



Health Centre Policy including Support of Students in School with Medical Conditions

September 2020

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Staff Link	Hayden Kershaw Director of Boarding
Governing Body Link	Dan Palmer Boarding and Safeguarding Governor

Signed
Helen Cullen
Headteacher

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1. INTRODUCTION

- 1.1 The School Health Centre is a four bedded unit staffed by a team made up of a qualified nurse and Health and Being Assistants with support as needed from additional qualified first aiders. In addition, boarding house staff give further support around medication administration. Boarders have access to the school GP from Bruton Surgery and to a weekly NHS School Nurse drop in clinic.
- 1.2 The Health Centre is staffed from 8am until 9pm Monday to Friday. Opening times are advertised in the boarding houses.
- 1.3 On a weekend First Aiders provide first aid cover onsite and for further medical needs that cannot be supported by the Boarding staff NHS advice is sought and where necessary contact is made with an out of hours GP or the local hospitals at Shepton Mallet and Yeovil.

2. MEDICAL CONDITIONS

- 2.1 All parents/guardians must complete a Medical Health and Consent form before their child joins the school. If a child has a pre-existing medical condition that may require special treatment in school, parents are encouraged to discuss this with the Health Centre Team and Director of Boarding prior to their child's admission to the school.
- 2.2 Each pupil at the school has a computerised individual medical file, through Medical Tracker.
- 2.3 Pupils with medical conditions that need specific care whilst at school will have an **Individual Health Care Plan (IHCP)** drawn up, following liaison with parents/school staff and medical agencies as appropriate. This is stored electronically on Medical Tracker so that it can be easily accessed as needed by relevant staff. Students with an IHCP are identified through the vulnerable learners register on the medical needs tab.

An IHCP plan will detail

- The child's medical condition
- Emergency contact details
- Specific medical needs required whilst in school
- Specific requirements in school, such as involvement by the SEND department, particular adjustments that may need to be made for movement around school/PE etc.

- 2.4 Pupils who carry adrenaline devices, have epilepsy, or any other condition that may require emergency treatment, will have an **Emergency Treatment Plan (ETP)** drawn up and circulated to school staff as appropriate.

This plan will detail

- The child's condition / what they are allergic to
- What symptoms to look out for
- Any known triggers/activities to be avoided
- Action/treatment in the event of an emergency
- Emergency contact details

This is stored electronically on Medical Tracker so that it can be easily accessed as needed by relevant staff. A copy is also sent to all staff at the beginning of the school year.

2.5 These plans will be updated as required in consultation with the child/their parents and any other relevant agencies. Parents will also be given a copy of their child's health care plan, and a copy will be available on Medical Tracker.

2.6 At the start of each term, the Health Centre Team will compile a list of pupils with medical conditions/specific dietary needs/allergies and circulate it to house/sports department/catering/heads of year as appropriate, along with copies of the pupil's health care/emergency treatment plans.

2.7 A list of pupils (with their health care/emergency treatment plan) is available on the vulnerable learners register

2.8 Parents should inform the Health Centre if

- There is any change in the management of their child's medical condition Their emergency contact details change
- Their child needs to take regular medication whilst in school
- Their child has been newly diagnosed with a medical condition (since starting at the school) that may impact on their welfare in school
- Their child is off school following a contagious illness / notifiable illness
- Their child has surgery/sustains an injury etc that may inhibit their mobility around school e.g.
- May need the use of a wheelchair
- May require the use of crutches long term
- May require the support of the SEND department

2.9 The Director of Boarding will ensure that

- Staff are appropriately trained and informed to support pupils with medical needs in school and boarding houses
- Staff will complete the EDCAURE Administration of medication course annually.
- Staff will receive training in management of relevant medical conditions as required, anaphylaxis training, and asthma management from the School Nurse Team
- Staff are aware of where/how to access important medical information on pupils
- Parents are requested at least yearly, via the newsletter, to update the school on any medical conditions /allergies that may impact on their child in school
- Parents are requested, at least yearly, to ensure that the school is kept up to date with emergency contact details

3. MEDICATION

3.1 The Health Centre keeps a supply of a range of 'over the counter' medications, as listed in the new pupils' health questionnaire.

3.2 Parents must sign the appropriate consents in order for their child to receive medication in school.

3.3 All medication brought in to school must be in your child's name, in its original containers, clearly showing the medication's name and expiry date, accompanied by a copy of the prescription or doctor's letter (with a translation if appropriate). You may be asked to take the

medication home with you if not supplied correctly. Medication instructions must be in English.

- 3.4 Boarding houses also keep a supply of paracetamol and throat lozenges.
- 3.5 It should not be necessary for pupils to bring non-prescribed medication into school, and boarders are not allowed to keep any medication in their rooms, unless risk assessed and approved by the Health Centre.
- 3.6 Medication must be administered and stored as detailed in the Health Centre's Medication Policy.
- 3.7 All Parents and House Parents are notified if non-prescribed medication (e.g. paracetamol) is given through Medical Tracker.

4. RESIDENTIAL TRIPS

- 4.1 Written parental consent is required for all residential and overseas trips.

The Health Centre will send a small supply of analgesia, antihistamines, throat sweets and travel tablets as appropriate to the length and destination of the trip.

Pupils for whom a parent has given written consent for medication will be administered these, as required, by an appointed member of staff who has been given instruction in the administration of medication to pupils. This staff member will have undertaken EDUCARE Administration of Medication Course.

If a child is on regular prescribed medication that needs to be taken on the trip, it must be supplied in its original container, with the child's name on a printed label, be in date, and supplied with detailed written instructions on when and how much to be given.

5. SELF-ADMINISTRATION OF MEDICATION

- 5.1 A boarder who is an asthmatic will always be encouraged to carry their inhaler with them.
- 5.2 A boarder may be allowed to carry/administer their own medication, depending on the medication, age of pupil and the competency of the pupil to do so. This will be risk assessed by a member of the Health Centre team and Director of Boarding. Please see Appendices E-G
- 5.2 A boarder may be able to self-administer their own medication but not store it due to the risk assessment and type of medication. In the event of this medication will be stored appropriately for them in the office within the Boarding House.

6. EMERGENCY MEDICATION

- 6.1 Adrenaline devices

The Health Centre will keep a spare adrenaline device for all pupils who have been prescribed one. Boarders will also have a spare adrenaline device and any other required medication kept in the office of the boarding house. Some pupils, according to age and ability, will also be able to carry their own device once a risk assessment has been undertaken.

The Health Centre will keep an adrenaline device for use in emergencies, according to the anaphylaxis protocol.

A spare adrenaline device will be sent out on school trips, for use by pupils already prescribed an adrenaline device for severe allergic reaction, should their own be unavailable, and whose parents have consented to its use.

Staff will be trained, as appropriate, in the recognition and management of anaphylaxis, and the use of the adrenaline device.

6.2 Asthma inhalers

Pupils should be encouraged to carry their own emergency asthma inhaler.

The Health Centre will keep a salbutamol inhaler for use in emergencies, according to the asthma protocol. A spare asthma inhaler will be sent out on school trips, for use by pupils on the school asthma register, whose parents have consented to its use.

Staff will be trained in the use of the device.

7. ADMITTING PUPILS TO THE HEALTH CENTRE

7.1 If a child is unwell, he/she may be admitted to the Health Centre. If a boarder is not well enough to go back to school, and appears to have more serious longer term illness (such as influenza, diarrhoea and vomiting) parents or guardians will be contacted to arrange collection.

Parents of boarders will be informed if a child needs to stay overnight. It is important that overseas boarders have guardians who are able to meet this requirement.

7.2 If a student presents with COVID-19 symptoms is admitted to the Health Centre Team will isolate the from all other staff and students and if necessary close the Health Centre to other non-COVID cases.

7.3 Where a COVID-19 case (suspected or positive) the Health Centre will ensure no other students or staff are placed at risk by operating separate entrance and triage room. Where this is not possible, the Health Centre will be temporarily closed to new admissions.

8. ACCIDENTS/A & E

8.1 If a pupil needs to go to A&E due to an accident/illness, parents will be contacted as soon as possible.

A member of staff will accompany all pupils to A&E if parents/guardians are unavailable.

9. COVID -19

9.1 During the period of time that COVID-19 is a concern, all staff will be vigilant for the symptoms and if they believe a students may be displaying COVID-19 like symptoms they will undertake an initial assessment using the NHS 111 questionnaire, as set out in the managing a suspected case of COVID, Appendix H.

9.2 A number of adaptations have been made to how the staff centre will operate during the period that COVID-19 is a concern nationally. These include:-

- Separate and identified isolation wards away from the normal wards
- Separate and identified bathroom facilities for students with suspected COVID-19
- PPE used by the Health Centre staff when there is a suspected case
- Allocated COVID safe zones within the Health Centre
- Additional cleaning daily
- Once an isolation room has been used it is locked and labelled as out of use until it has been cleaned and fogged

9.3 There are clear procedures that should be followed in the event of a student or staff member presenting with COVID -19 symptoms. See Appendices H and I.

9.4 If there are students in the Health Centre isolating with possible COVID Symptoms the First Aid service provided to staff and students will be moved to an alternative venue if it is not possible to operate safely within other areas of the Health Centre. Staff will be notified of the temporary First Aid room.

10. COUNSELLORS

10.1 The school has a counselling service. Counsellors see pupils by appointment.

Parents can seek counselling for their son/daughter by contacting the Pastoral Manager in the first instance.

11. CONFIDENTIALITY

11.1 Parents will usually be contacted when their child visits the Health Centre.

Students will always be encouraged to inform parents of any issues that may arise, and in most cases the Health Centre Team will inform parents, with the student's consent. A statement to that effect is below;

11.2 Confidentiality and Doctors and Nurses working in school.

In accordance with the school doctor's / nurse's professional obligations, medical information about pupils, regardless of age, will remain confidential.

However, in providing medical/nursing care, it is recognised that the doctor/nurse may liaise with parents or guardians, the head teacher or other academic/boarding staff and that information, ideally with the pupils' consent, will be passed on as appropriate.

With all matters, the doctor/nurse will respect a pupil's confidence except on the very rare occasions when, to give consent or divulgence, the doctor/nurse considers it is in the pupil's best interests, or necessary for the protection of the wider school community, to breach confidence and pass information on to a relevant person or body (e.g. where there is a safeguarding concern).

11.3 If a boarding student wishes to seek a confidential medical appointment at the Bruton GP Surgery, this can be arranged upon request of the Health Centre Team.

12. FIRST AID

12.1 The Health Centre supplies and monitors first aid kits to the school and boarding houses.

Kits are provided for school trips. A large number of staff have had first aid training and training in the management of anaphylaxis and acute asthma.

First Aiders are identifiable by their pictures in the First Aid poster displayed around the school and the Orange Lanyard they wear.

13. DEFIBRILLATOR

13.1 The school has one defibrillator, located in the swimming pool centre. The School Nurse will ensure that sufficient staff have had appropriate training in its use.

14. OFF GAMES/SWIMMING

14.1 Day students must have a note from parents if they need to be off sport due to injury or illness. Children who become unwell/injured during the school day may be given an off games slip by the Health Centre, as appropriate.

14.2 Boarders may request a note from their House Parent.

15. HEAD LICE

15.1 Head lice are a common recurring problem in school. If live lice are found on boarders a lice solution is used, this then needs re-applying a week later to ensure any eggs that may have hatched are treated.

If Head lice are found on a day student, their parent is contacted and asked to support with the treatment plan.

16. DIARRHOEA AND VOMITING GUIDELINES

16.1 As per the Health Protection Agency Guidelines, if a child is unwell with vomiting and / or diarrhoea they should not return to school for 48 hours following the last episode of vomiting or diarrhoea.

16.2 The Health Centre should be informed if a child has been off of school due to diarrhoea / vomiting or other contagious illness.

17. DOCTOR

17.1 Boarders are registered with a local GP practice;

*Bruton Surgery, Patwell Lane, Bruton, BA10 0EG
Tel 01749 812310*

18. MEDICAL APPOINTMENTS

18.1 Boarders may be referred by the GP to local services for treatment / investigation.

If a parent/guardian is unable to take their child to the appointment, a member of staff will accompany them if necessary.

19. DENTIST/OPTICIAN/ORTHODONTIST

- 18.1 Parents are advised that routine dental and optical appointments should be made during the holidays. A local dentist and optician are used in an emergency during term time. Parents should note that there will be a charge for transporting children to appointments unless these are the result of an emergency.
- 18.2 Boarders can be referred to our local orthodontist for treatment if required. Transport to non-emergency appointments will be charged for. Boarders receiving orthodontic treatment at home, requiring emergency treatment / repair whilst in school can be seen locally to the school but there is usually a small charge for this.

19. VACCINATIONS

- 19.1 It is important that we have a complete immunisation record of all young people in the school. Public Health England recommends that all children be vaccinated according to UK guidelines. If a boarder has an incomplete or uncertain vaccination record, we may ask parents/guardians consent to arrange booster vaccinations in accordance with UK immunisation schedule.
- 19.2 BCGs (Tuberculosis) this is no longer given in school but can sometimes be obtained through the GP or privately, if required.
- 19.3 DTP (Diphtheria/Tetanus and Polio) the final booster for this is given to all pupils in Year 9, usually in February / March. Parents will be informed and consent forms sent/emailed out, these need to be returned prior to the vaccination date.
- 19.4 Meningitis ACWY. This vaccination is given to students alongside the DTP vaccination in Year 9. Students in Year 13 who have not had the vaccination can receive it at their GP. Boarders will be offered it through the school GP.
- 19.5 HPV (Cervical Cancer). The course of two vaccinations is given to girls in Year 8. Parents will be informed and consent forms sent/emailed out, which should be returned prior to the vaccination date. If your daughter is under 18 and has missed her HPV vaccination, this can be obtained at your GP.
- 19.6 Flu Vaccinations. These are recommended annually to boarders only who are registered with the school GP and have a long-term medical condition such as asthma/diabetes. A consent form will be sent to parents prior to the vaccination being given. Pupils over 16 can consent for themselves.
- 19.7 Travel Vaccinations. Parents of boarders requiring travel vaccinations should inform the Health Centre at least six weeks before travel. Vaccinations will be arranged through a local travel clinic or GP surgery. A charge may be made for this service.

20. UNACCEPTABLE PRACTICE

- 20.1 Although school staff should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan, it is not generally acceptable practice to

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary
- Assume that every child with the same condition requires the same treatment
- Ignore the views of the child or their parents or ignore medical evidence or opinion (although this may be challenged)
- Send young people with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plan.
- If the young person becomes ill and unsafe to walk, send them to the reception or Health Centre unaccompanied or with someone unsuitable.
- Penalise young people for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- Prevent young people from drinking, eating or taking toilet or other breaks whenever they need in order to manage their medical condition effectively
- Require parents or others to feel obliged to attend school to administer medication or provide medical support to their child, including toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- Prevent young people from participating or create unnecessary barriers to young people participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child

21. LIABILITY AND INDEMNITY INSURANCE

The Governing Body will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

21.1 The school's public/products liability insurance provides cover to the school nurses and first aiders in respect of medical treatment and the administration of medication.

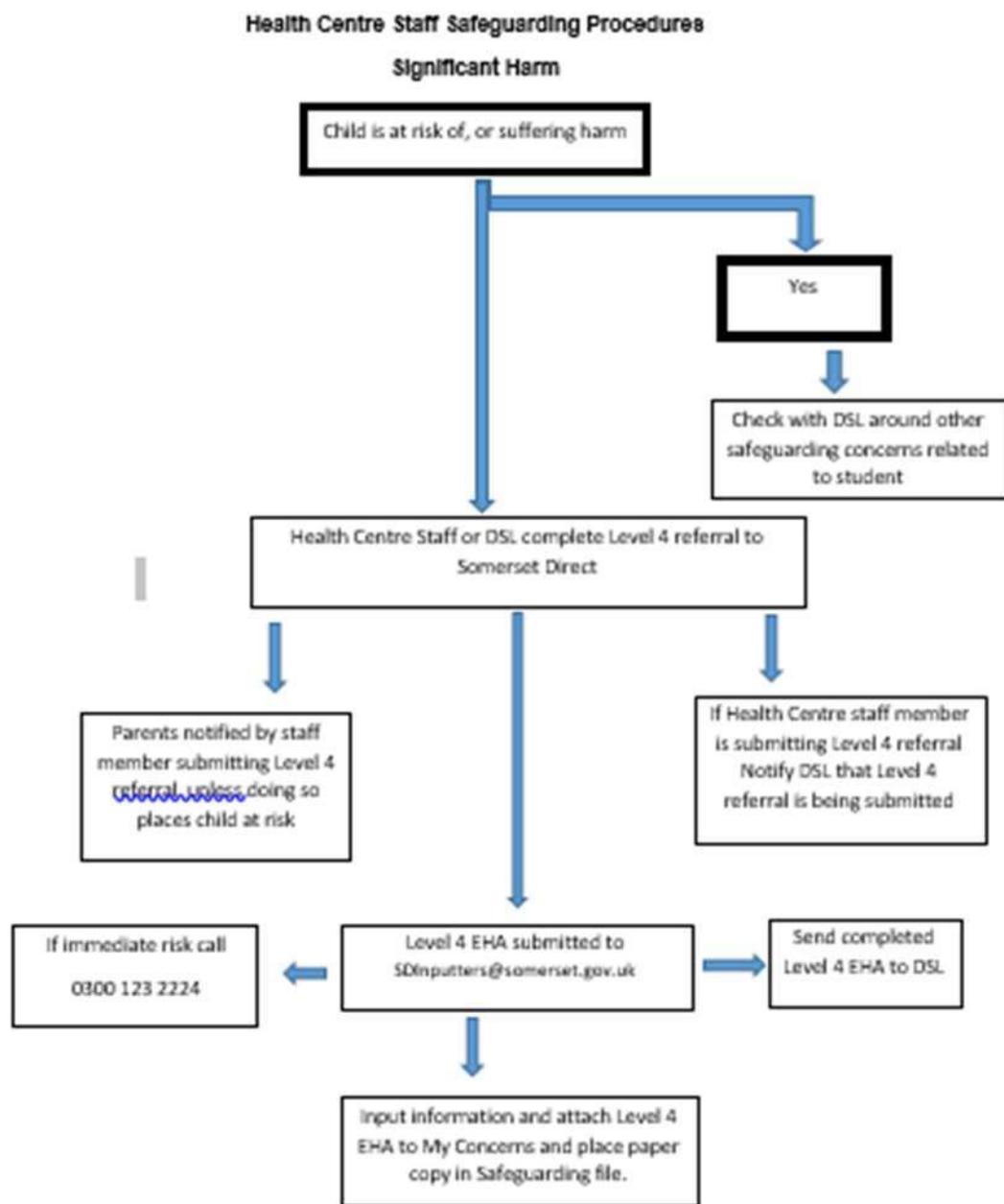
22. RESPONDING TO CONCERNS

23.1 Should parents or pupils be dissatisfied with the medical support provided, they should discuss their concerns directly with the school.

If, for whatever reason, this does not resolve the issue, they may make a formal complaint via the school's complaints policy.

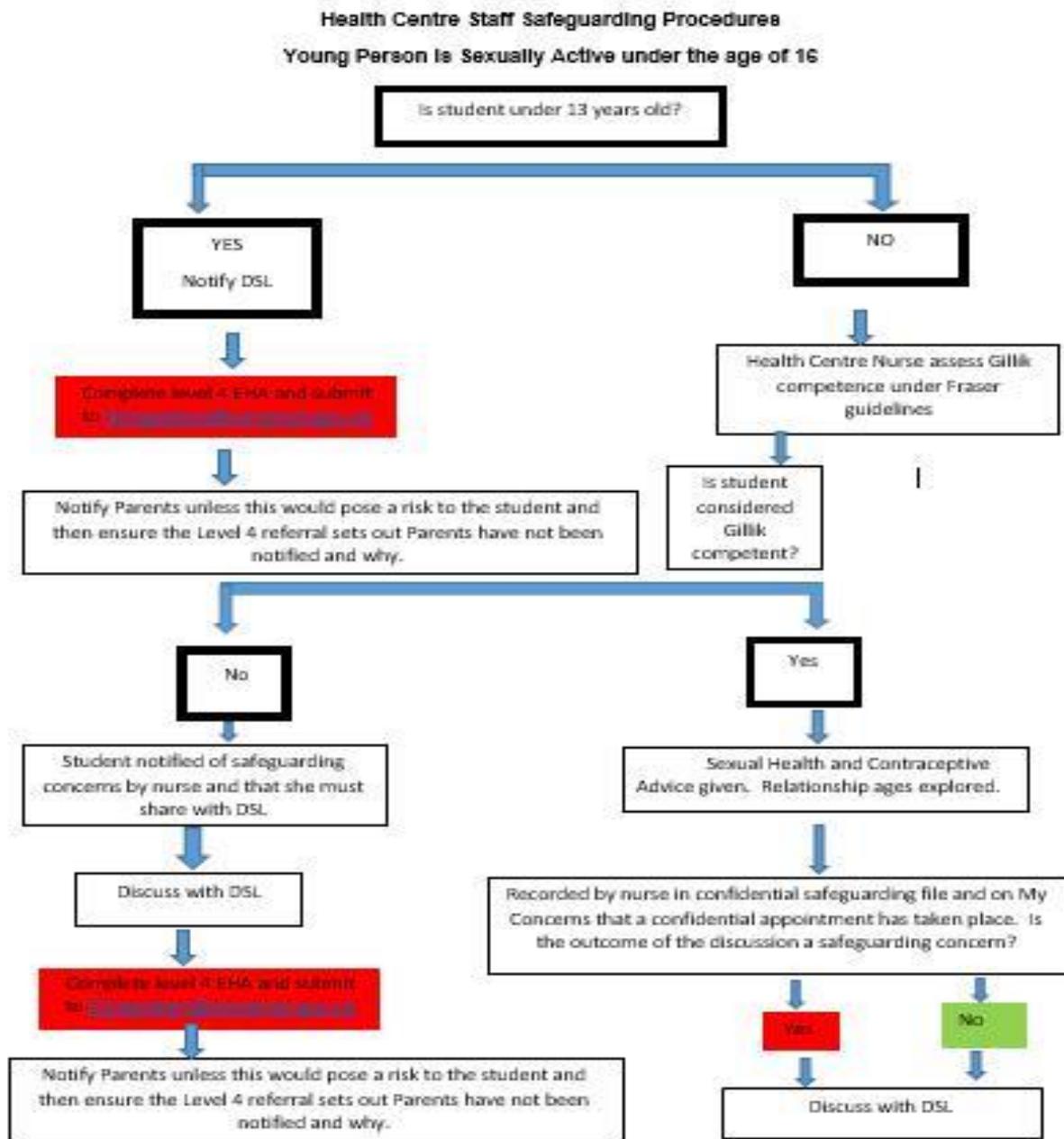
Making a formal complaint to the Department for Education should only occur if it comes within scope of section 496/497 of the Education Act 1996 and after other attempts at resolution have been exhausted.

Appendix A
Health Centre Staff Safeguarding Procedures – Significant Harm



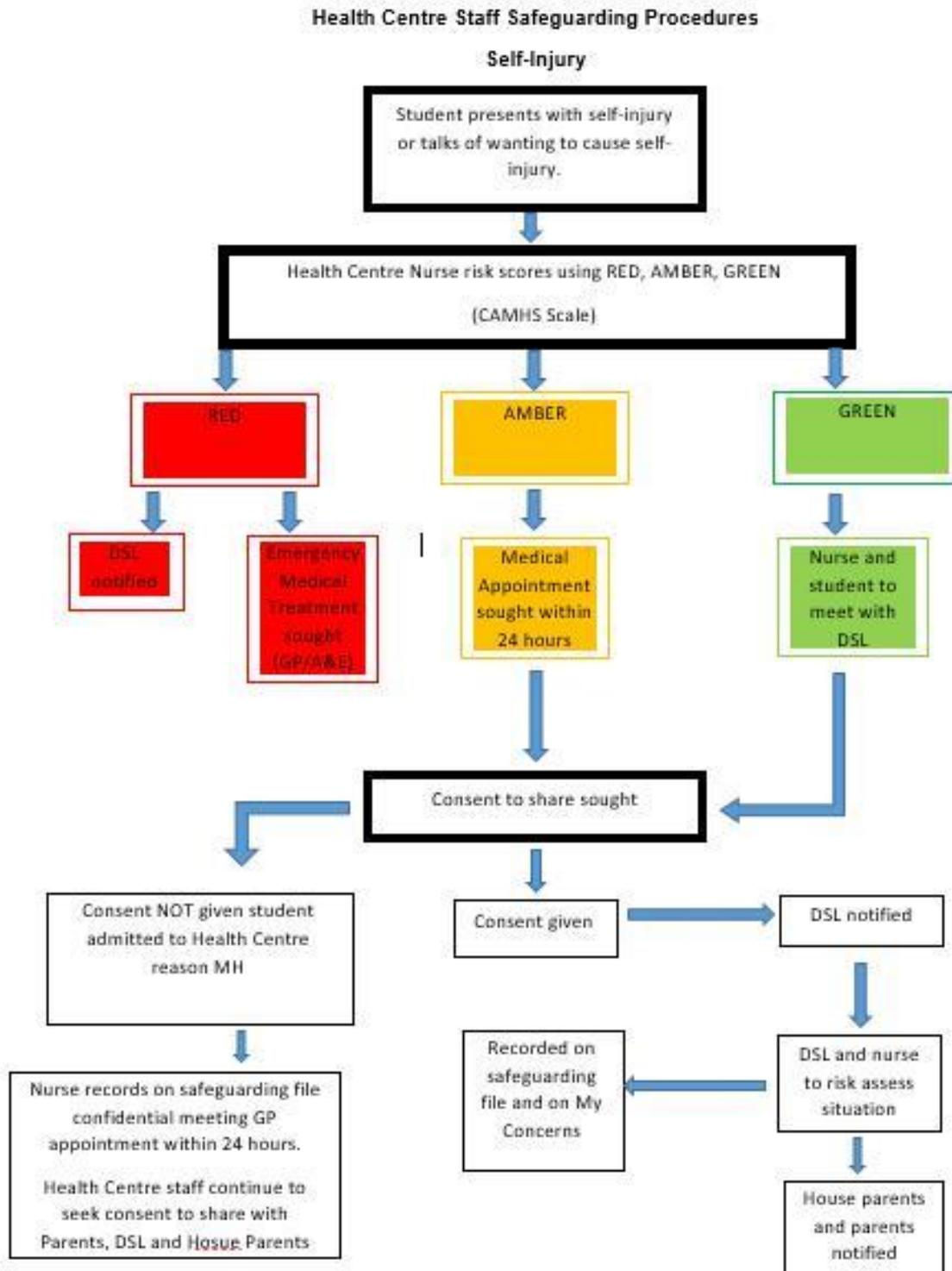
NB. These procedures are aligned to the NHS Somerset Clinical Commissioning Group Safeguarding Policy (March 2019)

Appendix B
Health Centre Staff Safeguarding Procedures – Sexually Active Young People



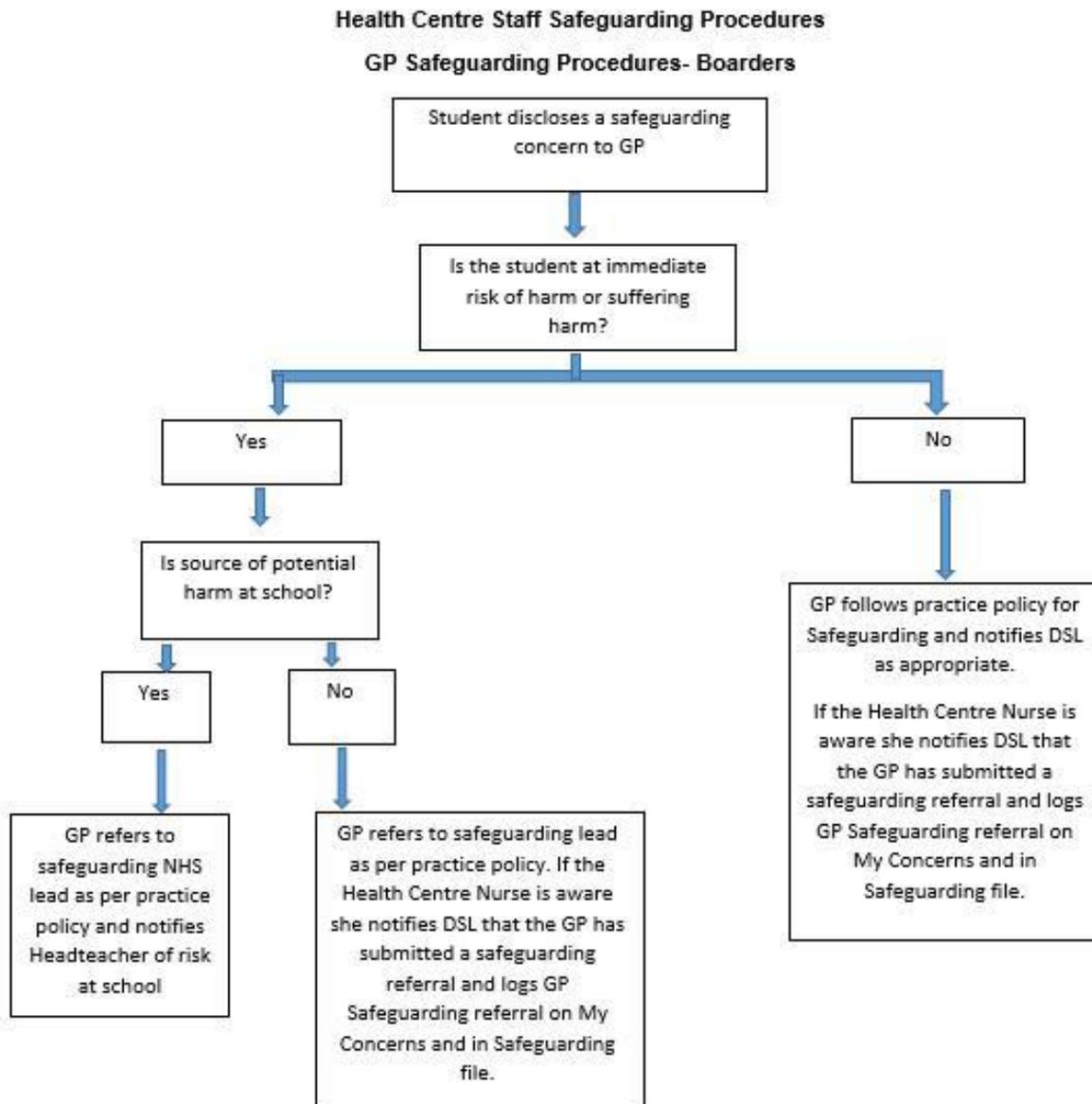
NB. These procedures are aligned to the NHS Somerset Clinical Commissioning Group Safeguarding Policy (March 2019)

Appendix C
Health Centre Staff Safeguarding Procedures – Self-Injury



NB. These procedures are aligned to the NHS Somerset Clinical Commissioning Group Safeguarding Policy (March 2019)

Appendix D
Health Centre Staff Safeguarding Procedures – GP Safeguarding Procedures



NB. These procedures are aligned to the NHS Somerset Clinical Commissioning Group Safeguarding Policy (March 2019)