

**SUPPORTING  
STUDENTS WITH  
MEDICAL NEEDS  
POLICY  
2019**



**KING HAROLD**  
ACADEMY

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## Aim

King Harold Academy has both a mandatory and moral obligation to establish arrangements to support students with medical conditions, in so doing the school will aim to ensure that children with medical conditions can access and enjoy the same opportunities at school as any other child, where possible.

## Introduction

This policy has been drawn together using the following legislation and underpins all that is contained herein;

- Children and Families Act 2014 - section 100
- Supporting students at school with medical conditions: statutory guidance for governing bodies of maintained schools and proprietors of academies in England, DfE December 2015
- 0-25 SEND Code of Practice, DfE January 2015
- Mental Health and behaviour in schools: departmental advice for school staff, DfE March 2016
- Equalities Act 2010
- Schools Admissions Code, DfE December 2014

## Purpose

The statutory duty for making arrangements for supporting students at school with medical conditions rests with the governing body. The governing body have conferred the following functions of the implementation of this policy to the staff below, however, the governing body remains legally responsible and accountable for fulfilling our statutory duty.

The overall responsibility for the implementation of this policy is given to Mr Ian Tilbury, Head of School. He will also be responsible for ensuring that sufficient staff are suitably trained and will ensure cover arrangements in cases of staff absences or staff turnover to ensure that someone is always available and on-site with an appropriate level of training. Mrs N Reece will have strategic responsibility for matters pertaining to supporting students with medical conditions. Mrs N Reece will be responsible in conjunction with parents/carers and Heads of Year, for drawing up, implementing and keeping under review the individual healthcare plan for each student and making sure relevant staff are aware of these plans. Mrs S. Dunne, will be responsible for overseeing the preparation of risk assessments for school visits and other school activities outside of the normal timetable. All members of staff are expected to show a commitment and awareness of children's medical conditions and the expectations of this policy.

## Implementation

This covers notification prior to admission, procedures to cover transitional arrangements between schools or alternative providers, and the process to be followed upon reintegration after a period of absence or when students' needs change. For children being admitted to King Harold Academy for the first time with good notification given, the arrangements will be in place for the start of the relevant school term. In other cases, such as a new diagnosis or a child moving to King Harold Academy mid-term, we will make every effort to ensure that arrangements as soon after the student joins us as is practicable.

We acknowledge that some medical conditions may be more obvious than others. We will therefore ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life. We aim to ensure that parents/carers and students can have confidence in our ability to provide effective support for medical conditions in school, so the arrangements will show an understanding of how medical conditions impact on the child's ability to learn, as well as increase their confidence and promote self-care.

We will ensure that staff are properly trained and supervised to support students' medical conditions and will be clear and unambiguous about the need to support actively students with medical conditions to participate



in school trips and visits, or in sporting activities. We will make arrangements for the inclusion of students in such activities with any adjustments as required unless evidence from a clinician such as a GP states that this is not advisable/possible. We will make sure that no child with a medical condition is denied admission or prevented from attending the school because arrangements for supporting their medical condition have not been made. However, in line with our safeguarding duties, we will ensure that all students' health is not put at unnecessary risk from, for example infectious disease. We will therefore not accept a child in school at times where it would be detrimental to the health of that child or others.

King Harold Academy does not have to wait for a formal diagnosis before providing support to students. In cases where a student's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. These discussions will be led by Mrs N Reece and following these discussions an individual healthcare plan will be written in conjunction with the parent/carers by Miss N.Cover.

## Individual healthcare plans

Individual healthcare plans (IHCP) will help to ensure that King Harold Academy effectively supports students with medical conditions.

Individual healthcare plans will provide clarity about what needs to be done, when and by whom.

Individual healthcare plans will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed.

Individual healthcare plans are likely to be helpful where medical conditions are long-term and complex. However, not all children will require one. The school, healthcare professional and parent/carer should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached the Head of School is best placed to take a final view.

Individual healthcare plans will capture the key information and actions that are required to support the child effectively. The level of detail within the plan will depend on the complexity of the child's condition and the degree of support needed. This is important because different children with the same health condition may require very different support. Where a child has SEN but does not have an Educational Health Care Plan (EHCP), their special educational needs should be mentioned in their individual healthcare plan.

Individual healthcare plans (and their review) should be drawn up in partnership between the school, parents/carers and a relevant healthcare professional eg school, specialist or children's community nurse, who can best advise on the particular needs of the child.

Students should also be involved whenever appropriate. The aim should be to capture the steps which King Harold Academy should take to help manage their condition and overcome any potential barriers to getting the most from their education.

King Harold Academy will ensure that individual healthcare plans are reviewed at least annually or earlier if evidence is presented that the child's needs have changed. They will be developed and reviewed with the child's best interests in mind and ensure that King Harold Academy assesses and manages risks to the child's education, health and social wellbeing, and minimises disruption. Where a child is returning to school following a period of hospital education or alternative provision, we will work with relevant partners e.g. the local authority and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

Individual healthcare plans, although may be varied to suit the specific needs of each student, should all include the following information:

- The medical condition, its triggers, signs, symptoms and treatments;



- The student'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 eg crowded corridors, travel time between lessons;
- Specific support for the student's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions;
- The level of support needed (some children will be able to take responsibility for their own health needs) including in emergencies. If a child is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring;
- Who will provide this 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 school needs to be aware of the child's condition and the support required;
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate eg, risk assessment;
- Where confidentiality issues are raised by the parent/child, the designated individual to be entrusted with information about the child's condition; and
- 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 development of their individual healthcare plan.

## Terminology

Students' medical needs may be broadly summarised as being of two types:-

Short-term affecting their participation at school because they are on a course of medication

Long-term potentially limiting access to education and requiring ongoing support, medicines or care while at school to help them to manage their condition and keep them well, including monitoring and intervention in emergency circumstances.

Some children with medical conditions may be considered disabled. Where this is the case governing bodies must comply with their duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have a statement or Education, Health and Care Plan (EHCP). Where this is the case this policy should be read in conjunction with the 0-25 SEND Code of Practice and the school's SEND policy and the individual healthcare plan will become part of the EHCP. In those cases where students do not have SEND/EHCP, they will have an Individual Health Care

## Roles and responsibilities

Students with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other students will often be sensitive to the needs of those with medical conditions, and can, for example, alert staff to the deteriorating condition or emergency need of students with medical conditions.

Parents/carers should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents/carers are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, eg provide medicines and equipment and ensure they or another nominated adult are contactable at all times. Parents/carers should be proactive in informing the school of any changes to their



child's medical conditions, furnishing the school with the required medications, keeping a track of the medicines that the school has and replacing them when they go out of date, parents should liaise with the school if they deem the IHCP needs updating etc.

Local authorities are commissioners of school nurses for maintained schools and academies in Essex. Under Section 10 of the Children Act 2004, they have a duty to promote cooperation between relevant partners such as governing bodies of maintained schools, proprietors of academies, clinical commissioning groups and NHS England, with a view to improving the well-being of children with regard to their physical and mental health, and their education, training and recreation. Essex County Council will work with us to support students with medical conditions to attend full time. Where students would not receive a suitable education in a mainstream school because of their health needs, the local authority has a duty to make other arrangements.

The Ofsted inspection framework places a clear emphasis on meeting the needs of disabled children and students with SEN, and considering the quality of teaching and the progress made by these students. Inspectors are already briefed to consider the needs of students with chronic or long-term medical conditions alongside these groups and to report on how well their needs are being met. Schools are expected to have a policy dealing with medical needs and to be able to demonstrate that it is being implemented effectively. All staff who are required to provide support to students with medical conditions will be trained by healthcare professional qualified to do so. The training need will be identified by the healthcare professional during the development or review of the individual healthcare plan. We may choose to arrange training ourselves and will ensure that it remains up-to date. Training should be sufficient to ensure that staff are competent and have confidence in their ability to support students with medical conditions, and to fulfil the requirements set out in the individual healthcare plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures. Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans). A first aid certificate does not constitute appropriate training in supporting children with medical conditions. Healthcare professionals can provide confirmation of proficiency of staff in a medical procedure, or in providing medication. All staff will receive appropriate training so that they are aware of the school's policy for supporting students with medical conditions and their role in implementing the policy. The school will seek advice, when appropriate, from relevant healthcare professions about training needs, including preventative and emergency measures so that staff can recognise and act quickly when a problem occurs. The results of any staff training should be passed to the Heads PA in order for the School Central Record to be kept up to date. Hard copies of any certificates should be stored centrally by the Heads PA. The family of a child will often be key in providing relevant information to school staff about how their child's needs can be met, and parents will be asked for their views. They should provide specific advice, but it may not be appropriate for them to be the sole trainer. The child's role in managing their own medical needs If, after discussion with the parent/carer, it is agreed that the child is competent to manage his/her own medication and procedures, s/he will be encouraged to do so. This will be reflected in the individual healthcare plan. Wherever possible children will be allowed to carry their own medicines and relevant devices or should be able to access their medication for self-medication quickly and easily; these will be stored in the cupboard in the medical room to ensure that the safeguarding of the other children is not compromised. King Harold Academy does also recognise that children who take their medicines themselves and/or manage procedures may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, then relevant staff will support them as detailed in their healthcare plan. If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents will be informed so that alternative options can be considered.



## Managing and administering medicines on school premises

At King Harold Academy, the following procedures are to be followed:

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so;
- No child under 16 should be given prescription medicines without their parents written consent - except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality;
- The school will not administer non-prescription medicines eg. paracetamol/Piriton, to students.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours;
- King Harold Academy will only accept prescribed medicines, with written permission from parent/carer that are in-date, labelled, provided in the original container as dispensed by a 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 schools inside an insulin pen or a pump, rather than its original container;
- All medicines will be stored safely in the medical room. Children should know where their medicines are at all times and be able to access them immediately.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available state where and not locked away. Asthma inhalers should be marked with the child's name.
- During school trips staff will check to make sure that students have their medication prior to departing. Arrangements will differ dependent accordingly re. whether the trip is residential or a day trip and the nature of the trip.
- Templates will be used accordingly to record any medicine administered to a child;
- A child who had been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another child for use is an offence. Monitoring arrangements may be necessary. Otherwise we will keep all controlled drugs that have been prescribed for a student securely stored in a non-portable container and only named staff will have access. Controlled drugs should be easily accessible in an emergency. A record should be kept of any doses used and the amount of the controlled drug held in the school;
- Staff administering medicines should do so in accordance with the prescriber's instructions. King Harold Academy will keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted. Written records are kept of all medicines administered to children. These records offer protection to staff and children and provide evidence that agreed procedures have been followed;
- When no longer required, medicines should be safely disposed of. Sharps boxes should always be used for the disposal of needles and other sharps.

## Emergency procedures

Mr Tilbury, the Head of School, will ensure that arrangements are in place for dealing with emergencies for all school activities wherever they take place, including school trips within and outside the UK, as part of the general risk management process. Where a child has an individual healthcare plan, this should define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. If a child needs to be taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.



## During day trips, residential visits, and sporting activities

We will actively support students with medical condition to participate in day trips, residential visits and sporting activities by being flexible and making reasonable adjustments unless there is evidence from a clinician such as a GP that this is not possible/advisable. We will always conduct a risk assessment so that planning arrangements take account of any steps needed to ensure that students with medical conditions can be included safely. This will involve consultation with parents\carers and relevant healthcare professions and will be informed by Health and Safety Executive (HSE) guidance on school trips.

## Unacceptable practice

Although staff at King Harold Academy should use their discretion and judge each case on its merit with reference to the child's individual healthcare plan, 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\carers; or ignore medical evidence or opinion (although this may be challenged);

## Risk Assessment for students with injuries (broken limbs)

Any student that presents with a broken arm, leg etc. will need to have a full risk assessment prior to returning to the school. This is to ensure that as a school we are able to offer the support required; be it leaving lessons early or not using stairs etc. The risk assessment will be carried out by the Office Manager and/or Student Services Advisor along with the parent/carer and the child. If no risk assessment is carried out, the child will be sent home until this can be completed. It is therefore imperative that arrangements are made prior to coming to school. Office staff will be available from 08:00 until 16:00 to allow this to be completed.

## Liability and indemnity

The school's insurance policy covers the legal liability of the school to pay damages out of claims for negligence in respect of accidental injury arising out of the provision of first aid and associated activities provided by its staff.

## Complaints

Should parents / carers be unhappy with any aspect of their child's care at King Harold Academy, they must discuss their concerns with the school. This will be with the child's Head of Year in the first instance, with whom any issues should be addressed. If this does not resolve the problem or allay the concern, the problem should be brought to the attention of Mrs N. Reece, the SENCO, who will, where necessary, bring concerns to the attention of the Head of School. In the unlikely event of this not resolving the issue, the parent\carer must make a formal complaint using the King Harold Academy Complaints Procedure. This can be found in the policy section on the school website.

Reviewed By: Mr C Freeborn

Checked by: Mr I Tilbury

Review Date: September 2019

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Date to be next reviewed: July 2020