Boarding

Medical and Medication Policy
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### Document History

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<tr>
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BOARDING MEDICAL POLICY
(Incorporating Medication Policy)

This policy applies to all students, including those who are over 18, who are boarders at Barton Hill House and attending Shaftesbury School. The school and boarding programme are committed to ensuring the safety and welfare of all boarders and will undertake whatever steps deemed necessary acting in loco parentis. This policy sets out what the boarding programme will do to ensure the safe and appropriate delivery of medication and medical/health care.

Barton Hill House has a number of trained first aid staff and any Boarder requiring other treatment/diagnosis will be referred to the appropriate service. This applies whether the treatment or medication is either long or short term and will take into account the individual’s needs.

A boarder’s right to confidentiality will be considered at all times and this may determine how much information is released regarding a condition and the treatment (including parents and guardians). Information regarding medication and health matters is strictly confidential.

Boarder Expectations

- To keep the boarding staff generally informed of any medical problems or questions. Boarders can withhold information if they so wish but we request staff be made aware of any medical or health problems which may require us to amend our provision or care.

- To hand in prescribed/non-prescribed medication with full instructions in English to a member of the boarding team for safekeeping unless deemed able to self-medicate.

- To co-operate with and follow instructions as appropriate of the boarding staff.

- Boarders are entitled to make a medical appointment out of school hours. Any prescribed medication issued must be handed to house staff for safekeeping, unless deemed able to self-medicate. Those Boarders deemed able to consent to their own treatment do not have to inform staff of the nature of their appointment, although the fact they are attending an appointment should be passed on to boarding/school staff to ensure the appropriate absence coding.

Responsibilities of the Boarding Staff Team

- To ensure all boarders are registered with Abbey View Medical Centre, Shaftesbury and to accompany Boarders to appointments as appropriate.
• To dispense and record all doses of prescribed and non-prescribed medication; Boarders are allowed to administer where appropriate.

• To keep accurate records of treatments and medication given to Boarders by ALL staff on duty.

• To keep an accurate record of accidents which occur within the building and grounds of Barton Hill House and when Boarders are under staff care and control, or involved in activities organised by Barton Hill House.

• To respond appropriately to any routine/emergency medical situation.

• To keep parents or guardians informed of a Boarder’s condition and progress if they are unwell or in need of treatment.

• Emergency dental treatment: Boarders will be offered private dental treatment if NHS is unavailable. In this instance parents may be liable for the costs incurred.

• If necessary, collect any Boarder taken ill in school and apply the appropriate level of care. If there are no staff available, then other arrangements will be made.

• To co-ordinate with the School Health Team regarding routine immunisations and inoculations. Parents will be consulted and prior written consent requested where appropriate.

• To inform parents/guardians as soon as possible of any serious accident the child has been involved in whilst in the care of Barton Hill House/Shaftesbury School.

• To keep Boarders informed of ongoing medical appointments and accompany if necessary; however, Boarders have the right to ask a member of staff to withdraw from the consultation.

• To accompany Boarders, as appropriate, to appointments.

• To provide suitable facilities for both genders in the event of the need for provision of care during illness or infectious disease.

• To consult and inform on care plans to ensure the appropriate level of care and supervision according to each individual need.

• Maintain constant dialogue with local health authorities and the Boarding School Association with regards to reviewing the medical/medication provision and any ongoing local and national health issues.

  Responsibilities of Parents/Guardians

• To complete the medical history form true and to the best of their ability. Any medical or health issue which could perhaps result in a review of suitability for boarding must
be declared so as to ensure the appropriate care. A medical condition does not normally mean a boarding place cannot be offered or have to be withdrawn but in order to ensure that we can meet the boarder’s medical needs this information is important.

- provide information regarding immunisation or inoculation specified on the medical information form.

- To arrange routine dental, orthodontist and optician appointments during school holidays where possible.

- To assume responsibility for the Boarder if they are medically unfit for school. It is not expected any Boarder will remain in the boarding house for more than three days of being unfit. In the case of long-term illness it is a clear expectation of the parent/guardian that they keep the Boarder in the home environment until the Boarder is fit to make a full return to school life.

- To assume responsibility, as soon as it is practical, if a Boarder is in need of medical surgery or a treatment which may include a stay in hospital.

- On return to the boarding house ensure any prescribed or non-prescribed medication is handed to a member of staff, discuss if necessary, and if not deemed able to self-medicate, ensure it is clearly labelled with the Boarder’s name and full instructions.

**Emergency Treatment**

In cases of serious medical emergency every attempt will be made to contact parents or guardians as soon as possible. In the case of a very serious emergency it may be necessary for Boarding Staff to give consent for treatment. This will never be undertaken lightly and only ever when advised by medical staff.

THERE SHOULD BE VERY CLEAR WRITTEN INSTRUCTIONS FROM ALL PERSONS WITH PARENTAL RESPONSIBILITY IF CONSENT IS NOT TO BE GIVEN IN ANY CIRCUMSTANCES WHEN THE PARENT/GUARDIAN CANNOT BE CONTACTED; THIS AUTHORITYION IS PART OF THE INDUCTION FORMS.

**Notification, Assessment, Recording and Storage of Medicines**

Boarders can request to self-administer medication but a risk assessment form will be completed to determine whether the Boarder is capable and competent to do so and reviewed annually or more frequently depending on the circumstances.
Any medication brought to the boarding house must be in the original container bearing the pharmacy label. This will state clearly the name of the recipient for whom it has been prescribed, plus the name, dose, duration and instructions for the administration of the medicine. Information regarding side effects and contraindications for taking the medicines must also be available. Where they are not available, staff reserve the right to withhold the medication until suitable checks are carried out.

This also applies to non-prescription medicines. If boarders wish to provide their own medication to self-administer, parental consent and an appropriate risk assessment form must be completed. Items should be bought and kept in their original containers containing the manufacturer’s instructions for use.

It is mandatory for all Controlled Drugs to be signed for and witnessed on receipt and at every administration. A detailed stock count is maintained in an appropriate file.

**Procedure of Administering Medicines**

Medicines must not be shared, or dosage altered at any time.

Only the Vice Principal/Vice Principal/Head of Boarding, Assistant Heads of Boarding, Day Manager and Senior House Parents will administer medication which will be stored at all times in a locked cupboard, the keys to which are held by the on-duty houseparents. The exception to this is inhaler devices and adrenaline auto injector pens, which should be easily accessible at all times and may be kept by the Boarders.

Those boarders, who have had consent to take paracetamol, are able to obtain a dose of the medication whilst at school during the day in order to assist with them remaining in school and accessing education. This assists in limiting the need to return to the boarding house to take medication.

A consent form is signed annual by the Vice Principal/Head of Boarding and held on file in the school. The medication is administered subject to the same standards and guidelines as in the boarding house and the boarding house senior staff is informed by school when boarders take paracetamol at school. This is then recorded.

**Self-administration of Medication**

Boarding Boarders in year 10 - 13 will be risk assessed as to whether they can self-medicate. Boarding staff reserve the right to adjust this provision based on any risks that may be posed. The risk assessment form will be kept in their medical files and reviewed where necessary.

Boarders are reminded of the importance in storing medicines safely and securely and must have access and keys to a suitable locked drawer/cupboard. Boarding Boarders in years 10 – 13 are given annual safe medication training, which includes the safe storage of medication in boarder rooms.
Boarders in years 7 – 9 are not permitted to self-medicate regardless of their age whilst in those academic year groups.

Boarders in year 10 – 11 who are found to not store medication appropriately or do not follow the guidelines to self-medication will have their right to self-medicate withdrawn until the following academic year.

Boarders in year 12 -13 who are found to not store medication appropriately or who do not follow the guidelines to self-medication will have their right to self-medicate withdrawn until the start of the next academic term.

In both cases, additional risk assessment and training will be carried out. Boarding staff reserve the right to withdraw any self-medication privilege should the need arise.

Boarders who wish to self-medicate, but also wish for the boarding staff to store their house remedies or other medications, may use the boarding medication safe storage and request access to them at any time. This will be recorded.

Boarders who are required to take prescription medication during the school day, will follow the school policy on self-medication.

There are exceptions for students who must carry an inhaler and/or Epipen and they will be permitted to keep these themselves.

**Competency**

Children over 16 years have the same rights to confidentiality and consent as adults.

Under 16 years of age, children can consent to medical treatment if they are deemed to be Fraser competent.

If a Fraser-competent child attends surgery without his or her parents or guardians, Health Care Professionals should consider securing the patients’ consent. Professional medical bodies advise:

‘You must assess a child’s capacity to decide whether to consent to or refuse proposed investigation or treatment before you provide it. In general, a competent child will be able to understand the nature, purpose and possible consequences of the proposed investigation or treatment, as well as the consequences of non-treatment’.

And:

‘Where a child under 16 years old is not competent to give or withhold their informed consent, a person with parental responsibility may authorise investigations or treatment which are in the child’s best interests’.

Boarders who are over 18 are subject to the same conditions and a risk assessment of their ability to self-medicate will be completed. Although 18, we have a duty of care to them and all the others in the boarding house.
Medicines and Health Provision for Off-Site Visits and Trips

First aid kits and home remedies, will be carried by Houseparent’s during off site visits/trips. Any treatment or medication administered to be recorded and transferred to Boarder medical file upon return.

Limited staff who regularly drive the minibuses on boarding trips are also trained in safe medication administration and carry a limited supply of house medicines. Any medication administered on a trip is recorded on the trip itself and then handed over to the senior staff on duty upon return.

Staff Training

Boarding staff will undertake appropriate training suitable to their role and ensure the appropriate coverage. Contacts are maintained with the local medical practise, the BSA, school nurse, trust senior health care worker and local authority medical providers.

Crutches, Wheelchairs and other Medical Aids

Any Boarder who needs to use crutches, a wheelchair or other medical aids will be assessed as part of the care plan drawn up. A risk assessment will be completed to ensure the appropriate use of the equipment and the Boarder will be transferred to the medical room if accommodated in areas other than on the ground floor. We reserve the right to move a Boarder to the medical room if it is in the best interests of the care plan.

Infection Policy

Boarding houses are an environment which sees many people living and working together in close proximity. From time to time illnesses and infections may enter this environment and spread rapidly through the population.

Aim

The aim of this policy is to control and prevent the spread of infectious diseases which may enter the boarding house or the school. The policy will act as an informative tool for staff so that they are aware of all precautions which should be taken to prevent the spread of infection.

Control of the infection

If an infectious disease is suspected house staff will contact the school nurse, trust senior health care worker, NHS direct or the local GP for advice.

Depending on advice from a health care professional a child suffering with an infectious illness will be held in isolation and provided with a private bathroom. The sick bay will generally serve this purpose. In some cases the decision may be made to send the child in
question to their parent or guardian. This decision will be made by the Vice Principal/Head of Boarding taking into account advice from the GP, house staff and parents of the child. Boarders should not reenter the general boarding population until 48 hours after they have suffered their last symptom, unless cleared by their GP.

All toilet seats, handles, hand basins and taps will be disinfected after use by an infected person.

Contaminated bedding and clothing will be washed in the school laundry at the hottest temperature the fabric will tolerate.

Every effort must be made by house staff to immediately and efficiently remove any bodily fluids which result from a Boarder becoming unwell. Cleaning products are always available when needed.

Any staff suffering from an infectious illness should avoid entering the work place until 48 hours after they have suffered their last symptom unless cleared by a GP.

**Procedure for cleaning up bodily fluids**

In cases of any spillage of bodily fluids, Personal Protective Equipment (PPE), including disposable gloves and disposable aprons must be worn and disposed of appropriately after use. Each duty room contains a body fluid cleaning kit complete with PPE, use of a body fluid cleaning kit should be reported to the office as soon as possible so that it can be replaced.

Any spilled bodily fluids will be immediately cleaned up using PPE. It is important to avoid getting splashes in eyes, nose, mouth or open sores or cuts. Any surfaces where spills have occurred will be cleaned and disinfected in a manner which will destroy both bacteria and viruses. Any clinical waste should be double bagged and disposed of appropriately and not put in general rubbish bins.

**Special cases**

In cases of extraordinary disease such as swine flu, Ebola etc this policy may be adjusted to coincide with current advice from the NHS or the world health organisation.

Advice may also be sought from the BSA consultant on school nursing matters.

**Staff illness**

Boarding staff must ensure they are free of applicable illnesses for up to 48 before returning to work and must call the absence line to inform of their non-/attendance.