



EF ACADEMY

International
Boarding Schools

OXFORD MEDICAL PROVISION AND MEDICINES POLICY 2022-23

A: MEDICAL PROVISION FOR STUDENTS

Developed by:	Paul Ellis (Head of School); Joan Wilisoni; with documentation from Hedena Health Medical Practice and Laura McDonald (Psychotherapist)
Date of Policy:	July 2018
Reviewed:	May 2019, Jun.'20, Jun.'21, Jul '22
Change log:	<p>May 2019 - medical provision policy brought together with other medical or medicine-related policies to form a single policy dealing with the medical provision for students and medicines policy for students 2019-20. Rachel Carlisle replaced by Wayne McKenna. Frequency of Nurse Practitioner increased from 2 days a week to 5.</p> <p>Jun.'20 (Mark Fletcher-Single): additional information and details of relevant procedural changes to incorporate the development of our COVID-19 Policy</p> <p>Jun.'21 (Mark Fletcher-Single): developments to reflect the School's (returning) onsite medical provision, new systems / procedures following the changes made as a result of Covid-19 and the introduction of the Orah App</p> <p>Jul '22 (Tina Desmond): Policy updated to reflect changing COVID-19 restrictions</p>
Review date	May 2023

Summary

Clinic: on campus

EF Academy Oxford engages Hedena Health Ltd (the Practice) to provide Primary Care Medical and Nursing Services at EF Academy Oxford. Five days a week the clinic is by an Advanced Nurse Practitioner, who can prescribe medicines.

The clinic on campus is located next to the Hub at Cotuit Hall. Students request an appointment by notifying their Pathway Manager / Head of Boarding / House Parent on duty.

Hours are 8:30 to 12:30pm Monday to Friday. These hours may be subject to adjustment on two days of the week.

Clinic: off campus

Outside these hours, students can go to the Bury Knowle Health Centre (01865 227788).

207 London Road
Headington
OX3 9JA

Students ask their Pathway Manager or the Head of Boarding (or other member of the Pastoral team in their absence) to make an appointment. Covid restrictions permitting, a member of staff will accompany a student if requested.

Medical emergencies / Hospital

For 24/7 emergencies or other treatment, the John Radcliffe University Hospital (0300 304 7777) is approximately 5 minutes away by car and 10 minutes' walk away from the School.

Headley Way
Headington
Oxford
OX3 9DU

Covid restrictions permitting, a member of staff accompanies a student to hospital in the case of a medical emergency and informs parents. This would normally be by the Pathway Manager or a member of the Boarding team but can be any member of staff.

1. Services on Campus

The Practice provides a dedicated Nurse Practitioner clinic 5 half-days per week during term time.

2. Registration of Students

- EF Academy Oxford provides the name, DoB, home address and contact details for each of the students as soon as they are enrolled.
- EF Academy Oxford also provides signed summary care record forms from students / parents.
- The Practice then registers onto the Practice list all students at EF Academy Oxford. Registration is in accordance with NHS & GDPR regulations.

3. Medical Services

- The Practice provides dedicated sessions at EF Academy Oxford during term time.
- Where a usual clinician is not available to attend an EF Academy Oxford surgery, the Practice provides another qualified clinician in their place.
- Students may also attend surgeries and access other services such as Practice nurse clinics, at Hedena Health, during normal surgery hours (as published in the Practice leaflet and website). Covid restrictions permitting, students may request to be accompanied by a member of staff.
- Out of hours (defined as Monday to Friday 6:30pm to 8:30am, Saturday, Sunday, all Public and Bank Holidays) EF Academy Oxford uses the Practice's arrangements (as published in the Practice leaflet and website) for emergency care.

4. Care Provided

- The Practice provides medical services to any student at EF Academy Oxford who is registered with the Practice.
- The Practice oversees vaccination and immunisation programmes for students at EF Academy Oxford on request. Vaccination and immunisation programmes are in line with current Practice recommended by the Department of Health.
- The Practice refers students to other NHS services as necessary.
- The Practice ensures all student data and information is kept according to GDPR requirements. The Practice will not share confidential information and data with EF Academy Oxford *unless*:
 - a. there is a safeguarding concern
 - b. the student has requested and / or consented for information and data to be shared with EF Academy Oxford
- The Practice maintains comprehensive and accurate medical records in line with NHS requirements.
- You can see what to expect from the NHS, what to expect at your doctor's appointment, how the NHS works, who's who and other useful information on the following link - <https://www.hedenahealth.co.uk/ef-academy-oxford>

4. Other Arrangements

- The Practice ensures that any clinician attending EF Academy Oxford has:
 - full registration with the GMC / NMC
 - membership of a recognised medical defence organisation
 - a current certificate of Hepatitis B immunity
 - full training in relevant procedures and protocols
- EF Academy Oxford provides the Practice with any relevant procedures and protocols that it produces with regard to student health. The Practice advises and assists on the formulation of procedures and protocols relevant to medical Practice at EF Academy Oxford.
- Where students require vaccines, medication and dressings that are not reimbursable by the NHS, the Practice invoices EF Academy Oxford for the items supplied. The cost of vaccines and medication not reimbursable by the NHS is charged to students / parents.

5. Charges to Students / Parents

The Practice charges EF Academy Oxford, who passes this charge on to the student / parent or the student directly for:

- a. the medical examination or provision of non-NHS services to a student, *if requested* by EF Academy Oxford
- b. the supply of items not reimbursable by the NHS or by mutual agreement of EF Academy Oxford and the Practice; in which case parents' permission will be sought

6. Complaints

- Complaints about a clinician from a student should be directed to Managing Director of the Practice. The Head of School of EF Academy Oxford will be notified of the complaint and the outcome.

B: Care of Students with Chronic Health Conditions

Date Created:	30 th June 2016
Author:	School Nurse - EF Academy Torbay (originally)
Individuals Involved in Developing the Document:	Deputy Head of School
Document Purpose:	This document sets out the procedure at EF Academy Oxford for identifying students with chronic health conditions and disabilities and how their care at school is managed.
Relevant to:	School Nurse, Head of School, Assistant Heads, Head of Boarding, Operations Manager, Pathway Managers, teaching staff as and when necessary.
Related Documents:	First Aid Policy Sections A, C & D of the Medical Provision and Medicines Policy
Date:	2 nd November 2018
Reviewed	May 2019, Jun.'20, Jun.'21, Jul '22
Change Log (what changes have been made, by who and when):	Deputy Head (Mark Fletcher-Single) June'20 (Mark Fletcher-Single): additional information and details of relevant procedural changes to incorporate the development of our COVID-19 Policy Jun.'21 (Mark Fletcher-Single): developments to reflect the School's (returning) onsite medical provision, new systems / procedures following the changes made as a result of Covid-19 and the introduction of the Orah App
Date of next review:	May 2023

Care of Students with Chronic Health Conditions and Disabilities

Statement

Students in school with medical conditions should be properly supported so they have full access to education, including school trips and physical activity.

Process

As part of the application process a **medical declaration form** will be completed by all student families before they arrive.

All new forms will be sent through to Hedena Health where any chronic health conditions and disabilities will be identified.

On identification of a chronic health condition or disability Hedena Health will follow this up with the student to obtain all relevant information.

Individual Healthcare Plans (IHP)

It is now law that any student with a medical condition in school has an **Individual Healthcare Plan (IHP)** that outlines their condition and the support that they require.

All students at EF Academy with an identified health condition or disability will have an IHP. This will be written in participation with the student, school, and family.

The IHP will help the school to identify the necessary safety measures to support those students with medical needs and ensure they and others are not put at risk. The IHP details exactly what support a student needs in school, when they need it, and who is going to give it.

Details of the information held on the IHP will be shared with all relevant colleagues.

- The information held on the IHP is confidential and will only be shared with further colleagues if felt necessary.
- Copies of the IHP will be kept in the student's file and with the nurses.
- Circulation of a student's IHP will be electronic and password-protected.
- Staff receiving a student's IHP will be advised of any updates.
- All school staff should be aware of such medical conditions as asthma, anaphylaxis, diabetes and epilepsy and the emergency care that they may require (see enclosed information).

- A student's IHP should explain what help they need in an emergency, and it should accompany the student should they need to go to hospital.
- All First Aid trained staff should know what action to take in a medical emergency.

Please also refer to:

- First Aid Policy
- Sections A, C and D of the Medical Provision and Medicines Policy
- See Special Medical Conditions (below) and support in school.

Special Medical Conditions

EF Academy Oxford follows the advice for schools below:

Diabetes - medical information

Type 1 diabetes is the most common form of diabetes in children and young people. In England and Wales 17 children in 100,000 develop diabetes each year.

Causes of diabetes

- Diabetes is a condition where there is an imbalance between the insulin and the glucose in the human body.
- Insulin, a hormone produced in the pancreas, enables cells to absorb glucose (sugar) in order to turn it into energy.
- Diabetes is a condition in which the body either does not produce enough, or does not properly respond to, insulin.
- This causes glucose to accumulate in the blood leading to various potential complications.

Symptoms of diabetes

- thirst
- weight loss
- tiredness
- frequent urination

Symptoms which are more typical for children and young people

- stomach pains
- headaches
- behaviour problems

Treatments for diabetes

Type 1 (the overall aim is to maintain near normal blood sugars)

- good diet and healthy eating

- regular exercise
- daily insulin injections

Type 2

- maintain a healthy diet
- regular exercise
- as type 2 diabetes can get progressively worse over time it may be necessary to take medication; (this will normally be in the form of tablets, but can sometimes require insulin injections)

Technical terms

- hypoglycaemia - glucose levels too low
- hyperglycaemia - glucose levels too high
- glucose comes from the digestion of carbohydrate containing food and drinks and is also produced by the liver
- insulin is vital for life: it is a hormone produced by the pancreas and helps the glucose to enter the cells where it is used as fuel for energy so we can work, play and generally live our lives

There are two main types of diabetes:

Type 1 - insulin dependent

- Type 1 diabetes develops if the body is unable to produce any insulin. This type of diabetes usually appears before the age of 40.
- Type 1 diabetes is the least common of the two main types and accounts for between 5 and 15 per cent of all people with diabetes.
- You cannot prevent Type 1 diabetes.

Type 2 - non-insulin dependent

- Type 2 diabetes develops when the body can still make some insulin, but not enough, or when the insulin that is produced does not work properly (known as insulin resistance).
- In most cases this is linked with being overweight.
- This type of diabetes usually appears in people over the age of 40.
- Type 2 diabetes is the most common of the two main types and accounts for between 85 and 95 per cent of all people with diabetes.

Diabetes - support at school

- All students with Diabetes should have an agreed IHP in place at school.
- Diabetic students who require insulin injections need to keep their medicine refrigerated; in the event of this a fridge will need to be supplied in school and in the residences / host family for the students use.

- Teaching staff need to be made aware of students with diabetes and all First Aid trained staff should know what actions to take in the event that a diabetic student has a 'hypo' or 'hyper' attack.
- The 'closest' First Aider will be identified in the IHP as first point of call in the event of the student having a 'hypo' or 'hyper' attack.
- The diabetic student needs to be treated as soon as possible if they are having an attack.
- In the event of a severe 'hypo' and the student becomes unconscious - **CALL AN AMBULANCE.**

Physical Education

- Diabetic students need to be encouraged to participate in all aspects of school life and supported to manage their diet and exercise needs.
- Diabetic students should check their blood glucose levels before and after physical activity and have a snack if necessary. If the activity is prolonged, they may need to test and / or have a snack during the lesson.
- A sugary drink or glucose tablets will be helpful in the event of a hypo.

School Trips

- When on school trips, outings, or overnight stays away, the diabetic student needs to ensure they have enough insulin injections and blood monitoring supplies.
- The student will need to try and stick to their normal mealtime routines so this needs to be planned when arranging the trip.

Epilepsy - Medical Information

What is epilepsy?

- Epilepsy is a condition in which there is a tendency to have seizures.
- A one-off seizure does not necessarily mean that you have epilepsy.
- An epileptic seizure happens when there is a sudden electrical discharge in the brain.
- This causes changes in sensation, behaviour, or consciousness.
- There are over forty different types of seizure - because the brain is responsible for such a wide range of functions and seizure activity in different parts of the brain can cause different seizures.
- Most last from a few seconds to a few minutes and usually stop without the need for any treatment.

The two main groups of seizures:

- **Generalised seizures** - the whole brain is affected by the abnormal electrical activity disturbance and the person becomes unconscious. This can be very brief or may last a few minutes. Some generalised seizures may involve sudden changes in muscle tone (stiffening or complete loss of tone) that will mean the person falls to the floor. This may then be followed by jerking movements. In other generalised seizures, such as absence seizure, the person will stop all activity and remain still in a daydream like state (but unconscious).
- **Focal seizures** - the abnormal electrical activity is focussed in just one part of the brain. The type of seizure will depend on exactly where in the brain the focus of activity is. There are usually changes in the level of awareness, but the person will not be unconscious.

What causes epilepsy?

The causes of epilepsy fall into three groups:

- structural / metabolic
- genetic
- unknown

In around 60% of cases, the cause is unknown. But with advances in brain imaging techniques and our understanding of genetics causes may be found in more cases.

What triggers a seizure?

We often do not know why a seizure occurs at one time and not another, but there are certain factors that may increase the likelihood of a seizure and these are known as triggers.

Common seizure triggers include:

- tiredness
- illness (raised temperature)
- dehydration
- stress
- menstruation
- alcohol
- changes in medication
- flashing lights (although photosensitive epilepsy is quite rare, affecting only around 5% of those with epilepsy)

Treatment of epilepsy

The first line of treatment for children with epilepsy is medication using antiepileptic drugs (AED's). Most medication is taken twice daily, and it is important that the medication is taken in the way that the doctor has prescribed. AEDs are not a cure for epilepsy, but they can reduce the amount of seizures a person is having.

Some people experience side effects from taking medication, but these often subside after a while. It is important to keep a record of any side effects so that these can be reported to the doctor. There are other treatments for epilepsy, and these include the use of implanted devices (like a cardiac pacemaker) such as a Vagus Nerve Stimulator (VNS) and dietary treatments such as the ketogenic diet. In some cases, neurosurgery may be a treatment option.

Epilepsy - Support at School

Having epilepsy shouldn't get in the way of living a normal life, there are a few activities that may be considered to be high risk if seizures are not well controlled, but even then, with some careful thought and appropriate supervision, students should be able to join in with most things.

All First Aid trained staff should know what actions to take in the event that a student has a seizure.

Communication

- Ensure clear instructions are written in the IHP about what treatment the student needs in the event of a seizure.
- Make sure all the information about a student's particular condition is known as epilepsy does not affect everyone in the same way.
- Teaching staff need to be made aware of students with epilepsy and what to do in the event of a seizure.
- Epileptics may need time to recover after a seizure and might need to sleep.

Computers and lights

- Some students may have photosensitive epilepsy, meaning seizures are triggered by flashing or flickering lights or by geometric patterns such as checks or stripes.
- Computers and TVs with a flat screen do not flicker and so are less likely to trigger seizures than screens that do flicker.
- However, fast-moving or flashing images on the screen could be a trigger.
- Other photosensitive triggers include flickering overhead lights, and sunlight creating patterns through blinds.

Medication

- Some anti-epileptic medication may leave students feeling tired and cause problems with memory or concentration.

School Trips

- It is really important students with epilepsy are included on school trips and activities.
- An emergency pack including medication and the students IHP is essential on all trips.
- It is also important to have details of the nearest local hospital just in case there is an emergency.

Sports and Activities

- There is no reason why students with epilepsy cannot take part in a range of sports and activities as long as the risks have been assessed.
- The school nurse (Hedena Health) and other medical advisors can provide all the information needed to allow the School to arrange the best options for activities.
- The most common precaution is that there is supervision and a trained person on hand should the student have a seizure.
- This also applies to swimming.

Asthma - Medical Information

1.1 million children and young people in the UK are currently receiving treatment for asthma.

Causes of Asthma

Asthma is a condition that people have that affects their airways - these are the small tubes that carry air in and out of the lungs. When a person with asthma comes into contact with something that irritates their airways (an asthma trigger), the muscles around the walls of the airways tighten so that the airways become narrower and the lining of the airways becomes inflamed and starts to swell.

Sometimes sticky mucus or phlegm builds up which can further narrow the airways. All these reactions cause the airways to become narrower and irritated - making it difficult to breathe and leading to symptoms of asthma.

Symptoms of Asthma

- coughing
- wheezing
- shortness of breath
- tightness in the chest
- treatments for asthma

Although there is no cure for asthma, there are some excellent medicines available to help control it.

- Everyone with asthma should have a reliever inhaler.
- Reliever inhalers are usually blue (*relievers* are medicines that are taken immediately to relieve asthma symptoms).
- Some students will use a Preventer inhaler (*preventers* control the swelling and inflammation in the airways). Preventers are usually brown, red or orange.

Asthma: coping with an asthma attack

Recommended steps to follow in an asthma attack (for both children and adults):

- use their reliever inhaler (usually blue) immediately
- sit them down and ensure that any tight clothing is loosened - DO NOT lie down
- if no immediate improvement during an attack, continue to take one puff of their reliever inhaler every minute for five minutes or until symptoms improve
- if their symptoms do not improve in five minutes, or you are in doubt, call 999 or a doctor urgently
- continue to take one puff of their reliever inhaler every minute until help arrives

Asthma: support at school

Medication

- Some students with asthma may need to be encouraged to take their medicine properly, ensuring that they use their inhaler correctly so that every dose they take gives them the most benefit.
- All students with asthma who use a reliever inhaler should always carry this with them.
- A permission form will have been signed by the student's parents to allow this.
- The school nurse (Hedena Health) can support the student to get a repeat prescription of medicines as necessary.
- All students with asthma need to ensure they have their medication on school trips and activities.

Triggers

- The IHP will detail the medical treatment plan including what triggers the student's asthma.
- Things like physical activity, changes in the weather, dust and pollen can all trigger asthma.

Communication

- Ensure regular updates are received from the student and parents regarding their asthma - for instance in the event of them returning home and being seen by a doctor in their home country.
- Teaching staff need to be made aware of students with asthma and what to do in the event of an asthma attack.
- Students who have been off school unwell with their asthma may need to take things slowly when they return to school and especially in sports.

Allergies - Medical Information

Allergies affect at least 1 in 4 children and young people

Causes of Allergies

It is fairly common for people to have mild allergies, but some people can experience an acute reaction to a substance or a food. The medical term for this is anaphylaxis. It is unclear how many people suffer with severe allergic reaction but around 1 in 70 students across the UK have a peanut allergy. An allergic reaction occurs when the body's immune system over-reacts on contact with normally harmless substances. An allergic person's immune system treats certain substances as threats and releases a substance called histamine to defend the

body against them. The release of histamine can cause the body to produce a range of mild to severe symptoms. An allergic response can develop after touching, swallowing, tasting, eating or breathing in a particular substance. Examples include nuts (especially peanuts), fish & shellfish, milk and eggs. Reactions can also occur with insect stings and natural rubber latex.

Mild to moderate symptoms of an allergy:

- itchy tingling or burning sensation in the mouth
- rapid development of rash, hives or weals
- intense itching
- swelling, particularly the face
- feeling hot or very chilled
- rising anxiety
- feeling flushed
- nausea and or vomiting
- abdominal pain
- mild wheeziness

Acute reactions: anaphylaxis

- difficulty breathing due to swelling within the throat and airway
- reduced level of consciousness, faint, floppy, very pale, blue lips unresponsive - due to a drop in blood pressure
- collapse

Treatments for Allergies

For children and young people with acute allergic reactions an action plan / IHP should be drawn up with their families, using input from the child or young person's medical team. In most cases the allergen is known and can be avoided, but schools (i.e. *us*: EF Academy Oxford) may need to make allowances for this.

Treatment if a reaction occurs may include adrenaline injections using a device preloaded with the correct dose (Epi-Pen). This should be stored in an accessible place with the student's name on it and checked regularly for shelf life (usually one year). All schools should have a trained member of staff on hand and all staff should be made aware of those students with severe allergies.

Allergies - Support at School

Allergy Management Plan

- It is really important that a student with an allergic reaction has an IHP. This needs to contain full details of the allergen and what to do in the event of an allergic reaction and an emergency situation.

- The IHP needs to be written in partnership with the student, the student's parents and where possible the medical team treating the student.
- This means there is clear information available at school so that the School staff can support the student to make the most of school and help them should they have an emergency situation.

Emergency Medication

Student's individual emergency medication (usually an Epi-Pen) should be available at all times. There should always be someone available who has been trained to administer medication to a student who is prescribed this medicine following a severe reaction.

Listen to the student

- The student will probably know if they are having an allergic reaction as things start happening in the body to warn them.
- Students need to be listened to and taken seriously when they inform someone they are having an allergic reaction.
- Do not suggest the student waits to see how they feel later on.
- Act quickly and call for help as needed.

School trips

- Students with allergic reactions should not be excluded from school activities and trips. It may just take a little bit of extra planning.
- All emergency medication needs to be taken with the student on school activities and trips.
- It is a good idea the staff know where the nearest hospital is when out on school trips.
- Any risk assessment needs to take into account the specific needs of the student in order that they can take part in the trip safely.

References:

Health Conditions in School Alliance: www.medicalconditionsatschool.org.uk

Department for Education: Supporting pupils at school with medical conditions

Allergy UK: Children's Allergy and Anaphylaxis Protocols for Schools and Child Care Organisations

Asthma UK: www.asthma.org.uk

Diabetes UK: www.diabetes.org.uk

Epilepsy Society: www.epilepsysociety.org.uk

C: Care of students who are unwell

Date Created:	30 th June 2016
Author:	Deputy Head (Pastoral)
Individuals Involved in Developing the Document:	School Nurse and Head of Boarding in Torbay. Deputy Head, School Nurses and Head of Boarding, Oxford.
Document Purpose:	This procedure describes the process for taking care of students who are unwell.
Relevant to:	House Parents, Head of Boarding, Pathway Managers, Emergency Telephone Holders, Head of School and Assistant Heads.
Related Documents:	Health & Safety Policy Sections A, B and D of the Medical Provision and Medicines Policy Disability Strategy Department for Education and Skills / Department of Health: Managing Medicines in Schools and Early Years Settings Safeguarding Policy Student Handbook Public Health England: Guidance on Infection Control in Schools and other Childcare Settings Thames Valley PHE Centre Chilton Oxfordshire OX11 0RQ Tel: 0345 279 9879
Date Introduced:	30 th June 2016
Change Log (what changes have been made, by who and when):	Adapted for use in EF Academy Oxford; October 2016, Janine Gray, Boarding Deputy - EF Academy Oxford Reviewed and developed following the development and inclusion of the related documents below: The Identification and Care of Students with Chronic Health Conditions and Accessibility Policy Staff to Administer Medicines Department for Education and Skills / Department of Health: Managing Medicines in Schools and Early Years Settings Safeguarding Policy Student Handbook Mark Fletcher-Single, Deputy Head (Pastoral), November 2018. May 2019: P. Ellis & M. Fletcher-Single: incorporated policy into Medical Provision & Medicines Policy 2019-20.

	<p>Jun.'20 (Mark Fletcher-Single): additional information and details of relevant procedural changes to incorporate the development of our COVID-19 Policy</p> <p>Jun.'21 (Mark Fletcher-Single): developments to reflect the School's (returning) onsite medical provision, new systems / procedures following the changes made as a result of Covid-19 and the introduction of the Orah App</p> <p>Jul. '22 (Tina Desmond) Developed to reflect administration of medicines by trained staff.</p>
Date of next review:	May 2023

Care of Students who are Unwell Policy

Statement

In the event of a student being unwell it is essential that students are able to summon staff assistance readily and rapidly when ill, day or night.

- EF Academy Oxford will endeavour to ensure the Boarding team, The Head of Boarding, Pathway Managers, nearest First Aider and the emergency telephone holders are easily contactable with effective communication systems.
- Staff will ensure all students are aware of the telephone number to call, or the email to contact, in the event of sudden illness.

This will be included in:

- new student information
- new student induction ("Welcome Week")
- noticeboards in school, residence buildings and in the Student Lounge
- information in each of the student rooms

Management and Administration of Medicines in School

Administration of medicines by school staff:

There may be times when a student is unwell and would benefit from being given some medication that would otherwise be available over-the-counter

- All staff administering medication will be fully trained and their proficiency regularly updated and reassessed
- The only non-prescribed medication that can be administered to an unwell student are:

Medicine	Reason for Administration
Paracetamol 500mg tablets 1-2 tablets , 4 hourly as required Not to exceed 4 doses in 24 hours	Headache, sore throat, toothache, period pain, high temperature, cold and flu symptoms
Ibuprofen 200mg tablets 1-2 tablets 6-8 hourly as required Not to exceed 3 doses in 24 hours	Headache, muscular pain, backache, migraine, period pains, dental pain, high temperature, cold and flu symptoms <i>CAUTION: Some people with asthma and gastric symptoms should not take Ibuprofen or any other generic non-steroidal anti-inflammatory</i>
Antiseptic Throat Lozenges Lozenges are to be sucked 2-3 hourly as required	Sore throat and cough <i>CAUTION: These most often contain sugar and should be taken with caution by diabetics. If the student is expectorating discoloured sputum then it may be necessary to seek a doctor's opinion</i>
Lemsip cold and flu 1 sachet dissolved in hot water Contains Paracetamol 1000mg and Phenylephrine Hydrochloride 12.2mg (decongestant) Not to exceed 4 sachets in 24 hours	For the relief of cold and flu symptoms and blocked nose <i>CAUTION: These sachets contain an ephedrine based medication and should be taken with caution as they can cause palpitations and other side effects. The student needs a full triage assessment and may need further advice from a GP</i>

- These above named medicines will be stored in a metal locked cabinet
- If students should require any other medication they would be directed to a Pharmacy or seen by their General Practitioner (GP)
- When visiting a pharmacy, students will be advised on how to report their symptoms and where necessary they will be given a letter to present to the pharmacist
- When administering medicines to students the following checks need to be carried out:
 - Check student's name and date of birth
 - Determine why the medicine is needed
 - Ensure when the medication was last taken
 - Ask student if they have any known drug allergies/sensitivities
 - Cross-reference with student's medical information
 - Select correct medicine: check name of drug, strength and expiry date
 - Ensure that the correct dose is given for age and supervise administration
 - Record the drug and dosage administered; time administered and by whom.
 - The person administering the medication should record all details manually in the book held with the medications.

Record Keeping:

- There is a statutory requirement to record information on all medicines in boarding schools. The following records relating to all medicines must be kept:
 - All medicines received by the school
 - All medicines prescribed for students
 - All medicines administered by the school
 - All medicines transferred out of the school or returned to the pharmacy for disposal
- Any medication given to students in school will be logged in the medicines' administration book and will include name of student, date, time, medication given, dose and reason for administration
- All records should be properly completed, legible and current. They need to be available for inspection at all times
- Medicine records should be kept for at least 15 years from the date of the last entry

Receipt of medicines:

- Stocks of medicines for use on campus will be logged in the medicines' administration book and should include:
 - Date of receipt of medicine
 - Name and strength of medicine
 - Quantity received
- No medicines from abroad should be self-administered by students unless there are clear instructions on the medicine in English stating the name of medicine, dose, administration route, side effects and cautions
- Any medicines being brought into the country by students that are not clearly labelled in English should be taken off them and securely locked away until the student returns to their home country
- Any medicines being brought into the country by students that are clearly labelled in English and where parental consent has been given, will be securely locked away and can be given to students on their request and then securely locked away again until further needed

Gillick Competence

The school respects the confidentiality and rights of students as patients. This includes the right of a student assessed to be 'Gillick Competent' by a doctor or nurse, to give or withhold consent for his/her own treatment.

Administration of Own Medicine Protocol

The school will allow students to keep their own medications in a locked area in the boarding residences if they have been assessed as competent to do so. Asthmatics should carry their inhalers with them and students with allergies which could require an Epi-pen should carry this with them.

The criteria used to assess the students are:

- The age of the student
- Whether the medication is a short course or for long term use
- The student's own choice
- Whether the student has proven him/herself to be reliable in general and will remember to take the medication if it is to be taken regularly
- That the student understands why they are taking the medication and any side effects and potential risks of overdose or under-medication
- That the student knows when and how to take the medication
- That the student can effectively store the medication in a locked area
- That the student understands that they should never give the medication to anyone else, even if they have similar symptoms

Management of students who report feeling unwell (non-COVID-19 related symptoms) out of school hours:

After having been contacted that a student is unwell, the member of staff should assess the student and take a decision on the next course of action:

- refer to a local Pharmacy or contact GP surgery during office hours
- contact the NHS out of hours service - call 111
- contact out-of-hours GP and follow the instructions on the surgery answer machine message
- **if life threatening or an emergency call 999**, Covid restrictions permitting, all students who need to be seen in hospital are to be accompanied by a member of staff in a taxi or, if necessary, an ambulance
- contact the school emergency telephone if a student needs to go to hospital

If required, an appointment will be made by the Pathway Manager for the student to see their GP. All students under the age of 18 should be offered a companion to accompany them to this appointment.

Management of students who report feeling unwell (non-COVID-19 related symptoms) out of school hours:

After having been contacted that a student is unwell, the Head of Boarding / House Parents / Pathway Managers will encourage the student to see the nurse:

- The student will be assessed and sent to lessons and / or, if required, over-the-counter medication be recommended for the student's self-administration. The student will be authorised by the Pathway Manager as unwell and allowed to stay in their room.
- The Pastoral team will see the student in Residence every few hours and complete a medical report. The medical log will be sent by the Head of Boarding to the students' Parents/Guardians the following morning with an update on the students welfare.
- The school nurses (Hedena Health) will discuss with the student and inform the Pastoral team in the event the student needs to be seen by their GP.
 - an appointment will be made for the student to see a GP
 - all students under the age of 18 may be accompanied to this appointment by a member of staff
 - the student will be instructed not to leave the residence unless visiting a Pharmacy, attending a Doctor's appointment or returning to classes

On-going management of sick students (non-COVID-19 related)

- In Residence, at the start of their shift, the Head of Boarding / House Parent will check the student(s) who is / are unwell and keep checking them as necessary throughout their shift, ensuring they have plenty of fluids and food if appropriate.
- All students will have access to toilet and washing facilities.
- All students will be made comfortable and will have access to food and water.
- The Head of Boarding / House Parent will be made aware of any medicines administered to the student and a log will be completed on the daily residence report.

Medical support: 111, out-of-hours GP service, hospital A&E (non-COVID-19 related)

- The House Parent dealing with an unwell student can obtain medical advice by telephoning 111, contacting the out-of-hours GP, or must call 999 in the case of an emergency.
- If the House Parent on duty is in any doubt as to whether medical assistance is needed, s/he must arrange for the unwell students to be taken to Accident and Emergency (A&E) or must call 999 for an ambulance.
- The member of staff who takes a student to hospital, should inform the senior member of the pastoral staff on duty, and inform the student's parents of the situation at the earliest opportunity OR inform the senior member of pastoral staff on duty, so that they can inform parents. During the day, the Pathway Manager would normally inform parents. In the evenings, this would normally be the Head of Boarding or a House Parent on duty. After curfew and before 7.30am, this would normally be the SPOC. In particular cases, it may be more appropriate for the call to parents to be made by the Head of School.

Infectious Diseases / Illness in School (non-COVID-19 related):

Infectious diseases occur naturally and commonly in school settings. This is a result of the degree of close contact between students and staff and the difficulties in maintaining a perfect state of hygiene.

Outbreaks of infection may lead to disruption of the school routine and costly control measures.

- Where possible the School will prevent the increase in an outbreak of infection into school and limit its spread.

- Follow advice from Public Health England and NHS UK; to prevent the spread of gastro-enteritis illness, all students and staff **must** stay at home or be isolated for 48 hours after their last episode of vomiting and / or diarrhoea.
- If an infectious disease is present at school (2 or more linked cases) the school nurses (Hedena Health) or the Pathway Managers will inform the Head of School, the teaching staff, Pastoral team and the local Health Protection Unit should be contacted so that appropriate control measures can be discussed.

Care of students with Vomiting and Diarrhoea (Gastro-enteritis or possible Norovirus)

- Students and staff members must not be in close contact with other people.
- Students need to ensure they wash their hands frequently and thoroughly with soap and hot water especially after using the toilet and before preparing food.
- Students in residences need to be isolated in single rooms with their own bathroom facilities, towels, cutlery and utensils.
- Staff members and students **should not** return to school until 48 hours has passed since their last episode of vomiting and / or diarrhoea.
- Any contaminated waste or soiled linen in school will be disposed of using a body spillage bag.
- All treatment given by the pastoral team on-site will be documented in the student's notes on Orah and logged on the residence report.

Further information available from:

Public Health England - 'Guidance on Infection Control in Schools and other Childcare Settings' for a full list of infectious and notifiable diseases - www.gov.uk
The Health and Safety Policy

References:

NHS UK: www.nhs.uk

Public Health England: Guidance on Infection Control in Schools and other Childcare Settings
www.gov.uk

Infection Control in Schools and other Childcare Settings

Thames Valley PHE Centre

Chilton

Oxfordshire OX11 0RQ

Tel: 0345 279 9879

Coronavirus (Covid-19) and schools

The main symptoms of coronavirus currently identified by the UK National Health Service (NHS) are:

- **high temperature** - this means you feel hot to touch on your chest or back (you do not need to measure your temperature)
- **new, continuous cough** - this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual)
- **loss or change to your sense of smell or taste** - this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal

Most people with coronavirus have at least one of these symptoms. Further NHS information on coronavirus can be found here: <https://www.nhs.uk/conditions/coronavirus-covid-19/>

The School's *systems of control* remain the same as '21/'22 academic year ends and '22/'23 begins (these constitute a set of actions outlined below).

Prevention

- 1) Minimise contact with individuals who are unwell by ensuring those who have Covid-19 symptoms, or who have someone in their household who does, do not attend the setting.
- 2) Clean hands thoroughly, more often than usual.
- 3) Ensure good respiratory hygiene by promoting the *catch it, bin it, kill it* approach.
- 4) Be considerate of contact between individuals and, when / where relevant, maintain social distance.
- 5) Where necessary, wear appropriate personal protective equipment (PPE).

Response to Any Infection

- 6) Manage confirmed cases of coronavirus (COVID-19) amongst our FE community.
- 7) Contain any outbreak by following local health protection team advice.

Numbers 6 and 7 must be followed in every case where relevant.

D: Medicines Management (self-medication) including Homely Remedies

Date Created:	September 2018
Author:	Oxford Nurses and Deputy Head (Pastoral)
Individuals Involved in Developing the Document:	Oxford Nurses and Deputy Head (Pastoral)
Document Purpose:	This policy covers the control and use of medicines within the school and residences to students only; within National Minimum Standards for Boarding legislation and Nursing and Midwifery Code of Conduct.
Related Documents:	Safeguarding Policy Student Handbook Sections A, B, & C of the Medical Provision and Medicines Policy 2019-20
	<p>May 2019 - medical provision policy brought together with other medical or medicine-related policies to form a single policy dealing with the medical provision for students and medicines policy for students 2019-20. Rachel Carlisle replaced by Wayne McKenna. Frequency of Nurse Practitioner increased from 2 days a week to 5.</p> <p>Jun.'20 (Mark Fletcher-Single): additional information and details of relevant procedural changes to incorporate the development of our COVID-19 Policy</p> <p>Jun.'21 (Mark Fletcher-Single): developments to reflect the School's (returning) onsite medical provision, new systems / procedures following the changes made as a result of Covid-19 and the introduction of the Orah App</p> <p>Jul. '22 (Tina Desmond): Updated to current Covid-19 guidelines</p>
Date of Next Review:	May 2023

Students are expected to

- Declare all medicines they bring on arrival at EF
- Declare all medicines they subsequently buy or acquire
- Use only their own medicines and not to share medicines with other students
- Store their medicines in their personal safe or in a bag/pocket within their possession

Initial assessment by the school nurses

- The Nurse (Hedena Health) will meet with, and assess, any student who is new to EF Academy Oxford and has brought medication with them.
- Any medications deemed unsuitable or unsafe to leave with the student will be labelled with the student's name and date of birth and stored securely, in a place only accessible by the Nurse (Hedena Health).
- If this medication is in current use by the student the Nurse (Hedena Health) may choose to leave it with the student temporarily, if safe, whilst further information about the medication or a suitable alternative is found.
- If the medication is not in regular use, the Nurse (Hedena Health) will store it safely until the student can arrange for it to be sent or taken home.
- If the student doesn't arrange for this to happen within 2 weeks the medicine will be taken to a pharmacy for safe disposal.

Self-medication

Where the Nurse (Hedena Health) decides a medication is safe for a student to use independently, the student may keep the medication and self-medicate. They are expected to store the medication securely, either in the safe in their room or in a bag or pocket in their possession.

The criteria used to assess the students include:

- the age and maturity of the student
- any mental health concerns about the student
- the student's preferences
- whether the student has proven him / herself to be reliable in general and shows commitment to correct use of the medication
- what the medication is, whether it has been prescribed or not, how dangerous it's use may be, whether it is subject to any specific storage requirements (e.g. refrigeration, controlled drugs, etc.)
- the condition the medication is used for
- whether the medication is new or something the student is already familiar with and whether it is part of a short course or for long term use
- whether the student understands why they are taking the medication and any side effects and potential risks of overdose or under-medication
- that the student knows when and how to take the medication
- that the student can effectively store the medication in a locked area
- the dangers if someone else gains access to the medication
- that the student understands they should never give the medication to anyone else, even if they have similar symptoms

Students with asthma should carry their inhalers with them and students with allergies which could require an Epi-pen should carry this with them.

Supervised self-medication

- Where the Nurse (Hedena Health) decides a student should **not** be allowed to manage independently their medication, the Nurse (Hedean Health) will arrange for the administration of the medication to be supervised by identified staff members (from the School's Pastoral team).
- The Nurse (Hedean Health) will establish the exact procedure for this. It may involve either the patient storing their own medication or it being stored by the identified 'supervising' staff members (if the latter, the staff will store it in a safe accessible only to them and the Nurse).
- The level of supervision required may include anything from simply reminding the student to take their medicine, to direct observation of the patient taking each dose.
- Any supervised self-medication should only occur in line with the prescription for that medication and should be appropriately documented in the 'Supervised Self-medication' logbook.

Controlled Drugs (CDs)

- CDs are subject to an enhanced level of monitoring and care. Students bringing CDs into the UK need to apply for a licence to do so and this should be shown to the Nurse (see <https://www.gov.uk/guidance/controlled-drugs-licences-fees-and-returns>).
- A student may either self-administer the CD or this may need to be supervised, both cases as detailed above, but particular caution is applied to allowing self-administration.
- All CDs held on site will be stored in a medicines' cabinet, accessible only to those whom the nurse deems to need access.
- All CDs will be logged in the Controlled Drugs Register. A record must be made in this register of all movement of supplies of the drug (e.g. when a dose is administered, when new stock is added or when stock is returned to the student or disposed of).
- The stock level of CDs will be checked on a daily basis (Mon. to Fri.) by the Nurse. If any discrepancy of stock is noticed this should be immediately reported to the Nurse (Hedena Health) and Head of Boarding / Head of School, who will investigate and unless a secure explanation obtained, will report to the appropriate authorities, including the Police if required.

Administration Errors

- Any errors in administration of a drug, either by the student or a staff member, will be reported immediately, to the Nurse (Hedena Health) if available or to the Emergency Practitioner at Bury Knowle Health Centre, in working hours, or to the 111 service out of hours.
- If necessary, an ambulance will be called and any first aid necessary rendered.
- An incident form should be completed and sent to the Head of Boarding and the Nurse (Hedena Health) who will review the event and make necessary adjustments to avoid future issues.

Adverse Reactions

- If a student is thought to be having an adverse reaction to a medicine any necessary first aid will be rendered and then an appropriate assessment booked with either the Nurse, or a clinician at Bury Knowle Health Centre / 111.
- The event should be logged in the appropriate documentation.

Homely Remedies

- These are defined as a product that can be purchased (e.g. from a pharmacy or supermarket) for the relief of a minor, self-limiting ailment without the need for a prescription.

Appendix 1

Self-administration Assessment Form

First Name of student:

Surname of student:

DOB:

Name of medication 1:

Dosage:

.....

.....

Amount of medication given to student:

Medication can be stored in a locked area:

Yes / No

Length of treatment:

Date from: To:

Name of medication 2:

Dosage:

.....

.....

Amount of medication given to student:

Medication can be stored in a locked area:

Yes / No

Length of treatment:

Date from: To:

.....

Name of medication 3:

Dosage:

.....

.....

Amount of medication given to student:

Medication can be stored in a locked area:

Yes / No

Length of treatment:

Date from: To:

Name of medication 4:

Dosage:

.....

.....

Amount of medication given to student:

Medication can be stored in a locked area:

Yes / No

Length of treatment:

Date from: To:

Student's choice: Yes / No

The Student has proven themselves to be reliable:

Yes / No

The Student has full understanding of reasons for medication:

Yes / No

The Student has full awareness of any possible side effects:

Yes / No

The student knows when and how to take medication:

Yes / No

Student's Signature:

Date:

.....

Staff Member's Signature:

Date:

.....