

## **MEDICINES POLICY**

## 1. PURPOSE

The purpose of this Policy is to define the responsibilities of the College and its staff, the students and where relevant, their parent / guardian / carer or emergency contact/s in relation to the safe storage and managing medical conditions.

The College wishes to ensure that students with medical needs receive appropriate care and support throughout their studies with the College. The College seek to make reasonable adjustments to ensure that no student is discriminated against or unfairly disadvantaged because of their medical need/s. This Policy is written and will be implemented in line with the specific requirements of the Equality Act 2010 and the Children and Families Act 2014 as specified in the Special Educational Needs and Disability (SEND) Code of Practice 0-25 years.

## 2. SCOPE

This Policy relates to any students at the College who have medical needs that might affect them during their time as a student at the College. It outlines the responsibilities of the student, or where applicable their parent / guardian / carer or emergency contact/s (this applies to a vulnerable adult) and members of the College staff in relation to safe storage and managing medical conditions on College premises or on college business (including residential, trips or work placement).

For the purpose of this policy a vulnerable adult is defined as a student who may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.

Whilst all members of staff have a duty to take reasonable care of the Health and Safety of students in college, there is no contractual requirement for teachers or other staff to administer prescribed medication to students. For each student their individual requirements will be discussed and agreed with each member of staff following the receipt of the appropriate training and the staff member agreeing that they are competent to undertake the administration.

In some cases, members of staff who are willing or employed to undertake such duties will be identified and be given training by the appropriately trained person or health care professional. This will be reviewed on a case by case basis by Health, Safety, Sustainability and Compliance Manager and the Head of Inclusion.

This Policy applies to all prescribed medication without exception and specifically around medical needs, recording, storage of medication and related responsibilities. This Policy does not pertain to dispensing of non-prescribed medicines (e.g. paracetamol) by the College staff. Staff should not under any circumstances give out or store medicines for headaches, aches and pains or other minor ailments to any student, nor administer medication unless specifically designated and trained to do so.

## 3. OBJECTIVES

The College is committed to ensuring that all students have access to their medication as required and as directed by the prescriber.

In order to comply with the Policy, the processes below will be in place.

## 3.1 Disclosure

All students/potential students will have the opportunity to disclose a medical need and/or discuss this need and its potential implication for the student. In some circumstances this may need to be discussed and agreed with the student's parent / guardian / carer or emergency contact/s.

It is the responsibility of the student or for vulnerable students, their parent / guardian / carer or emergency contact/s to inform the College of medical needs that might affect them during their time as a student at the College.

- 3.1.1 The disclosure should be made ideally at the pre-entry stage: at the school review, or the application/admission stages, however, the College will review any disclosure after this entry stage and proceed as applicable. The College processes provide the opportunity for this disclosure.
- 3.1.2 The member of staff receiving the disclosure will operate within the confidentiality guidelines of the College, the Data Protection Act and the Disclosure Policy.
- 3.1.3 The detailed process for acting on the disclosure is defined in the Medicines Guidance and Procedure that details the operational procedure and includes a flowchart which identifies student led only intervention from staff if pre agreed by the In some cases, members of staff who are willing or employed to undertake such duties will be identified and be given training by the appropriately trained person or health care professional. This will be reviewed on a case by case basis by the Health, Safety, Sustainability and Compliance Manager and the Head of inclusion.
- 3.1.4 College staff will be proactive in encouraging disclosure and the subsequent issue of the In Case of Emergency (ICE) card and the requirement for the student to display the ICE Card for their safety and that of other students and staff members.
- 3.1.6 For students undertaking off site and/or work placement activities the Requirements and Guidance for Off Site Visits and Adventurous Activities including the use of the Evolve system and the Health and Safety Assessments for Work Placements respectively must be adhered to by the staff planning and organising this activity. The Health and Safety and/or ALS teams will provide support to staff on a case by case basis, where any such case arises, to ensure appropriate procedures are adopted.

## 3.2 Agreement of responsibilities

A written agreement will be drawn up which records the agreement made by the College and signed by the relevant staff and the student and/or parent / guardian / carer or emergency contact. Where possible, students will be encouraged and supported to administer their own medication.

- 3.2.1 Staff supervision for self-administering prescribed medication may be agreed where that is considered necessary.
- 3.2.2 Where students need support for them to be able to self-administer (i.e. reminders, prompts), this will be explored, and best endeavours will be made to support this. If a student is unable to administer their own medication, the appropriateness of the provision will be considered including liaising with the Local Authority to update that needs are not able to be met and support in signposting to an appropriate provision. The exception to this will be rescue medication where this will be reviewed on a case-by-case basis.
- 3.2.3 College staff who support or administer rescue medication will receive training, guidance and supervision through arrangements made with relevant healthcare professionals or other professionals qualified to deliver the training.
- 3.2.4 It is the responsibility of the student to ensure any rescue medication is kept on them at all times. The College will provide a secure locker where the student can store spare medication. It is the responsibility of the student to ensure that if they have to keep the spare medication on them due to not having their personal medication their replace this. If a student who needs rescue medication does not have this on them and has no spare, and staff become aware, their parent / guardian / carer or emergency contact/s must be informed and the student cannot be on site.
- 3.2.5 The College will maintain and update EBS which records the student's needs, relevant information for medical emergencies.
- 3.2.6 It is the students or where applicable their parent / guardian / carer or emergency contacts responsibility to inform the College immediately if there is any change.
- 3.2.7. Where a student needs rescue medication. This will be reviewed by the Health, Safety, Sustainability and Compliance Manager who will discuss with the Head of School and Advisory Teacher. This will also be recorded on ProMonitor, and it is the responsibility of curriculum staff to complete the relevant training through Organisational Development (OD) Booking.
- 3.2.8 It is the responsibility of the student and either their parent / guardian / carer or emergency contact to collect out-of-date spare medication and dispose of them safely.
- 3.2.9 If a student experiences a medical emergency i.e. Seizure, an Anaphylaxis shock, heart pains or is unable to breathe etc, 999 and a first Aider must be called immediately. Any information on the ICE Card must be communicated and instructions followed.

# 3.3 Staff Training

All staff will be informed of the Medicines Policy by the circulation of the document on approval of the Policy and Procedure Committee. The attached guidance will support this.

- 3.3.1 The administration of rescue medication in college will be the duty of designated trained staff i.e. First Aiders managed by the Health, Safety, Sustainability and Compliance Manager
- 3.3.2 All First Aid staff involved in the storage or administration of medication, need to attend training annually in the application of this policy and set of procedures, to achieve and/or maintain competence.
- 3.3.3 Additionally, these staff must also receive training in the administration of any individual medications they are required to administer, where these medications need to be administered in particular or unusual ways (e.g. between the gum and cheek or via an Epipen).
- 3.3.4 Written confirmation of instructions and training from a health practitioner is required prior to administering any medication.
- 3.3.5 The Medicines Guidance and Procedure refers to all the relevant forms which need to be completed for students who declare they need have a condition which requires rescue medication. Training will be given on the accurate completion of any required records such as risk assessments or Personal Emergency and Evacuation Plans (PEEPs) and these will be audited by the Health, Safety, Sustainability and Compliance Manager and Head of inclusion on a termly basis.
- 3.3.6 Where there is a requirement for rescue medication to be administered to a student during an off-site or work placement activity which will require staff to be appropriately trained, then consult Health, Safety, Sustainability and Compliance Manager, and/or ALS team for more guidance. This will be looked at on a case by case basis.

### 4. STAKEHOLDER CONSULTATION

The Policy has been consulted with the Head of Inclusion, Inclusion Manager, Health, Safety, Sustainability and Compliance Manager, Academic Learning Support Lead, and Executive Director of Student Support and Experience (DSL), before submission to the Policies and Procedures Review Committee for approval.

### 5. MONITORING AND REVIEWING

The Policy will be monitored and reviewed by the Head of Inclusion, Inclusion Manager and, Health, Safety, Sustainability and Compliance Manager. The periodic review of this policy will take place every 2 years, or sooner if relevant to ensure that it continues to support the mission, strategic objectives and legal requirements of the College.

The Health, Safety, Sustainability and Compliance Manager will take responsibility for auditing the ICE Cards and checking that procedures are being adhered to.

# **6. RELATED POLICIES/ PROCEDURES**

Associated policies and procedures Manager responsible	
Student Safeguarding Policy and Procedures	Executive Director of Student Support and
	Experience (DSL)
Confidentiality Statement & Framework	Executive Director of Student Support and
	Experience (DSL)
Health & Safety Policy Statement	Health, Safety, Sustainability and
	Compliance Manager
Requirements and Guidance for Off Site Visits	Health, Safety, Sustainability and
and Adventurous Activities	Compliance Manager
Disability Policy for Higher Education Students	Head of Inclusion
Medicines Guidance and Procedure Head of Inclusion	
Admissions Policy (Students)	Head of MIS/IT
SEN and Disability Local Offer - Blackburn	Head of Inclusion
College	
Special Educational Needs and Disability Head of Inclusion	
Policy for Further Education Students	
Equity, Diversity and Inclusion Policy and	Executive Director of Student Support and
Procedures	Experience (DSL)

## 7. MANAGEMENT RESPONSIBILITY

This Policy is one of the Special Educational Needs and Disability associated policies and also incorporates the Medicines Guidance and Procedures overseen by the Head of Inclusion supported by the Health, Safety, Sustainability and Compliance Manager

### 8. EQUALITY IMPACT ASSESSMENT

Blackburn College is committed to the promotion of equality, diversity and providing a supportive environment for all members of our community. Our commitment means that this policy has been reviewed to ensure that it does not discriminate against (either intentionally or unintentionally) any of the protected characteristics of age, disability, gender (including gender identity), race, religion or sexual orientation and meets our obligations under the Equality Act 2010. Therefore, this policy has no adverse impact on any of the above protected groups.

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Owner:	Faz Imran (Head of inclusion)
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Consulted with:	Director of Student Support and Experience (DSL), Head of
	Student Experience, Health, Safety, Sustainability and Compliance
	Manager, Curriculum Leadership Team, Students Union and HE
	Disability Service and colleagues

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