

## Medicines Policy

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### 1. The Policy

- 1.1. This policy applies to the nurseries, schools and boarding houses of the Stephen Perse Foundation (the 'Foundation') including Early Years.

### 2. Guiding Principles

- 2.1. Clear policies, understood and accepted by staff, parents and students, provide a sound basis for ensuring children with medical needs receive proper care and support at school and where

applicable, when boarding. This policy will promote, where possible, regular school attendance. The formal procedures drawn up in partnership with parents, staff and healthcare professionals where appropriate support this policy.

- 2.2. This policy has regard to the government guidance issued by the Department for Education '[Supporting pupils at school with medical conditions](#)' (December 2015, updated 2017), '[Guidance on the use of emergency adrenaline auto-injectors in schools](#)' (September 2017) and the '[National minimum standards](#)' for boarding schools (2015).
- 2.3. The administration of medicines is a parent's/carer's responsibility, although older children have the right to be responsible for their own welfare (Children Act 1989). If medicines need to be taken during the school day or when boarding, the parent/carer should make arrangements for them to be given by themselves or by a representative. This policy is necessary because the Foundation has agreed to provide that 'representative'.
- 2.4. An Appointed Person is a member of staff appointed to take charge of first aid arrangements. Please refer to the Foundation's First Aid Policy for further information.
- 2.5. Foundation staff are not required to administer medication and have the right to refuse to be involved. Staff who do administer medicines must understand the basic principles and be aware of the legal liabilities involved. Training in medication awareness will be given to each Appointed Person and other staff as appropriate. They must have confidence in dealing with any emergency situations as they arise. Knowledge of medical conditions will assist them with this. Boarding staff will be given appropriate information about the student's medical conditions and how to support the students affected.
- 2.6. This policy sets out the circumstances in which students and staff may take prescription (POM - prescription only medicines) and non-prescription medicines (over-the-counter medicines). It advises on assisting students with long-term or complex medical needs with regard to administering their required medication. It covers the prior written agreement from parents/carers for the administration of medicine to a child. It addresses students carrying their own medication and administering it. It discusses staff training in managing medical needs. It gives guidance on record-keeping, storage and access to medicines and the Foundation's emergency procedures.
- 2.7. Parents are asked to provide the Foundation with full, up-to-date information about their child's medical needs. Staff noticing deterioration in a student's health should inform the relevant Nursery Manager, Head of School/Boarding, Pastoral Leader and the Healthcare Practitioner, as appropriate, who will liaise with parents.

### **3. Safety**

- 3.1. Some medicines may be harmful to anyone for whom they are not prescribed. By agreeing to

administer medicines on the premises, the Foundation has a duty to ensure that the risks to others are properly controlled. This duty derives from the Control of Substances Hazardous to Health Regulations 2002 (COSHH).

#### **4. Storage**

4.1. The Nurseries, Schools and boarding houses should not store large volumes of medicines. Medicines should be locked in a secure cupboard to which only designated staff have access. These are stored in each Nursery, School and boarding house in the locations detailed below:

- Shaftesbury Road - individual non refrigerated medicines are kept in reception in Year group boxes.
- Salisbury Villas - individual non refrigerated medicines are kept in reception in Year group boxes.
- Madingley - individual non refrigerated medicines are kept in the medical room in Year group boxes.
- The Junior School at the Fitzwilliam Building - in reception in year bags
- Dame Bradbury's - in the cupboard behind reception.
- Senior School – in the Medical Room.
- The Sixth Form - in the appropriately labelled cupboard behind Reception.
- Boarding Houses (St Barnabas and Scholars House) - in the medical room at St Barnabas and the staff office at Scholars House.

4.2. The exceptions are medicines and devices, such as inhalers and Adrenaline Auto-Injectors (Jext/Emerade/Epipens), including emergency medicines provided and held by the Foundation, which need to be readily available where staff and children know where to locate them quickly, and medicines carried by students themselves (see paragraph 4 below). Please see also section 20 regarding storage of controlled drugs which are subject to requirements.

4.3. Some medicines need to be refrigerated. These are stored in each Nursery, School and boarding house in a fridge in the locations detailed below:

- Shaftesbury Road; Salisbury Villas; Madingley; Junior School, Fitzwilliam Building; Senior School; and St Barnabas boarding house - in the medical room.
- Dame Bradbury's - in the staff room.
- The Sixth Form - in the staff office.

4.3.1. Access to the refrigerators should be restricted to designated members of staff only, where possible. If the medicine that requires refrigeration is such that it needs to be readily available and the medical room may not be manned (such as outside of normal school hours), the medicine will be stored in a dedicated fridge in an accessible location such as the staff room.

4.4. Medicine should be stored in the original container in which it was dispensed, clearly marked

with the name of the drug and student when it is a prescribed medicine. Where students with specific needs bring medicine into school, such as to complete a course of treatment thereby minimising the absence from school, the drug needs to be in its original packaging, clearly labelled with the name of the student, the name of the drug, the dosage and frequency of administration and instructions for storage. Form 1 (Request for school to administer medicine) should be completed by the parent/carer for medicine required on a long term and adhoc basis. Students should know where their own medication is stored. The Foundation Healthcare Practitioner and each relevant Appointed Person is responsible for making sure that medicines are stored safely, where applicable. This responsibility may be delegated to an appropriate nominated person. Please also see section 5 for medicines brought from overseas.

4.5. A record should be kept of medicines stored in each Nursery, School and Boarding House, including controlled drugs, for whom and doses used.

4.6. The following over-the-counter medicine can be kept in stock (see the guidelines for administering this in sections 8 and 9 of this policy):

- Paracetamol
- Ibuprofen
- Decongestant
- Cetirizine

4.7. Legislation recognises that children have the right to take responsibility for their welfare (the Children Act 1989). The Patient's Charter Services for Children and Young People (Department of Health April 1996) states that students have a right to expect access to inhalers whilst at school. Therefore students should be allowed to carry their own asthma inhalers or have clear knowledge of where they are in a centralised place in the individual School, and be able to use them as required. Form 3 (Request for a student to carry their own medication) should be completed to allow this. Students should have had previous instruction on correct usage and their technique regularly checked by an Asthma Nurse during their annual check-up. This also applies to those students carrying medication for other conditions, such as students carrying adrenaline (Jext/Emerade/Epipen) and/or antihistamine for allergic reactions, those carrying insulin or hypostop to control diabetes, those carrying pancreatin (creon) to aid digestion for medical conditions such as cystic fibrosis and those carrying analgesia to control migraine/severe period pains.

## **5. Overseas medicines**

5.1. Overseas medicines (herbal or otherwise) must have an English translation, the student's name on it and a doctor's prescription letter, if appropriate. Parents and students must inform the relevant School Office or House Staff for boarding students of any medication being sent to school or brought into the boarding house and have a discussion with the Head of Boarding/Appointed Person in order to decide whether the medication is appropriate in school

or the boarding house. Non-identifiable medication will not be allowed on site.

## **6. Controlled drugs**

6.1.1. The supply, possession and administration of some medicines are controlled by the Misuse of Drugs Act 1971 and its associated regulations. Some may be prescribed as medication for use by children and young people. It is imperative that controlled drugs are strictly managed between the relevant school/boarding house and parents.

6.1.2. Once appropriate information and training has been received, any member of staff may administer a controlled drug to the child or young person for whom it has been prescribed. Staff administering medicine should do so in accordance with the prescriber's instructions.

6.1.3. CONTROLLED DRUGS (Schedule 2 drugs)

6.1.4. Controlled drugs (CDs) are subject to safe custody and must be stored in a locked receptacle such as an appropriate CD cabinet. The key to this cabinet must be securely stored and only accessible to staff authorised to have access to it. CDs must be administered in a timely fashion in line with relevant legislation and local standard operating procedures.

6.1.4.1. Record Keeping For Controlled Drugs – 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 must be kept on the premises to which it relates
- The CDR must be available for inspection by an authorised person

6.1.5. In the CDR it must also state the following when CDs are obtained:

- Date CDs are received
- Name and address from whom they were obtained (e.g. pharmacy)
- Amount received
- Form in which it is received

6.1.6. It is recommended that the following information MAY (not must) be recorded in the CDR

- Running balances
- A second signature against each entry

6.1.7. It is good practice for the CDR to contain the following for each entry made:

- Date drug issued to a patient
- Name of patient receiving drug
- Amount issued
- Form in which the drug is issued
- Name and signature of person issuing the drug
- Name and signature of witness if possible
- Balance left in stock

## **7. Access**

- 7.1. Students must know where their medicines are kept and be able to access them immediately. If relevant, they must know who holds the key to a locked storage facility. However, it is important that medicine is only available to those for whom it has been prescribed.
- 7.2. Sixth Form students are typically deemed competent to carry their own medicines and to store a reasonable quantity of their own prescription medicine in their boarding room, at the discretion of the Head of Boarding. Please also refer to the boarding section in this policy for further information.
- 7.3. Senior School students may carry a reasonable quantity of their own prescription medicine with parental consent, where appropriate, but must not allow other students to have access to them. Senior School boarding students are typically deemed competent to store a reasonable quantity of their own prescription medicine in their boarding room, at the discretion of the Head of Boarding. Please also refer to the boarding section in this policy for further information.
- 7.4. Pupils at Shaftesbury Road, Salisbury Villas, Madingley, the Junior School Fitzwilliam Building and Dame Bradbury's may not carry their own medicines. After discussion with parents, pupils who are competent are encouraged to take responsibility for managing their own medicines and procedures. This may require an appropriate level of supervision.

## **8. Hygiene/Infection Control**

- 8.1. All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures. Staff should have access to protective disposable gloves and take care when dealing with spillages of blood or other bodily fluids and when disposing of dressings and equipment to dispose of it appropriately. Please refer to the 'protection from blood-borne viruses' section of the First Aid and Emergency Procedures for further information.

## **9. Standing Orders**

- 9.1. If a student suffers regularly with acute pain, such as migraine, the parents/carers should authorise and supply appropriate analgesia (pain relief) for their child's use, with written instructions about how and when to administer the medication. A member of staff should supervise the student taking the medication and notify the parents/carers or boarding house staff for boarders on the day it is taken.

## **10. Administering Medication**

- 10.1. Medicines should only be administered in school when it would be detrimental to a child's health or school attendance not to do so. Written parental consent will be sought for administering prescription medication to students under the age of 16. The exception is when the medicine has been prescribed to the child without the parents' knowledge. In this circumstance, every effort should be made to encourage the child to involve his/her parents whilst respecting their right to confidentiality.
- 10.2. Any staff giving prescribed medicine to a student should check:
- The student's name and that this matches up with the dispensing label on the drug and it is in its original packaging;
  - The student's date of birth;
  - The written (translated if applicable) instructions provided by the prescriber on the dispensing label or container;
  - The drug to be given by generic or brand name;
  - The strength of the medication;
  - The prescribed dose;
  - The maximum dosage;
  - The last time the student had the medication;
  - The frequency of the medication;
  - The route of administration;
  - Any allergies or existing medical conditions that may contraindicate the medication;
  - The expiry date of the drug;
  - The circumstances in which the drug is to be administered;
  - Their own ability / training needs to administer the drug; and
  - The possible side effects of the drug and what to do if they occur.
- 10.3. Before issuing over the counter medicine to a student, all staff that administer medicines to students:
- must be certain of the identity of the child to whom the medicine is to be administered;

- must check that the parent(s) have given appropriate consent for the medicine to be administered;
- must check that the child is not allergic to the medicine before administering it;
- must know the therapeutic uses of the medicine to be administered (i.e. what it is for), its normal dosage, side effects, precautions, and contra-indications;
- should check whether the student is used to taking the medicine; and
- must know when the student last took the medicine and whether they have eaten.

10.3.1. The staff issuing the medicine must log this accordingly at the time of administering. Appropriate Foundation staff receive training in medicine awareness and should be sufficiently informed of the student's needs.

10.4. An accurate written record of all medication administered must be kept in each student's medical log in SIMS. A written record of medication administered must be sent to the parents/carers of students in all schools, with the exception of students aged 16 and over and boarding students, informing them of the drug, dose and time administered. This is done through electronic communication to parents via InTouch. All adverse reactions must be communicated to parents and/or boarding staff and recorded in the student's medical log.

## **11. Circumstances in which Medicines may be Administered**

11.1. Over the counter medicines may be administered by staff assessed by the relevant Head of School or Head of Boarding as competent to do so. Members of staff accompanying school trips will be given written information about over-the-counter medications, which they might be required to administer. On a student's entry to the Foundation, all parents/carers must complete a medical consent form which gives permission for the Foundation's Healthcare Practitioner, designated First Aider or Appointed Person to administer specific over the counter medicines. For medicines required on an adhoc basis which are not included within permissions already given, the Foundation will request a Form 1 to be completed by the parents.

11.2. Students aged 16 or over, and those deemed to be "Gillick competent<sup>1</sup>" are able to consent to the administration of medicines without parental consent. However, if the Head of Boarding, or the Appointed Person in boarding, has any concerns regarding the administration of any medicine to these students, medication will be withheld until the parents/carers can be contacted.

11.3. Paracetamol (including Calpol) may be administered for headaches, pyrexia (temperatures) abdominal pains, toothache, and other conditions when deemed appropriate. It may also be administered to those students who are unable to tolerate Non Steroidal Anti-inflammatories

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<sup>1</sup> Gillick competence 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. A child will be Gillick competent if he or she has sufficient understanding and intelligence to understand fully what is proposed.

(NSAIDs) such as Ibuprofen, for example asthmatic students.

- 11.4. Ibuprofen may be administered for dysmenorrhoea (painful menstruation), migraine and injuries including such as sporting injuries and other conditions when deemed appropriate. If a student requires hospital care, full details of any medication given must be handed to staff at the Accident and Emergency Department. Ibuprofen will be withheld from all asthmatic students unless otherwise instructed by the parents.
- 11.5. Analgesia will normally be withheld in cases involving head injury.
- 11.6. Antihistamines (Piriton/Cetirizine) may be administered for a mild allergic reaction. A bottle of antihistamine liquid or tablets will be accessible at all times for allergic reactions at each School and at the boarding house.
- 11.7. Aspirin will not be administered unless prescribed by a doctor.
- 11.8. If the designated adult has any concerns regarding the administration of any medicine to a student, the medication will be withheld until the parents/carers have been contacted.
- 11.9. Prescription Only Medicines (POMs) will be administered, with the written consent of the parents where necessary, by the Foundation's Health Practitioner, the Appointed Persons, a first aid trained designated member of staff or other staff assessed as competent in their absence.
- 11.10. The medicines generally (but not exclusively) administered include adrenaline (in the form of an Epipen/Jext or Emerade pen), Salbutamol, Ventolin, Cetirizine (Zirtek) analgesia and antibiotics. These should only be administered from the original containers containing the written prescription – this includes the name and date of birth of the student. The name of the drug and the strength and the timing of administration should all be legible. The individual healthcare plan (if applicable) should be referred to for allergic reactions.
- 11.11. Senior School and Sixth Form students, including those who board, with long-term medical needs who carry their own medication and are deemed sufficiently competent to self-medicate should be encouraged to take ownership of their medication and administer it safely. The protocol for assessing students' competence to self-medicate is set out in Section 21 of this policy. No students will be allowed to share medication and should be encouraged to act responsibly to safeguard their own health and that of their peers. These students include those with asthma carrying inhalers and those known to have anaphylactic reactions requiring prompt administration of adrenaline (epipen/Jext/Emerade pen). Those with other medication may include those students with diabetes and epilepsy. The Foundation's Healthcare Practitioner will provide support for them and they should have individual healthcare plans drawn up in conjunction with their parents and healthcare professionals. Subsequently, parents have the ultimate responsibility for any medication required to treat their son/daughter's condition.

- 11.12. Students known to have anaphylactic reactions will have an individual healthcare plan to advise on the treatment of their condition. These are kept with the adrenaline auto-injector (AAI) for individual students. It is also good practice for Form 1 (Request for School to Administer Medication) confirming parental consent to administer the medication to be kept with the EpiPen/Jext/Emerade pen and the healthcare plan as in these circumstances, time is of the essence.
- 11.13. The Foundation holds spare AAI devices for use in emergencies, in accordance with the Human Medicines (Amendment) Regulations 2017. These are for any student who holds both medical authorisation and parental consent for an AAI to be administered. The AAIs can be used if the student's own prescribed AAI is not immediately available (for example, because it is broken, out-of-date, has misfired or been wrongly administered). Please refer to the Foundation's Emergency Adrenaline Auto-Injector Procedures at Appendix C of the Foundation's Supporting Pupils with Medical Conditions for further information.
- 11.14. All staff are required to complete training in the administration of emergency adrenaline during their induction to the Foundation and every three years during INSET days.
- 11.15. Should the need arise for the administration of adrenaline, the staff member should stay with the student and either telephone the Reception/School Office directly or send someone to the School Office to obtain help. The Foundation's Healthcare Practitioner can be contacted via the relevant School Office or by mobile phone.
- 11.16. If adrenaline is administered, prompt transfer to hospital should be arranged by calling 999. Please see the First Aid and Emergency Procedures for further information.
- 11.17. A record of administration will be held on the student's medical records. Any over the counter medicine administered by house staff for boarding students is recorded and checked by the Healthcare Practitioner.
- 11.18. Support should be provided for those witnessing the event and time allowed to talk through concerns raised.

## **12. Privacy**

- 12.1. All students are entitled to privacy for the administration of medicines, especially those students requiring invasive techniques such as injections. This maintains the dignity of the student but also lessens the distress of fellow students, especially if the administration is in an emergency.
- 12.2. Privacy also allows the student the opportunity to discuss any confidential matters with the staff involved.

### **13. Parental Responsibility**

- 13.1. Parents/carers are responsible for supplying information about the medicines their child needs to take at school and in the boarding house, where applicable (Confidential Medical Information and Consent Form). They are responsible for informing the Foundation in writing of any changes to the prescription. Verbal messages will be accepted as a change to the prescription as long as this is documented. The parent/carer or the student's healthcare professional should provide written details to include:
- The name of the medication;
  - The dose;
  - The method of administration;
  - The time and frequency of administration;
  - The length of treatment / stop date if appropriate;
  - Other treatments required; and
  - Any possible side effects.
- 13.2. Parents/carers are also responsible for ensuring that medicines stored for occasional use are not out-of-date. All dates of medicines stored in school will be checked every term and students' parents notified of medicines due to become out-of-date. It is recommended that parents note when sending medicines to school when a replacement prescription will be required.

### **14. Record-Keeping**

- 14.1. Written records are kept in SIMS of all medicines administered to children, including what, how much, when (date and time), by whom and any side-effects. Records offer protection to staff and students and provide evidence that agreed procedures have been followed.

### **15. School Trips**

- 15.1. Students with special medical needs should be encouraged to participate in school trips. Staff may need to take additional safety measures for outside visits. Consideration should be given to transporting medications safely. Students, with the exception of the Sixth Form and Senior School students who self-medicate and carry their own medication within the school and/or boarding environment, should not be asked to carry medications; staff should take sole responsibility. Where applicable, students should carry only their own medication. Ideally written permission should be given by the parents to administer paracetamol/Calpol, ibuprofen/Nurofen and piriton/cetirizine upfront (by completion of the Confidential Medical Information Form). Details of students' medical needs and medication are detailed on the risk assessment for each trip.

- 15.2. Students who may require emergency administration of medication should be easily identifiable to the staff in charge of the trip/visit. The medication for those students should be signed out and returned immediately on return to school. Senior School and Sixth Form students may carry their own medication, providing the staff have checked it and are in agreement that the student can do so safely. Where this is the case, staff should arrange for the parent to complete Form 3 to request this permission in advance of the trip. A protocol for the administration of the medicine should be kept with the medicine and referred to accordingly.
- 15.3. Any medicine administered should be done so in accordance with paragraphs 7.1 to 7.3 above.
- 15.4. If staff are concerned about whether they can provide for a student's safety, or the safety of other students and staff on the trip, they can discuss their concerns with the relevant Foundation Healthcare Practitioner in the first instance.

## **16. Sporting Activities**

- 16.1. Most students with medical conditions can participate in the Physical Education curriculum or extra-curricular sport. For many, physical exercise can benefit their overall social, mental and physical health and wellbeing.
- 16.2. Some students may need to take precautionary measures before and during exercise, such as those asthmatic students who may need to self-administer their inhalers. Staff supervising sporting activities should be aware of students' medical conditions and must allow access to their medication. They should supervise the self-medication and be aware of emergency procedures.
- 16.3. Caution must be exercised when taking students off site, such as to any offsite games fields. Students should be encouraged to take ownership of their own medication and staff should ensure the medication is available when required. Emergency medication such as epipen/jext is signed out by supervising staff and taken to any external sports facility. The Latham Road pavilion First Aid Kit contains an emergency inhaler and emergency AAI. Senior School and Sixth Form students carry their own inhalers and AAIs.
- 16.4. Any medication administered should be done so in accordance with paragraphs 7.1 to 7.3 above.

## **17. School Transport**

- 17.1. The Foundation needs to ensure the safety of all students travelling on school transport, including students travelling to and from school on the minibus from Cambridge Park and Ride sites, and on school trips. The staff should be familiar with the Foundation's policies and protocols and emergency procedures.
- 17.2. Students rarely require medication on the journey to and from school. Therefore transportation

of medicines is not a concern, with the exception of those students who have ownership of their own medication. The Foundation will arrange for students in 1-11, who have a prescribed AAI and travel independently on public transport or on a school minibus, to take their prescribed AAI with them for the journey and sign this back into school each day.

- 17.3. The Foundation Healthcare Practitioner in the Senior School, or relevant Appointed Person should be made aware of any medication administered during the journey or at another Foundation site.

## **18. Disposal of Medicines**

- 18.1. Staff should not dispose of medicines. Staff should arrange for out of date medicines to be returned to the parent for safe disposal, where possible. Where this is not possible, the Foundation Healthcare Practitioner, or one of the Appointed Persons, will take the expired medication to the local pharmacy and ask the pharmacist to destroy it safely.
- 18.2. No medicine should be disposed of in the sewerage system or the refuse. Current waste disposal regulations make this illegal. Sharps boxes should always be used for the disposal of needles. Parents/carers can obtain these on prescription from their GP.

## **19. Emergency Procedures**

- 19.1. All staff should be aware of the First Aid and Emergency Procedures and who has responsibility for performing emergency procedures as required.
- 19.2. A student taken to hospital should be accompanied by a member of staff, who should stay with the student until their parents/carers arrive.
- 19.3. Boarding students taken to hospital should be accompanied by a member of house staff or another member of staff. The staff member will stay with the student at least until they have been seen by the doctor, had x-rays or other assessments and been admitted to a ward. The member of staff will communicate with the Head of Boarding to determine who should ring parents and to decide who will visit during the evening/provide support to the student during their stay in hospital.
- 19.4. Generally staff should not take students to hospital in their own cars; accompanying staff should use public transport such as a taxi or a Foundation vehicle.

## **20. Staff taking medication/other substances**

- 20.1. Staff must not be under the influence of alcohol or any other substance which may affect their ability to care for students. If members of staff are taking medication which may affect their ability to care for students, they should seek medical advice. The Foundation must ensure that

those members of staff only work directly with students if medical advice confirms that the medication is unlikely to impair that staff member's ability to look after students properly. Staff medication on the premises must be securely stored, and out of reach of students, at all times.

## **21. Boarding students**

21.1. In accordance with the National Minimum Standards for Boarding Schools, (April 2015), all schools are required to have written policies and procedures on the administration and control of medicines within the school and associated activities. It is the purpose of this section to clarify the additional procedures for boarders.

### **21.2. Registration at a local surgery**

21.2.1. Boarding students are required to register when they start their course with a local practice, Woodland Surgery, or with a practice of their choosing. Details of contact numbers for the surgery, NHS Direct (111), dentists and counselling services are displayed in all boarding houses, on the medical room door and are available from the Sixth Form offices.

### **21.3. Induction to boarding**

21.3.1. During a student's first week in boarding, all students will have a brief interview with the relevant Appointed Person who will ensure that they have registered with the doctor and advise on safe storage and responsible usage of prescription medication or other medication that they may have brought with them. This interview will include, if applicable, an assessment of whether the student can be deemed competent to carry their own medicine. Any medicine brought to the boarding house must be declared to house staff and it must be stored in the staff office until the Appointed Person has conducted this interview.

### **21.4. Protocol for assessing boarders' competence to self-medicate**

21.4.1. Boarding students are actively encouraged to take responsibility for the administration of their own medications. In addition, in urgent situations, for emergency medication, such as auto adrenaline devices and asthma inhalers, it is particularly beneficial for students to administer their own medication. It is the responsibility of the Head of Boarding to ensure the security of medicines in the boarding context.

21.4.2. For students who board, subject to parental consent if required, over-the-counter medicines can be obtained from house staff.

21.4.3. Students' suitability to manage their own medication will be assessed in the interview with the Appointed Person and discussed with the Head of Boarding. The student's suitability to manage their own medication will be based on the student's medical history, the type of medication prescribed, and following a discussion with the student to assess their understanding of the

medication. Parents will also be consulted, if appropriate.

21.4.4. Self-medication will be denied if:

- the student fails to answer relevant questions about the medication in an appropriate manner;
- the student has abused or self-harmed with medication in the past;
- the medication is a controlled drug or may be harmful to others; and/or
- a student fails to be responsible for their medication.

21.5. If a student is known to have regular prescribed medication and is deemed fit to self-administer, the Appointed Person must be made aware, by the students' parents and/or via the surgery, of the prescription and the dosage. The relevant Appointed Person will discuss the medication with the student to ensure that the student is capable of administering the correct dosage.

21.6. If a student is deemed unable to self-medicate, arrangements will be made by the Appointed Person to ensure the prescribed medication is given at the appropriate time by a trained member of staff.

21.7. If special arrangements are required for the administration of prescribed medication for boarding students, it will be arranged through Woodlands Surgery.

21.8. Those students identified as competent to self medicate may store a reasonable quantity of their own individual medicines in their personal lockable storage and securely on their person where they need to carry this with them. This will be monitored on an ongoing basis to ensure security of medicines.

21.9. Additional consideration will be given to controlled drugs (see the section on controlled drugs for further information above) and these will be stored and administered by the Foundation.

## **22. Related policies**

Please also refer to

First Aid Policy

First Aid and Emergency Procedures

Ill Health Procedures

Supporting Students with Medical Conditions Policy

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**Version Control**

|                                     |                                    |
|-------------------------------------|------------------------------------|
| Date of adoption of this policy     | 11 February 2022                   |
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| Policy owner                        | Vice Principal                     |
| Authorised by                       | The Principal and Heads of Schools |