HOLYPORT COLLEGE

College protocols on supporting students at the College with medical conditions and the management and administration of medicine

Person responsible for policy formulation, implementation, maintenance and evaluation	Health Centre Manager
Persons consulted	Dr R Stephenson - Responsible Governor for Students Wellbeing Mr Walter Boyle – Head Master College Nurse ELT GWC
Adopted by Governors on	5th October 2016
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Revision	2nd March 2023

REVISION STATUS TABLE

Revision No	Effective date	Summary of Revision	Reviewed by	Date
v1.1	5th November 2021	Revision on original policy	College Nurse, ELT, GWC	4th November 2021
V1.2	March 2023	Periodic review	College Nurse, ELT, GWC	2nd March 2023

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INTRODUCTION

Section 100 of the Children and Families Act2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting students with medical conditions. This policy is based on statutory guidance and non-statutory advice given in the Department for Education's December 2015 version of 'Supporting pupils at school with medical conditions'.

Students who miss school as a result of a medical condition are highly likely to fall behind their peers academically. However, there are social and emotional implications associated with medical conditions too. Young people may be self-conscious about their medical condition and some may be bullied or develop emotional disorders such as anxiety and depression. Long-term absences impact upon a young person's ability to integrate with their peers. The College therefore aims to create an inclusive community where students with medical needs are well cared for and feel welcome and valued.

Key Responsibilities

- The Health Centre Manager is responsible for the formulation, implementation, maintenance and evaluation of this policy.
- All staff must be aware of student's health needs, their associated risks and the impact the medical condition has the individual's education.
- Parents are responsible for informing the school of any medical conditions, medications and medical needs of their child on the student record on Operoo at entry to Holyport and the Health and Wellbeing form which is shared with the nurse and SENCO. They should contact the school nurse with any changes and updates to their child's condition so that amendments can be made to their care plan.

Key points

- Students at Holyport College with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- The Governing Board must ensure that arrangements are in place in the College to support students with medical conditions and ensure that Holyport College fosters an inclusive ethos where all feel welcome.
- The Governing Board should ensure that College staff consult health and social care professionals, students and parents to ensure that the needs of students with medical conditions are properly understood and effectively supported. (The College will endeavour to meet the reasonable requests of parents but will challenge parental wishes or advice from GPs and other medical professionals where appropriate for it to do so - page 23, 'Supporting students with medical conditions in schools'.)

INDIVIDUAL HEALTH CARE PLANS (IHP)

When the College is notified that a student has a medical condition the College, healthcare professional and parent will meet to decide, based on evidence, whether an individual healthcare plan (IHP) would be inappropriate or disproportionate. If consensus cannot be

reached, the Head Master is best placed to take the final view. **Procedure for students who do not need an IHP**

- If medication is required during the College day, appropriate written consent must be received from the parent.
- Where appropriate, staff should be informed of a student's medical needs.

Procedure for students who need an IHP

- Plans should be drawn up in partnership between the College, parents and a relevant healthcare professional who can best advise on the particular needs of the student. Students should also be involved whenever appropriate.
- The aim should be to capture the steps which the College should take to help the student to manage their condition and overcome any potential barriers to getting the most from their education.
- Partners should agree who will take the lead in writing the plan, but responsibility for ensuring it is finalised and implemented rests with the College.
- The level of detail within plans will depend on the complexity of the student's condition and the degree of support needed.
- Plans are reviewed at least annually or earlier if evidence is presented that the student's needs have changed.

The following information should be considered when writing an individual healthcare plan:

- the medical conditions, its triggers, signs, symptoms and treatments
- the student's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues
- specific support for the student's educational, social and emotional needs
- the level of support needed including in emergencies
- who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements
- who in school needs to be aware of the student's condition and the support required
- arrangements for written permission from parents for medication to be administered by a member of staff or self-administered (students who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision)
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the student can participate
- confidentiality
- what to do if a student refuses to take medicine or carry out a necessary procedure
- what to do in an emergency, who to contact and contingency arrangements
- where a student has SEN but does not have an Education, Health and Care plan, their special educational needs should be mentioned in their individual healthcare plan

ROLES AND RESPONSIBILITIES

Supporting a student with a medical condition during College hours is not the sole responsibility of one person. The College will work collaboratively with any relevant person or agency to provide effective support.

The Governing Body

- must make arrangements to support students with medical conditions and ensure policy is developed and implemented
- must ensure sufficient staff receive suitable training and are competent to support students with medical conditions
- must ensure the appropriate level of insurance is in place and appropriately reflects the level of risk

The Head Master

- should ensure all staff are aware of this policy and understand their role in its implementation
- should ensure sufficient numbers of staff are trained to implement the policy and deliver IHPs, including in emergency and contingency situations, and they are appropriately insured

The Health Centre Manager

- is responsible for the development of IHPs
- should ensure all staff who need to know are informed of a student's condition
- should contact the school nursing service in the case of any student with a medical condition who has not been brought to the attention of the nurse

All School Staff

- any staff member may be asked to provide support to students with medical conditions, including the administering of medicines, although they cannot be required to do so
- should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting students with medical conditions
- training should be sufficient to ensure that staff are competent and have confidence in their ability to support students with medical conditions, and to fulfil the requirements as set out in the IHP. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

- any staff member should know what to do and respond accordingly when they become aware that a student with a medical condition needs help
- attend any general awareness training provided on medical conditions. This could be on anaphylaxis awareness or epilepsy awareness, or could be focussed on the specific needs of an individual student.

Students

- should, whenever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHP
- after discussion with parents, students who are competent should be encouraged to take responsibility for managing their own medicine and procedures. This will be reflected within individual healthcare plans
- will be told where their medicines/devices are stored so that they can be accessed for self-medication quickly and easily.

Parents

- must provide the school with sufficient and up-to-date information about their student's medical needs
- are the key partners and should be involved in the development and review of their student's IHP
- should carry out any action they have agreed to as part of the IHP implementation

Day Trips, Residential Visits and Sporting Activities

- a risk assessment will be conducted for any student with a medical condition prior to the trip, residential visit or sporting activity
- all reasonable adjustments will be made to enable the student to participate fully – if a medical professional advises against a certain trip or activity, the College may not be able to make reasonable adjustments
- the trip leader will ensure all medication is available and that responsible staff are briefed.

Liability and Indemnity

- The College has full public liability insurance

Complaints

- The College's Complaints Policy is on the College website.

MEDICAL ADMINISTRATION PROTOCOL

1. Introduction

This Medicine Administration Protocol is designed to enhance the attendance of students at the College. Strict criteria have to be followed in accordance with Government and Nursing & Midwifery Council Guidelines to ensure safe administration of medication to students.

There is no contractual requirement for any member of staff to administer medication to a student. However in the following circumstances listed below staff will be required to administer medicines:

- When the School Nurse is off site. (Named staff will be trained)
- Staff who take students on school trips.
- All staff involved with the boarding students.

A restricted list of OTC (over the counter) medications may be administered to students in certain circumstances if parental consent has been given and follows the 'Homely Remedy Protocol'.

Medicines should only be administered at school when it would be detrimental to a student's health or school attendance not to do so.

2. Aim

Ensure safe administration of medication to all students whilst at school.

3. Key Staff

Staff who are required to administer medication will need to do the following:

- Read through 'Medicine Administration Policy'.
- Undertake annual training with the nursing staff
- Be assessed as competent by the nurse doing the training
- Complete appropriate paperwork to confirm training and competencies

4. Consent – all medication

Prior to any medication being administered consent must be given.

Consent is given as follows:

1. Medication Consent Form – for non-prescribed/prescribed medicines/regular medication
2. Consent for Day Students restricted home remedy protocol medications
3. Telephone Consent – for clarification and in an emergency.

5. Consent - Prescribed Medication

- This is for students on prescribed medication, whether short or long term.

- The medication must be stored in its original packaging with the prescription details.

  • It is NOT acceptable to have loose or cut off tablets in an envelope

A review date or stop for the medication must be indicated on the consent form.

6. Administration of Medicines

When administering medication all staff must follow the following procedure:

- Wash hands
- Check identity of the student (name, date of birth)
- Check whether student has any allergies (e.g. Penicillin)
- Know usage of medicine, normal dosage, side effects, precautions and contraindications (every medication has Patient Information Leaflet which should be read)
- Be aware of student's medical care plan (if appropriate)
- Check the prescription or that the label is clearly written
- Check expiry date
- Check dosage and route of administration (oral/topical)
- Ensure a drink is available
- Make a clear, accurate and immediate record of all medication administered, record with the date and time. Both staff member and student must sign on the individual student's medication record
- Document if the student refuses, or the medication is dropped or wasted
- Ensure medication is taken immediately in view
- Complete hard bound Controlled Drug book on appropriate page, sign and counter sign (2nd adult) and calculate remaining tablets/elixir and record

7. Non Prescribed Medication

- These medications will **ONLY be given for 2 days** as per Homely Remedy Protocol and thereafter a supporting letter from a Doctor will be required for the medication to be continued and only for the period specified by the Doctor**.**
- The medical centre and/or boarding house staff should be informed of all medication brought into school and if necessary a 'Self Administration Assessment' carried out.

• No HOMEOPATHIC medication will be given at school without an accompanying detailed letter from prescribing practitioner

• Vitamins will only be administered according to manufacturer's instructions or as prescribed by GP.

If the administration or a particular medicine appears to be becoming a regular occurrence at school, the nurse will contact the student's parents/carer**.**

8. Storage of Medication

- No medication should be carried by students in the College without prior consent from the Medical Centre.
- Medication must be stored in a locked cabinet or fridge according to manufacturer's instructions.
- Prescription Medication must be stored separately from 'home remedy medication'.
- Medications which require fridge storage should be stored in a fridge at temperatures of 2-8°C
- Temperature monitoring must take place daily and recorded. Any deviance from required temperature should be reported to the medical centre/pharmacist.

Exception to storage: Epipens and Glucogel should not be in locked cabinets but kept safely and within easy access.

9. Medical Needs Training

All staff who have significant contact with students who are asthmatic, diabetic, have severe allergic reactions or seizures of some type will require further training in the medications listed below. Training may be available from the College's own nurses or with the local school nursing team in Maidenhead. Training dates will be circulated.

Medical Condition	Prescribed Medication
Severe Allergic reaction/Anaphylaxis	**Adrenaline autoinjector (Epipen/Jext/ Emerade)** May be self-administered if able. Must have ambulance called if administered.
Asthma	'Reliever' inhaler (usually blue) **Ventolin/Salbutamol** When student is wheezy or tight chested. All students should carry their own inhaler however generic inhalers are also kept in boarding houses and in the medical centre.
Diabetes	**Insulin** usually self-administered. Certain students supervised by staff. **Glucogel (oral)** to be used in hypoglycaemia vials are kept in the medical centre and boarding houses.
Seizures/Epilepsy	**Buccal midazolam** Training will be undertaken by the local school nurses

- When medications are brought into school they must be stored correctly and safely according to instructions on the label.
- All medications **must be** handed into the Medical Centre.
- **No medication should be stored in the class rooms.**
- No students **except** Epipen holders, asthmatics and diabetics are allowed to carry any medication on them - this includes pain relief medicines, unless a SelfAdministration Assessment has been completed.

10. Reporting drug errors

A drug error is described as one of the following:

- The incorrect dosage of medication administered
- The incorrect medication administered
- The omission to administer a prescribed medication
- All drug errors MUST be reported to the Medical Centre/Medical Centre Line Manager, and appropriate paperwork completed.
- Seek medical advice from local GP/Out of Hours service/111
- Parents/carers must be informed of drug error under Duty of Candour.

11. Medication Stock Control/Audit

- Nursing staff are responsible for ordering and storage of medication within the medical centre.
- Nursing staff will order repeat prescriptions as instructed by boarding house staff, a minimum 72 hours should be allowed for collection.
- Boarding house staff who administer medication and have undertaken training are responsible for keeping stock count of 'home remedy' medications and reporting any storage issues to the medical centre.
- Nursing staff will complete an audit of controlled drugs weekly and a monthly audit on all other medication.
- These audits will be forwarded to all appropriate staff within the boarding house to encourage good practice.
- Nursing staff will not permit medicinal products from overseas to be administered unless instructions are clearly translated into English

12. School trips

There are many factors which must be taken into consideration for trips.

- Length of trip
- First aid training of staff accompanying
- Medical needs of students
- Consent from parents
- For all trips it is the responsibility of the lead teacher to ensure all appropriate preparation is undertaken and medications are obtained and administered

13. Day trips/Sports Fixtures

- First aid/sports first aid bags
- Consent from parents to divulge medical information on students
- Discussion with medical centre on student's medical needs

- Any prescribed medication including inhalers/epipens and diabetic equipment

14. Residential Trips

- Once a trip is booked the medical centre must be consulted regarding any medical needs/immunisations required
- First aid training checked of staff attending
- Consent requested from parents to divulge information on medical needs
- Discussion with school nurse on students' medical needs.
- Consent to administer medication whether prescribed or from a restricted list of home remedy medications as identified by medical centre following advice from GP/Pharmacist
- Appropriate notice must be given to ensure all these details can be undertaken safely

15. Disposal of Medications

- Unused medication or medication which does not have consent to administer should not be stored either in the medical centre or the boarding house.
- A request should be made to parents to collect the medication, if this is not done within 3 weeks the medication should be disposed of by the staff in the medical centre.
- Any medication which is out of date should be disposed of by medical centre.
- Staff at the medical centre will dispose of any medication by returning it to the local pharmacy.
- Medications should not be disposed of in the domestic bins or poured down the sink.

Staff

- Medication stored within the medical centre is primarily for students use only. It may be given to staff members in an emergency and staff should be encouraged to use their own personal medication.
- Any unauthorised access to locked medicine cabinets will be reported to the Senior Leadership Team.

APPENDIX - HOLYPORT COLLEGE MEDICAL CENTRE HOMELY REMEDY PROTOCOL

The Nursing & Midwifery Council (NMC) state that homely remedy protocols are not prescriptions but protocols to enable administration of general sales list (GSL) and pharmacy only (P) listed medicines in settings, for example, care homes, student homes and some educational institutions. Although they have no legal standing they are required for liability purposes. Any registrant using a homely remedy protocol must ensure there is a written instruction that has been drawn up and agreed in consultation with other relevant qualified professionals. (Where possible this should be a medical practitioner or pharmacist.)

The protocol should clarify what medicinal product may be administered and for what indication it may be administered, the dose, frequency and time limitation before referral to a GP. An example of a homely remedy could be paracetamol for a headache. All registrants using the protocol should be named and they should sign to confirm they are competent to administer the medicinal product, acknowledging they will be accountable for their actions. (NMC, 2015)

A homely or household remedy is another name for a non-prescription medicine available over the counter in community pharmacies, for the short term management of minor, selflimiting conditions, e.g. toothache, mild diarrhoea, cold symptoms, cough, headache, occasional pain, etc.

- Household remedies should only be administered in accordance with the manufacturer's directions and only to those students whose parents have agreed to their use. A record of that agreement should be made in the individual resident's profile within the medical centre.
- Household remedies should not be used for more than an agreed period, which should be stated in the policy. It is recommended that administration should not continue for more than 48 hours before consulting a GP.
- The administration of household remedies must be recorded in the student's record stating drug, dose, time, date, administered by, reason for administration.
- Care should be taken to ensure that students are not taking non-prescribed medicines that they have purchased or have been given, in addition to the household remedies being administered by staff.
- Homely remedies should be stored within the medication storage area, but separated from prescribed medication. They should not be labelled for individual student's, expiry dates should be checked regularly and only small packs/bottles of each item should be held in the boarding house.
- **ALL PRODUCTS TO BE ADMINISTERED ACCORDING TO MANUFACTURERS' GUIDANCE**

Authorisation to administer homely remedies for a maximum of 48 hours for the treatment of the conditions listed below.

After this period, if symptoms persist the GP or pharmacist will be contacted.

GP/Pharmacist:

Signature:

List agreed (date):

Agreed drugs for use as Homely Remedies:

[A signed copy is available in the Health Centre]

Minor illness req. treatment	Drug/Medicine	Maximum dose to be taken at one time	How often can it be given	Contraindications
Allergic reaction	Piriton (Chlorphenamine maleate) tablets or Liquid	• 10-12 years ½ tablet or 5mls • Over 12 years 1 tablet or 10mls	• Maximum 3 tablets or 30 mls in 24 hours • Maximum 6 tablets or 60 mls in 24 hrs	• ONLY IN EMERGENCIES or as described in individual care plans.
Bruises	Arnica Cream	•	•	• Do not use on broken skin
Cold Symptoms	Lemsip	• 1 sachet	• 4 hourly • Maximum 4 doses in 24 hours	• Check not taking other medication containing paracetamol. • DO NOT give to students under 12years. • Caution with diabetics
Congestion	Breathe easy Tissues (contains Menthol) or Olbas oil on a tissue	•	• As required	•
Cuts/Grazes	Antiseptic wipes	•	• As required to clean grazes	•
	Savlon	•	• As required to grazes	•
Diarrhoea	Rehydration sachets	• One sachet after each loose motion, in addition to normal fluid intake.	• 5 Sachets in 24 hours	• Caution with Diabetics
Dry Cough	Simple linctus Sugar Free Simple Linctus	• Two 5ml spoonfuls	• Repeat after 4 hours	• Caution with diabetics
	Cough Sweets	• As required	•	• Caution with diabetics
Dry/itchy skin	Aqueous/ emulsifying cream	• As required	•	• For infection reasons each students should have their own pot of cream.
Eye Care	Sodium Chloride Eye pods	•	• Use to bathe eyes or to remove irritation	•

Hayfever Symptoms	Cetirizine 10mgs tablets	• On tablet	• One daily	•

Minor illness req. treatment	**Drug/Medicine**	**Maximum dose to be taken at one time**	**How often can it be given**	**Contraindications**
Headache, toothache, muscular pain, period pain	Paracetamol Tablets	• one or two 500mgs tablets	• Doses NOT closer than 4 hours apart NOT more than 8 tablets in 24 hours.	• Students age 10-12 years should only have one 500mg tablet for one dose & no more than 4 doses within 24 hours. 12-16 year olds should have 500-750mgs. • Check carefully that the student is not taking other medications containing paracetamol
Fever	Liquid Paracetamol 250mg/5ml	• 10-20 ml of the liquid	• As above	• As above
Indigestion	Gaviscon or similar liquid/tablets eg Magnesium Triscilicate	• Age 11-12years 5-10mls • Over 12years 10-20 mls	• After meals & at bedtime • Leave at least 2 hours between doses	• Check each individual medication for directions
Muscular pain, Inflammation, fever	Ibuprofen	• One or two 200mgs tablets • 10-12 years 200mg • Over 12years 200400mgs	• Doses no closer than 6 hours apart • Maximum 3 doses per day	• Not to be given to asthmatics • Must not be given on an empty stomach. • DO NOT give at the same time as Paracetamol.
	Liquid Ibuprofen 100mgs/5mls	• 10-12 years 15mls. • Over 12 years 1520mls	• Doses no closed than 6 hours apart • Maximum 3 doses per day	• Be aware of weight in smaller students • Do not give to asthmatics. • Do not take on an empty stomach.
Muscular Pain	Deep Heat Rub	• Thin application	• 3 times daily max	• Not advised for asthmatics. • Do not apply to broken skin. Wash hands immediately after use.
Sunburn Prevention	Sun Cream at least factor 30 After sun	•	•	• Students on certain medications have a higher sensitivity to sunburn.

ADVICE NOTES:

- Only the medications listed and approved above may be used as Homely Remedies
- Boarding Staff can take advice from a GP prior to administering a Homely Remedy if preferred (e.g. emergency doctor service at weekends).
- The decision to administer a Homely Remedy or to contact the GP must only be made by an appropriately trained member of staff.
- Homely remedies should only be given for a maximum of 48 hours before referring to the GP if symptoms persist.
- If the student's condition does not respond to the Homely Remedy, or if it worsens, refer to the School Nurse/GP even if this is before the maximum 48 hours period.
- All doses given must be entered immediately in the medicines record book and on the student's Medication Administration Record with the quantity, date and time with details of the student's condition.
- Only packs purchased over-the-counter can be kept as Homely Remedies, these contain the appropriate warnings and information.
- The remedies must be stored separately from student's prescribed medication, in a locked cupboard and must be clearly marked: HOMELY REMEDY
- Ideally a separate book with a running balance and expiry dates of each Homely Remedy should also be kept.
- Expiry dates must be checked regularly and before use
- Bottles of liquid should have the date marked on them when they are first opened.
- Product guidance (on the pack) on how long to keep a bottle once opened should be followed.

References/Guidance

- NMC (2015) Standards for Medicines Management.
- Windsor, Ascot & Maidenhead CCG: Good Practice Guidance 2: The Use of Homely Remedies (non-prescribed medication)

- Nice Guidelines
- BNF
- MHRA UK Public Assessment Report: Liquid Paracetamol for Children 2011.

http://www.mhra.gov.uk/home/groups/s-par/documents/websiteresources/con134921.pdf