

HEALTH CARE POLICY

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Lead for review:	Assistant Headteacher Pastoral & School Nurse

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Preface

Guildhouse School is committed to ensuring that all students receive appropriate medical care during their time with us. This policy provides clear guidelines in the following areas:

- Medical care offered by the school
- Confidentiality and information sharing
- Documentation
- Collaboration with parents/guardians
- Procedures for reporting sickness
- Administration, record-keeping, and disposal of medicines
- Health care plans

Aim

To collaborate with parents, guardians, students, and healthcare professionals to ensure students requiring medical treatment can do so in a safe and supportive environment, enabling them to continue their education effectively.

Confidentiality and Information Sharing

In line with data protection regulations, students under 18 require parental or authorised representative consent for the school to process their health information. The school nurse is bound by professional confidentiality but may share medical information when:

- It is in the best interest of the student or the wider school community, even if consent cannot be obtained.
- An emergency arises where the student is unable to give consent.

Information shared will follow the guidelines in Appendix 3 (Information Sharing Flowchart). The reasons and details of shared information must be documented as per school procedures.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721581/Information_sharing_advice_practitioners_safeguarding_services.pdf

Documentation

Medical interactions and communications are recorded securely in the school's designated systems (e.g., Shackleton) and stored in secure personal files on OneDrive/SharePoint. Hard copies are returned to the student or disposed of as confidential waste. Access is limited to authorised staff only.

New students complete a medical-health arrival questionnaire upon joining, detailing their medical history, current treatments, allergies, immunisations, mental health, and eating habits.

Working with Parents/Guardians

Guildhouse School values collaboration with parents, guardians, or agents to address student health needs effectively. Parents are expected to provide accurate and up-to-date information about their child's medical conditions, medications, and any special requirements. This includes:

- Medicine name, dosage, and administration method
- Frequency and timing
- Side effects impacting behaviour or performance
- Changes in medication

The school will respect cultural and religious considerations while ensuring health and safety.

Medical Services and Support

Students are directed to register with a local GP upon arrival. The school provides:

- Ongoing support from the School Nurse. There is a clear procedure for seeing the Nurse, usually by contacting them on Microsoft Teams. If a situation occurs during a lesson, the teacher contacts the Nurse to see if they can attend to the student.
- In the case of the Nurse being off-site, students are directed to Reception who will then liaise in the first instance and request for First Aid trained Student Services/Administration staff to see the student.
- If they are not available, reception will liaise with the Academic and Pastoral Hub (Middle/Senior Leaders (Pastoral Directors/Assistant Head Teacher Pastoral) who are First Aid Trained) for someone to see the student.
- Support for appointments with GPs, dentists, and optometrists
- Staff accompaniment for students under 18 during medical appointments (unless parental consent is given for unaccompanied visits)
- Students over 18 can attend medical appointments unaccompanied but it must be confirmed they wish to do this; some may request for a member of staff to attend with them
- Support for students with chronic conditions such as asthma, diabetes, epilepsy, and allergies, including relevant staff training and emergency action plans
- Mental health counselling services arranged through the School Nurse with the School Counsellor – these may sometimes be advised
- School Staff/Boarding Staff should consult with the National Health Service (NHS) helpline 111 for non-emergency medical advice and assistance.

Individual cases are assessed to determine the level of support required. Where resources are insufficient to meet a student's needs, alternative arrangements will be discussed with parents or guardians.

Reporting Sickness

Students feeling unwell must follow the attendance procedures outlined in the Student and Boarding Handbook. After assessment, the following actions may be taken:

1. Return to class if deemed fit.
2. Rest in their residence or the boarding medical bay, with staff informed.
3. Arrange a GP or private doctor appointment, with parental consent required for private consultations.
4. Direct the student to trained first aid staff if the School Nurse is unavailable by directing them to reception.

For illnesses lasting more than three days, proof of sickness via an NHS doctor's certificate may be required and the school reserves the right to insist that a student attends an NHS Doctor to enable proof to be received.

Sickness absence need to be reported to the school nurse (working with SLT) in line with policies in order for the absence to be authorised.

Medication Management

It is important that students who need to take medication at school are involved as closely as possible in the arrangements made for them. When planning for medical care at school the following is taken into consideration:

- Independent management of needs
- Supervised administration of medication
- Staff administration of medication

Storage

- Medicines are kept in locked cupboards or refrigerators in medical rooms. Members of staff who use the refrigerator must be made aware of the importance of keeping medicine safe and secure.
- Students competent to self-medicate (Gillick Competent) may store prescribed medication in personal safes.
- Students will carry their own inhalers/EpiPens with them.
- Spare emergency inhalers/EpiPens are kept in medical rooms and accommodation, clearly labelled.
- Advice on the storage of medicines will be sought from a qualified pharmacist when required.
- Medicines may be potentially harmful to anyone for whom they are not prescribed. The school acknowledges that it has a duty to ensure that risks to the health of others are properly controlled.
- All staff should be familiar with the normal procedures for avoiding infection and will follow the basic hygiene procedures detailed in the Infection Control Guidelines issued in January 1997. (See Appendix 4.)
- Medication should be taken to school only when it is needed. Often medication can be prescribed in dose frequencies, which enable it to be taken outside school hours.

Administration

- Medicine administration is supervised by the Nurse or authorised staff.
- Details are recorded, including dosage, time, and administrator signature on Shackleton.
- Risk assessments and health plans are implemented for controlled medications.
- Details will be completed on Shackleton for each student receiving medication.
- The health plan of medication administration will be reviewed with the student and nurse, at set intervals, to ensure the student's medical needs are being met.
- Any changes to the plan will be updated on Shackleton and the appropriate staff informed by the School Nurse.

Non-Prescribed Medicines

- Staff must check for previous doses, allergies, or contraindications before administering homely remedies.
- Staff must not compel a student to take medication.
- Parental consent for under-16s is required, unless the student is assessed as Gillick Competent.

Disposal

- Medicines are disposed of via local pharmacies and recorded in a disposal log. Sharps are placed in designated boxes.

Prescribed Medicines

Any member of staff giving medicines to a student should observe the following procedure in cooperation with a colleague

- confirm the student's name agrees with that on the medication
- check the written instructions provided by the parents or doctor
- confirm the prescribed dose
- check the expiry date
- check notes on Shackleton

Staff record on Shackleton each time they give medication to a student and alert the note to the school Nurse.

Emergency Medical Procedures

The Nurse and Assistant Head Teacher Pastoral will ensure that all staff know how to call the Emergency Services. Names of staff qualified to administer First Aid will be posted in rooms around the school and in the Boarding residence.

In medical emergencies:

- Staff must call 999/112 and provide detailed information.
- A member of staff will accompany the student to the hospital and act in loco parentis.

- In the case of a student self-referring, a member of staff would be assigned to accompany and stay until it's decided by SLT that the student can remain on their own.
- Parents or guardians will be informed promptly.
- If a student is admitted, the school will make arrangements for an overnight bag to be brought to the hospital and find out if it is appropriate for friends to visit.
- During a hospital stay, the school will liaise regularly with medical staff and ensure appropriate accompaniment and visits are organised.
- Medication currently being taken by the student should be brought to the hospital.
- Refusal of medication is documented, and emergency services are contacted if necessary.
- If a student is taken to hospital during school hours, the Head Teacher/SLT and School Nurse must be informed.
- The school will then undertake to inform the parents/guardian/agent and keep the parents/guardian/agent updated.
- A member of staff will be with the student to facilitate discharge from the hospital.
- If a student is taken to hospital during boarding hours (Monday – Friday 1730-0830 / all day Saturday and Sunday) then call the emergency telephone number. The on-call senior member of staff will inform the parents/guardian/agent as soon as is practical.
- When a student is taken to hospital by a member of staff, they should also take with them all medication the student is currently taking. If a student refuses to take medication, the school will record this on Shackleton and inform the student's parents

Health Care Plans

Individual health care plans outline the required level of support for students with medical needs. Plans are developed with input from:

- The student (if appropriate)
- Parents/guardians/agents
- The school nurse and relevant staff
- External healthcare professionals

Plans include medication details, emergency procedures, and review intervals. They ensure tailored support and effective communication among all stakeholders.

Related Policies

Health & Safety Policy

First Aid Policy

Attendance Policy

Appendices

Appendix 1: Health Plan Template

Student Name:	
D.O.B.:	
Gender:	
Residence:	
Names Health Coordinator:	
Family Contact on Shackleton:	
Medical Diagnosis/Condition (include medicine prescribed):	

Medical Professional Contact:	
Name:	
Telephone Number:	
Address:	

Assessment	
Medical Needs	Symptoms

Daily Health Plan to be implemented:	
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Health Plan Implemented by whom:	

Potential Complications and Emergency Situation:	
Agreed Actions to take:	
Actions Implemented by whom:	

Review Due:	
Review By:	
Date Reviewed:	
Outcome of Review:	
Date of Plan:	
Review Date:	
Date Reviewed:	
Reviewed by:	

Appendix 2: Protocol for Homely remedies for Guildhouse

Guidance

This is a list of medication that can be administered to students that have not been prescribed by a doctor. The aim of these guidelines is to provide safe treatments for commonly presented conditions. This policy does not supersede the need to contact a doctor, by any member of staff, if they are unsure or there is any doubt about the condition being treated.

Administration of these remedies should be given in accordance with the patient information leaflets provided in each pack, taking into account that there are no contraindications or previous allergies to the medication.

Any medication administered must be clearly recorded on the medical section in Shackleton and the school Nurse informed of the time and dose that the medication was given.

Homely Remedies

CONDITION	TREATMENTS
Cold and 'flu like symptoms'	Paracetamol or decongestant
Muscular Pain Relief, anti-inflammatory	Paracetamol, Ibuprofen
Allergy relief, hay fever	Allergy and Hay fever relief
Diarrhoea	Loperamide hydrochloride
Indigestion relief	Gaviscon or Rennie
Rehydration	Rehydration treatment
Minor cuts and grazes	Plasters

Paracetamol

Indications

When it can be used	Pain relief for mild to moderate pain, pyrexia (fever)
Do Not Give	In conjunction with other medicines containing paracetamol

Treatment to be given

Name of Medicine	Paracetamol 500mg
Dose	1 to 2 tablets
Route	Oral
Frequency	Four to Six hours between doses
Max dose in 24 hrs	4g (8 tablets)
Follow up	Inform GP if symptoms persist
Warning/Adverse reactions	Side effects rare – rash, blood disorders, liver damage in overdose

Ibuprofen

Indications

When it can be used	Pain relief for mild to moderate pain, migraine, musculoskeletal pain.
Do not give	Asthma, pregnancy, known hypersensitivity to aspirin, ibuprofen or other NSAID. Current or previous history of dyspepsia or peptic ulceration, patients taking oral anticoagulants, warfarin, heparin, aspirin or other NSAIDs, patients taking lithium, methotrexate, tacrolimus, ciclosporin, and patients with known severe cardiac disease, heart failure, oedema, hypertension or renal impairment

Treatment to be given

Name of Medicine	Ibuprofen 200 mg tablets
Dose	200mg – 400mg
Route	Oral
Frequency	Every 8 hours
Max Dose in 24 hrs	6 x 200mg tablets
Follow up	If condition worsens or symptoms persist then Seek further medical advice
Warnings/Adverse Reactions	Discontinue if indigestion or other gastro – intestinal symptoms develop e.g. haematemesis (blood in vomit)
Advice to student	Take Medicine with or after food or milk. Ibuprofen may be taken with paracetamol if necessary. Advise Students

	not to take another non-steroidal anti – inflammatory (NSAIDS) containing products at the same time.
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Decongestant

Indications

When it can be used	For relief of colds and flu symptoms
Do not give	If allergic to paracetamol, ascorbic acid, or any of the ingredients contained within this product. Have kidney or liver problems, overactive thyroid, diabetes, high bp or heart disease Taking drugs for heart problems or tricyclic antidepressants or have been prescribed drugs for depression in the last two weeks

Treatment to be given

Name of medicine	Decongestant
Dose	1 sachet every 4-6 hrs
Route	Oral
Frequency	One sachet every 4-6 hrs
Max Dose in 24hrs	No more than 6 sachets
Follow up	See GP if condition worsens or does not improve
Warnings/Adverse Reactions	Rare – allergic reactions, such as skin rash

Hayfever and allergy relief

Indications

When it can be used	Symptomatic relief of allergy such as hayfever, urticaria
Do Not Give	Kidney problems, pregnant or breastfeeding

Treatment to be given

Name of Medicine	Hay fever and allergy relief tablets
Dose	One tablet daily
Route	Oral
Frequency	Once daily
Max dose in 24hrs	1
Follow up	If no relief, refer to GP
Warnings/Adverse Reactions	Rare – headache, dizziness, dry mouth, drowsiness, stomach or intestinal discomfort

Cough Linctus

Indications

When it can be used	For relief of chesty coughs
Do not give	Fructose intolerance or allergic to ingredients

Treatment to be given

Name of medicine	Cough Linctus
Dose	10ml (2x5ml spoonful)
Frequency	2-3 hourly
Max dose in 24hrs	
Follow up	Refer to GP if symptoms persist with a temperature
Warnings/Adverse Reactions	Rare – stomach upset

Loperamide hydrochloride

Indications

When it can be used	To relieve symptoms of diarrhoea
Do not use	Cases of severe diarrhoea after taking antibiotics, inflammatory bowel conditions such as ulcerative colitis, constipation, acute dysentery. Advice needed if patient has AIDS and stomach becomes swollen. If diarrhoea lasts more than two weeks (or is related to IBS) If diarrhoea is severe

Treatment to be given

Name of Medicine	Loperamide Hydrochloride
Dose	Two tablets initially, followed by 1 capsule after each loose bowel movement
Route	Oral
Frequency	Take after each loose bowel movement
Max dose in 24hrs	16mg daily
Follow up	If symptoms persist after 3 days, seek medical help
Warnings/Adverse Reactions	Abdominal cramps, nausea, vomiting, tiredness, drowsiness, dizziness, dry mouth and skin reactions
Advice to student	Drink plenty of fluids to maintain hydration. To prevent spread of infection wash hands after going to the toilet, before you touch food. Rehydration therapy may be needed in cases of severe diarrhoea where large amounts of fluids are lost.

Toothache tincture

Indications

When it can be given	To relieve sore gums
DO NOT GIVE	If suffering from stomach ulcer. Allergic to any ingredients contained within the product. DO NOT GIVE to children or adolescents under the age of 16. There is a junior Bonjela available for this age group or boots own sore gum Seek advice if pregnant or breastfeeding. Linked to Reyes syndrome if given to children.

Treatment to be given

Name of Medicine	Tooth Tincture
Dose	One centimetre applied to sore area
Route	Oral
Frequency	Every 3hrs
Max Dose in 24 hrs	
Warnings/Adverse reactions	Possible allergic reaction, symptoms may like those of asthma.
Advice	If symptoms persist after 7 days, seek advice

Indigestion Remedies

Indications

When it can be used	To relieve Indigestion
DO NOT GIVE	Within two hours of taking other medicine by mouth as it may be less effective. Seek advice if suffering from phenylketonuria as this product is sweetened with aspartine.

Treatment to be given

Name of Medicine	Indigestion Remedy
Dose	2-4 tablets after meals and at bedtime
Route	Oral
Frequency	After meals
Max dose in 24 hrs	
Warnings/Adverse reactions	Too many tablets can cause bloating. Rare- allergic reaction
Advice to students	Look at lifestyle of student if appropriate. Do they smoke, drink too much coffee, alcohol or eat too many fatty food, chocolate.

Rehydration

Indications

When it can be used	To replace salts after diarrhea or excessive vomiting
DO NOT USE	Ask Doctor or pharmacist if suffering from intestinal obstruction, inflammatory bowel disease, diabetes, kidney or liver failure or on a low potassium or sodium diet

Treatment to be given

Name of medicine	Rehydration treatment
Dose	1 – 2 sachets with 200ml of water after each loose motion
Route	Oral
Max Dose in 24 hrs	6
Warnings/Adverse reactions	Rare- Allergic reaction
Follow Up	If symptoms persist, medical advice must be sought
Advice to Student	If vomiting is present the solution should be given in small frequent doses in sips

Calamine Lotion

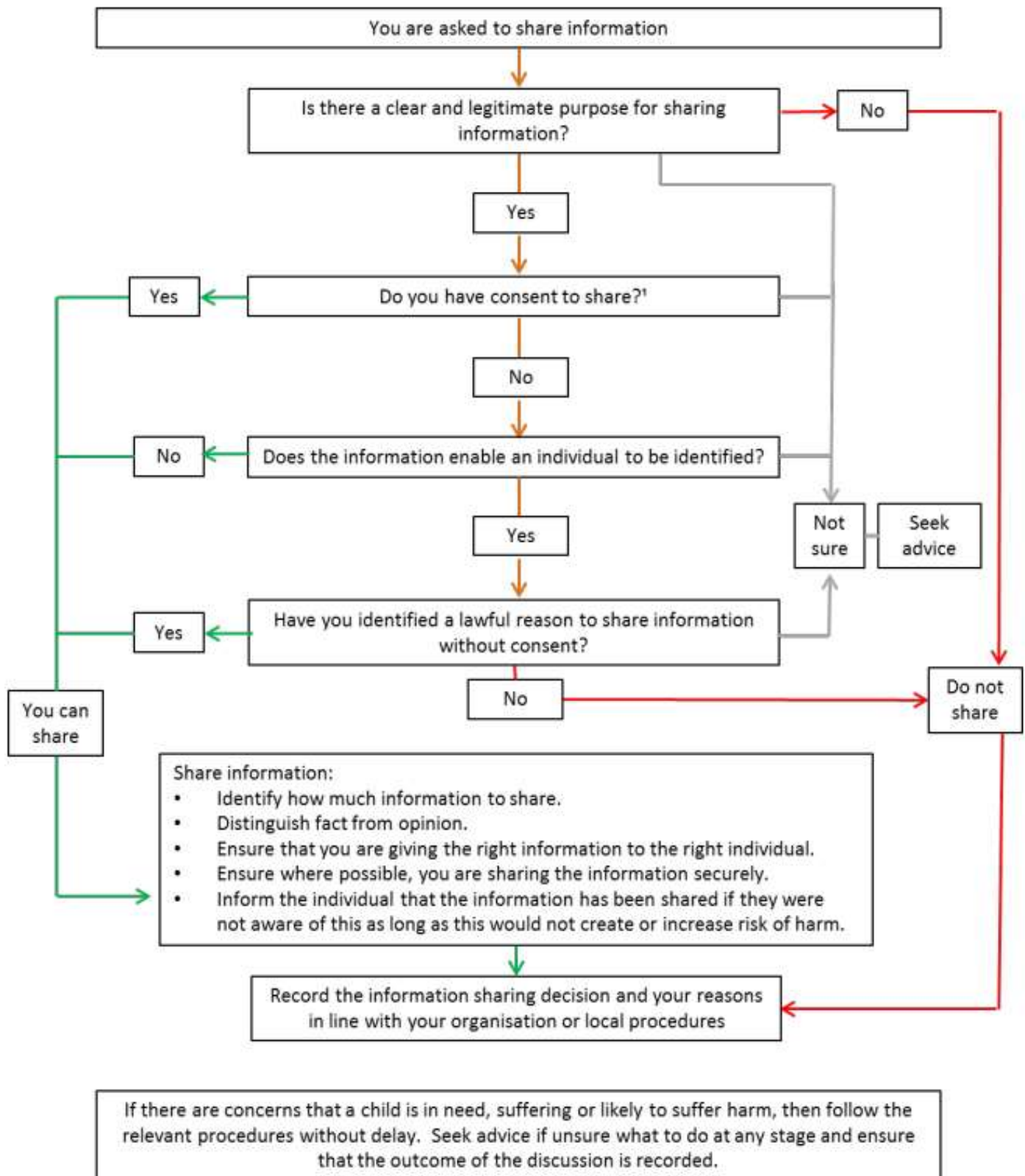
Indications

When it can be used	To relieve sun, burn and skin irritation
DO NOT USE	If allergic to lotion

Treatment to be given

Name of Medicine	Calamine Lotion
Dose	Apply as necessary to affected area.
Frequency	As required
Follow up	See GP if symptoms persist

Appendix 3: FLOWCHART OF KEY QUESTIONS FOR INFORMATION SHARING



Appendix 4: GOOD HYGIENE PRACTICE

For more advice contact your local Health Protection Unit or school health service.

Handwashing

It is one of the most important ways of controlling the spread of infections, especially those that cause diarrhoea and vomiting and respiratory disease. The recommended method is the use of liquid soap, water and paper towels. Always wash hands after using the toilet, before eating or handling food, and after handling animals. Cover all cuts and abrasions with waterproof dressings.

Coughing and sneezing easily spread infections

Children and adults should be encouraged to cover their mouth and nose with a tissue. Wash your hands after using or disposing of tissues. Spitting should be discouraged.

Cleaning of the environment

Including toys and equipment should be frequent, thorough, and follow national guidance e.g. use colour coded equipment, COSHH, correct decontamination of cleaning equipment. Monitor cleaning contracts and ensure cleaners are appropriately trained with access to Personal Protective Equipment PPE (see below).

Cleaning of blood and body fluid spillages

All spillages of blood, faeces, saliva, vomit, nasal, and eye discharges should be cleaned up immediately (always wear PPE). When spillages occur, clean using a product which combines both a detergent and a disinfectant. Use as per manufacturer's instructions and ensure it is effective against bacteria and viruses, and suitable for use on the affected surface. NEVER USE mops for cleaning up blood and body fluid spillages use disposable paper towels and discard clinical waste as described below. A spillage kit should be available for blood spills.

Personal Protective Clothing (PPE)

Disposable non powdered vinyl or latex free CE marked gloves and disposable plastic aprons, must be worn where there is a risk of splashing or contamination with blood/ body fluids. Goggles should also be available for use if there is a risk of splashing to the face. Correct PPE should be used when handling cleaning chemicals.

Laundry

It should be dealt with in a separate dedicated facility. Soiled linen should be washed separately at the hottest wash fabric will tolerate. Wear PPE when handling soiled linen. Soiled children's clothing should be bagged to go home, never rinse by hand.

Clinical waste

Always segregate domestic and clinical waste in accordance with local policy. Used sanitary products, gloves, aprons and soiled dressings should be stored in correct clinical waste bags in foot operated bins. All clinical waste must be removed by a registered waste contractor. All clinical waste bags should be less than 2/3rds full and stored in a dedicated, secure area whilst awaiting collection.

Sharps injuries and bites

If skin is broken make wound bleed/wash thoroughly using soap and water. Contact GP or go to Accident and Emergency immediately.

Appendix 5: Helpful organisation contacts

Allergy UK

Allergy Help Line: (01322) 619864

Website: www.allergyfoundation.com

The Anaphylaxis Campaign

Helpline: (01252) 542029

Website: www.anaphylaxis.org.uk and www.allergyinschools.co.uk

Association for Spina Bifida and Hydrocephalus

Tel: (01733) 555988 (9am to 5pm)

Website: www.asbah.org

Asthma UK (formerly the National Asthma Campaign)

Adviceline: 08457 01 02 03 (Mon-Fri 9am to 5pm)

Website: www.asthma.org.uk

Council for Disabled Children

Tel: (020) 7843 1900

Website: www.ncb.org.uk/cdc/

Contact a Family

Helpline: 0808 808 3555

Website: www.cafamily.org.uk

Diabetes UK

Careline: 0845 1202960 (Weekdays 9am to 5pm)

Website: www.diabetes.org.uk

Department for Education

Website: <https://www.gov.uk/government/organisations/department-for-education/services-information>

Department of Health

Tel: (020) 7210 4850

Website: www.dh.gov.uk

Equality and Human Rights Commission | Creating a fairer Britain

<http://www.equalityhumanrights.com/>

Equality Advisory and Support Service (EASS)

Phone: 0808 800 0082

Textphone: 0808 800 0084

Website: [//www.equalityadvisoryservice.com](http://www.equalityadvisoryservice.com)

Epilepsy Action

Freephone Helpline: 0808 800 5050 (Monday – Thursday 9am to 4.30pm, Friday 9am to 4pm)

Website: www.epilepsy.org.uk

Health and Safety Executive (HSE)

HSE Infoline: 08701 545500 (Mon-Fri 8am-6pm)

Website: www.hse.gov.uk

Health Education Trust

Tel: (01789) 773915

Website: www.healthedtrust.com

MENCAP

Telephone: (020) 7454 0454

Website: www.mencap.org.uk

National Eczema Society

Helpline: 0870 241 3604 (Mon-Fri 8am to 8pm)

Website: www.eczema.org

National Society for Epilepsy

Helpline: (01494) 601400 (Mon-Fri 10am to 4pm)

Website: www.epilepsynse.org.uk

Psoriasis Association

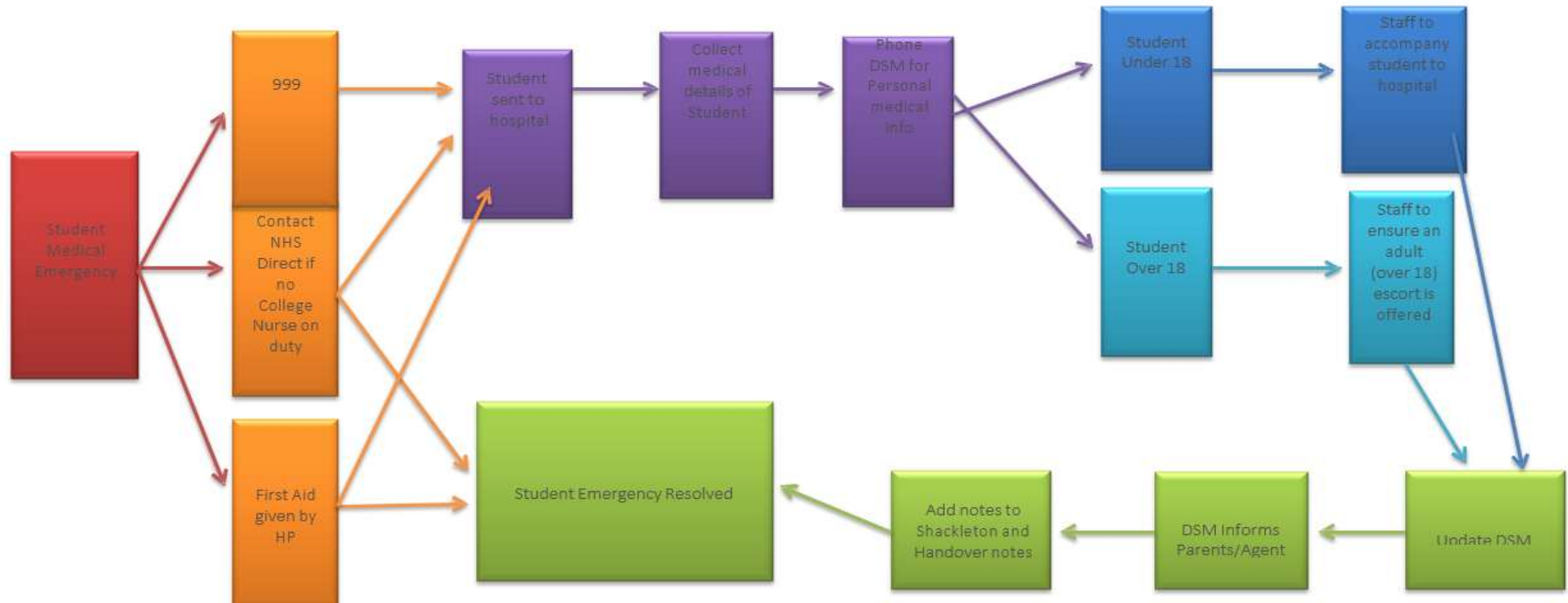
Tel: 0845 676 0076 (Mon-Thurs 9.15am to 4.45pm Fri 9.15am to 16.15pm)

Website: www.psoriasis-association.org.uk/

Sure Start

Tel: 0870 000 2288 / Website: www.surestart.gov.uk

Appendix 6: PREMIER HOUSE MEDICAL EMERGENCY FLOW CHART





GUILDHOUSE SCHOOL
LONDON



Creating tomorrow's change makers.