Southfields Academy: Policy for Supporting Students at the Academy with Medical Conditions

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1. ACADEMY CONTEXT

The staff at Southfields Academy are committed to providing students with a high quality education whatever their health need, disability or individual circumstances. We believe that all students should have access to as much education as their particular medical condition allows, so that they maintain the momentum of their learning whether they are attending the academy or going through periods of treatment and recuperation. We promote inclusion and will make all reasonable adjustments to ensure that students and young people with a disability, health need or SEND enjoy equitable access to education.

2. PRINCIPLES

This policy and any ensuing procedures and practice are based on the following principles:

- All students and young people are entitled to a high quality education;
- Disruption to the education of students with health needs should be minimised;
- If students can be in the academy they should be attending. Student’s diverse personal, social and educational needs are most often best met in an educational setting. Our academy will make reasonable adjustments where necessary to enable all students to attend the academy;
- Effective partnership working and collaboration between academies, families, education services, health services and all agencies involved with a student or young person are essential to achieving the best outcomes for the student;
- Students with health needs often have additional social and emotional needs. Attending to these additional needs is an integral element in the care and support that the student requires and the Education, Health and Care Plan (EHCP) should address these aspects of need when one is in place or is being sought.
- Students and young people with health needs are treated as individuals and are offered the level and type of support that is most appropriate for their circumstances; staff should strive to be responsive to the needs of individuals.

3. POLICY STATEMENT

Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained academies to make arrangements for supporting students at their academy with medical conditions. For further information, see statutory guidance:

The Board of Trustees will ensure that all students with medical conditions in our academy are supported to enable them to have full access to all aspects of the education provided and the same opportunities as other students, including access to academy trips and physical education.

All students with medical conditions, in terms of either physical or mental health, will be properly supported so that they can play a full and active role at the academy, remain healthy and achieve their academic potential.

The academy will consult and work in partnership with health and social care professionals, students and parents to ensure the needs of students with medical conditions are effectively met.

The academy will ensure that there is a focus on the needs of each individual student and how their medical condition impacts on their academy life.

The academy will ensure staff are provided with appropriate training to provide whatever support students require, including training in what to do in an emergency.

All staff have a clear understanding that medical conditions should not be a barrier to learning and that they have a duty of care to students. All staff have a responsibility to ensure that all students at this academy have equal access to the opportunities that will enable them to flourish and achieve to the best of their ability. In addition, designated staff have additional responsibilities as well as additional support and training needs.

4. DEFINITION OF HEALTH NEEDS

For the purpose of this policy, students with health needs may be:

- students with chronic or short term health conditions or a disability involving specific access requirements, treatments, support or forms of supervision during the course of the academy day; or
- sick students, including those who are physically ill or injured or are recovering from medical interventions; or
- students with mental or emotional health problems.

This policy does not cover self-limiting infectious diseases of childhood, e.g. measles.

Some students with medical conditions may have a disability. A person has a disability if he or she has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities. 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 an EHCP which brings together health and social care needs, as well as their special educational provision.
5. **DESIGNATED ACADEMY MEDICAL NEEDS OFFICER / Deputy Headteacher - Senior DSL**

The member of staff responsible for ensuring that students with health needs have proper access to education is the Deputy Headteacher – Senior DSL. The designated member of staff will be the person with whom parents/carers will discuss particular arrangements to be made in connection with the medical needs of a student. It will be their responsibility to pass on information to the relevant members of staff within the academy. This person will liaise with other agencies and professionals, as well as parents/carers, to ensure good communication and effective sharing of information. This will enhance students’ inclusion in the life of the academy and enable optimum opportunities for educational progress and achievement.

6. **INTRODUCTION**

Parents/carers of students with medical conditions are often concerned that their child’s health will deteriorate or not be effectively managed when they attend school. This is because students with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that student’s health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. It is therefore important that parents feel confident that the school will provide effective support for their child’s medical condition and that the students feel safe.

In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Students may be self-conscious about their condition and some may be bullied or develop emotional disorders such as anxiety or depression around their medical condition.

Long-term absences due to health problems affect student’s educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. Reintegration back into the academy should be properly supported so that students with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Short-term and frequent absences, including those for appointments connected with a student’s medical condition (which can often be lengthy), also need to be effectively managed and appropriate support put in place to limit the impact on the student’s educational attainment and emotional and general wellbeing.

7. **STAFF AWARENESS, TRAINING AND SUPPORT**

This policy will be publicised to all staff to raise awareness at a whole academy level of the importance of supporting students with medical conditions, and to make all staff aware of their role in implementing this policy.

All staff understand their duty of care to students at all times and in the event of an emergency.
All staff supporting students with medical needs may need relevant training. Training provided will be planned in conjunction with the academy lead and relevant external medical professionals. Training for staff will be at a level which ensures staff members are competent and have confidence in their ability to support students effectively and to fulfill the requirements set out in their individual healthcare plans.

Staff will not give prescription medicines or undertake health care procedures. A first-aid certificate does not constitute appropriate training in supporting students with medical conditions.

Training will be given to appropriate staff and will be refreshed on an annual basis or as required. Staff will receive a certificate detailing the training they have received and a record is kept by the academy detailing training provided and who attended. The record is reviewed annually to ensure staff are suitably trained. As a minimum, there should be sufficient numbers of school staff who have received training in the following:

- Epipen / severe allergic reaction
- Headlice
- Epilepsy
- Diabetic coma
- Asthma management

This training can be offered by the academy nursing service.

If there is a need for a student to be taken to hospital the parent will be informed, a member of staff (wherever possible someone familiar to the student) may accompany the student and stay with them until a parent or responsible family member arrives. The academy will ensure a copy of the student’s healthcare plan is taken to the hospital with the student wherever possible.

All staff accompanying students on off-site visits will be made aware of students with medical conditions involved in the trip and any relevant information necessary.

8. **NOTIFICATION THAT A STUDENT HAS A MEDICAL CONDITION, PROCESS FOR ENSURING SUPPORT IS PUT IN PLACE AND INDIVIDUAL HEALTHCARE PLANS**

Notification may come through an Education, Health and Care (EHC) plan, from a medical practitioner or from the parent of the student.

Information about medical needs or SEND is requested on admission to the academy. Parents are asked to keep the academy informed of any changes to their child’s condition or treatment. Whenever possible, meetings with the parents and other professionals are held before the student attends the academy to ensure a smooth transition into the class. At this meeting parents can seek advice on the health of their child.
When a student is starting at our academy at the usual transition points, and has an identified medical condition, we will ensure that arrangements are in place in time for the start of the relevant academy term. In other cases, such as a new diagnosis or students moving mid-term, we would expect to have arrangements in place within two weeks of notification or admission.

Any medical concerns the academy has about a student will be raised with the parents/carers and discussed with the health professionals. Most parents will wish to deal with medical matters themselves through their GP.

9. INDIVIDUAL HEALTHCARE PLANS

The usual process for supporting a student with medical needs will be by establishing an Individual Healthcare plan. Individual Healthcare plans help to ensure that students with medical needs are effectively supported. The plan provides clarity about what needs to be done, when and by whom. The plan is helpful in the majority of cases and especially for long-term and complex medical conditions, although not all students will require one. The level of detail within the Individual Healthcare plan will depend on the complexity of the student’s condition and the degree of support needed. The academy recognizes that different students with the same health condition may require very different support.

Not all students with medical needs will require an individual healthcare plan. The academy, healthcare professional and parent should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the headteacher will take a final view.

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. Plans are also likely to be needed in cases where medical conditions are long-term and complex. Plans provide clarity about what needs to be done, when and by whom. A flow chart setting out the process for identifying and agreeing the support a student needs is at Appendix A.

Individual healthcare plans should 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. A template for individual healthcare plans is provided at Appendix B.

Individual healthcare plans, 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 to the student. Plans will be drawn up in partnership between the academy, parents, and a relevant healthcare professional, e.g. academy, specialist or student’s community nurse, who can best advise on the particular needs of the student. Students will also be involved whenever appropriate.

**Individual Healthcare Plans will include the following information:**

- The medical condition, its triggers, signs, symptoms and treatments;
• The student’s resulting needs, including medication (its side-effects and its storage) and other treatments, dose, time, facilities, equipment, testing, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons;

• Specific support for the student’s educational, social and emotional needs, including how absences will be managed, support to catch up with work missed, additional time for exams, counselling etc.;

• Who will provide this support, their training needs and cover arrangements in their absence;

• Who in the academy needs to be aware of the student’s condition and the support required;

• Written permission for medication to be administered by a member of staff, or self-administered by individual students 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 student can participate e.g. risk assessments;

• Where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student’s condition; and

• What to do in an emergency, including who to contact, and contingency arrangements.

Partners should agree who will take the lead in writing the plan, but responsibility for ensuring that it is finalised and implemented rests with the academy. Plans are reviewed at least annually, or earlier if evidence is presented that the student’s needs have changed. Plans are developed with the student’s best interests in mind and ensure that the academy assesses and manages risks to the student’s education, health and social well-being and minimises disruption.

Responsibility for the wellbeing of the student will not be left to one person; a team of people will be identified to ensure that the student’s health, safety and emotional wellbeing are supported. Close liaison between the academy and the relevant healthcare providers will be developed to ensure that the needs of the student are fully catered for and reasonable adjustments made to ensure inclusion.

Where a student has SEND but does not have an EHC, their special educational needs will be mentioned in their individual healthcare plan. Where the student has a special educational need identified in an EHC plan, the individual healthcare plan will be linked to or become part of that EHC plan.

Where a student is returning to the academy following a period of hospital education or alternative provision (including home tuition), the academy will work with the Wandsworth Hospital and Home Tuition Service or appropriate hospital school to ensure that the individual healthcare plan identifies the support the student will need to reintegrate effectively.

Individual healthcare plans are used by the academy to ensure that students with medical conditions are effectively supported to access the curriculum and wider academy life. They are developed in
the context of assessing and managing risks to the student’s education, health and social well-being and to minimise time out of academy / learning.

10. HOME TUITION

When students are too ill to attend, the academy will establish, where possible, the amount of time a student may be absent and identify ways in which the academy can support the student in the short term (e.g. providing work to be done at home in the first instance). Where a student is absent from the academy for over 15 days in an academic year due to illness, the academy will review the plan, taking into account information received from health practitioners involved in their care, and a referral made (if appropriate) to the LA medical provision. For Wandsworth resident students, this is the Home and Hospital Tuition Service; students resident in other boroughs will be referred to the equivalent service in their LA.

Where students have long-term health needs, the pattern of illness and absence from the academy can be unpredictable, so the most appropriate form of support for these students should be discussed and agreed between the academy, the family, Home Tuition Service and the relevant medical professionals. A flowchart of support offered for students with health needs is provided at Appendix C.

11. PREGNANCY

Young women of compulsory school age who are pregnant are entitled to remain at the academy whenever and for as long as possible. The academy will make reasonable adjustments to enable young pregnant women to remain in school. When there is medical evidence that continuing to attend academy would be contrary to the young woman’s or the unborn child’s wellbeing, the academy will make a referral for provision of home tuition. Following the birth of the baby, young mothers may benefit from home tuition for a temporary period before they return to academy.

12. RECORD KEEPING, HEALTHCARE PLAN REGISTER AND REVIEWS

The Trustees will ensure that robust records are kept relating to students with medical conditions: including:

- Their Individual Healthcare Plans, key staff involved and the review processes of administration of medication
- Training
- Emergency procedures
- Parental permission forms

Parents are asked if their child has any health conditions or health issues and if so these should be recorded appropriately when the student is admitted to the academy. Parents are expected to update the academy if their child’s medical needs change.
Individual healthcare plans are used to create a centralised register of students with medical needs. An identified member of staff has responsibility for maintaining and updating the register, and will contact parents if any further information or clarification is required.

The healthcare register will be securely kept, all staff will respect student confidentiality and permission will be sought from parents and students before any medical information is shared with any other party. The academy seeks permission from parents to allow the healthcare plan to be sent ahead to emergency care staff, should an emergency happen during academy hours or at an academy activity outside the normal academy day. This permission is included in the healthcare plan.

Apart from the central copy, specified members of staff (agreed by the student and parents) securely hold copies of students’ Healthcare Plans. These copies are updated at the same time as the central copy.

All members of staff who work with groups of students have access to the Healthcare Plans of students in their care.

When a member of staff is new to a student group, for example due to staff absence, the academy makes sure that they are made aware of (and have access to) the Healthcare Plans of students in their care.

All individual healthcare plans will be reviewed annually as a minimum.

Staff at the academy will also use opportunities such as teacher-parent consultations and home academy diaries to ensure information held is accurate and updated where needed.

Parents and students will always be provided with a copy of the student’s current plan.

An anonymised overview report on the support for students with medical conditions will be presented to trustees annually at the ECM Governors summer committee meeting. The report will be prepared by the named person and will summarise key issues emerging from the plans and processes in place including issues re access to the curriculum.

13. MEDICINES IN ACADEMY

13.1 Self-management by students
Wherever possible, students are allowed to carry their own medicines and relevant devices or are able to access their medicines for self-medication quickly and easily. Students who can take their medicines themselves or manage procedures may require an appropriate level of supervision.

If a student refuses to take medicine or carry out a necessary procedure, staff will not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents will then be informed so that alternative options can be considered.
13.2 Consent to administer medicines, storage and administration of medication at academy

Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside academy hours. Medicines will only be administered at the academy when it would be detrimental to a student’s health or academy attendance not to do so.

If a student requires regular prescribed or non-prescribed medication at the academy, parents are asked to provide consent on their child’s Healthcare Plan giving the student permission to administer medication on a regular/daily basis, if required. A separate form is used with parents for students taking short courses of medication.

The academy understands the importance of medication being taken as prescribed. No student under 16 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 the student without the knowledge of the parents. In such cases, every effort will be made to encourage the student or young person to involve their parents while respecting their right to confidentiality.

The academy only accepts 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.

All medicines are stored safely. Students are informed of where their medicines are at all times and are able to access them immediately. Where relevant, they know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens are always readily available to students and not locked away.

A student under 16 will never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, will never be administered without first checking maximum dosages and when the previous dose was taken. Parents will be informed.

A student who has been prescribed a controlled drug may legally have it in their possession if they are competent to do so, but passing it to another student for use is an offence. The academy will keep controlled drugs that have been prescribed for a student securely stored in a non-portable container to which only named staff have access. Controlled drugs will be easily accessible in an emergency. A record is kept of any doses used and the amount of the controlled drug held in academy.

Staff administering medicines will do so in accordance with the prescriber’s instructions. The academy keeps 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 at academy should be noted. Parents will be informed when a student has been unwell and /or medication has been required / administered.

Specific arrangements will be put in place for academy trips where a student requires medication.
Parents of students at this academy understand that if their child’s medication changes or is discontinued, or the dose or administration method changes, that they should notify the academy immediately.

If a student refuses their medication, this will be recorded and the parent notified. If necessary advice will be sought from the relevant health professional.

If a student misuses medication, either their own or another student’s, their parents are informed as soon as possible. These students are subject to the academy’s usual disciplinary procedures.

There is an identified member of staff who ensures the correct storage of medication at academy. The identified member of staff will check for expiry dates three times a year. Medication will not be stored at academy over the summer holiday period.

It is the parent’s responsibility to ensure new and in date medication comes into academy on the first day of the new academic year, and whenever required.

All academy staff have been informed through training that they are required, under common law duty of care, to act like any reasonably prudent parent in an emergency situation. ‘Emergency’ is defined as a potentially life-threatening situation. This may include taking action such as administering medication. It is crucial that accurate information about any action taken is passed to acute / ambulance services on arrival.

14. RESIDENTIAL VISITS, ACADEMY TRIPS AND SPORTING ACTIVITIES

Students with medical conditions are actively supported to participate in academy trips and visits, or in sporting activities. In planning such activities, teachers will undertake the appropriate risk assessment and will take into account how a student’s medical condition might impact on their participation. Arrangements for the inclusion of students in such activities with any required adjustments will be made by the academy unless evidence from a clinician such as a GP states that this is not in the student’s best interests.

Parents are sent a residential visit / academy trips form to be completed and returned to academy shortly before their child leaves for an overnight or extended day visit. This form requests up-to-date information about the student’s current condition and their overall health. This provides essential and up-to-date information to relevant staff and academy supervisors to help the student manage their condition while they are away. This includes information about medication not normally taken during academy hours.

All residential visit forms are taken by the relevant staff member on visits and for all out-of-academy
hours activities where medication is required.

All parents of students with a medical condition attending an academy trip or overnight visit are asked for consent, giving staff permission to administer medication at night or in the morning if required.

If the form includes current issues of medication - a discussion is held with the parent about how the medical condition will be managed whilst on the trip.

15. AN INCLUSIVE ACADEMY ENVIRONMENT WHICH IS FAVOURABLE TO STUDENTS WITH MEDICAL CONDITIONS, INCLUDING THE PHYSICAL ENVIRONMENT, AS WELL AS SOCIAL, SPORTING AND EDUCATIONAL ACTIVITIES

The academy is committed to providing a physical environment that is accessible to students with medical conditions and this includes academy trips and journeys.

The academy ensures the needs of students with medical conditions are adequately considered to ensure their involvement in structured and unstructured social activities, including during breaks and before and after academy.

The academy ensures the needs of students with medical conditions are adequately considered to ensure they have full access to extended academy activities such as academy discos, breakfast club, academy productions, extra-curricular clubs and residential visits.

All staff at this academy are aware of the potential social problems that students with medical conditions may experience. Staff use this knowledge to try to prevent and deal with problems in accordance with the academy’s anti-bullying and behaviour policies.

Staff use opportunities such as personal, social and health education (PSHE) lessons to raise awareness of medical conditions amongst students and to help create a positive social environment.

The academy understands the importance of all students taking part in sports, games and activities. The academy ensures all classroom teachers, PE teachers and sports coaches make appropriate adjustments to sports, games and other activities to make physical activity accessible to all students.

Teachers and sports coaches are aware of students in their care who have been advised to avoid or to take special precautions with particular activities, and all PE teachers, classroom teachers and academy sports coaches are aware of the potential triggers for students’ medical conditions when exercising and how to minimize these triggers.

The academy ensures all students have the appropriate medication or food with them during
physical activity and that students take them when needed.

The academy ensures all students with medical conditions are actively encouraged to take part in out-of-academy clubs and team sports.

This academy ensures that students with medical conditions can participate fully in all aspects of the curriculum and ensures that appropriate adjustments and extra support are provided.

If a student is missing a lot of time at the academy, they have limited concentration or they are frequently tired, all teachers at this academy understand that this may be due to their medical condition.

Teachers at this academy are aware of the potential for students with medical conditions to have special educational needs (SEND). Students with medical conditions who are finding it difficult to keep up with their studies are referred to the SEND coordinator. The academy’s SEND coordinator consults the student, parents and the student’s healthcare professional to ensure the effect of the student’s condition on their academy work is properly considered.

Risk assessments are carried out prior to any out-of-academy visit and medical conditions are considered during this process. Factors we consider include: how all students will be able to access the activities proposed, how routine and emergency medication will be stored and administered, and where help can be obtained in an emergency.

The academy understands that there may be additional medication, equipment or other factors to consider when planning residential visits.

Risk assessments are carried out before students start any work experience or off-site educational placement. The academy accepts the responsibility for ensuring that the placement is suitable, including travel to and from the venue for the student. Permission is sought from the student and their parents before any medical information is shared with an employer or other education provider.

16. HEALTH AND SAFETY, INCLUDING COMMON TRIGGERS THAT CAN MAKE MEDICAL CONDITIONS WORSE OR CAN BRING ON AN EMERGENCY

The academy has a list of common triggers for the common medical conditions at this academy. The academy has written a trigger reduction schedule and is actively working towards reducing or eliminating these health and safety risks. The academy is committed to reducing the likelihood of medical emergencies by identifying and reducing triggers both at academy and on out-of-academy visits.

Academy staff have been given training on medical conditions. This training includes detailed information on how to avoid and reduce exposure to common triggers for common medical conditions.

Healthcare Plans are used to identify individual students who are sensitive to particular triggers. The academy has a detailed action plan to ensure these individual students remain safe during all lessons.
and activities throughout the academy day.

Full health and safety risk assessments are carried out on all out-of-academy activities before they are approved, including work experience placements and residential visits, taking into account the needs of students with medical conditions.

All medical emergencies and significant incidents are reviewed to ascertain whether and/or how they could have been avoided. Appropriate changes to policy and procedures are implemented after each review.

17. ROLES AND RESPONSIBILITIES

This academy works in partnership with all interested and relevant parties including the academy’s Board of Trustees, all academy staff, parents, employers, community healthcare professionals and students to ensure the policy is planned, implemented and maintained successfully.

17.1 The Board of Trustees

The Board of Trustees is responsible for making arrangements to support students with medical conditions in the academy, including ensuring that this policy is developed and implemented. They will ensure that all students with medical conditions at this academy are supported to enable the fullest participation possible in all aspects of academy life. The Trustees will ensure that appropriate staff have received suitable training and are competent before they take on responsibility to support students with medical conditions. They will also ensure that any members of the academy staff who provide support to students with medical conditions are able to access information and other teaching support materials as needed.

Trustees will receive annual updates as to the effective working of the policy, will review this carefully and ensure implementation of any changes or recommendations arising from the review.

17.2 The Principal/Headteacher and the Lead for students with medical conditions have lead responsibility for the implementation and review of the policy and will ensure that:

- the academy is inclusive and welcoming;
- the policy is in line with national guidance and expectations, is put into action and maintained;
- liaise with other interested and relevant parties (including parents and students, academy health, community and acute health services, the local authority services etc.);
- ensure information held by the academy is accurate and up to date and good communication and information sharing systems are in place;
- ensure student confidentiality is respected;
- assess the training and development needs of staff and arrange for them to be met;
- ensure all staff are aware of the policy, including supply teachers and new staff;
- delegate tasks appropriately to named members of staff;
- monitor and review the policy at least once a year, with input from students, parents, staff and external stakeholders and update it as and when necessary; and
• report back to trustees and to all key stakeholders about the implementation of the medical conditions policy.

17.3 All staff at the academy have a responsibility to:

• be aware of and understand the academy’s medical conditions policy;
• be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency;
• know which students in their care have a medical condition and be familiar with the content of the student’s Healthcare Plan;
• allow all students to have immediate access to their emergency medication when necessary;
• maintain effective communication with parents including informing them if their child has been unwell at academy;
• ensure students who carry their medication with them have it when they go on an academy visit;
• be aware of students with medical conditions who may be experiencing bullying or need extra social support;
• ensure all students with medical conditions are not excluded unnecessarily from activities they wish to take part in, and understand the impact a medical condition may have on a student and make any reasonable adjustments to accommodate this (e.g. that students have the appropriate medication or food with them during any exercise and are allowed to take it when needed, and are not forced to take part in an activity if they are unwell);
• be aware that medical conditions can affect a student’s learning and provide extra help when students need it, including help to catch up with work when the student has been unwell; and
• use opportunities such as PSHE and other areas of the curriculum to raise student awareness about medical conditions.

17.4 Specific responsibilities of key staff:

• The Deputy Headteacher – Senior DSL for the academy will keep an overview of any students whose medical needs impact on their learning, will advise staff working directly with them and ensure appropriate strategies are put in place to support them.
• Staff with first aid training will give immediate help to casualties with common injuries or illnesses and those arising from specific hazards within the academy and when necessary ensure that an ambulance or other professional medical help is called.
• Designated lead for medication will ensure all medication is correctly stored and labelled, regularly reviewed, in date and that parents provide new medication as needed.

17.5 Academy nurse / academy health team will be involved in the healthcare planning for students with medical needs as appropriate. This may include:
• informing the academy of students in need of a health care plan;
• initiating healthcare plans when relevant;
• contributing to healthcare plans and their review;
• ensuring parental consent is obtained and recorded;
• help in providing regular training for academy staff in managing the most common medical conditions at academy;
• advising on training on less common conditions, including providing information about where the academy can access other specialist training;
• collating relevant health information to support student, family and academy to inform the healthcare plan; and
• supporting students and parents as appropriate.

17.6 **Individual doctors and specialist healthcare professionals** caring for students who attend this academy have a responsibility to:

• complete the student’s Healthcare Plans provided by parents;
• where possible, and without compromising the best interests of the student, try to prescribe medication that can be taken outside of academy hours;
• offer every student or young person (and their parents) a written care/self-management plan to ensure students and young people know how to self-manage their condition;
• ensure the student or young person knows how to take their medication effectively;
• ensure students and young people have regular reviews of their condition and their medication;
• provide the academy with information and advice regarding individual students and young people with medical conditions (with the consent of the student and their parents); and
• understand and provide input in to the academy’s medical conditions policy.

17.7 **Acute health care service personnel** have a responsibility to:

• have an agreed system for receiving information held by the academy about students and young people’s medical conditions, to ensure best possible care
• understand and provide input in to the academy’s medical conditions policy

17.8 **The students at this academy** have a responsibility to:

• treat other students with and without a medical condition equally;
• tell their parents, teacher or nearest staff member when they are not feeling well;
• let a member of staff know if another student is feeling unwell;
• let any student take their medication when they need it, and ensure a member of staff is called;
• treat all medication with respect;
• know how to gain access to their medication in an emergency;
if mature and old enough, know how to take their own medication and to take it when they need it; and
ensure a member of staff is called in an emergency situation.

17.9 The parents/carer of a student at this academy have a responsibility to:

- tell the academy if their child has a medical condition;
- ensure the academy has a complete and up-to-date Healthcare Plan for their child;
- inform the academy about the medication their child requires during academy hours;
- inform the academy of any medication their child requires while taking part in visits, outings or field trips and other out-of-academy activities;
- tell the academy about any changes to their child’s medication, what they take, when, and how much;
- inform the academy of any changes to their child’s condition;
- ensure their child’s medication and medical devices are labelled with their child’s full name;
- provide the academy with appropriate spare medication labelled with their child’s name;
- ensure that their child’s medication is within expiry dates;
- keep their child at home if they are not well enough to attend academy;
- ensure their child catches up on any academy work they have missed;
- ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional; and
- ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition.

18. UNACCEPTABLE PRACTICES

The DfE guidance 2015 lists the following unacceptable practices. This policy is designed to ensure that these issues are avoided and that there is an ongoing dialogue between academy, students and parents so that all students and parents feel confident in the processes in place in the academy.

"Unacceptable practice”:

- to prevent students from easily accessing their inhalers and medication and administering their medication when and where necessary;
- to assume that every student with the same condition requires the same treatment;
- to ignore the views of the student or their parents; or ignore medical evidence or opinion, (although this may be challenged);
- to send students with medical conditions home frequently or prevent them from staying for normal academy activities, including lunch, unless this is specified in their individual healthcare plans;
- if the student becomes ill, to send them to the academy office or medical room unaccompanied or with someone unsuitable;
• to penalise students for their attendance record if their absences are related to their medical condition e.g. hospital appointments;
• to prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively;
• to require parents, or otherwise make them feel obliged, to attend the 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; and
• to prevent students from participating, or create unnecessary barriers to students participating in any aspect of academy life, including academy trips, e.g. by requiring parents to accompany the student. “

19. LIABILITY AND INDEMNITY

The academy’s insurance arrangements are sufficient and appropriate to cover staff providing support to students with medical conditions. Staff providing such support are entitled to view the academy’s insurance policies.

20. COMPLAINTS

If parents or students are dissatisfied with the support provided they should discuss their concerns directly with the academy in the first instance. If for whatever reason this does not resolve the issue, they may make a formal complaint via the academy’s complaints procedure.

21. COMMUNICATION PLAN TO ENSURE FULL IMPLEMENTATION OF THIS POLICY

21.1 Students are informed and regularly reminded about the medical conditions policy:

• through the academy’s student representative body;
• in the academy newsletter at several intervals in the academy year; and
• in personal, social and health education (PSHE) classes.

21.2 Parents are informed and regularly reminded about the medical conditions policy:

• by including the policy statement in the academy’s prospectus and signposting access to the policy at the start of the academy year when communication is sent out about Healthcare Plans;
• in the academy newsletter at several intervals in the academy year; and
• when their child is enrolled as a new student via the academy’s website, where it is available all year round.

21.3 Academy staff are informed and regularly reminded about the medical conditions policy:
• at scheduled medical conditions training; and
• through the key principles of the policy being displayed in several prominent staff areas at this academy.

21.4 Relevant local health staff are informed and regularly reminded about the academy’s medical conditions policy:
• by letter accompanied with a printed copy of the policy at the start of the academy year;
• CCG and academy / community nurse; and
• through communication about results of the monitoring and evaluation of the policy.

21.5 Trustees agree the policy and regularly review it (at least every 2 years).

21.6 All other external stakeholders are informed and reminded about the academy’s medical conditions policy.