

# South Bank Academies Supporting Students with Medical Needs

South Bank Academies Trust (the trust) is accountable for students at trust schools: South Bank University Academy and South Bank UTC.

#### **Aims**

This policy aims to ensure that:

- Students, staff and parents/carers (referred to as 'parents' in this policy) understand how our schools will support students with medical conditions
- Students with medical conditions are properly supported to allow them to access the same education as other students, including school trips and sporting activities

The governing board through the trust executive will implement this policy by:

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

#### The named persons with responsibility for implementing this policy are

South Bank University Academy: John Taylor, Principal

South Bank UTC: David Bell, Principal

## Legislation and statutory responsibilities

This policy meets the requirements under <u>Section 100 of the Children and Families Act 2014</u>, which places a duty on governing boards to make arrangements for supporting students at their school with medical conditions. It is also based on the Department for Education's statutory guidance on <u>supporting pupils with medical conditions at school</u>. This policy also complies with our funding agreements and articles of association.

#### Roles and responsibilities

The trust board (governing board)

The governing board has ultimate responsibility to make arrangements to support students with medical conditions. The governing board will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

# **The Principal**

The Principal in each school will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this
  policy and deliver against all individual healthcare plans (IHPs), including in
  contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support students in this way
- Contact the school nursing service in the case of any student who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

#### Staff

Supporting students with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to students with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support students with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of students with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

#### **Parents**

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP,
   e.g. provide medicines and equipment, and ensure they or another nominated adult
   are contactable at all times

#### **Students**

Students with medical conditions will often be best placed to provide information about how their condition affects them. Students should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

# School nurses and other healthcare professionals

The school nursing service will notify the school when a student has been identified as having a medical condition that will require support in school. This will be before the student starts school, wherever possible. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and paediatricians, as well as other external agencies where appropriate, will liaise with the school's nurses and notify them of any students identified as having a medical condition. They may also provide advice on developing IHPs.

# **Equal opportunities**

The trust is clear about the need to actively support students with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

Each school will consider what reasonable adjustments need to be made to enable these students to participate fully and safely on school trips, visits and sporting activities. Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that students with medical conditions are included. In doing so, students, their parents and any relevant healthcare professionals will be consulted.

#### Being notified that a child has a medical condition

When the school is notified that a student has a medical condition, the process outlined below will be followed to decide whether the student requires an IHP.

The school will make every effort to ensure that arrangements are put into place within two weeks, or by the beginning of the relevant term for students who are new to the school.

See Appendix 1.

## Individual healthcare plans

The Principal has overall responsibility for the development of IHPs for students with medical conditions. This has been delegated to

South Bank University Academy South Bank UTC

Plans will be reviewed at least annually, or earlier if there is evidence that the student's needs have changed. Plans will be developed with the student's best interests in mind and will set out what needs to be done, when and by whom.

Not all students 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 no consensus, the Principal will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare

professional, such as the school nurse, specialist or paediatrician, who can best advise on the student's specific needs. The student will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a student has SEND but does not have an EHC plan, the SEND 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 governing board and the Principal and/or designated staff, will consider the following when deciding what information to record on IHPs:

- 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, e.g. 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, including in emergencies. If a student 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 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 and the headteacher for medication to be administered by a member of staff, or self-administered by the student 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 parent/student, the designated individuals to be entrusted with information about the student's condition
- What to do in an emergency, including who to contact, and contingency arrangements

### Managing medicines

Prescription and non-prescription medicines will only be administered at school when it would be detrimental to the student's health or school attendance not to do so and where the school has parents' written consent.

The only exception to this is where the medicine has been prescribed to the student without the knowledge of their parents.

Students under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a student any medication (for example, for pain relief) will first check maximum

dosages and when the previous dosage was taken. Parents will always be informed.

The school will only accept prescribed medicines that are:

- In-date
- Labelled
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Students will be informed about 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 will always be readily available to students. Designated staff will be available at all times to permit access to medicines as required.

Regular reviews of stored medicines to ensure they are in-date and labelled correctly will take place led by designated members of staff.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

## **Controlled drugs**

<u>Controlled drugs</u> are prescription medicines that are controlled under the <u>Misuse of Drugs</u> Regulations 2001 and subsequent amendments, such as morphine or methadone.

A student 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 student to use. All other controlled drugs are kept in a secure cupboard in the school office and only named staff 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.

#### Students managing their own needs

Students who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents and it will be reflected in their IHPs.

Students will be allowed to carry their own medicines and relevant devices wherever possible. Staff will not force a student to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

#### Unacceptable practice

School staff should use their discretion and judge each case individually with reference to the student's IHP, but it is generally not acceptable to:

- Prevent students from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every student with the same condition requires the same treatment

- Ignore the views of the student or their parents
- 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 school activities, including lunch, unless this is specified in their IHPs
- If the student becomes ill, send them to the school office or medical room 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 students 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 school to administer medication or provide medical support to their student, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- 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 to accompany their child
- Administer, or ask students to administer, medicine in school toilets

## **Emergency procedures**

Staff will follow the school's normal emergency procedures (for example, calling 999). All students' IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a student needs to be taken to hospital, staff will stay with the student until the parent arrives, or accompany the student to hospital by ambulance.

#### Training

Staff who are responsible for supporting students with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to students with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with Principal or designated member of staff. Training will be kept up to date.

#### Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the students
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

# 10. Record keeping

The governing board will ensure that written records are kept of all medicine administered to students for as long as these students are at the school. Parents will be informed if their student has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

## 11. Liability and indemnity

The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk. Both schools are covered through the government-backed RPA insurance scheme.

## 12. Complaints

Parents with a complaint about their child's medical condition should discuss these directly with the Principal or the designated member of staff in the first instance. If the Principal or the designated member of staff cannot resolve the matter, they will direct parents to the school's complaints procedure.

#### 13. Monitoring arrangements

This policy will be reviewed and approved by the governing board every year.

## 14. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy

Our schools are inclusive communities that welcome and support students with medical conditions. We provide all students with any medical condition the same opportunities as others in the community. We will help to ensure they can:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution
- achieve economic wellbeing once they leave their school.

The trust makes sure all staff understand their duty of care to children and young people in the event of an emergency. All staff feel confident in knowing what to do in an emergency. This trust understands that certain medical conditions are debilitating and potentially life threatening, particularly if poorly managed or misunderstood. This trust understands the

importance of medication and care being taken as directed by healthcare professionals and parents. All staff understand the medical conditions that affect students at our schools. Staff receive training on the impact medical conditions can have on students.

Our schools are welcoming and supportive of students with medical conditions. We provide children with medical conditions with the same opportunities and access to activities (both school based and out-of-school) as other students. No child will be denied admission or prevented from taking up a place in trust schools because arrangements for their medical condition have not been made.

Our schools will listen to the views of students and parents.

Students and parents feel confident in the care they receive from their school and the level ofthat care meets their needs.

Staff understand the medical conditions of students at our schools and that they may be serious, adversely affect a child's quality of life and impact on their ability to learn.

All staff understand their duty of care to children and young people and know what to do in the event of an emergency.

All staff and local health community understand and support the medical conditionspolicy.

Our schools understand that all children with the same medical condition will not have thesame needs.

Our schools recognise that duties in the Children and Families Act (England only), the EqualityAct (England, Wales and Scotland) and the Disability Discrimination Act (Northern Ireland only) relate to children with disability or medical conditions and are anticipatory.

#### **Policy framework**

The policy framework describes the essential criteria for how trust schools can meet the needs of children and young people with long-term medical conditions. This medical conditions policy is drawn up in consultation with a wide range of local key stakeholders within both the schools and health settings.

Stakeholders should include students, parents, schools nurses, staff, governors, the trust executive, relevant local health services and relevant supporter organisations. The medical conditions policy is supported by a clear communication plan for staff, parents\* and other key stakeholders to ensure its full implementation.

Students, parents, relevant local healthcare staff, and other external stakeholders are informed of and reminded about the medical conditions policy through clear communication channels. All children with a medical condition should have an individual healthcare plan (IHP).

An IHP details exactly what care a child needs in school, when they need it and who is going togive it.

It should also include information on the impact any health condition may have on a child's learning, behaviour or classroom performance.

This should be drawn up with input from the child (if appropriate) their parent/carer,

relevant staff and healthcare professionals, ideally a specialist if the child has one. Allstaff understand and are trained in what to do in an emergency for children with medical conditions at the schools.

All school staff, including temporary or supply staff, are aware of the medical conditions at the schools and understand their duty of care to students in an emergency.

All staff receive training in what to do in an emergency and this is refreshed at least once a year.

A child's IHP should, explain what help they need in an emergency. The IHP will accompany a student should they need to attend hospital. Parental permission will be sought and recorded in the IHP for sharing the IHP within emergency care settings. All staff understand and are trained in the schools' general emergency procedures.

All staff, including temporary or supply staff, know what action to take in an emergency and receive updates at least yearly.

If a student needs to attend hospital, a member of staff (preferably known to the student) will stay with them until a parent arrives, or accompany a child taken to hospital by ambulance. They will not take students to hospital in their own car. The schools have clear guidance on providing care and support and administering medication at school.

The schools understand the importance of medication being taken and care received asdetailed in the student's IHP.

The schools will make sure that there are more than one members of staff who have been trained to administer the medication and meet the care needs of an individual child. This includes escort staff for home to school transport if necessary. The schools will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies. This governing body has made sure that there is the appropriate level of insurance and liability cover in place.

The schools will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances, and every effortwill be made to encourage the student to involve their parent, while respecting their confidentiality.

When administering medication, for example pain relief, the schools will check the maximum dosage and when the previous dose was given. Parents will be informed. The schools will not give a student under 16 aspirin unless prescribed by a doctor.

The schools will make sure that a trained member of staff is available to accompany a studentwith a medical condition on an off-site visit, including overnight stays.

Parents at the schools understand that they should let the school know immediately if theirchild's needs change.

If a student misuses their medication, or anyone else's, their parent is informed as soon as possible and the disciplinary procedures are followed. The schools have clear guidance on the storage of medication and equipment at school.

The schools make sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment is readily available wherever the child is in the school and on off-site activities, and is not locked away.

Studentsmay carry their emergency medication with them if they wish/this is appropriate.

Students may carry their own medication/equipment, or they should know exactly where to access it.

Students can carry controlled drugs if they are competent, otherwise this school will keep controlled drugs stored securely, but accessibly, with only named staff having access. Staff at the schools can administer a controlled drug to a student once they have had specialist training.

This schools will make sure that all medication is stored safely, and that students with medicalconditions know where they are at all times and have access to them immediately.

This schools will store medication that is in date and labelled in its original container where possible, in accordance with its instructions. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.

Parents are asked to collect all medications/equipment at the end of the term, and to provide new and in-date medication at the start of each term.

The schools dispose of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits as appropriate. They are collected and disposed of in line with local authority procedures. The schools have clear guidance about recordkeeping.

Parents at the schools are asked if their child has any medical conditions on the enrolmentform.

The schools use an IHP to record the support an individual student needs around their medicalcondition. The IHP is developed with the student (where appropriate), parent, staff, specialist nurse (where appropriate) and relevant healthcare services.

The schools have a centralised register of IHPs, and an identified member of staff has theresponsibility for this register.

IHPs are regularly reviewed, at least every year or whenever the student's needs change.

The student (where appropriate) parents, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHP. Other staff are made aware of and have access to the IHP for the students in their care.

The schools make sure that the student's confidentiality is protected.

The schools seek permission from parents before sharing any medical information with anyother party.

The schools meet with the student (where appropriate), parent, specialist nurse (where appropriate) and relevant healthcare services prior to any overnight or extended day visit to discuss and make a plan for any extra care requirements that may be needed. This is recorded in the student's IHP which accompanies them on the visit.

The schools keep an accurate record of all medication administered, including the dose, time, date and supervising staff.

The schools make sure that all staff providing support to a student and other relevant teams have received suitable training and ongoing support, to make sure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the student's IHP. This should be provided by the specialist nurse/ nurse/other suitably qualified healthcare professional and/or the parent. The specialist nurse/ nurse/other suitably qualified healthcare professional will confirm their competence, and this school keepsan up-to date record of all training undertaken and by whom. The schools ensure that the whole school environment is inclusive and favourable to students with medical conditions. This includes the physical environment, as well as social, sporting and educational activities. The schools are committed to providing a physical environment accessible to students with medical conditions and students are consulted to ensure this accessibility. The schools are also committed to an accessible physical environment for out-of-school activities.

The schools make sure the needs of students with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.

All staff are aware of the potential social problems that students with medical conditions may experience and use this knowledge, alongside the bullying policy, to help preventand deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.

The schools understand the importance of all students taking part in physical activity and thatall relevant staff make appropriate adjustments to physical activity sessions to make sure they are accessible to all students. This includes out-of-school clubs and team sports.

The schools understand that all relevant staff are aware that students should not be forced totake part in activities if they are unwell. They should also be aware of students who have been advised to avoid/take special precautions during activity, and the potential triggers for a student's medical condition when exercising and how to minimise these.

The schools make sure that students have the appropriate medication/equipment/food withthem during physical activity.

The schools make sure that students with medical conditions can participate fully in all aspectsof the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.

All staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a student's medical condition. The schools will not penalise students for their attendance if their absences relate to their medical condition.

The schools will refer students with medical conditions who are finding it difficult to keep up educationally to the SENCO who will liaise with the student (where appropriate), parent andthe student's healthcare professional.

Students at this schools learn what to do in an emergency.

The schools make sure that a risk assessment is carried out before any out-of-school visit, including work experience and educational placements. The needs of students with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

The schools are aware of the common triggers that can make common medical conditions worseor can bring on an emergency. The schools are actively working towards reducing or eliminating these health and safety risks and has a written schedule of reducing specific triggers to support this.

The schools are committed to identifying and reducing triggers both at school and on out-of-school visits.

Staff have been given training and written information on medical conditions which includes avoiding/reducing exposure to common triggers. It has a list of the triggers for students with medical conditions at the schools, has a trigger reduction schedule and is activelyworking towards reducing/eliminating these health and safety risks.

The IHP details an individual student's triggers and details how to make sure the student remains safe throughout the whole school day and on out-of-school activities. Risk assessments are carried out on all out-of-school activities, taking into account the needs of students with medical needs.

The schools review all medical emergencies and incidents to see how they could have been avoided, and changes school policy according to these reviews. Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), the schools will work with the local authority and education provider to ensure that the child receives the support they need to reintegrate effectively.

The schools work in partnership with all relevant parties including the student (where appropriate), parent, school governing body, South Bank Academies (the Trust), all staff, catering staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully. Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.

The schools work in partnership with all relevant parties including the student (where appropriate), parent, governing body, all staff, catering staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.

The schools are committed to keeping in touch with a child when they are unable to attend school because of their condition. The medical conditions policy is regularly reviewed, evaluated and updated. Updates are produced every year.

In evaluating the policy, The schools seek feedback from key stakeholders including students, parents, school healthcare professionals, specialist nurses and other relevant healthcare professionals, staff, local emergency care services, governors and the trust. The views of students with medical conditions are central to the evaluation process.

\*The term 'parent' implies any person or body with parental responsibility such as a foster parent, carer, guardian or local authority. <a href="https://www.medicalconditionsatschool.org.uk">www.medicalconditionsatschool.org.uk</a>

**Policy approved by:** South Bank Academies trust board

**Date of last review:** August 2022 **Date of next review:** August 2023