



**TRURO  
SCHOOL**



**SENIOR SCHOOL**

# General Health Policy

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A copy of this policy is published in the following areas: The school's website  
Reviewed and updated: September 2025  
Date for review: September 2026  
Created by: Health and wellbeing lead  
Reviewed by: Health and wellbeing lead, School Nurses and Deputy Head Pastoral

## **General Health Policy**

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The School's website*

Date last reviewed: September 2025 for

Review: September 2026

Reviewed by: Health and Wellbeing Lead; School Nurses & Deputy Head (Pastoral).

Applies to: Senior School

### **A. Introduction**

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The aims of the school Medical Centre is to promote good general health, preventative care, medical advice and provide emergency treatment for the whole school community, all within a caring and accessible framework which will as far as possible respect the pupil's wish for confidentiality.

### **B. Protocol**

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1. The school Medical Centre is organised to provide medical support for all pupils during the school day (8.30am – 5.00pm).
2. Although emergency treatment will always be provided by the Medical Centre during school hours, it is expected that for routine medical matters the day pupil's home GP will be consulted.
3. The Medical Centre is always staffed by one registered nurse and an assistant, under the management of the full-time Health and Wellbeing Lead.
4. A Medical Questionnaire is completed by all pupils' parents (or pupils themselves if over 16) when they join the School. Written medical and nursing records are kept confidentially in the Medical Centre, separately from house records
5. A programme of preventative medical screening and immunisations for boarders is organised on a regular basis, subject to parental consent. Immunisations for day pupils are delivered by Cornwall and Devon School Age Immunisation Service on school premises as appropriate, subject to parental consent.
6. The Medical Centre update ISAMS and the Pupil Medical Information document which shares information on any pupils with specific health needs which staff need to be aware of, in agreement with parents, in order to keep pupils safe (for example, cardiac issues, diabetes or epilepsy). The Pupil Medical Information document is a live document which is found on the intranet. It is updated with any new medical information or changes to the pupil's health.  
Pupils

with chronic conditions will have a care plan written by the nursing staff. This will be shared with the staff involved in the pupil's day to day life at school.

7. Boarders are registered with Three Spires Medical Practice unless their home is in the UK and a choice is made between the home and school GP registration. Boarders can request to see a female doctor if they prefer.
8. Boarders who are unwell and unable to attend school lessons are required to be in the Medical Centre during the school day rather than in the boarding house. If their condition permits, medical staff may allow the pupil to return to the boarding house overnight with management advice to boarding staff, with a reassessment the following morning.
9. **Accidents:** Please refer to the First Aid Policy. The school will always provide adult company for pupils if an emergency visit to hospital is required and if parents are not available immediately, but in the case of Day Pupils parents are expected to take over the care of the pupil at the hospital as soon as practicable.

When accidents occur in school, the teacher in immediate charge may give First Aid if urgent. Casualties must be reported to the nurse on duty in the Medical Centre, or sent to the Medical Centre, accompanied except in very minor cases. In non-emergency cases it may be necessary for the school to charge for the use of taxis to the hospital.

All accidents to pupils on the school site are recorded on individual files in the Medical Centre and on the school's on-line Accident and Incident form and parents will be informed via a note home or phone call in all but major cases.

10. **Accidents on the sports fields:** Medical staff will be on duty in school while games and matches are being played on site 8.30am – 5.00pm Mon-Fri and at other times by SBA staff. During weekend fixtures a trained First Aider is in attendance to attend to any injuries. In school time any casualty should be escorted to the Medical Centre if their condition permits it – otherwise, medical staff will attend the site of injury.
11. **Non-prescribed medicines:** Simple treatments (non-prescribed) such as Paracetamol and Ibuprofen may be given to the pupils when deemed necessary by medical staff in the School Medical Centre during the working day and to boarders by boarding house staff at other times. Consent for this is obtained and signed for on the Medical Questionnaire on entry to school. In all cases a record will be kept and the nature and implications of the medicines explained to the pupil. Pupils may not carry any medicines with them in school except those that have been recorded by the school's medical staff.
12. **Prescribed medicines:** The only prescribed medications that can be carried by pupils themselves are insulin, inhalers and AAI's (epipen/jext).. A spare, complete with name of pupil, can be kept at the Medical Centre for emergency use. Other medications such as antibiotics must be stored and administered (and recorded) only at the Medical Centre. Medication must be in the original container and clearly marked with the pupil's name and prescribed dose.
13. **Administration to save a life:** in an extreme emergency case if a pupil has emergency medication for an anaphylactic reaction or a seizure, with training, this can be given.

14. Foreign medications must be verified by parents and consent given by parents for administration or discussed with the GP with whom they register to establish correct usage and storage. These medications should be stored in the boarding house locked medicine cupboard as other medications.
15. **Storage and access to medication :** All medications are stored in a locked cupboard which is always locked.
16. **Administration and storage of medications by boarding staff :** Any medication should be given in line with the guidance in the medical handbook for boarding. Any medication in the boarding house should be stored in line with the guidance in the medical handbook for boarding.
17. Pupils who are prescribed 'controlled medicines' give the medical centre this medication. This is stored in the medical centre or in the boarding house in a double locked cupboard. Two members of staff should always check and administer the medication. A controlled book is filled out when receiving or administering each pupil's medication.
18. **Medication on residential trips:** a record should be kept of medication sent on residential trips. There is a protocol for this in the medical centre. Staff in charge of residential trips should inform the medical centre of the pupils they are taking and ask to be briefed fully but the school nurse prior to the trip
19. **Medical confidentiality:** Pupils over the age of 16 are entitled to full medical confidentiality. Below that age a pupil may wish for a matter to be treated confidentially: medical staff will respect that wish if they feel that the pupil is competent to make judgments for himself/herself and fully understands the nature of the situation (in line with principles and assessment of Gillick competence), and if the confidentiality does not put him/herself or (in the case of an infectious disease, for example) others at risk. If a pupil is considered at risk, the medical staff must share information about pupils of any age with the Designated Safeguarding Lead (DSL), in the pupils' best interest or the well-being of the community. Adequate records should be kept.
20. **Notification to parents:** With the pupil's consent and at the nurses' discretion, any non-routine visit to the Medical Centre by a pupil under 16 may be reported to parents or boarding house staff, and (again with pupil's consent) any non-routine appointment with a doctor will be reported to parents or boarding house staff of pupils under 16.
21. **Medical treatment requiring consent:** A pupil of any age may consent to or refuse medical treatment if they are judged "competent" to do so. The doctor or nurse proposing the treatment must judge whether or not the pupil understands the nature of the treatment, as well as the consequences of refusal, and can thus be deemed Gillick "competent". Written records should be kept.

It will be usual to gain consent to medical treatments at the time, following explanation of the nature of the treatment. "Blanket" consent on joining the school may not always be legally adequate, as the consent must be always be "informed". However, the Medical Questionnaire covers consent for non prescribed medication and day-to-day First Aid; individual consent for specific vaccinations etc will always be sought at the time.

22. Safe disposal of blood and bodily fluids is essential as may carry infectious materials. Protective clothing of gloves, aprons, goggles or visors should be worn where there is risk of contamination/ splash risk. Body fluid spill-packs are stationed with most first aid kits or can be obtained from the Medical Centre. Any such rubbish disposed of in a yellow plastic bag and go for incineration. The duty caretaker is always available to assist with such duties.
23. **Related policies:** Child Protection and Safeguarding Policy; Alcohol, Drugs and Substance Misuse Policy; First Aid Policy; Concussion Policy.
24. The school curriculum includes a Health Education programme for pupils delivered in PHSEE lessons. Subjects include drug misuse, smoking, alcohol and sex education; pupils can also seek individual advice at the Medical Centre.
25. School Counselling is available to all pupils.

### **What is school-based counselling?**

Counselling with children and young people is when a trained professional counsellor, working to a theoretical model, acting in accordance with a strict code of ethics, which requires confidentiality, accountability and clinical supervision, works on a one-to-one basis with a young person, whilst also working to a competence framework set by their membership body. School-based counselling has been defined as 'a form of psychological therapy that provides young people with an empathic, non-judgmental and supportive relationship to find their own answers to their own problems' (Hill, Roth and Cooper, 2013). This is offered within a safe and bounded space for children and young people to talk through their difficulties within a relationship of agreed confidentiality. Counsellors work to a core theoretical model, most commonly referred to as a humanistic or person-centred approach, based on the work of the psychologist Carl Rogers who emphasised the importance of the counselling relationship to help develop personal growth. (www.bacp.co.uk , School-based counselling – essential guide for school leaders, mental health leads and commissioners, 2023)

There is a full-time school counsellor and two part-time trainee counsellors. This policy is followed by the counsellors in their work with the pupils.

The school allows pupils to access counselling support without their parents or guardians knowing by following the Gillick Competence guidelines, see <https://learning.nspcc.org.uk/child-protection-system/gillick-competence-fraser-guidelines#skip-to-content> for further information. Please note that the counsellor will always encourage and work with the pupil to talk to their parents.