



Oxford Sixth Form College

A NORD ANGLIA EDUCATION SCHOOL

**Policy
(Including the
Care of Boarders
– who are
unwell)**

Revised: August 2024

Review date: August 2025

Introduction

Oxford Sixth Form College (OSFC) is committed to meeting the recommendations of the Department for Education's 2017 document *Supporting pupils at school with medical conditions* to ensure that all students with medical conditions, in terms of both physical and mental health, are properly supported in College so that they can play a full and active role in College life, remain healthy and achieve their academic potential.

Additional guidance for this policy has been taken from the *Professional Guidance on the Administration of Medicines in Healthcare Settings 2019*, *National Minimum Boarding Standards 2022*, *Promoting the health & wellbeing of looked after children 2015* and *First aid in schools, early years and further education 2022*.

Students with medical conditions

Students with long-term and complex medical conditions may require on-going support, medicines or care while at College to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. Students' health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. There are social and emotional implications associated with medical conditions: students may be self-conscious about their condition, and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition. Long-term absences due to health problems affect students' educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. It is therefore important that parents, guardians and agents (referred to as 'parents' in the rest of this document) feel confident that OSFC will provide effective support for each student's medical condition and that students feel safe. In making decisions about the support it can provide, OSFC will establish relationships with relevant local health services to help them. OSFC will fully consider advice from healthcare professionals and listen to, and value, the views of parents and students to manage short-term and frequent absences, including those for appointments connected with a student's medical condition.

Some students with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010, updated 2015. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision. See the Special Educational Needs and Disabilities Policy.

PROCEDURES

Arrangements

The Vice Principal (VP) is responsible, under the direction of the Principal, for making arrangements to support students with medical conditions, to ensure that such students can access and enjoy the same opportunities at College as any other student and can receive a full education. The arrangements will aim to build students' confidence, promote self-care, and show an understanding of how medical conditions impact on a student's ability to learn. Arrangements will need to be flexible, and consideration may also be given to how students will be reintegrated back into College after periods of absence. The focus will be on the needs of each individual student and how their medical condition impacts on their College life.

The VP, in liaison with the Health and Safety Officer (HSO) will ensure that there are sufficient and suitably trained staff to provide appropriate support for all students with medical conditions. It is the duty of the College to also ensure that all relevant staff are made aware of the students' condition and that adequate support is provided to those staff. All risk assessments for College visits and activities will be assessed by the Principal or VP and the Health and Safety Officer, where there is involvement of a student with a medical condition, to ensure appropriate support and actions are in place. The monitoring of Individual Healthcare Plans and Educational Health Care Plans (EHPCs) is the responsibility of the SENCO.

Admissions

Wherever possible no student with a medical condition will be denied admission or prevented from taking up a place in College because arrangements for their medical condition have not been made. There may be extreme circumstances where it may not be possible to admit a student because their needs cannot be met e.g., where a student requires medicines to be administered and there is not a trained member of staff who can perform this task. There may also be times when a student becomes so unwell, physically or mentally, that the student is no longer able to continue their studies in College (see Fitness to Study policy).

At the same time students' health will not be put at unnecessary risk from, for example, infectious diseases: the College will not accept a student in College at times where it would be detrimental to the health of that student or others to do so.

In the transitioning of a student from a school to the College the VP will ensure that all arrangements are in place in time for the students start at the College. In other cases, such as a new diagnosis or students moving mid-term, every effort will be made to ensure that arrangements are put into place within two weeks of the students arrival.

Health questionnaires

All students are required to complete a health questionnaire prior to their arrival. This will form the basis in good faith of the College's support of each individual student. If conditions are not disclosed by parents on the form, the College cannot take responsibility until parents have informed it fully.

The College Matron, or a member of the pastoral team will meet with all students individually at the start of their course to discuss the students Health Questionnaire to assess any needs that might arise and identify any further information that may need to be added to the student's record.

Individual Healthcare Plans

Individual Healthcare Plans (IHCP) help to ensure that the College effectively supports students with medical conditions. They provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed and are likely to be helpful in the majority of other cases, especially where medical conditions are long-term and complex. However, not all students will require one. The College, healthcare professionals and parents will agree, based on evidence, when a health care plan would be inappropriate or disproportionate. If consensus cannot be reached, the Principal is best placed to take a final view.

Plans will be drawn up in partnership between the College, parents, and a relevant healthcare professional, and will be easily accessible to all who need to refer to them, while preserving confidentiality. The aim will be to capture the steps which a College should take to help the student manage their condition and overcome any potential barriers to getting the most from their education. The College will use the Template provided by the DfE in *Supporting pupils with medical conditions* December 2017 <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

Individual health care plans will include the following:

- the medical condition, its triggers, signs, symptoms and treatments
- the student's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons
- specific support for the student's educational, social and emotional needs: for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions

- the level of support needed (some students will be able to take responsibility for their own health needs) including in emergencies. If a student is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring
- who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the student's medical condition from a healthcare professional; and cover arrangements for when they are unavailable
- who in the College needs to be aware of the student's condition and the support required;
- arrangements for written permission from parents and the Principal for medication to be administered by a member of staff, or self-administered by the student during College hours
- separate arrangements or procedures required for College trips or other College activities outside of the normal College timetable that will ensure the student can participate, e.g. risk assessments
- where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student's condition
- what to do in an emergency, including whom to contact, and contingency arrangements. Some students may have an emergency healthcare plan prepared by their lead clinician that could be used to inform development of their individual healthcare plan. An explanation of the collaborative working arrangements between all those involved (College staff, healthcare professionals, social care professionals, local authorities, and parents and students), showing how they will work in partnership to ensure that the needs of students with medical conditions are met effectively.

Gillick competence

Gillick competence is a term originating in England and is used in medical law to decide whether a child (16 years or younger) is able to consent to his or her own medical treatment, without the need for parental permission or knowledge.

The College requires the parents/guardian/agent to disclose the student's ability to self-administer on the Health Questionnaire. If there is concern about a student's ability to self-administer the College will further assess students on arrival to establish their Gillick competence in line with NMS 7.6 'Boarders allowed to self-medicate are assessed as sufficiently responsible to do so. Boarders confidentiality, rights, privacy and dignity as patients is fundamental and will always be protected. This includes the right of a boarder deemed to be 'Gillick Competent' to give or withhold consent for their own treatment.

Managing medicines on College premises

OSFC will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin which must still be in date but will generally be available inside an insulin pen or a pump, rather than in its original container.

OSFC will ensure that all medicines are stored safely and securely, and accurate records are kept of its administration. Students will be told where their medicines are at all times and be able to access them immediately. Where relevant, they should know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to students and not locked away. This is particularly important when outside of College premises, e.g. on College trips.

A student who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so but passing it to another student for use is an offence. Monitoring arrangements may be necessary. The College will otherwise keep controlled drugs that have been prescribed for a student securely stored in a non-portable lockable container and only named staff should have access. Controlled drugs will be easily accessible in an emergency. A record will be kept of any doses used and the amount of the controlled drug held in College. College staff may only administer a controlled drug to the student for whom it has been prescribed and in the presence of a second member of staff. Staff administering medicines will do so in accordance with the prescriber's instructions. The College will keep a record of all medicines administered to individual students, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at College will be noted. The College maintains this record on MST and hard copy so that the document is easily accessible to those who need it (restricted access in place) on all sites, including the boarding houses.

When no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.

Administering medicines

Medicines should only be administered at College when it would be detrimental to a student's health or College attendance not to do so. Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside College hours.

No student under 16 should be given prescription or non-prescription medicines without their parent's written consent – except in exceptional circumstances where the medicine has been prescribed to the student without the knowledge of the parents. In such cases, every effort should be made to encourage the student or young person to involve their parents while respecting their right to confidentiality. **A student under 16 should never be given medicine containing aspirin unless prescribed by a doctor.**

Until such time as staff are appropriately trained, we shall not issue homely remedies. **Medication, e.g. paracetamols for pain relief, should not be administered unless the member of staff has been appropriately trained. Full records must be kept on MST at all times. The use of local pharmacies and GP surgeries are to be considered.**

All prescription medicines for students under the age of 18 must be kept in a locked cupboard, or medical fridge in the boarding houses and given out by a member of the house staff according to the prescription.

The College will assess students 18 and older for their maturity and reliability. Unless a student is judged to be especially vulnerable the College allows students to store limited quantities of their own medicines and to self-medicate.

Staff do not have a statutory duty to give medicines or medical treatment. However, prescription medicines will be administered to enable the inclusion of students with long-term medical needs, promote regular attendance and minimise the impact on a student's ability to learn. In an emergency, all teachers and other staff in charge of children have a common law duty of care to act for the health and safety of a child in their care – this might mean giving medicines or medical care.

Unacceptable practice

It is **not** generally acceptable practice to:

- prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary
- assume that every student with the same condition requires the same treatment
- ignore the views of the student or their parents; or ignore medical evidence or opinion (although this may be challenged)
- send students with medical conditions home frequently or prevent them from staying for normal College activities, including lunch, unless this is specified in their individual healthcare plans
- if the student becomes ill, send them to the College reception or medical room unaccompanied or with someone unsuitable
- penalise students for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively

- require parents, or otherwise make them feel obliged, to attend College to administer medication or provide medical support to their student, including with toileting issues. No parent should have to give up working because the College is failing to support their student's medical needs
- prevent students from participating, or create unnecessary barriers to students participating in any aspect of College life, including College trips, e.g. by requiring parents to accompany the student.

Liability and indemnity

The College will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk. Insurance policies should provide liability cover relating to the administration of medication, but individual cover may need to be arranged for any healthcare procedures. The level and ambit of cover required must be ascertained directly from the relevant insurers. Any requirements of the insurance, such as the need for staff to be trained, should be made clear and complied with.

In the event of a claim alleging negligence by a member of staff, civil actions are likely to be brought against the employer.

Record keeping

Written records will be kept of all medicines administered to students. Records offer protection to staff and students and provide evidence that agreed procedures have been followed. Parents should be informed if their student has been unwell at College. Where controlled drugs have been administered to a student, the names of both staff must be recorded.

Emergency procedures

Where a student has an IHCP, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other students in the College should know what to do in general terms, such as informing a teacher immediately if they think help is needed.

If a student needs to be taken to hospital, staff should stay with the student until the parent arrives, or accompany a student taken to hospital by ambulance. The College understands the local emergency services cover arrangements and that the correct information is provided for navigation systems.

Day trips, residential visits and sporting activities

Teachers should be aware of how a student's medical condition will impact on their participation, but there should be enough flexibility for all students to participate according to their own abilities and with any reasonable adjustments. The College will make arrangements for the inclusion of

students in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not possible.

Responsibilities

Principal

The Principal will ensure that their College's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting students with medical conditions and understand their role in its implementation. The Principal should ensure that all staff who need to know are aware of the student's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. This may involve recruiting a member of staff for this purpose. The Principal have overall responsibility for the development of individual healthcare plans. They should also make sure that College staff are appropriately insured and are aware that they are insured to support students in this way.

College staff

Any member of College staff may be asked to provide support to students with medical conditions, although they cannot be required to do so.

The administration of prescription only medication specified in Schedule 19 of the Human Medicines Regulations 2012 (see Appendix B) should only be given by those trained to do so. Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans). Any member of College staff providing support to a student with medical needs should have received suitable training. This should have been identified during the development or review of individual healthcare plans. Staff who provide support to students with medical conditions should be included in meetings where this is discussed. All College staff must be aware of the policy through training. Any member of College staff should know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

In some cases, written consent, and medical instructions from the parent or on the medication container dispensed by the pharmacist, would be considered sufficient. A first-aid certificate does not constitute appropriate training in supporting students with medical conditions.

Other healthcare professionals, including GPs and paediatricians

They must notify the College when a student has been identified as having a medical condition that will require support at College. They may provide advice on developing healthcare plans. Specialist local health teams may be able to provide support in the College for students with particular conditions (e.g. asthma, diabetes, epilepsy).

Students

Those with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other students will often be sensitive to the needs of those with medical conditions.

Wherever possible, students should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication quickly and easily. Students who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If it is not appropriate for a student to self-manage, then relevant staff should help to administer medicines and manage procedures for them.

If a student refuses to take medicine or carry out a necessary procedure, staff should not force them to do so. Parents should be informed so that alternative options can be considered.

Parents

Parents will be asked to provide the College with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the College that their student has a medical condition. Parents are key partners and should be involved in the development and review of their student's individual healthcare plan and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Complaints

The College's Complaints procedures clearly set out the routes by which anyone may make a complaint.

Further sources of information

Section 3 of the Childrens Act 2004 provides a duty on a person with the care of a student (who does not have parental responsibility for the student) to do all that is reasonable in all the circumstances for the purposes of safeguarding or promoting the welfare of the student.

The College's duties towards disabled students and adults are included in the Equality Act 2010, and the key elements are as follows:

- They must not discriminate against, harass, or victimise disabled students and young people
- They must make reasonable adjustments to ensure that disabled students and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory: adjustments must be planned and put in place in advance, to prevent that disadvantage

Section 2 of the Health and Safety at Work Act 1974, and the associated regulations, provides that it is the duty of the employer to take reasonable steps to ensure that staff and students are not exposed to risks to their health and safety.

Under the Misuse of Drugs Act 1971 and associated Regulations the supply, administration, possession and storage of certain drugs are controlled. Colleges may have a student who has been prescribed a controlled drug.

The Medicines Act 1968 specifies the way that medicines are prescribed, supplied and administered within the UK and places restrictions on dealings with medicinal products, including their administration.

National Minimum Boarding Standards 2022, 7.3, 7.5 and 7.6 state that effective arrangements are made to care for boarding pupils who are sick or injured. The school ensures boarders have access, as appropriate, to local medical, dental and optometric services and provision. All medication is stored safely and securely, and accurate records are kept of its administration. Staff are properly trained to provide the support that pupils need when administering medicines. Prescribed medicines are given only to the boarders to whom they are prescribed. Boarders allowed to self-medicate are assessed as being sufficiently responsible to do so

Appendix A

Keeping track of medicines in boarding

New students to boarding:

Admissions will ensure that:

- there is a section in the enrolment form which enables all medicines to be listed prior to arrival, and
- that there is a request in the joining email that asks students to put all their medicines into a clear plastic bag in their suitcase so these can be handed to the Houseparent on arrival. Any medicine with instructions not written in English, must be translated into English by a medical professional before arrival. This could be in a separate list form.

Upon arrival to the boarding house:

- The Houseparent, or Head of House will take the student to their allocated room for induction and to remove the medicines from the student (this does not include the contraceptive pill, epi-pen, inhaler or insulin pods or glucose sensors).
- The Head of House will record each students' medicines in a 'Medicine book' and store the medicines appropriately.
 - In St Ebbes this will be in the office on the 4th floor, or if something is needed on a regular basis, in the safe in Plant Room 1. Medicines requiring a cool temperature will be stored in the medical fridge.
 - In Pensons Gardens medicines are kept in the office. Medicines requiring a cool temperature will need to be stored in the medical fridge in the office.
- A student may keep up to one week's supply of prescription medicine in their room, unless there is agreement that the medicines need to be administered. Students may also keep small quantities of non-prescription medicines, e.g., Paracetamol in their rooms.
- Aspirin or products containing aspirin must not be given to students unless prescribed for that particular student by a doctor.

Guidelines for the dispensing of medicine

Paracetamol and prescription medicines must be recorded in the BLUE medicine book.

Controlled medicines must be recorded in the GREEN medicine book.

Paracetamol and prescribed medicine must be kept in a locked cupboard.

Paracetamol administration

1. Paracetamol administration and stock level must be recorded on-line, and in the blue logbook.
2. A running total of the amount of medicine in stock must be recorded after each administration.

Prescribed medicine administration

1. Name and age of student to be recorded at the top of the page in blue logbook (weight and height not needed)
2. All columns must be filled in
3. Student must sign in the **Taken** column
4. Staff must sign in the **Note** column after medication is taken
5. A running total of the amount of medicine in stock must be recorded after each administration.

Controlled medicines

Controlled drugs MUST be kept in a double locked facility with 2 keys. e.g. in a locked safe/drawer/fridge and in a locked room/cupboard and MUST always be administered by TWO people.

Controlled drugs administration

Record keeping for Controlled Drugs has Legal Requirements:

- Paper Controlled Drug Register (CDR) will be kept in a bound book format
 - There must be a separate page for each strength & form of an individual drug
 - Each page must specify the name, strength and form of the drug at the head of the page and all of the entries on that page must relate to that drug only
 - Each entry must be in chronological order
 - Each entry must be legible and written in indelible ink. If a mistake is made, then it should be crossed through with a single line so that it can still be read. The CDR logbook must be kept on the premises to which it relates. The CDR must be available for inspection by an authorised person.
1. All Controlled Drug names must be recorded in the Index
 2. The name of student must be recorded at the top of the page in green logbook
 3. All columns to be filled in as directed
 4. Two staff must administer CD and both to sign logbook after medication is taken by student
 5. A running total/balance of the amount of medicine in stock must be recorded after each administration.

Example layout of the Medical Book:

Name	Medicine Name	Dosage on box/bottle	Frequency of dosage	Date given	Time Given	Administered by whom	Student Initials
Jo BLOGS	Rapture	2	3 x daily	11.10.2022	07:50	ZP	Student signs

The blue section repeats across an A3 page so that all 3 frequencies during the day are recorded.

All staff MUST follow the above procedures exactly.

Appendix B

The Human Medicines Regulations 2012

Schedule 19, Regulation 238:

Medicinal products for parenteral administration in an emergency, i.e. they may only be administered where a first aid needs assessment identifies that Schedule 19 medication may be required to be administered in an emergency. Ideally the first aider would have received additional training so that they can be aware of the symptoms and condition and administer lifesaving medication in an emergency situation.

In all other circumstances the following medication cannot be administered by a member of staff, unless they have been trained to do so:

Adrenaline 1:1000 up to 1mg for intramuscular use in anaphylaxis

Atropine sulphate and obidoxime chloride injection

Atropine sulphate and pralidoxime chloride injection

Atropine sulphate injection

Atropine sulphate, pralidoxime mesilate and avizafone injection

Chlorphenamine injection

Dicobalt edetate injection

Glucagon injection

Glucose injection

Hydrocortisone injection

Naloxone hydrochloride

Pralidoxime chloride injection

Pralidoxime mesilate injection

Promethazine hydrochloride injection

Snake venom antiserum

Sodium nitrite injection

Sodium thiosulphate injection

Sterile pralidoxime

In **ALL** cases, the administering of the above, and any other medicines must be recorded at the time it is administered.