



Thorpepark Academy

Supporting pupils with medical needs Policy



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| 1 | Summary | Supporting pupils with medical needs policy | | | |
| 2 | Responsible person | Caroline Knight | | | |
| 3 | Accountable SLT member | Caroline Knight | | | |
| 4 | Applies to | <input checked="" type="checkbox"/> All staff <input type="checkbox"/> Support staff <input type="checkbox"/> Teaching staff | | | |
| 5 | Who has overseen development of this policy | Vikki Eggleton | | | |
| 6 | Who has been consulted and recommended policy for approval | Governors Staff | | | |
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Contents

| | |
|---|---|
| 1. Introduction..... | 3 |
| 2. Policy implementation..... | 4 |
| 3. Definition of medical conditions..... | 4 |
| 4. The role of staff..... | 4 |
| 5. Procedures to be followed when Notification is received that a pupil has a Medical Condition | 5 |
| 6. Individual health care plans (IHCP)..... | 5 |
| 7. The pupil's role in managing their own medical needs..... | 6 |
| 8. Managing medicines onsite..... | 6 |
| 9. Unacceptable practice..... | 7 |
| 10. Complaints..... | 8 |

Engaging, protecting and teaching 'our children' must be the starting point for all policies. This policy must be read in conjunction with our Safeguarding policy.

1. Introduction

The Children and Families Act 2014 (Section 100) places a duty on the governing bodies and Senior Leadership Team to make arrangements for supporting pupils with medical conditions at Thorpepark Academy. Pupils with special medical needs have the same right of admission to schools as other students and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of pupils have a common law duty to act in the place of the parent and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the school site. This could extend to a need to administer medicine. The prime responsibility for a student's health lies with the parent who is responsible for the student's medication and should supply the school with information.

This Policy will be reviewed regularly and will be readily accessible to parents/carers and staff through our website.



1. Policy Implementation

All schools and academies are expected by Ofsted to have a policy dealing with medical needs and to be able to demonstrate that this is implemented effectively. The overall responsibility for the successful administering and implementation of this Policy is given to the Head of School, who will also be responsible for ensuring that sufficient staff are suitably trained and will ensure cover arrangements in case of staff absences or staff turnover to ensure that someone is always available and onsite. The Senior Leadership team will be responsible for the monitoring of individual healthcare plans, risk assessments for in and out of school activities. A green folder is available in all classrooms that contains vital medical information and plans. This is made available to all teachers and support staff in the classroom.

All staff will be expected to show a commitment and awareness of student's medical conditions. All new members of staff will be inducted into the arrangements and guidelines set out in this Policy.

2. Definitions of Medical Conditions:

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

- Short-term affecting their participation in Academy activities because they are on a course of medication.
- Long-term potentially limiting their access to education and requiring extra care and support (deemed special medical needs).

3. The Role of Staff

Some students with medical conditions may be 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 and may have an Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For students with SEN, this guidance should be read in conjunction with the SEN Code of Practice and the school's SEN Policy.

If a student is deemed to have a long-term medical condition, the school will ensure that arrangements are in place to support them. In doing so, we will ensure that such students can access and enjoy the same opportunities at school as any other student. The school staff, health professionals, parents/carers and other support services will work together to ensure that students with medical conditions receive a full education, unless this would not be in their best interests because of their health needs. In some cases this will require flexibility and involve, for example, programmes of study that rely on home tuition or part time attendance at the Medical PRU classroom. Consideration will also be given to how students will be reintegrated back into school after long periods of absence.

Staff must not give prescription medicines or undertake health care procedures without appropriate training from a professional (updated to reflect any Individual Health Care Plans [IHCP]). We recognise that a first-aid certificate does not constitute appropriate



training in supporting students with medical conditions. Healthcare professionals, including the school nurse, who we have regular access to, will provide training and subsequent confirmation of the proficiency of staff in a medical procedure, or in providing medication.

4. Procedures to be followed when Notification is received that a pupil has a Medical Condition

We will ensure that the correct procedures will be followed whenever we are notified that a pupil has a medical condition. The procedures will also be in place to cover any transitional arrangements between schools, the process to be followed upon reintegration or when pupils' needs change and arrangements for any staff training or support. At the admission meeting of a student with a medical condition, parents/carers will complete the IHCP and arrangements will be in place in time for when the child/young person starts at one of our schools. In other cases, such as a new diagnosis or new admission mid-term, we will make every effort to ensure that arrangements are put in place within two weeks.

5. Individual Health Care Plans

Where a student has an IHCP, this should clearly 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 student (regardless of whether they have an IHCP or not) needs to be taken to hospital, staff should stay with the student until the parent/carer arrives, or accompany a student taken to hospital by ambulance.

Individual Health Care Plans will be written and reviewed by the identified Health Care professional or class teacher, but it will be the duty of all members of staff supporting the individual students to ensure that the Plan is followed and updated. The class teacher will be responsible for the student's development and ensuring that they and their medical conditions are supported at school.

Individual Health Care Plans will be easily accessible to all who need to refer to them, while preserving confidentiality. Plans will capture the key information and actions that are required to support the student effectively. The level of detail within plans will depend on the complexity of the student's condition and the degree of support needed. This is important because different students with the same health condition may require very different support.

Where a student has SEN but does not have a statement or EHC plan, their SEN should be mentioned in their Individual Health Care Plan. The IHCP must be completed by the Lead Professional (usually the SENCO or class teacher) with support from parents/carers, and a relevant healthcare professional where relevant, e.g. school nurse, who can best advise on the particular needs of the student.

The IHCP should be reviewed at least annually or earlier if evidence is presented that the student's needs have changed. They will be developed and reviewed with the student's best interests in mind and ensure that the school assesses and manages risks to the student's education, health and social wellbeing and minimises disruption. Where the student has a SEN identified in a statement or EHC plan, the IHCP should be linked to or become part of that statement or EHC plan.



The IHCP template includes:-

- 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/noisy conditions
- specific support for the pupil's educational, social and emotional needs – for example, how absences will be managed, requirements for extra time to complete tests, use of rest periods or additional support in catching up with lessons, counselling sessions
- the level of support needed, (some young people may be able to take responsibility for their own health needs), including in emergencies. If a student 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 student'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 student's condition and the support required;
- arrangements for written permission from parents/carers and for medication to be administered by a member of staff, or self-administered by the pupil during school hours
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the student can participate, e.g. risk assessments;
- where confidentiality issues are raised by the parents/carers or student, the designated individuals to be entrusted with information about the student's condition;
- what to do in an emergency, including whom to contact and contingency arrangements.

6. The pupil's Role in Managing Their Own Medical Needs

If a student refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but instead follow the procedure agreed in the IHCP. Parents/carers should be informed, outside of the review, so that alternative options can be considered. If the student can manage their own medical needs this should be encouraged following a discussion with parents and if appropriate for age and if competent.

7. Managing medicines onsite

The following are the procedures to be followed for managing medicines:-

- Medicines should only be administered when it would be detrimental to a student's health or school attendance not to do so.



- No student under 16 should be given prescription or non-prescription medicines without their Parents/carers written consent.
- We will administer non-prescription medicines to a pupil, such as paracetamol if a parent/carer wished a pupil to have the medicine administered during the school day. The school has the right to refuse to give non-prescribed medicines.
- The school will only accept prescribed medicines 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 still be in date, but will generally be available inside an insulin pen or a pump, rather than in its original container.
- Students should only bring in sufficient medicine for each day they attend school. At the end of their school week the empty container should be given back to the student to take home.
- All medicines will be stored safely in the office in a locked cabinet or fridge in the staff room if necessary.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to staff; these will be stored in the classroom cupboards where both class teacher and support staff know how to access them. If a student requires an asthma inhaler it is crucial that there is an inhaler in the school at all times.
- During school trips, the first aid trained member of staff be responsible for ensuring all medical devices and medicines required are available.
- Staff administering medicines should do so in accordance with the prescriber's instructions. The school will keep a record of all medicines administered to individual students, stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered should be noted on the IHCP. These records offer protection to staff and students and provide evidence that agreed procedures have been followed.
- Sharps boxes should always be used for the disposal of needles and other sharps.

8. Unacceptable Practice

It is not acceptable practice for staff to:-

- prevent students from easily accessing their inhalers and/or 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 student or their parents/carers; or ignore medical evidence or opinion, (although this may be challenged)
- send students with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHCPs
- if the student becomes ill, send them to the office unaccompanied or with someone unsuitable
- penalise students 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
- prevent students from participating, or create unnecessary barriers to students participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany the student

9. Complaints

Should parents/carers be dissatisfied with the support provided they should discuss their concerns directly with the Head. If for whatever reason this does not resolve the issue, they may make a formal written complaint via the complaints procedure outlined in the school's and Complaints Policy.

