



Winterton Community Academy

Supporting Pupils at Academy with Medical Conditions Policy

Legislative background

At Winterton Community Academy we recognise and will meet our duties and responsibilities in relation to supporting pupils at academy with medical conditions. These duties and responsibilities are contained in the legislation and statutory guidance listed below:

- Department for Education's statutory guidance - 'Supporting pupils at academy with medical conditions' April 2014 (updated December 2015) – governing bodies, proprietors and management committees must have regard to this guidance in order to meet the duty / responsibilities of the Children and Families Act 2014.
- Children and Families Act 2014 (Section 100) – places a duty upon governing bodies of maintained academies, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their academy with medical conditions.
- Equality Act 2010 – some children with medical conditions may be disabled. Where this is the case governing bodies must comply with their duties under the Equality Act 2010.
- Special Educational Needs and Disability (SEND) Code of Practice July 2014 – some children with medical conditions may also have special educational needs (SEN) and may have an Education, Health and Care (EHC) Plan. For children with SEN this policy / procedure statement should be read in conjunction with academy SEN policies and the SEND Code of Practice.
- Human Medicines (Amendment No. 2) Regulations 2014 – allows academies to hold stocks of asthma inhalers containing salbutamol for use in an emergency. These regulations come into effect on 1 October 2014.

Introduction

At Winterton Community Academy children with medical conditions, in terms of both physical and mental health, will be appropriately supported in academy so that they can play a full and active role in academy life, remain healthy and achieve their academic potential. Children with medical conditions will be encouraged and supported to access and enjoy the same opportunities at academy as any other child.

We recognise that pupils with long-term and complex medical conditions may require on-going support, medicines or care whilst at academy to help them to manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. Winterton Community Academy recognises that each child's needs are individual.

We also recognise that needs may change over time and that this may result in extended absence from academy. The academy will make every effort to minimise the impact upon a child's educational attainment and support his or her emotional and general well-being, including any necessary re-integration programmes. The academy will strive to give pupils and their parents' confidence in the academy's approach.

The academy recognises that some children who require support with their medical conditions may also have special educational needs and may have an Education, Health and Care (EHC) Plan – also introduced by the Children and Families Act 2014. We will work together with other academies, health professionals, other support services, and the Local Authority. Sometimes it will be necessary for the academy to work flexibly, for example, by means of a combination of attendance at academy and alternative provision / personalised learning.

Policy arrangements

- The Headteacher will ensure that sufficient staff are suitably trained.
- All relevant staff including supply and other temporary staff will be made aware of the child's condition(s).
- Cover arrangements will be put into place to cover for staff absence to ensure appropriate provision is always available.
- Risk assessments will be put into place for educational visits and other academy activities outside the normal timetable.
- Individual Healthcare Plans (IHPs) will be monitored and involve appropriate health care professionals.

Procedure to be followed when notification is received that a pupil has a medical condition

The academy, in consultation with all relevant stakeholders including parents, will:

- Ensure that arrangements are put into place to cover transition from and to another setting, upon being notified that a child is coming into academy with a medical condition. These may vary from child to child, according to the existing IHP.
- Ensure that arrangements are implemented following reintegration into the academy or when the needs of a child change.
- Put arrangements into place in time for the start of the new academy term.
- In other cases, such as a new diagnosis or children moving to a new academy mid-term, make every effort to ensure that appropriate arrangements are in place within two weeks.
- Provide support to pupils where it is judged by professionals that there is likely to be a medical condition.
- Ensure that any staff training needs are identified and met.

Individual Healthcare Plans (IHP)

The Designated Safeguarding and Inclusion Officer and the SENCO will normally be responsible for developing IHPs – in liaison with, and with appropriate oversight of, a relevant healthcare professional (e.g. academy nurse / nurse specialist – diabetes / epilepsy / paediatrician, etc.). The purpose of an IHP is to ensure that there is clarity about what needs to be done, when and by whom. An IHP will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and they are likely to be helpful in the majority of other cases, especially where medical conditions are long-term and complex and require specific management. However, not all children will require an IHP. The academy, healthcare professionals and parents will agree, based upon evidence, when an IHP would be inappropriate or disproportionate. If consensus cannot be reached, the Head teacher will take a final view. A flow chart for agreeing the support required is provided in [Annex A](#) and a template IHP is provided in [Annex B](#). Input from a healthcare professional must be provided.

The IHP is confidential to the parents / young person and to those academy staff who need to know. The level of detail within an IHP will depend upon the complexity of the child's condition and the degree of support needed. Where a child has a special educational need, but does not have an EHC Plan, their special educational needs will be referred to in their IHP.

IHPs, and their review, may be initiated, in consultation with the parent, by a member of academy staff or a healthcare professional involved in providing care for the child. IHPs will be drawn-up in partnership between the academy, parents, and a relevant healthcare professional, e.g. Specialist or Community / Academy Nurse / other health professional. Wherever possible, the child should also be involved in the process. The aim is to capture what needs to be done to help staff and the child manage their condition and overcome any potential barriers to getting the most from their education. Responsibility for ensuring the plan is finalised rests with the academy.

IHPs will be reviewed at least annually or more frequently if evidence is presented that the child's needs have changed. IHPs are devised with the child's best interests in mind, ensuring that an assessment of risk to the child's education, health and social well-being is managed minimising disruption. Reviews will be linked to any EHC Plan, as appropriate.

Information to be recorded

When deciding upon the information to be recorded on IHPs, the following will be considered:

- The medical condition, its triggers, signs, symptoms and treatments.
- The pupil's resulting needs, including medication (dose, side-effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues. E.g. Crowded corridors, travel time between lessons.
- Specific support for the pupil's educational, social and emotional needs. E.g. exams, use of rest periods or additional support in catching up with lessons, counselling sessions.
- The level of support needed, including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring.

- Who will provide the support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional; and cover arrangements for when they are unavailable.
- Who in the academy needs to be aware of the child's condition and the support required.
- Arrangements for written permission from parents and the Head teacher for medication to be administered by a member of staff, or self-administered by the pupil during academy hours.
- Separate arrangements or procedures required for academy trips or other academy activities outside of the normal academy timetable that will ensure the child can participate, e.g. appropriate Risk Assessments.
- Where confidentiality issues are raised by the parent or child, the designated individuals to be entrusted with information about the child's condition.
- 'What to do in an emergency', including whom to contact and contingency arrangements. Some children may have an emergency healthcare plan prepared by their lead clinician that could be used to inform the development of their academy IHP.
- Informing / sharing appropriate IHP information with other relevant bodies (e.g. Home to Academy Transport) – through appropriate agreement / consent.

Roles and responsibilities

Supporting a child with a medical condition during academy hours is not the sole responsibility of one person. The academy will work collaboratively; both with staff within the organisation and with outside agencies, as the circumstances of each child dictate.

Governing Body

The Governing Body will ensure that:

- Pupils in academy with medical conditions are supported.
- This policy is reviewed at least annually, developed, implemented and monitored.
- Staff receive suitable training and that they are competent before they take on the responsibility to support children with medical conditions.
- There are quality assurance systems in place to ensure that pupils in academy with medical conditions are supported (e.g. case monitoring / assurance audits).

1. Headteacher

The Headteacher has overall responsibility for the development of IHPs. The Head teacher will ensure that:

- The *Supporting Pupils at Academy with Medical Conditions Policy / Procedure* is developed and effectively implemented with partners, including ensuring that all staff are aware of the policy and that they understand their role in implementing the policy.
- The Head teacher will ensure that all staff who need to know are aware of a child's medical condition.
- Sufficiently trained staff are available to implement the policy and deliver against all the IHPs, including in contingency and emergency situations.
- Ensure that all staff are appropriately insured to support pupils in this way.

- Liaise with the academy nurse in respect of a child who has a medical condition, including in cases where the situation has not yet been brought to the attention of the academy nursing service.

Academy Staff

Any member of the academy staff may be asked to provide support to pupils with medical conditions, including the administration of medicines.

Any member of academy staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Pupils

Pupils with medical conditions may be best placed to provide information about how their condition affects them. They will be involved in discussions about their medical support needs and contribute as much as possible to the development of, and review of, their IHP. Other children will often be sensitive to the needs of those with medical conditions and this will be considered as part of wider planning.

Parents/Carers

Parents/carers should provide the academy with sufficient and up-to-date information about their child's medical needs. At Winterton Community Academy, parents/carers are key partners and they will be involved in the development and the review of their child's IHP, including its drafting. Parents/carers should carry out the action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Local Authority

Winterton Community Academy will communicate / liaise with the Local Authority as appropriate/required by a child's medical needs / condition(s).

The Local Authority has a duty to commission an academy nursing service to this academy. The Local Authority will provide support, advice and guidance, as appropriate.

Providers of Health Services

Winterton Community Academy will communicate / liaise with providers of health services as appropriate / required by a child's medical needs. Health services can provide valuable support, information, advice and guidance to academies, and their staff, to support children with medical conditions at academy.

Clinical Commissioning Groups (CCGs)

Winterton Community Academy will communicate / liaise with CCG colleagues as appropriate / required by a child's medical needs. CCGs commission other healthcare professionals such as specialist nurses. They ensure that commissioning is responsive to children's needs, and that health services are able to co-operate with academies supporting children with medical conditions.

Staff training and support

Training needs for staff will be assessed by looking at the current and anticipated needs of pupils already on roll. It may be possible to determine training needs by early information relating to a child about to be admitted to the academy. All members of staff providing support to a child with medical needs will have been trained beforehand. Staff who provide specific support to pupils with medical conditions will be included in meetings where this is discussed. All staff training in relation to medical conditions will be recorded / signed off in terms of competency.

The type of training, and frequency of refresher training, will be determined by the actual medical condition that a child may have and this will be supported by the Governing Body. Some training may be arranged by the academy, and other types may make use of the skills and knowledge provided by the academy nursing service, or specialist nursing services, among others. In some cases, a specific health care professional will be required to provide appropriate training. Training may involve on-site or off-site provision. Parents / carers and appropriate healthcare professionals will be asked to supply specific advice in relation to possible training requirements.

Staff will be made aware of the specific needs of each child with a medical condition and will be competent and confident to deliver the support. It must be noted that a First Aid certificate alone will not suffice for training to support children with medical conditions. The *Supporting Pupils at Academy with Medical Conditions Policy / Procedure* will be subject to whole staff consultation as part of the draft, and subsequent reviews. All members of staff will be informed of it and it will be included in the induction arrangements for new staff to the academy.

The child's role in managing their own medical needs

At Winterton Community Academy, the children who require medication or other procedures will be supervised in administering them or receiving them from a relevant member of staff. If a child refuses to take medicine or carry out a medical procedure, staff will follow the procedure agreed in the IHP. Parents / carers and relevant health professionals will be informed so that alternative options can be considered.

Managing medicines on academy premises

Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside academy hours. Where this is not possible, the following will apply:

- Medicines will only be administered at academy when it would be detrimental to a child's health or academy attendance not to do so.
- No child will be given prescription or non-prescription medicines without their parent's written consent – (except in exceptional circumstances where the medicine has been prescribed to a young person without the knowledge of the parents).
- Non-prescription medicines will be administered / managed by parents, as far as is reasonably practicable, should they be needed during the academy day. For the administering of non-prescription medicines during an educational visit, parents should provide written consent.

- No child will be given a medicine containing aspirin unless it has been prescribed by a doctor. Parents will be required to give their written consent.
- The academy will only accept prescribed medicines that are in-date, labelled, provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage. The exception to this is insulin which must be in-date, but will generally be available to academies inside an insulin pen or pump, rather than its original container.
- Medicines will be stored safely. This will be in the Medical Room or in a fridge in the staff room. Some medicines may be stored in classroom store rooms. Children who need to access their medicines immediately, such as those requiring asthma inhalers, will be shown where they are. On educational visits, medicines will also be available and they will be looked after by a relevant member of staff.
- If a controlled drug has been prescribed, it will be kept securely and stored in a non-portable container. Named staff only will have access to such medication so that it can be administered to the specific child. The academy will keep a record of doses administered, stating what, how and how much was administered, when and by whom. Any side effects of the medication will be noted.
- When no longer required, medicines will be returned to the parent to arrange for safe disposal.
- Written records will be kept of all medicines administered to children and parents / carers will be informed if their child has been unwell at academy.

Emergency procedures

A child's IHP will clearly define what constitutes an 'emergency' and the action to be taken, including ensuring that all relevant staff are aware of emergency symptoms and procedures. It may be necessary to inform other pupils in general terms so that they can inform a member of staff immediately if they think help is needed.

If a child is taken to hospital, staff will stay with the child until the parents / carers arrive, or accompany a child taken to hospital by ambulance. Accurate information about the child will be provided to the emergency services at the call out stage, during any first response stage, or subsequent moving on to hospital.

Educational visits and sporting activities

The academy will consider how a child's medical condition will impact upon their participation. We will encourage all children to participate according to their ability and make any necessary reasonable adjustments, unless evidence from a clinician, such as a GP, states that this is not possible.

The academy will consider what reasonable adjustments and risk assessments are required so that planning arrangements take into account all steps needed to ensure that children with medical conditions are included. This will require consultation with parents / carers, pupils and advice from relevant healthcare professionals to ensure that pupils can participate safely.

Unacceptable practice

Although academy staff will use their discretion and judge each case on its merits with reference to the child's IHP, it is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assume that every child with the same condition requires the same treatment.
- Ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged).
- Send children with medical conditions home or prevent them from staying for normal academy activities, including lunch, unless this is specified in their IHP.
- If the child becomes ill, send them to the academy office or medical room unaccompanied or with someone unsuitable.
- Penalise children for their attendance record if their absences are related to their medical condition e.g., hospital appointments.
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively (as identified in their IHP).
- Require parents / carers, or otherwise make them feel obliged, to attend academy to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the academy is failing to support their child's medical needs.
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of academy life, including educational visits, e.g., by requiring parents to accompany the child.

Liability and indemnity

The Governing Body at Winterton Community Academy ensures that appropriate insurance is in place and that it reflects the level of risk. The insurance covers staff providing support to pupils with medical conditions. From time to time, the academy will need to review the level of cover for healthcare procedures and any associated related training requirements (such as may be the case with specific children with complex needs).

Complaints

Parents / carers who are dissatisfied with the support provided should discuss their concerns directly with the academy. If for whatever reason this does not resolve the issue, they can make a formal complaint via the academy's complaints procedure.

Other issues for consideration

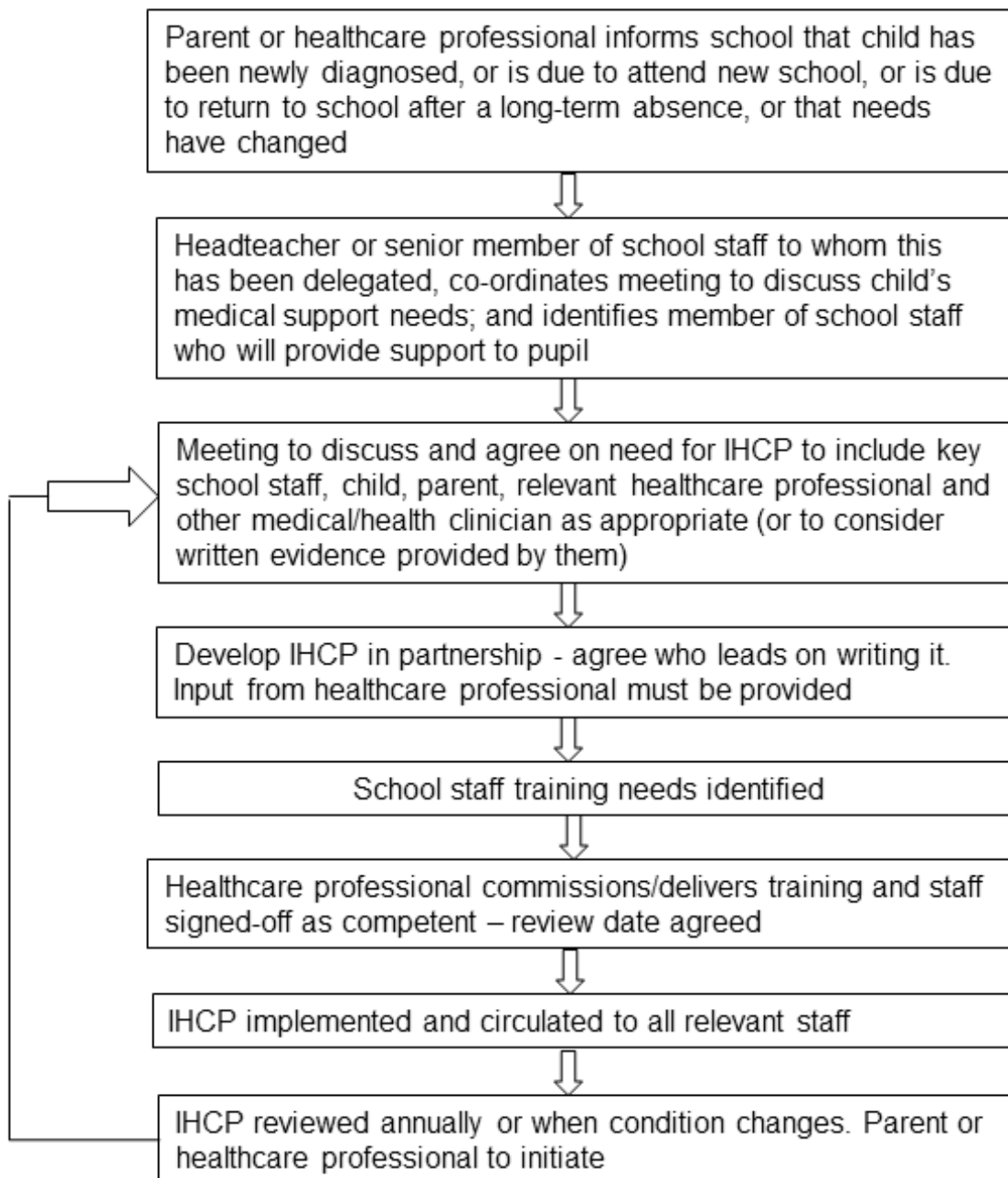
The academy has a number of trained First Aiders amongst the staff.

A number of staff have been trained in CPR, where staff have been trained in CPR a defibrillator has been purchased as part of our first aid equipment and the local NHS ambulance service has been informed of its location.

The academy will consider the use of asthma inhalers for emergency use.

Annex A

Process for developing IHPs.



Annex B

INDIVIDUAL HEALTHCARE PLAN FOR A PUPIL WITH MEDICAL NEEDS

NAME

DATE OF BIRTH

--	--

NHS NUMBER

UNIT NUMBER

--	--

CONDITION/S

ALLERGIES

--

CLASS/FORM

DATE:

--	--

NAME OF ACADEMY:

REVIEW DATE:

--	--

CONTACT INFORMATION

Family Contact 1, Name, Phone Numbers, Relationship

--

Family Contact 2, Name, Phone Numbers, Relationship

IC/Hospital Contact, Name, Phone Number

General Practitioner, Name, Phone Number

--

Describe condition and give details of pupil's individual symptoms:

--

Daily care requirements: (e.g. before sport/at lunchtime)

--

Describe what constitutes an emergency for the pupil, and the action to take if this occurs

--

Follow-up care

--

Who is responsible in an emergency: (state if different on/off-site activities)

--

Form copied to

Headteacher Class teacher Consultant Paediatrician etc
--

Whilst every effort will be taken to ensure this individual healthcare plan is up to date, it remains the parents / carers responsibility to inform academy of any changes.

Signed

Signed

Signed

Health Professional	Parent	Headteacher

Annex C

Further advice and resources

The Anaphylaxis Campaign

1 Alexandra Road
Farnborough
Hampshire GU14 6BU

Telephone 01252 546100 (head office) or 01252 542029 (helpline)

info@anaphylaxis.org.uk

www.anaphylaxis.org.uk

Asthma UK

18 Mansell Street
London E1 8AA

Telephone 020 7786 4900

info@asthma.org.uk

www.asthma.org.uk

Diabetes UK

Macleod House
10 Parkway
London NW1 7AA

Telephone 0345 123 2399

info@diabetes.org.uk

www.diabetes.org.uk

Epilepsy Action

New Anstey House
Gate Way Drive
Yeadon
Leeds LS19 7XY

Telephone 0113 210 8800 (head office) or 0808 800 5050 (helpline)

epilepsy@epilepsy.org.uk

www.epilepsy.org.uk

Date Reviewed by EF
Ref:

Next Review Date June 2019

Department for Education

Piccadilly Gate
Store Street
Manchester M1 2WD

Telephone 0370 000 2288

Typetalk 18001 0370 000 2288

Contact form: www.education.gov.uk/contactus/dfe

www.education.gov.uk

Council for Disabled Children

National Children's Bureau
8 Wakley Street
London EC1V 7QE

Telephone 020 7843 1900

cdc@ncb.org.uk

www.councilfordisabledchildren.org.uk

National Children's Bureau

National Children's Bureau
8 Wakley Street
London EC1V 7QE

Telephone 020 7843 6000

enquiries@ncb.org.uk

www.ncb.org.uk

Tuition and Medical Needs Education Team (TAMNET)

North Lincolnshire Council
Learning Development Centre
Enderby Road
Scunthorpe DN17 2JL

Telephone 01724 297149 or 01724 297945

There is a duty to meet the education needs of children with medical conditions. The Tuition and Medical Needs Education Team (TAMNET) can support with this by providing home tuition, tuition in hospital and small group teaching for children with medical or mental health conditions.

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TAMNET can also help children with chronic conditions who are frequently absent from academy by providing occasional tuition when required. The team is available to give advice and help to academies about children with medical needs. Contact details for discussion about individual cases/referral - as above.

