls into theirs, and should private space be needed then they should be encouraged speak to a member of staff. Should any of the staff wish a private chat with any boarder then the best space to use is the staffroom; other than during room checks, staff should avoid entering any bedroom without demonstrable cause – for instance, to investigate any commotion, to locate a boarder, or at the direct request of a boarder for a particular purpose; and where this is necessary, the door should be kept open at all times.

## Telephones & Internet

Upper School boarders have their own mobile phones and access to the internet so their use of landlines is relatively infrequent. Upper school boarders must hand their phones to a duty member of staff at 17.30 and will have them returned at 20.15 following the activity session. All mobile phones, laptops, tablets etc are to be handed in to the house parents at 21.55 to be returned after 08.00.

Pupils in Forms 1 to 6 have designated boarding mobile phones which can be used as contact with parents. These mobiles are kept on the first floor to prevent the boarders needing to get permission to use them. In addition to this pupils have supervised access to the I.T. Room in free time between 19.00 and 20.00. During this time arrangements may be made for pupils to skype.

In addition to this the school provides daily newspapers to help boarders stay in contact with events in the outside world.

## **House organisation**

#### Hierarchy

Whilst School Prefects are acknowledged, their authority is not recognized within the house. Therefore there is no real hierarchy other than the natural one which occurs with age.

## The daily routine in the boarding house

07:30 Wake-up

House Staff should wake every boarder no later than 07:30, taking time to ensure everything is well with them and there are no illnesses. Where necessary any reminders should be given concerning the day ahead.

# Laundry

Housekeeping will collect laundry from rooms after 7.30am

#### 08:00 Breakfast

Breakfast is always in the school dining hall. Boarders may only leave when dismissed by the House Staff and they are expected to clear away to the pantry their own plates and bowls.

Here a head count is taken.

#### 08:20 Room check

House Staff should go back to their floors after breakfast to see the children off to school and ensure their rooms are adequately tidy – which means, ready for the house cleaning staff, which in turn means: floors clear; beds made; clothes put away; work-tops tidy.

# 08:30 Registration

Children should be on their way by 08:25. From this point until they return after their final classes or Enrichment activities in the afternoon, they pass into the care of the school; this means that in the event of any evacuation, they will go with their class to the appropriate evacuation post and be checked against the school register.

## 17:00 End of school

At this point the boarders will return to the boarding house to prepare for tea.

#### 17.30 Tea

Tea is prepared by the school kitchens and served in the dining room.

## 18:00 House meeting

All boarders to meet in the library

18.10 Prep

F1-F5 will have supervised prep in the Dining room. F6 and upper school will have supervised prep in their dormitory work areas.

#### 19.10 Activities

There are activities available to the whole school via the Termly activities list provided by the school office. In addition to this the duty staff provide a wide range of activities both inside and outside, dependent on the time of year. It would be expected for Prep School age pupils to participate in one of the activities unless it has been agreed by a member of the duty staff. Upper School pupils have the option to partake.

## 20:15 Supper

A light supper is available from 20:15 until the earliest bedtimes, and boarders are welcome to graze their way through as much or as little of this as they fancy.

## 20:45+ Bedtimes

A copy of the current bedtimes across the year groups is included in the appendices. The earliest bedtime – for F1 & 2 children – is 20:45

## 22:30 Lights out

A final check of their floors should ordinarily – and depending on the age groups in the house that night - be made by the Duty House Parent no later than 22:30.

#### Door check

One of the Duty House Parents should also check that the house is secure for the night – at a minimum this means checking that the library door, the back and side doors, Arthurs place door and the main door are all locked.

# The Boarding Register

The Boarding Register contains the following:

- The daily registers
- Calendar of the anticipated boarding attendance that term
- Emergency contact details for boarders and their next of kin
- List detailing the special medical needs of ANY Cundall pupil
- Pupil welfare plan
- Fire evacuation procedures including emergency service contact details
- Weekly fire alarm testing record sheets.
- Templates for recording
  - The unexpected activities of individual boarders on the day for instance, absences from the house, unscheduled exeats, visits to town etc. *All boarders MUST advise the House Tutor if they leave the house for any reason*
  - o any incident or disciplinary event this record is simply a "holding" record, and provides an easy and quick means of noting any such event for future reference and discussion with other House Staff about to come on duty. If necessary the event will be transferred to a formal Incident Report, maintained in the school office and where appropriate circulated to other members of staff including the Head of Station, Deputy Head and Headmaster

The Boarding Register is therefore an essential record that must always be to hand, its location always known to at least one of the duty House Tutors. It is usually located in the School Office. It must be taken by the House Tutor during any evacuation, and on any trip out of school (with the appropriate Risk Assessment).

### Trips of any kind - local or regional

Staff taking boarders on trips out of school must follow the guidelines in the Staff Handbook according to the Educational Visits Policy. It is particularly important that accurate lists of all participants and contact details about the venue being visited are left at school with the office and that all appropriate risk assessments have been completed. In the event of any accident the school office (01423 360200) should be informed during the working day and as appropriate the emergency services as well as the Headmaster or a Deputy who will have the responsibility of reporting to parents and dealing with the press or broadcast media. Outside of the working day the Headmaster or a Deputy must be contacted

General and specific Risk Assessment for trips are available in the staff shared area and should be passed to a Deputy Head for approval 48 hours prior to any trip.

## Economic wellbeing: specific guidance to be given to boarders

The Boarding House is the boarders' home - day pupils must respect this and only be on the corridor if invited by a boarder or accompanied by a member of staff.

Bedrooms and common rooms must be kept clean and tidy at all times. Items of clothing must not be left lying around - this includes leaving things on radiators. No clothes must be left hanging where they are visible from the windows. Beds must be left properly made up during the day and at weekends when boarders are away.

Each morning after breakfast your room must be ready for the cleaning staff. This means:

- your bed is made
- the floor is clear
- your clothes have been put away (hung up/folded in drawers)
- work surfaces are tidy
- the windows/sinks are tidy

Note that in most cases this is only impossible when someone has brought too much to keep in school - *remember space is limited!* Rooms will be inspected after breakfast every day.

Posters are allowed anywhere within the dormitories but must be in "good taste".

Important: any graffiti or wilful damage to property belonging to the school must be paid for.

No furniture may be moved between rooms without the consent of the House Tutor but furniture may be rearranged to suit the room occupants' wishes, except where health & safety issues arise.

Pupils may not sleep overnight in any other room without:

- the permission on the duty staff and
- the permission of the person whose room it is.

At all times boarders are expected to have the greatest respect for the rights and privacy of others.

Absolutely NO food that is to be cooked should be stored (or cooked) in a room.

Cash over £5 must be lodged with the Housemaster and appropriate receipts given.

Valuable items are brought into school at the pupil's own risk. The school cannot take responsibility for safeguarding them. It is the boarder's RESPONSIBILITY to keep them safe.

Bed Linen must be changed every other week – girls and boys alternating.

Bed times should be strictly observed but permission for a work extension should be gained from the member of staff on duty.

Duties around the house

It is expected that ALL pupils will have a fair share of duties around the house for the benefit of every member of the boarding community.

Pupils who want to change Rooms

When pupils arrive they will be allocated a room. This may mean they will be sharing. It is accepted that not everyone can get on and every effort is made to put together those pupils who are friends, where they are known to the staff. Pupils need to realise that there are

often pupils whom everyone wants to be with, and other pupils whom others are less keen to be with. If the initial pairings are unhappy and do not settle, pupils will be given the opportunity to change rooms if they can sort out the following among themselves. In such situations, the following guidelines should be adhered to.

- 1. Find someone who is willing to swap with you. (They must be willing without any intimidation or being "told to move"!).
- 2. Talk to any other people in the room.
- 3. See the House Tutors with the proposal.
- 4. The House Tutors will have the final say in any proposed room changes.

When pupils cannot sort out difficulties themselves using the above procedure, a solution will be imposed upon them by the House Tutor on duty.

The boarding corridors, bedrooms and common areas are out of bounds during the school day unless permission is sought. Pupils may return to the boarding house after 5.00pm.

No chewing gum or Tipp-Ex is allowed in school. All damage or breakages must be reported immediately to the House Tutor on duty, who will report the matter to the maintenance team and bursar as appropriate.

Pupils must never enter the school kitchens unaccompanied by a member of staff or without permission.

## **Laundry Procedures**

Weekly boarders have their laundry done at school. All clothes should be named. The Housekeeper will collect washing from rooms daily. Bed linen should be changed on a weekly basis.

#### Personal & Stationary Items

The school shop is available via the school office for personal and stationery items. The school would try its upmost to provide for the needs of the boarders and a discussion with a House parent would normally resolve any problems.

## **BOARDING STAFF DEVELOPMENT**

Cundall Manor is committed to the continuing professional development of all staff, including boarding staff, and encourages applications for appropriate training grants and subsidies. The attention of boarding staff is drawn in particular to the various courses and qualifications offered by the Boarding Schools' Association, which extend from short day courses to university-accredited professional practice and development certificates. Every effort will be made to accommodate interest shown by staff in any relevant training. Application should be made in the first instance to a Deputy Head who will arrange for the necessary submissions to be made to the SMT and the Bursar, and who will ensure appropriate arrangements are made for cover within the house.

# APPENDICES

Floor plans of boarding accommodation

See plans

# **Risk Assessments**

Boarding an		<i>J</i>	Date	28.06.2013
accommoda	tion	Fiona Saxby		

HAZARD IDENTIFICATION											
Electricity	Manual handling, ergonomic hazards		Work equipment & machinery	hot/cold temperature	Threat of violence	&		Slips, trips and falls	Fire, explosion	Medical/ other emergency	Food safety & hygiene issues
Y	Y	N	N	Y	Y	N	Y	Y	Y	Y	Y

What are the hazards?	Who might be harmed and how?	What control measures are already in place?	Likelihood	Severity	Risk	What other control measures might be necessary?	Action by who	Action by when	Action done
Electricity	Staff & pupils Other users Electrocution, burns, fires from faulty electrical installations or equipment.	<ul> <li>Fixed (building) wiring properly maintained</li> <li>RCD protection fitted to consumer unit</li> <li>Portable appliance inspection and testing in place in line with current HSE guidance</li> <li>No overloaded sockets or extensions used</li> <li>Defective equipment taken out of use safely and promptly replaced</li> <li>Pupils own equipment PAT tested or RCD tested before use</li> </ul>	2	3	6	<ul> <li>Staff trained to spot and report any defective plugs, discoloured sockets or damaged cable or equipment</li> <li>Staff and pupils reminded not to bring in their own appliances (CD, radio etc.) without authorisation</li> </ul>	FS		

Manual handling, ergonomic hazards	Staff & pupils Other users Risk injuries or back pain from handling heavy/bulky objects or equipment	<ul> <li>Minimal lifting policy</li> <li>Appropriate storage</li> <li>Training, information and supervision</li> </ul>	3	3	9	Ensure members of staff who have to carry out regular manual handling activities receive adequate training	FS	
Slips, trips and falls. General hazards from fixtures and fittings	Staff & pupils Slips causing sprains, fractures and trapped fingers etc from doors/window s etc.	<ul> <li>Defects reported immediately.</li> <li>Adequate lighting provided.</li> <li>No trailing cables or leads</li> <li>Work areas and walkways kept clear.</li> <li>Good housekeeping.</li> <li>Floors cleaned on a regular basis.</li> <li>Spillages cleaned up immediately.</li> <li>Floor surfaces maintained to good standard, defects reported</li> <li>Windows and doors checked for condition</li> <li>Windows restricted or protected from fall hazards</li> <li>Tables, chairs, cupboards, draws, beds etc. checked for condition and suitability</li> </ul>	2	3	6	Staff to report any defective or damaged equipment fixtures or fittings	FS	
Display Screen Equipment	Staff & pupils Back pain, headaches, eyesight deterioration.	Appropriate desk, chair and equipment available to meet DSE requirements	2	2	4		FS	

Fire &	Staff & pupils	Houseparent or their cover present whole	2	3	6	• All users made aware	FS	
Emergency	Other users	time.				of fire & emergency		
0 ,	If trapped,	Fire Risk Assessment carried out by a				procedures and contacts		
	people could	'competent person'				1		
	suffer fatal	Regular fire & emergency drills carried						
	injuries from	out						
	smoke	Good housekeeping – Storage and waste						
	inhalation or	management						
	burns.	Equipment switched off at night						
	Property	wherever possible						
	damage &	Passive fire resistance designed in to						
	other loss	building (fire doors & compartmentation)						
		Extinguishers in place and maintained						
		Detectors in place and maintained						
		Emergency escape plan in place						
		Emergency signage and information in						
		place						
		• Emergency exits lead to marked assembly						
		points						

General safety & security. Threat of violence, medical emergency	Staff, visitors & pupils Unauthorised access and possible medical emergency	<ul> <li>Building secure with restricted access</li> <li>All activities and visitors to be authorised</li> <li>First aid kit available</li> <li>Trained First Aiders available</li> <li>Written arrangements in place for recording and reporting of accidents</li> </ul>	2	3	6	<ul> <li>Opening/closing procedure</li> <li>All 'non-school' users to provide own insurance and safety information or declaration prior to use</li> <li>All 'non-school' users to be aware of parking arrangements</li> </ul>	FS	
Hot, or cold temperatur e	Staff & pupils Other users Extreme temperature can cause hypothermia, heat exhaustion or heatstroke	<ul> <li>Appropriate heating in all rooms</li> <li>General ventilation (windows) in place</li> <li>Temperature monitored</li> </ul>	2	2	4	• Monitor temperatures	FS	

Slips, trips & falls	Staff, visitors & pupils Possible fractures, sprains, cut, grazes or other injuries, if tripping over objects or slip on spillages	<ul> <li>No trailing leads or cables.</li> </ul>	2	3	6	<ul> <li>Staff trained to spot and rectify slip and trip hazards</li> <li>Any defects in flooring to be reported and activities restricted</li> </ul>	FS	
Food safety & hygiene issues	Staff, visitors & pupils Possible infection, anaphylactic shock or food poisoning	<ul> <li>Houseparent or cover always present.</li> <li>Daily cleaning schedule in place</li> <li>Reporting procedure for hygiene issues</li> <li>Food safety management system in place</li> <li>Limit type and range of foodstuffs allowed in accommodation area</li> <li>Appropriate storage of foodstuffs (including any allergy management issues</li> </ul>	2	2	4	House parent liaison with parents and School Matron	FS	

# Risk Assessment Methodology

			15-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	LIKELIHOOD		April and the second se
R	isk Assessment Risk Rating Matrix	VERY UNLIKELY (Freak event – no known history)	UNLIKELY (Unlikely sequence of events)	LIKELY (Foreseeable under unusual circumstances)	VERY LIKELY (Easily foreseeable – incidents have occurred)	ALMOST CERTAIN (Common occurrence – aware of many incidents)
	ACCIDENT OR INCIDENT WHERE NO HARM ARISES	1	2	3	4	5
\$10	MINOR INJURY	2	4	6	8	10
SEVERITY	INJURY RESULTING IN 3 OR MORE DAYS OFF 3	3	6	9	12	15
S	MAJOR DISABLING INJURY 4	4	8	12	16	20
	FATALITY OR MULTI FATALITIES	5	10	15	20	25

- All assessments follow the OHS Hierarchy of Control and will remove or reduce identified hazards, ignoring the trivial and concentrate on serious hazards and risks.
- Actions must be both "reasonable and practicable" and "suitable and sufficient" with being informed of any H&S hazards that affect them in an appropriate manner.

#### **Fire Evacuation Procedures**

#### 1. ACTION WHEN THE FIRE ALARM SOUNDS

All occupants are to exit the building by the nearest available escape route, closing all doors behind you.

Make your way to the muster point in the school gym.

Duty House Parents will ensure evacuation of the boarding house.

Duty House Parent will collect the boarding register before leaving the boarding house.

Once all of the pupils and staff have been mustered in the school gym the House Parent will then follow the instructions below for the Operation of the Fire alarm:

- Observe the fire alarm panel and identify the location of the sounding detector.
- If safe to do so go to the detector and check if there is a fire.
- If there is a fire immediately call the Fire Brigade by dialling 9 999
- If sure there is no fire reset the alarm
- Do not allow anybody to re enter the building until the alarm is reset.

DISABLED PERSONS: it is the responsibility of the House Parent to ensure any disabled persons are evacuated via the nearest accessible route.

#### 2. ACTION ON DISCOVERING A FIRE

Close the door on the fire and activate the Fire Alarm by breaking the nearest Break Glass. Call Fire Brigade by dialling 9 – 999 Attack the fire if possible but do not take any personal risks.

#### 3. ROLL-CALL

The Duty House Parent will bring the boarding register to the assembly area and check that all registered occupants are present. The register should include details of any boarders in other parts of the site (grounds, Sports Hall, etc) or off site. It should also detail any visitors to the Boarding House and off duty resident boarding staff.

# **Boarders Survey**

1.

# ANNUAL BOARDING REVIEW

**ACCOMMODATION** 

The following survey is intended to help the staff understand just what we need to do to make sure life in the boarding house is as good for you as we can make it. What you feel about things matters, and you've got the chance in this survey to let us know how we're getting on. There's no need to put your name on this – the space to do so at the end is optional – and when you're done, put it in the envelope addressed to Head Teacher, seal it, and hand it to one of the house-parents. It should only take a few minutes – mostly you just have to tick something, but there is space for you to sound off about stuff if you feel the need to.

Please put a tick in whatever box most closely fits what you think or feel about each question

1.1.	How do yo	ou rate your bedroo	m?					
Very g	good □	Reasonably good		Not very goo	od 🗆	Awful!		
1.2.	How do yo	ou rate the common	n areas i	in boarding?				
Very g	good 🗆	Reasonably good		Not very goo	od 🗆	Common		
2.	CATERING	G						
1.1.	What do yo	ou think of the food	d during	g the school v	week?			
1.1.1. Great	Breakfast start to the	day 🗆 OK 🗆 🛚	Not ver	y good □	Not enou	ıgh to get r	ne going 🗆	
1.1.2. Very §	Lunch good □	Reasonably good		Not very goo	od 🗆	Awful!		
1.1.3. Very §	Supper good □	Reasonably good		Not very goo	od 🗆	Awful!		
1.2.	What do yo	ou think of the food	d at wee	ekends?				
1.1.1. Very §	good □	Brunch Reasonably good		Not very goo	od 🗆	Awful!		
1.1.2. Very §	good □	Supper Reasonably good		Not very goo	od 🗆	Awful!		
3.	ACTI	VITIES						
1.1.	Do	you think you have	e enoug	h to do in bo	arding d	uring the v	veek?	
Yes, a	bsolutely $\square$	Pretty good mo	st of the	e time 🗆 🔝 1	Not really	√ □ Absol	utely not □	
	If you've got any suggestions about what else you'd like to be able to do during the week, put them here							

4.	THE DAILY GR	IND			
1.1. house?	What do you	think about t	he current weekly/d	aily routine i	n the boarding
Ideal □ required! □	Reasonable	ı Ro	oom for improvemer	nt □ Urg	gent review
study?	What do you	think about t	he current arrangen	nents for prep	o/individual
	ell for me □ Wo	rking OK 🗆	Not really working	for me 🗆 🏻 I	Not working at
1.3. for schoolw	•	you get enou	gh of the support yo	u need from	the house tutors
house-tuto	Yes, always □ rs? □	Most	of the time $\square$	Not really [	□ What
5.	SOCIAL & PERS	SONAL STUF	`F		
feel safe an enjoy yours more; feel you car confidence learn to be	d secure in the h self and feel you on make a positive	house – and a ouse – and a can achieve a contribution to want to ma ourself.	u – are learning how to so re learning how to ke t school – and leave n to life in the house ake a difference beyo	eep yourself s wanting to a and leave wit	safe; chieve even
1.1.1. Very well		ny & happy?	Not very well	П	Badly! □
		sound?	Trot very wen		Dudiy.
Very well			Not very well		Badly! □
1.1.3. Very well		ing and achie y well □	eving? Not very well		Badly!
1.1.4. Very well		ng a contribut y well □	tion? Not very well		Badly!
1.1.5. Very well		responsible? y well □	Not very well		Badly!

1.2. Do you feel that there is someone in the house you'd be able to go to if you had a personal problem?
Yes □ Yes for most things □ Not really □ No, not at all □
1.3. How helpful are the house tutors generally?
Very helpful □ Mostly helpful □ Not particularly helpful □ Not helpful at all □

1.4. informed abo	Are the house tute ut plans and what'			- do they keep you	properly
Yes □	Yes for most thir	ngs 🗆	Not really □	Not at a	ıll 🗆
account by th	Do you think that e house tutors?				
Always □	Most of the	e time □	Not really □	Not at a	ll 🗆
1.6.	Do you think bull				11
Not at all □	Only very ra	irely 🗆	Yes, sometime	es □ Yes, a big j	problem $\square$
1.7.	If you've ever bee				
Yes, always □	Mostly □ Rare	ely 🗆 No	, the problems v	were never addres	sed □
1.8. they arrive?	Do you think new	boarders are	properly welco	omed and looked a	after when
Yes, absolutel	y   Mostly	Not	really □	Not at all □	
1.9. Golly yes, it's it □	Do you think the invaluable! □ Yes				never read
	of what to expect v	when he/she	comes into the		fair and
Yes □	Mostly □	Not really	□ Not	at all 🗆	
6. G	ENERAL				
1.1.	What words best	describe life i	n the boarding	house?	
Very relaxed out □	& informal □	Just about b	earable □	Hard going □	Let me
1.2.	Write down the ty	wo things you	like best about	boarding	
1					
2					
1.3.	Write down the ty	wo things you	like least abou	t boarding	
1					
2					

1.4. better	Write down two things you'd do that you think would make boarding life
1	
2	
1.5.	Write down three words that you <i>instinctively</i> associate with boarding
1	
1 2 3	
3	
1.6.	Anything else you want to tell us (now's your chance)?
FD1 + 2 *1	'1'' '1 1 1 '110DAT III 1'' (111
That's it – no tutors. Than	ow stick it in the envelope provided, SEAL IT, and hand it to one of the house aks.
Name (STRI	CTLY OPTIONAL!)

# **Cundall Manor: Medication Policy**

February 2013

When a member of staff sees a sign which may be a cause for concern (s)he should seek any information from the pupil with tact and sympathy.

### 1 GENERAL CARE PRINCIPLES

# 1.1. Staff guidance

Boarding House staff must recognise their own limitations in making medical diagnoses or failing to act after reports of accidents. The school doctor or The Friarage Hospital as well as the qualified first aiders are readily available for consultation and should be consulted when in doubt. Non-medical boarding staff are advised not to give any form of medication without consultation with the School Matron. Household remedies and non-prescription medication may be administered 'in loco parentis' and strictly in accordance with manufacturer's instructions, but only after a pupil's medical record has been checked for known allergic reactions etc. The time, date and dosage of <u>any</u> medication given, along with the signature of the staff member, must be recorded in the Medical Administration Record (MAR) kept for the purpose. IF IN DOUBT STAFF MUST ALWAYS CONSULT A MEDICAL PRACTITIONER. Courses of prescribed medicines must be kept in the metal cabinet in School Sickbay Room and only issued according to the doctor's prescription. When resident staff are required to administer tablets the following guidelines must be followed:

- Ensure that the pupil is either permitted or required to take the tablet(s).
- Ensure that the pupil is given only one dose at any one time.
- Ensure that the tablet(s) are swallowed in the presence of the staff member and not taken away.
- An appropriate entry is made in the MAR.
- Those Boarders deemed 'Gillick Competent' may self medicate in the presence of the School Matron and/or duty staff

Any boarder unable to attend school due to ill health should remain in their own dormitory or be removed to the sickbay room as the House Parent sees fit. The School Matron should be informed when she comes on duty and should be asked to visit the patient. Where there is any doubt as to the seriousness of the condition or the patient has a high temperature or complains of pains in the ears then parents must be informed.

When any staff member is roused in the night by a pupil complaining of ill health, or a room-mate reports such a problem, they must respond immediately and investigate. A telephone call to the Casualty department, The Friarage Hospital Tel 01609 779911 is the recommended first point of contact where help or advice is needed.

All accidents and injuries beyond the trivial must be recorded in the Accident Book kept in the sickbay, as must the action taken.

### 1.2. Safe administration

The safe administration of medicines means that medicines are given in such a way as to maximise benefit and to avoid causing harm. In order to give a medicine safely, you need to be able to:

- Identify the medicines correctly. To do so, medicine packs (prescribed, non-prescribed and "homely remedies") <u>must</u> have labels attached by the pharmacist or dispensing GP.
- Identify the recipient correctly.
- Know what the medicine is intended to do for example to help the person breathe more easily.
- Know whether there are any special precautions for example that the medicine should be given before, after, or with food.
- Staff should only give medicines that they have been trained to give. In general, boarding staff may give or assist boarders with the following:
- Taking tablets, capsules, oral mixtures
- Applying a medicated cream/ointment
- Inserting drops to ear, nose or eye
- Administering inhaled medication.

Medicines that have been prescribed and dispensed for one person should not, under any circumstances, be given to another person or used for a purpose that is different from the one they were prescribed for. Medicines must be given from the container they are supplied in. This means that doses of medicines must not be put out in advance of administration in egg-cups or medicine pots. This is secondary dispensing and can lead to accidental mix-ups and errors.

#### 1.3. Errors

Errors will not always harm the individual but a few errors can have serious consequences. It is imperative that errors are recorded in the Medical Administration Record (MAR) and the cause fully investigated so that lessons are learnt and steps taken to prevent a similar error happening in the future. Examples of errors are:

- Wrong dose is given too much, too little
- Medication is not given
- Medication is given to the wrong child.

The incident must be brought to the attention of all members of house staff.

# 1.4. Adverse reactions

If a child becomes unwell following the administering of a new medicine, this could be caused by the medicine and you must contact the school doctor immediately.

#### 1.5. Minor ailments

Boarding staff need to consider carefully whether or not to treat minor ailments with 'homely remedies'. Anyone can buy 'homely remedies'; for instance, paracetamol is the kind of treatment that many boarders will want to take to relieve a headache. In such situations the attending member of staff must:

- Keep accurate and up-to-date records of the purchase, administration and disposal of all such remedies
- Be clear about the problems they are allowed to treat for example, headache, heartburn, cough
- Choose the medicines that are suitable for the age range of the recipient.
- Staff must additionally be alert to the risk that prescribed medicines will interact with medicines purchased over the counter and cause harm. This includes:
- Herbal products
- Traditional Chinese medicines.

# 1.6 Record-keeping

Health declarations, medication consents and MAR

Staff must ensure that the health declaration and medication consent forms issued to parents or guardians at the time each boarder joins the school are copied into the boarding house file.

It is imperative to record in the MAR the administering of any medicine when it is done. Do not rely on memory to write information accurately at a later time. Anyone should be able to understand from the MAR exactly what staff have done and be able to account for all of the medicines administered to any boarder. The MAR must be complete, legible, up to date, written in ink, dated and signed to show who has made the record. Accurate record-keeping is essential to ensure that:

- informed assessments can be made that a course of medication is being taken thoroughly and appropriately
- other members of staff coming on duty are made fully aware of the circumstances of the boarder receiving the medicine
- the development of a persistent and non-responsive problem or condition is identified and can be reported to the school doctor
- the school doctor has all the information necessary to review the course of treatment.

#### Medicine inventories

An accurate inventory of medicine stocks should be maintained, detailing date of purchase, quantity, strength and expiry date. Inventories should be checked against this record monthly, with particular attention paid to expiry dates.

At no point should more than 10 Paracetemol be kept in the medicine cabinet If prescription medication is issued to staff for provision to a boarder, the inventory should make clear who the medication was received from, the name and strength of the medicine, how much was received and when it was received. Where medication is brought by the boarder into the house or is otherwise supplied directly by them, two checks should furthermore be made immediately:

- 1. The label attached to the medicine, which should have the boarder's name on it, will also have a date when the medicine was prepared. If it is more than six months ago, check with the dispensing doctor or pharmacist whether they should still have it.
- 2. What is the expiry date printed on the pack? Staff must never administer date expired medicine, and this may also indicate that the boarder has not been taking this medicine recently. Check with the dispensing doctor or pharmacist whether they should still have it.

If necessary an individual care plan – including separate MAR - should be drawn up for any boarder receiving a prolonged course of treatment, and this plan should make clear what support that boarder needs to look after and take the prescribed medication. A copy of any individual care plan should also be kept in the boarding register.

### 2 MEDICATION POLICY: HANDLING MEDICATIONS SAFELY

1.1. Procedures for managing prescription medicines during the school day In general, medicines should only be taken to school when essential - that is where it would be detrimental to a child's health if the medicine were not administered during school. Staff should only accept medicines that have been prescribed by a doctor, dentist, nurse prescriber or pharmacist prescriber. Medicines should always be provided in the original container as dispensed by a pharmacist and include the prescriber's instructions for administration.

Staff should never accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions. It is helpful, where clinically appropriate, if medicines are prescribed in dose frequencies which enable it to be taken outside school hours. Parents could be encouraged to ask the prescriber about this. It is to be noted that medicines that need to be taken three times a day could be taken in the morning, after school hours and at bedtime. The Medicines Standard of the National Service Framework (NSF) for Children recommends that a range of options should be explored including the use of medicines which require to be administered only once or twice a day (where appropriate) for children so that they can be taken outside school hours. Prescribers may also be prepared to consider providing two prescriptions, where appropriate and practicable, for a child's medicine: one for home and one for use in the school, avoiding the need for repackaging or re-labelling of medicines by parents.

# Controlled Drugs

The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act and its associated regulations. Some may be prescribed as medication for use by children. Any member of staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicine should do so in accordance with the prescriber's instructions.

A child who has been prescribed a controlled drug may legally have it in their possession. It is permissible for schools to look after a controlled drug, where it is agreed that it will be administered to the child for whom it has been prescribed. Controlled drugs must be kept in the locked non-portable fixed container kept within the Sickbay to which only named staff should have access. All administrations should be recorded in the MAR for audit and safety purposes. A controlled drug, as with all medicines, should be returned to the parent when no longer required, or otherwise arrangements made with the parents' consent for safe disposal (usually by returning the unwanted supply to the local pharmacy or school doctor).

- Procedures for managing prescription medicines on trips and outings 1.2. It is good practice to encourage children with medical needs to participate in safely managed visits. Staff should nonetheless take particular care to consider what reasonable adjustments may be necessary to enable children with medical needs to participate fully and safely on visits. This might include reviewing and revising the visits policy and procedures so that planning arrangements will include the necessary steps to include children with medical needs. It might also include risk assessments for such children. Sometimes additional safety measures may need to be taken for outside visits. It may be that an additional supervisor, a parent or another volunteer might be needed to accompany a particular child. Arrangements for taking any necessary medicines will also need to be taken into consideration. Staff supervising excursions should always be aware of any medical needs, and relevant emergency procedures. A copy of any individual health care plan should be taken on visits and retained in the boarding house day book in the event of the information being needed in an emergency. If staff are concerned about whether they can provide for a child's safety or wellbeing during any particular outing or activity, they should seek parental views and medical advice from the school doctor.
- 1.3. Circumstances in which children may take non-prescription medicines Staff should never give non-prescribed medicines to any boarder unless the appropriate authority has been granted by the boarder's parents or guardians on the school admissions health declaration and medication consent forms. Where a non-prescribed

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medicine is administered to a child it should be immediately recorded in the MAR and the parents informed. If a child suffers regularly from frequent or acute pain the school doctor should be consulted and if appropriate – for instance, in the case of a weekly boarder - the parents may be encouraged to refer the matter to the boarder's own GP. A child under 16 should never be given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

School policy on assisting children with long-term or complex medical needs 1.4. It is important to have sufficient information about the medical condition of any child with long-term medical needs. This information should be detailed on the boarder's admissions health declaration and medication consent forms. If a child's medical needs are inadequately supported this may have a significant impact on a child's experiences and the way they function in both the boarding house and during the school day. The impact may be direct in that the condition may affect cognitive or physical abilities, behaviour or emotional state. Some medicines may also affect learning, leading to poor concentration or difficulties in remembering. The impact could also be indirect - perhaps disrupting access to education through unwanted effects of treatments or through the psychological effects that serious or chronic illness or disability may have on a child and their family. The Special Educational Needs (SEN) Code of Practice 2001 advises that a medical diagnosis or a disability does not necessarily imply SEN. It is the child's educational needs rather than a medical diagnosis that must be considered. Staff must therefore familiarise themselves with any particular needs of individual boarders on admission, or when any medical need first develops. For children who attend hospital appointments on a regular basis, special arrangements may also be necessary. *In all cases* where long-term care is anticipated it will be necessary to draw up an individual health care plan in consultation with the parents or quardians and relevant health professionals.

# 1.5. Safe storage of medicines

All medicines should be stored strictly in accordance with product instructions (paying particular note to temperature) and in the original container in which dispensed. Large volumes of non-prescription or 'homely remedies' medicines should not be stored.

Staff should only store, supervise and administer prescription medicines that have been prescribed for an individual child. Staff should ensure that the supplied container is clearly labelled with the name of the child, the name and dose of the medicine and the frequency of administration. Where a child needs two or more prescribed medicines, each should be in a separate container. Medicines should never be transferred from their original containers. Children should know where their own medicines are stored and who holds the key. The School Matron is responsible for making sure that medicines are stored safely. All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily available to children. Children requiring inhalers must be encouraged to carry them at all times. Other non-emergency medicines should generally be kept in a secure place not accessible to children.

# 1.6. Safe disposal of medicines

Surplus, unwanted or expired medicines must not be retained, and regular inventory checks – at least once every term - should be made. This applies to medicine supplies remaining after a period of treatment is concluded, to medicines left behind by a departing boarder, and to medicines that have reached their expiry date – staff should be aware that the usable life of some medicines is shortened once the product has been opened and is in use.

Staff should not ordinarily dispose of surplus, unwanted or expired prescription medicines - parents should take responsibility for the safe disposal of any such medicines, and should collect the medicines at the end of term or earlier if possible. If this cannot be arranged, then staff should obtain their consent to the removal of the medicines to the school doctor or a local pharmacy for safe disposal. In all cases, medicines to be disposed of from boarding house inventory should be taken by staff to the School Matron for disposal.

# 1.7. Emergency procedures

A member of staff should always accompany a child taken to hospital by ambulance, and should stay until the parent arrives. *Health professionals are responsible for any decisions on medical treatment when parents are not available*. Staff should never take children to hospital in their own car without parental consent; it is safer to call an ambulance. Any individual health care plan should include instructions as to how to manage the child in an emergency, and identify who has the responsibility in an emergency.

#### 3. COMMON CONDITIONS: PRACTICAL ADVICE

#### 1.1. Asthma

Asthma is common and appears to be increasingly prevalent in children and young people. One in ten children have asthma in the UK. The most common symptoms of asthma are coughing, wheezing or whistling noise in the chest, tight feelings in the chest or getting short of breath. Younger children may verbalise this by saying that their tummy hurts or that it feels like someone is sitting on their chest. Not everyone will get all these symptoms, and some children may only get symptoms from time to time. However in early years settings staff may not be able to rely on younger children being able to identify or verbalise when their symptoms are getting worse, or what medicines they should take and when. It is therefore imperative that early years and primary school staff, who have younger children in their classes, know how to identify when symptoms are getting worse and what to do for children with asthma when this happens. This should be supported by written asthma plans, asthma school cards provided by parents, and regular training and support for staff. Children with significant asthma should have an individual health care plan.

# Medicine and Control

There are two main types of medicines used to treat asthma, relievers and preventers. Usually a child will only need a reliever during the school day. Relievers (blue inhalers) are medicines taken immediately to relieve asthma symptoms and are taken during an asthma attack. They are sometimes taken before exercise. Whilst Preventers (brown, red, orange inhalers, sometimes tablets) are usually used out of school hours. Children with asthma need to have immediate access to their reliever inhalers when they need them. Inhaler devices usually deliver asthma medicines. A spacer device is used with most inhalers, and the child may need some help to do this. It is good practice to support children with asthma to take charge of and use their inhaler from an early age, and many do. Children who are able to use their inhalers themselves should be allowed to carry them with them. If the child is too young or immature to take personal responsibility for their inhaler, staff should make sure that it is stored in a safe but readily accessible place, and clearly marked with the child's name. Inhalers should always be available during physical education, sports activities and educational visits. For a child with severe asthma, the health care professional may prescribe a spare inhaler to be kept in the school or setting. The signs of an asthma attack include:

- coughing
- being short of breath
- wheezy breathing
- feeling of tight chest
- being unusually quiet.

When a child has an attack they should be treated according to their individual health care plan or asthma card as previously agreed. An ambulance should be called if the symptoms do not improve sufficiently in 5-10 minutes, the child is too breathless to speak, the child is becoming exhausted, or the child looks blue. It is important to agree with parents of children with asthma how to recognise when their child's asthma gets worse and what action will be taken. An Asthma School Card (available from Asthma UK) is a useful way to store written information about the child's asthma and should include details about asthma medicines, triggers, individual symptoms and emergency contact numbers for the parent and the child's doctor. A child should have a regular asthma review with their GP or other relevant healthcare professional. Parents should arrange the review and make sure that a copy of their child's management plan is available to the school or setting. Children should have a reliever inhaler with them when they are in school or in a setting. Children with asthma should participate in all aspects of the school or setting 'day' including physical activities. They need to take their reliever inhaler with them on all off-site activities. Physical activity benefits children with asthma in the same way as other children. Swimming is particularly beneficial, although endurance work should be avoided. Some children may need to take their reliever asthma medicines before any physical exertion.

Warm-up activities are essential before any sudden activity especially in cold weather. Particular care may be necessary in cold or wet weather.

Reluctance to participate in physical activities should be discussed with parents, staff and the child. However children with asthma should not be forced to take part if they feel unwell. Children should be encouraged to recognise when their symptoms inhibit their ability to participate.

Children with asthma may not attend on some days due to their condition, and may also at times have some sleep disturbances due to night symptoms. This may affect their concentration. Such issues should be discussed with the child's parents or attendance officers as appropriate. All schools and settings should have an asthma policy that is an integral part of the whole school or setting policy on medicines and medical needs. The asthma section should include key information and set out specific actions to be taken (a model policy is available from Asthma UK). The school environment should be asthma friendly, by removing as many potential triggers for children with asthma as possible. All staff, particularly PE teachers, should have training or be provided with information about asthma once a year. This should support them to feel confident about recognising worsening symptoms of asthma, knowing about asthma medicines and their delivery and what to do if a child has an asthma attack.

# 1.2. Epilepsy

Children with epilepsy have repeated seizures that start in the brain. An epileptic seizure, sometimes called a fit, turn or blackout can happen to anyone at any time. Seizures can happen for many reasons. At least one in 200 children have epilepsy and around 80 per cent of them attend mainstream school. Most children with diagnosed epilepsy never have a seizure during the school day. Epilepsy is a very individual condition. Seizures can take many different forms and a wide range of terms may be used

to describe the particular seizure pattern that individual children experience. Parents and health care professionals should provide information to schools, to be incorporated into the individual health care plan, setting out the particular pattern of an individual child's epilepsy. If a child does experience a seizure in a school or setting, details should be recorded and communicated to parents including:

- any factors which might possibly have acted as a trigger to the seizure e.g. visual/auditory stimulation, emotion (anxiety, upset);
- any unusual 'feelings' reported by the child prior to the seizure;
- parts of the body demonstrating seizure activity e.g. limbs or facial muscles;
- the timing of the seizure when it happened and how long it lasted;
- whether the child lost consciousness;
- whether the child was incontinent.

This will help parents to give more accurate information on seizures and seizure frequency to the child's specialist. What the child experiences depends whether all or which part of the brain is affected. Not all seizures involve loss of consciousness. When only a part of the brain is affected, a child will remain conscious with symptoms ranging from the twitching or jerking of a limb to experiencing strange tastes or sensations such as pins and needles. Where consciousness is affected; a child may appear confused, wander around and be unaware of their surroundings. They could also behave in unusual ways such as plucking at clothes, fiddling with objects or making mumbling sounds and chewing movements. They may not respond if spoken to. Afterwards, they may have little or no memory of the seizure. In some cases, such seizures go on to affect all of the brain and the child loses consciousness. Such seizures might start with the child crying out, then the muscles becoming stiff and rigid. The child may fall down. Then there are jerking movements as muscles relax and tighten rhythmically.

During a seizure breathing may become difficult and the child's colour may change to a pale blue or grey colour around the mouth. Some children may bite their tongue or cheek and may wet themselves. After a seizure a child may feel tired, be confused, have a headache and need time to rest or sleep. Recovery times vary. Some children feel better after a few minutes while others may need to sleep for several hours. Another type of seizure affecting all of the brain involves a loss of consciousness for a few seconds. A child may appear 'blank' or 'staring', sometimes with fluttering of the eyelids. Such absence seizures can be so subtle that they may go unnoticed. They might be mistaken for daydreaming or not paying attention in class. If such seizures happen frequently they could be a cause of deteriorating academic performance.

### Medicine and Control

Most children with epilepsy take anti-epileptic medicines to stop or reduce their seizures. Regular medicine should not need to be given during school hours. Triggers such as anxiety, stress, tiredness or being unwell may increase a child's chance of having a seizure. Flashing or flickering lights and some geometric shapes or patterns can also trigger seizures. This is called photosensitivity. It is very rare. Most children with epilepsy can use computers and watch television without any problem. Children with epilepsy should be included in all activities. Extra care may be needed in some areas such as swimming or working in science laboratories. Concerns about safety should be discussed with the child and parents as part of the health care plan. During a seizure it is important to make sure the child is in a safe position, not to restrict a child's movements and to allow the seizure to take its course. In a convulsive seizure putting something soft under the child's head will help to protect it. Nothing should be placed in their mouth. After a convulsive seizure has stopped, the child should be placed in the recovery position and

stayed with, until they are fully recovered. An ambulance should be called during a convulsive seizure if:

- it is the child's first seizure
- the child has injured themselves badly
- they have problems breathing after a seizure
- a seizure lasts longer than the period set out in the child's health care plan
- a seizure lasts for five minutes if you do not know how long they usually last for that child
- there are repeated seizures, unless this is usual for the child as set out in the child's health care plan.

The individual health care plan should clearly identify the type or types of seizures, including seizure descriptions, possible triggers and whether emergency intervention may be required. Most seizures last for a few seconds or minutes, and stop of their own accord. Some children who have longer seizures may be prescribed diazepam for rectal administration. This is an effective emergency treatment for prolonged seizures. The epilepsy nurse or a paediatrician should provide guidance as to when to administer it and why. Training in the administration of rectal diazepam is needed and will be available from local health services. Staying with the child afterwards is important as diazepam may cause drowsiness. Where it is considered clinically appropriate, a liquid solution midazolam, given into the mouth or intra-nasally, may be prescribed as an alternative to rectal diazepam. Instructions for use must come from the prescribing doctor. Children and young people requiring rectal diazepam will vary in age, background and ethnicity, and will have differing levels of need, ability and communication skills. If arrangements can be made for two adults, at least one of the same gender as the child, to be present for such treatment, this minimises the potential for accusations of abuse. Two adults can also often ease practical administration of treatment. Staff should protect the dignity of the child as far as possible, even in emergencies.

#### 1.3. Diabetes

Diabetes is a condition where the level of glucose in the blood rises. This is either due to the lack of insulin (Type 1 diabetes) or because there is insufficient insulin for the child's needs or the insulin is not working properly (Type 2 diabetes). About one in 550 schoolage children have diabetes. The majority of children have Type 1 diabetes. They normally need to have daily insulin injections, to monitor their blood glucose level and to eat regularly according to their personal dietary plan. Children with Type 2 diabetes are usually treated by diet and exercise alone. Each child may experience different symptoms and this should be discussed when drawing up the health care plan. Greater than usual need to go to the toilet or to drink, tiredness and weight loss may indicate poor diabetic control, and staff will naturally wish to draw any such signs to the parents' attention.

#### Medicine and Control

The diabetes of the majority of children is controlled by injections of insulin each day. Most younger children will be on a twice a day insulin regime of a longer acting insulin and it is unlikely that these will need to be given during school hours, although for those who do it may be necessary for an adult to administer the injection. Older children may be on multiple injections and others may be controlled on an insulin pump. Most children can manage their own injections, but if doses are required at school supervision may be required, and also a suitable, private place to carry it out. Increasingly, older children are taught to count their carbohydrate intake and adjust their insulin accordingly. This means that they have a daily dose of long-acting insulin at home, usually at bedtime; and then insulin with breakfast, lunch and the evening meal, and before substantial snacks. The child is taught how much insulin to give with each meal,

depending on the amount of carbohydrate eaten. They may or may not need to test blood sugar prior to the meal and to decide how much insulin to give. Diabetic specialists would only implement this type of regime when they were confident that the child was competent. The child is then responsible for the injections and the regime would be set out in the individual health care plan. Children with diabetes need to ensure that their blood glucose levels remain stable and may check their levels by taking a small sample of blood and using a small monitor at regular intervals. They may need to do this during the school lunch break, before PE or more regularly if their insulin needs adjusting. Most older children will be able to do this themselves and will simply need a suitable place to do so. However younger children may need adult supervision to carry out the test and/or interpret test results. When staff agree to administer blood glucose tests or insulin injections, they should be trained by an appropriate health professional. Children with diabetes need to be allowed to eat regularly during the day. This may include eating snacks during class-time or prior to exercise. Schools may need to make special arrangements for pupils with diabetes if the school has staggered lunchtimes. If a meal or snack is missed, or after strenuous activity, the child may experience a hypoglycaemic episode (a hypo) during which blood glucose level fall too low. Staff in charge of physical education or other physical activity sessions should be aware of the need for children with diabetes to have glucose tablets or a sugary drink to hand. Staff should be aware that the following symptoms, either individually or combined, may be indicators of low blood sugar – a hypoglycaemic reaction (hypo) in a child with diabetes:

- hunger
- sweating
- drowsiness
- pallor
- glazed eyes
- shaking or trembling
- lack of concentration
- irritability
- headache
- mood changes, especially angry or aggressive behavior

Each child may experience different symptoms and this should be discussed when drawing up a health care plan. If a child has a hypo, it is very important that the child is not left alone and that a fast acting sugar, such as glucose tablets, a glucose rich gel, or a sugary drink is brought to the child and given immediately. Slower acting starchy food, such as a sandwich or two biscuits and a glass of milk, should be given once the child has recovered, some 10-15 minutes later. An ambulance should be called if the child's recovery takes longer than 10-15 minutes or the child becomes unconscious. Some children may experience hyperglycaemia (high glucose level) and have a greater than usual need to go to the toilet or to drink. Tiredness and weight loss may indicate poor diabetic control, and staff will naturally wish to draw any such signs to the parents' attention. If the child is unwell, vomiting or has diarrhoea this can lead to dehydration. If the child is giving off a smell of pear drops or acetone this may be a sign of ketosis and dehydration and the child will need urgent medical attention.

#### 1.4. Anaphylaxis

Anaphylaxis is an acute, severe allergic reaction requiring immediate medical attention. It usually occurs within seconds or minutes of exposure to a certain food or substance, but on rare occasions may happen after a few hours. Common triggers include peanuts, tree nuts, sesame, eggs, cow's milk, fish, certain fruits such as kiwifruit, and also penicillin, latex and the venom of stinging insects (such as bees, wasps or hornets). The most severe form of allergic reaction is anaphylactic shock, when the blood pressure falls

dramatically and the patient loses consciousness. Fortunately this is rare among young children below teenage years. More commonly among children there may be swelling in the throat, which can restrict the air supply, or severe asthma. Any symptoms affecting the breathing are serious. Less severe symptoms may include tingling or itching in the mouth, hives anywhere on the body, generalised flushing of the skin or abdominal cramps, nausea and vomiting. Even where mild symptoms are present, the child should be watched carefully. They may be heralding the start of a more serious reaction.

#### Medicine and Control

The treatment for a severe allergic reaction is an injection of adrenaline (also known as epinephrine). Pre-loaded injection devices containing one measured dose of adrenaline are available on prescription. The devices are available in two strengths – adult and junior. Should a severe allergic reaction occur, the adrenaline injection should be administered into the muscle of the upper outer thigh. An ambulance should always be called. Staff that volunteer to be trained in the use of these devices can be reassured that they are simple to administer. Adrenaline injectors, given in accordance with the manufacturer's instructions, are a well-understood and safe delivery mechanism. It is not possible to give too large a dose using this device. The needle is not seen until after it has been withdrawn from the child's leg. In cases of doubt it is better to give the injection than to hold back. The decision on how many adrenaline devices the school or setting should hold, and where to store them, has to be decided on an individual basis between the head, the child's parents and medical staff involved. Where children are considered to be sufficiently responsible to carry their emergency treatment on their person, there should always be a spare set kept safely which is not locked away and is accessible to all staff. In large schools or split sites, it is often quicker for staff to use an injector that is with the child rather than taking time to collect one from a central location. Studies have shown that the risks for allergic children are reduced where an individual health care plan is in place. Reactions become rarer and when they occur they are mostly mild. The plan will need to be agreed by the child's parents, the school and the treating doctor. Important issues specific to anaphylaxis to be covered include:

- anaphylaxis what may trigger it
- what to do in an emergency
- prescribed medicine
- food management
- precautionary measures.

Once staff have agreed to administer medicine to an allergic child in an emergency, a training session will need to be provided by local health services. Staff should have the opportunity to practice with trainer injection devices. Day to day policy measures are needed for food management, awareness of the child's needs in relation to the menu, individual meal requirements and snacks in school. It is important to ensure that the catering supervisor is fully aware of the child's particular requirements. Parents often ask for the head to exclude from the premises the food to which their child is allergic. This is not always feasible, although appropriate steps to minimise any risks to allergic children should be taken. Children who are at risk of severe allergic reactions are not ill in the usual sense. They are normal children in every respect – except that if they come into contact with a certain food or substance, they may become very unwell. It is important that these children are not stigmatised or made to feel different. It is important, too, to allay parents' fears by reassuring them that prompt and efficient action will be taken in accordance with medical advice and guidance. Anaphylaxis is manageable. With sound precautionary measures and support from the staff, school life may continue as normal for all concerned.

# Storage/Dispensing of Medicines

- 1. 1. All medicines prescribed for pupils must be taken from the pupil and kept in locked, safe storage. A spare key for the cupboard(s) must be lodged in the School Office.
- 2. All medicines prescribed for pupils must be recorded in the Medicine Book in accordance with current medical practice.
- 3. All medicines must be dispensed in strict accordance to the doctor's instructions and a contemporaneous record kept in the Medicine Administration Book which includes details of day, date, dosage, time and name of the person dispensing the medicine. The member of staff dispensing the medicine should sign for each entry.
- 4. The record books may be looked at by the Senior Management Team (Head, Deputies, Director of Studies or Bursar).

### Boarders in Bed or Isolation

Boarders unable to attend school must be monitored by visits throughout the school day and arrangements made for them to receive food and drinks. Where a boarder requires the boarder's family should be informed and arrangements made for the boarder to go home if that is the wish of the family.

### The school day

08:30	Registration
08:40	Period 1
09:20	Period 2
10:00	Period 3
10:40	Morning break
11:00	Period 4
11:40	Period 5
12:20	Lunch
13:10	Registration
13:20	Period 6
14:00	Period 7
14:40	Afternoon break
14:50	Period 8
15:30	Period 9
16:10	Assembly/Enrichment
17:00	End of school day

# **Bed times**

Times indicated are the times the boarders are expected to be actually in bed, so they should be chased off to their rooms 15 minutes earlier.

Form 1-4	20:45
Form 5/6	21:15
Upper School	22.00

# **Race Policy**

Cundall Manor is an inter-racial community and as such children are treated equally in all respects.

# **Cundall Manor Discipline Policy**

Disciplinary Action - Code of Practice

Routine disciplinary infringements are dealt with by members of staff who may issue a verbal reprimand or a lunchtime detention. More serious matters are reported to the appropriate Head of Station who will interview the pupil concerned and decide the appropriate course of action. For serious and/or repeated breaches of discipline, the pupil will be interviewed by the Headmaster or a member of the Senior Management Team usually accompanied by the Head of Station. Written notes will be taken of the contents of the interview. It will be at the discretion of the Headmaster whether or not the pupil's parents will be asked to attend the interview if the pupil does not request their attendance. Parents will be informed in writing of serious breaches of discipline, and pupils may receive a verbal or written warning. In certain circumstances it is school policy to detain pupils after school in a SMT Detention, which will be supervised by a member of the Senior Management Team. This sanction will only be used for serious or persistent misdemeanours. Parents will be informed in writing of the circumstances that have led to this step.

A further sanction which may be employed as a consequence of a serious breach of discipline is suspension. All warnings, whether written or verbal, will be recorded in the pupil's file and will remain 'active' for two years. Whilst written warnings of possible suspension or even removal from school will normally be given, in very serious cases, such as the bringing of drugs into school, no previous warning may have been issued.

Disciplinary Action - Appeals Procedure

Any pupil who has undergone the disciplinary process which resulted in his/her suspension or expulsion may appeal, within 7 days of the date of the written notification of the punishment, in writing to a Committee of the Board of Governors to have his/her case reviewed; such review will take place within 7 days of the receipt of the appeal.

At the appeal hearing the pupil, or his/her representative, may present his/her case in person. The decision of the Committee is final.

#### **Residential Staff**

House Parents - responsible to the Headmaster for all matters relating to the Boarding House:

Gary Coates and Julie Conway

Resident Staff Jayne Stroud, Henry Crossley

The following staff are qualified to drive the mini bus: Gary Coates Jayne Stroud

The following staff hold current first Aid certificates:

Jayne Stroud Julie Conway Gary Coates

The following staff hold current Food Hygiene certificates:

Sylvia Varley	Level III	April 2013
April Lishman	Level III	April 2013
Jayne Stroud	Level II	April 2013
Julie Conway	Level II	April 2013

The following staff have attended a fire safety course:

Jayne Stroud Gary Coates Julie Conway

# **Key Telephone Numbers**

School Office 0142336200

House Mobiles 07766838581

07759295078

Bursar 01423 360911

CHILDLINE 0800 1111

Children's Rights Director 0800 5280731

Child rights website www.rights4me.org

Independent Listener

Rev Alison Askew 01423 326284

Dentist 01642 712519

Vitality, 21 High Street, Stokesley.

Doctor 01765 692366

Ripon Spa Surgery

THE HEADMASTER 01423 360200



# Menu

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
		Fresh So	up & Freshly Baked	Bread Roll	
Protein Selection	Sykes House Farm Pork & Apple Sausages (GF) Vegetarian Sausages	Spaghetti Bolognese (GF) Quorn Mince Bolognese (V)	Steak Pie (GF) Vegetable Bake (V)	Southern Fried Chicken (GF) Omelette (V)	Roast Ham (GF)
		Jacket Po	tato with grated che	eese or tuna	
Carbohydrate Selection	Mashed Potatoes	Garlic Bread	New Potatoes	Curly Fries	Roast Potatoes Yorkshire Pudding Stuffing Balls
Vegetable Selection	Cauliflower with Cheese Green Beans	Diced Carrots Salad	Sweetcorn and Peas Mixed cabbage	Baked Beans Coleslaw	Swede and Carrot Mix
			Meats, Salads from law, tomatoes, cous		,
Sweet Selection	Bird Seed with Whole Milk Custard	Angel Delight	Fruit Jelly with Cream and Fruit	Treacle Sponge with Custard	Manchester Tart with Fresh Milk Custard
	S	election of Fres	sh Fruit & Assorted	Organic Yoghurt	S