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MELIORA

ACADEMY TRUST
Better Futures For All

POLICY FOR SUPPORTING PUPILS WITH MEDICAL CONDITIONS AND THOSE THAT ARE TOO ILL TO ATTEND SCHOOL

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Contents

1. Purpose.....	3
2. Roles & Responsibilities	3
2.1 The Governing Board.....	3
2.2 The Headteacher	3
2.3 Parents	4
2.4 Pupils	4
2.5 School Staff.....	4
2.6 Norfolk HCP team.....	4
2.7 Other Healthcare Professionals.....	5
3. Staff Training & Support	5
4. Managing Medicine on School Premises.....	5
4.1 Controlled Drugs.....	6
5. Record Keeping.....	7
6. Pregnant pupils and school age parents.....	7
7. Individual Healthcare Plans.....	7
8. Emergency Procedures	8
9. Equal Opportunities.....	9
10. Unacceptable Practice:.....	9
11. Attendance.....	10
12. Liability & Indemnity	10
13. Complaints.....	10

Appendices (P10, 11 and 12): -

Appendix 1: What if a child is too ill to attend the academy?

Appendix 2: Moving & Handling of Pupils Process

Appendix 3: Moving & Handling of Pupils Flowchart

1. Purpose

The purpose of the Policy for Supporting Pupils at School with Medical Conditions is to ensure that:

- Pupils, staff and parents understand how our academies will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including academy trips and sporting activities

The Board of Directors will implement the policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupil's condition, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)

This policy meets the Trust's statutory requirements under section 100 of the [Children and Families Act 2014](#) which places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.

This Policy pays due regard to the Department for Education's statutory guidance [Supporting pupils at school with medical conditions](#).

2. Roles & Responsibilities

2.1 The Board of Directors

The Board of Directors must make arrangements to support pupils with medical conditions in academies, including making sure that a policy for supporting pupils with medical conditions is developed and implemented. They should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.

2.2 The Headteacher

The Headteacher will ensure that their academy's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation. The Headteacher will ensure that all staff who need to know are aware of the child's condition, ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. This may involve recruiting a member of staff for this purpose.

The Headteacher has overall responsibility for the development of individual healthcare plans, will make sure that academy staff are appropriately insured and are aware that they are insured to support pupils in this way. The Headteacher will ensure that contact is made with Norfolk health care professionals (HCP) in cases where

further guidance to support the management of the pupil's health need is required. This may include signposting to other HCP or organisations.

2.3 Parents

Parents will provide the academy with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the academy that their child has a medical condition. Parents 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, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times. Where a child is identified as having complex health needs which may require additional staff funding, or the management of more specialised equipment please consult the NCC Guidance for managing Children and Young People with complex medical care needs in educational settings.

2.4 Pupils

Pupils 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 pupils will often be sensitive to the needs of those with medical conditions.

2.5 Academy Staff

Any member of the academy staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach. Academy staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. Any member of staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training (updated to reflect requirements within individual healthcare plans).

2.6 Norfolk HCP team

The Trust has access to school nurses and other health practitioners via the Just One Number (0300 300 0123) Single Point of Access: www.justonenorfolk.nhs.uk. Academies can contact the service for advice and support when a young person has a health condition and needs additional support and advice. Where a health condition is impacting on academy attendance, staff can also refer young people for a Health assessment to help explore the impact of their health needs. Where a child is already open to more specialist/community nursing or medical services, the HCP team may recommend liaison with the specialist service in the first instance. School/community/specialist nursing services may be able to provide advice on developing individual healthcare plans and support associated staff training needs.

The Children & Young People's Health Services (Norfolk HCP) website also offers a range of online information and resources for children, young people, families and professionals: www.justonenorfolk.nhs.uk/our-services

2.7 Other Healthcare Professionals

Other healthcare professionals, including GPs, paediatricians and mental health professionals, may communicate with the academies when a child has been identified as having a medical condition that will require support at the academy. They may provide advice on developing individual healthcare plans. Specialist local health teams may be able to provide support for children with particular conditions (e.g. asthma, diabetes, epilepsy).

3. Staff Training & Support

Any member of staff providing support to a pupil with medical needs should have received suitable training.

This should include references to staff training on:

- the development or review of individual healthcare plans [IHPs]
- an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures
- whole-school awareness training so that all staff are aware of the Trust's policy for supporting pupils with medical conditions and their role in implementing that policy
- relevant healthcare professional should be able to advise on training that will help ensure that all medical conditions affecting pupils in the academies are understood fully. This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs
- Training for specific conditions may be available via external websites for example: www.asthma.org.uk www.anaphylaxis.org.uk www.epilepsy.org.uk To discuss sources for training for specific health conditions contact the Just One Number (0300 300 0123)
- Awareness of other relevant NCC policies including those for pupils with complex medical care needs/intimate care needs

4. Managing Medicine on Academy Premises

Medicines will only be administered at school when it would be detrimental to a child's health or academy attendance not to do so.

- no child 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 child without the knowledge of the parents. In such cases, every effort will be made to encourage the child or young person to involve their parents while respecting their right to confidentiality
- the Trust has clear arrangements in which non-prescription medicines may be administered
- children under 16 will never be given medicine containing aspirin unless prescribed by a doctor
- medication, e.g. for pain relief, will not be administered without first checking maximum dosages and when the previous dose was taken or without first informing parents

- where clinically possible, the academy will seek to ensure that parents request that medicines are prescribed in dose frequencies which enable them to be taken outside academy hours
- academies will only accept prescribed medicines if these 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 to academies inside an insulin pen or a pump, rather than in its original container
- all medicines should be stored safely. Children will know where their medicines are at all times and be able to access them immediately. Where relevant, they will know who holds the key to the storage facility. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away. This is particularly important to consider when outside of the academy, e.g. on trips
- when no longer required, medicines should be returned to the parent to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps
- a child 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 child for use is an offence. Monitoring arrangements may be necessary. Academies should otherwise keep controlled drugs that have been prescribed for a pupil securely stored in a non-portable container and only named staff should 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
- staff may administer a controlled drug to the child for whom it has been prescribed. Staff administering medicines should do so in accordance with the prescriber's instructions. Academies should 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
- self-management by pupils; wherever possible, pupils are allowed to carry their own medicines and relevant devices or are able to access their medicines for self-medication quickly and easily. Pupils who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If it is not appropriate for a pupil to self-manage, then relevant staff will help to administer medicines

4.1 Controlled Drugs

Controlled drugs are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

A pupil who has been prescribed a controlled drug may have it in their possession if they are competent to do so, but they must not pass it to another pupil to use.

Blenheim Park Academy- all other controlled drugs are kept in a secure LOCKED cupboard in the medical room and only Senior leadership team and trained first aiders will have access.

Greenpark Academy- all other controlled drugs are kept in a secure LOCKED cupboard in the admin office and only admin staff will have access.

Reffley Academy - all other controlled drugs are kept in a secure LOCKED cupboard in the school office and only reception office staff will have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

5. Record Keeping

The Board of Directors will ensure that written records are kept of all medicines administered to children – including medication refusals or errors.

6. Pregnant pupils and school age parents

Norfolk County Council Medical Needs Service has developed guidance to help schools support pregnant pupils and school age parents. The policy provides links to national guidance and services within Norfolk which can offer support. It highlights the responsibilities of schools, and actions that schools can take to keep the pregnant pupil safe and ideally, remaining in education. The [Pregnant pupils policy for schools](#) can be accessed via the Medical Needs Service webpage. There is also a template School Care Plan for schools to use to document and review information and support agreed.

7. Individual Healthcare Plans

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to:

Blenheim Park Academy – Ms N Taylor Headteacher
Greenpark Academy – Claire Bunton SENCO
Reffley Academy – Helen Fendley Headteacher

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed. Special consideration needs to be given to reviewing the plan when a young person is transitioning to a different setting or reintegrating back into the academy after a period of absence.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is not a consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the academy and parents/carers with advice from a relevant healthcare professional, such as a member of the HCP team, a specialist nurse, allied health professional or paediatrician who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate. If healthcare professionals cannot offer advice in person, they may provide written guidance or information.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have a EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Headteacher/SENDCo, will consider the following when deciding what information to record on IHPs:

- 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. 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, including in emergencies. If a pupil is self-managing their medication, this will 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 pupil'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 pupil's condition and the support required
- Who outside the academy needs to be aware of the pupil's condition and the support required (with appropriate consent from the young person and family) – for example academy transport provided by local authority
- Arrangements for written permission from parents and the headteacher 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 timetable that will ensure the pupil can participate, e.g. risk assessments. Please consider large or split school sites
- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition
- What to do in an emergency (including medication administration errors), including who to contact, and contingency arrangements

8. Emergency Procedures

In an emergency situation, the following will take place:

Blenheim Park Academy – In an emergency situation the relevant emergency services would be contacted and parents informed as soon as possible.

Greenpark Academy - In an emergency situation the relevant emergency services would be contacted and parents informed as soon as possible.

Reffley Academy – In an emergency, a member of SLT will be informed as quickly as possible and will take responsibility for making decisions. The first priority will be ensuring the child accesses the correct care as quickly as possible but also that parent/carers are contacted as soon as viable. The emergency will be recorded in the accident book as needed. After the emergency is over a review will take place to review any lessons that could be learnt from the emergency. Well-being support will be offered to staff involved after dealing with an emergency.

As part of general risk management processes, all academies will have arrangements in place for dealing with emergencies for all academy activities wherever they take place, including on trips within and outside the UK. Where a child has an individual healthcare plan, 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. Other pupils in the academy should know what to do in general terms, such as informing a teacher immediately if they think help is needed. 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. Headteachers need to ensure they understand the local emergency services' cover arrangements and that the correct information is provided for navigation systems. It is important to ensure emergency treatments (for example asthma inhalers/adrenaline auto injectors) are always available – this may include consideration of when pupils are off-site but also accessing multiple areas across a large school site for different parts of their curriculum.

Example templates for managing medication, IHP's and contacting emergency services are included in [Supporting pupils at school with medical conditions](#).

9. Equal Opportunities

The Board of Directors will ensure that the academy enables pupils with medical conditions to participate in trips and visits, or in sporting activities, and not prevent them from doing so.

Leaders will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

The Trust acknowledges the [Equalities Act 2010 and schools](#) and works proactively to support all its pupils.

10. Unacceptable Practice:

Although staff are encouraged to use their professional discretion and judge each case on its merits 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; or ignore medical evidence or opinion (although this may be challenged)
- send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal academy activities, including lunch, unless this is specified in their individual healthcare plans
- if the child becomes ill, send them to the 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
- 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
- prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child

11. Attendance

A child or young person with a medical condition may have difficulties attending the academy at certain times. This could be due to planned appointments or surgery, or as a result of an increase in symptoms or deterioration of their overall health condition. Parents have a responsibility to advise the academy of any planned appointments or predicted absence due to surgery/therapeutic intervention. Academies have a responsibility to [code this absence appropriately](#). If an academy does not have sufficient information regarding a young person's health condition, and it is impacting on attendance, they may contact the Just One Number (0300 300 0123) Single Point of Access: www.justonenorfolk.nhs.uk to request a school nurse attendance health check. If this process does not identify sufficient information, leaders/SENDCo can also contact GP's with parental consent, utilising the NCC Joint Protocol between Health Services and Schools. If absence due to a medical condition is noted to be for more than 15 days, leaders should consult the [NCC Medical Needs Service](#) for advice and support.

12. Liability & Indemnity

The Board of Directors will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk. The Ad Meliora Academy Trust is a member of the Department for Education's Risk Protection Arrangement (RPA).

13. Complaints

Complaints concerning the support provided to pupils with medical conditions will be handled in line with the Trust's Complaints Policy.

Appendix 1: What if a child is too ill to attend the academy?

The academy will investigate ways to ensure that the pupil is supported to minimise the disruption to their studies. For a short-term absence, this might mean sending some work home to complete. This will be closely matched to the work being completed by the child's class as possible. Leaders will also look at setting work electronically, either via email or via the academy's 'online portal' software. Consideration of using an external e-learning provider may also be appropriate in certain instances.

For longer term absences (i.e., 15 days or more) we offer educational provision via the Medical Needs Service.

Medical needs coordinator

The medical needs coordinator is responsible for the education of children with additional health needs in Norfolk. They work with schools/academies and professionals to ensure children and young people with medical needs and those who cannot attend school/academies receive a good education.

Services provided by the coordinator

- Parents can contact the coordinator to discuss their child's specific circumstances.
- The academy can contact the coordinator to get support, advice and guidance in relation to medical needs

The coordinator will also liaise with professionals and colleagues. This is to ensure children with additional health needs are able to access a suitable education

Contacting the coordinator

Email: medicalneeds@norfolk.gov.uk

Address: Professional Development Centre, 144 Woodside Road, Norwich, Norfolk NR7 9QL

Making a medical needs referral

The academy can make a medical needs referral for a child who cannot attend the academy because of health needs. It must be clear that the child will be away from the academy for 15 days or more, whether consecutive or cumulative. Medical needs referrals will normally be made by the academy where your child is on roll and need to be accompanied by appropriate information from a health professional.

What happens next?

Following the acceptance of a referral:

- The medical needs coordinator will contact the [Short Stay School for Norfolk](#) – this service is commissioned to provide education for children who are unable to attend school because of their health needs
- The coordinator will ask for interim medical needs provision to start.
- A planning meeting will be held to decide how provision will be delivered. This will be for an initial period of 12 school weeks (or for the period that the child is absent from the academy, whichever is shorter). If after this initial period, the child is unable to return to the academy, further medical advice will be required in order for the provision to continue

Information about how medical needs provision is planned and delivered, along with how reintegration to school can be supported, is all outlined in the Norfolk County Council medical needs policy that can be found on

www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/support-services/medical-needs-education-provision

Appendix 2: Moving & Handling of Pupils Process

1. Identify pupils requiring a specific Moving and Handling risk assessment from the initial referral or review of the pupil's care provision.

2. The Headteacher will arrange a pupil moving and handling assessment for the pupil with help from The Learning Support Service for Children with Physical Difficulties as soon as possible.
3. Assessors to complete a Pupil Moving and Handling assessment form and summary sheet and pass to Headteacher.
4. The Headteacher will ensure individual capabilities of those staff carrying out pupil moving and handling are assessed against requirements identified in the Moving and Handling assessment. Training identified in the Pupil and Handling assessment should be undertaken before the pupil manual handling takes place.
5. The Headteacher will ensure all lifting equipment is maintained under LOLER and PUWER*.
6. The Headteacher will identify and implement control measures to remove and reduce any risks and communicate findings and actions to relevant staff.
7. Staff working with the pupil will acknowledge that they have read and understood control measures and agree with assessment of individual capabilities.
8. The Headteacher will arrange for the monitoring and review of the Pupil Moving and Handling assessments to ensure that the control measures continue to be effective.

***LOLER** and **PUWER** are two sets of health and safety regulations. The Lifting Operations and Lifting Equipment Regulations (**LOLER**) and the Provision and Use of Work Equipment Regulations (**PUWER**).

Appendix 3: Moving & Handling of Pupils Flowchart

SCHOOL MOVING & HANDLING OF PUPILS AND YOUNG PEOPLE PROCEDURE

