

## KING EDWARD VI HANDSWORTH WOOD GIRLS' ACADEMY

## **SUPPORTING STUDENTS WITH MEDICAL NEEDS** Committee **Academy Trust Board** Policy Type **School Policy Policy Owner** Deanne Howe **Statutory** No **Publish Online** Yes **Last Review Date** August 2023 Review Cycle **Annual Next Review Date** August 2024 **Expiry Date** October 2024 Version 1

## SUPPORTING STUDENTS WITH MEDICAL CONDITIONS POLICY

This policy has been developed in line with the Department for Education's guidance released in April 2014 and last published/revised in December 2015 "Supporting Students at School with Medical Conditions". This policy has been written with reference to Ofsted guidance regarding children with medical needs (April 2014), DFE guidance 'Supporting Children at School with Medical Conditions' (December 2015) and 'Guidance on the use of emergency salbutamol inhalers in schools' (March 2015), The Equality Act (2010), The Special Educational Needs and Disability Code of Practice (2014 and 2015), Education Act (2011), The Children Act (2004), The Children and Families Act (2014) and The NHS Act (2006.)

This policy should be read in conjunction with the following policies, strategies and documents:

- Academy Prospectus
- Disability Equality Scheme
- Equal Opportunities Policies
- Health and Safety Policy
- Special Educational Needs Policy
- SEND Information Report

### **PART 1:**

## 1.1 <u>Aims</u>

King Edward VI Handsworth Wood Girls' Academy aims to provide all children with medical conditions the same opportunities as their peers.

Children at King Edward VI Handsworth Wood Girls' Academy with medical conditions should be properly supported so that they have full access to education, including academy trips and physical education.

Clear arrangements are in place in academies to support children at each academy with medical conditions, so that they can play a full and active role in academy life, remain healthy and achieve their academic potential.

The academy will consult with health and social care professionals, parents and children to ensure that the needs of children with medical conditions are effectively supported.

## 1.2 Objectives

On-going support to children and young people with long term and complex medical conditions is in place, monitored and reviewed.

That each academy's ability to supply emergency intervention, where required, is in place.

That staff are aware of social and emotional implications of long term ill health for individual children, and that provision is made to support children in this position.

That the reintegration back into academy, following long term illnesses/ medical conditions is planned and supported.

That short term and frequent absences for children who have to attend frequent medical appointments are also effectively managed, and that appropriate support is put into place to limit the impact on the child's educational attainment and emotional well-being.

All staff understand that many of the medical conditions affecting our children will affect quality of life and may be life-threatening, particularly if poorly managed or misunderstood.

This policy is supported by a clear communication plan for staff, parents and other key stakeholders to ensure its full implementation at academy level.

All staff understand and are trained in what to do in an emergency for the most common serious medical conditions at this academy. These include serious allergic reactions, epilepsy, and children who have heart or lung conditions. Epipen training is provided by specialists annually and each academy has a list of staff prepared to administer Epipen treatment where needed.

All staff understand and are trained in the academy's general non-emergency and emergency procedures.

Each academy has clear guidance on the administration and storage of medication.

Each academy has clear guidance about record-keeping.

All staff understand the common medical conditions that affect children at the academy they work within. Staff receive training on the impact medical conditions can have on children.

We ensure that the whole academy environment is inclusive and favourable to children with medical conditions. This includes the physical environment, as well as educational, social and sporting activities.

All staff show an understanding of how medical conditions impact on a child's ability to learn and seek to enhance their confidence and promote self-care.

King Edward VI Handsworth Wood Girls' Academy understand the importance of all children taking part in sports, games and activities. Teachers and coaches will make appropriate adjustments to make physical activity and other activities like trips are accessible to all.

King Edward VI Handsworth Wood Girls' Academy is aware of the common triggers that can make medical conditions worse or can bring on an emergency. The academy is actively working towards reducing or eliminating these health and safetyrisks.

## 1.3 Definitions

- "Medication" is defined as any prescribed or over the counter medicine.
- "Prescription medication" is defined as any drug or device prescribed by a doctor.
- A "staff member" is defined as any member of staff employed by King Edward VI Handsworth Wood Girls' Academy

## 1.4 Avoiding unacceptable practice

King Edward VI Handsworth Wood Girls' Academy understands that the following behaviour is unacceptable:

- Ignoring medical evidence or opinion.
- Assuming that students with the same condition require the same treatment.
- Ignoring the views of the student and/or their parents.
- Refusing to allow students to eat, drink or use the toilet when they need to in order to manage their condition.
- Creating barriers to children participating in academy life, including academy trips.
- Sending students home frequently or preventing them from taking part in activities at academy
- Sending the student to the medical room or academy office alone if they become ill.
- Making parents/carers feel obliged or forcing parents to attend academy to administer medication or provide medical support, including toilet issues, unless it is necessary to do so.
- Penalising students with medical conditions for their attendance record where the absences relate to their condition

## 1.5 Complaints

- Should parents / students /stakeholders be dissatisfied with the support provided, they should discuss their concerns directly with King Edward VI Handsworth Wood Girls' Academy
- If, for whatever reason, this does not resolve the issue, they may make a complaint via the academy's complaints procedure (see Complaints Policy).

## 1.6 Insurance

- Staff who undertake responsibilities within and in line with this policy are covered by the academy's insurance.
- Full written insurance policy documents are available to be viewed by members of staff who are providing support to students with medical conditions.

## **PART 2:**

## 2.1 The Local Authority (LA) is responsible for:

- Promoting cooperation between relevant partners and stakeholders regarding supporting children with medical conditions.
- Providing support, advice and guidance to academies and their staff.
- Making alternative arrangements for the education of children who need to be out of academy for fifteen days or more due to a medical condition.

## 2.2 Governance Responsibilities:

## **The Academy Trust**

The Academy Leads have a duty to ensure that their insurance arrangements provide cover for staff to act within the academy of their employment; that the procedures outlined in this policy are followed, and where necessary training is made available to staff.

## The Academy Governing Body is responsible for

- The overall implementation of the Supporting Children with Medical Conditions Policy and procedures of academy.
- Ensuring that the Supporting Children with Medical Conditions Policy, as written, does not discriminate on any grounds including, but not limited to: ethnicity/national origin, culture, religion, gender, gender reassignment, disability or sexual orientation. In addition, that no child or young person with a medical condition should be denied admission or prevented from taking up a place in academy because arrangements for their medical condition has not been met with the exception of those with an EHC plan who require exceptionally specialist provision, like a special academy.
- Handling complaints regarding this policy as outlined in the Trust's Complaints Policy.
- Ensuring that all children with medical conditions are able to participate fully in all aspects of academy life. In doing so, Governors may take into account that academy procedures and facilities are such that academy systems can deal with children' needs in a flexible manner, and involve for example, programmes of study that rely on part time attendance at academy or alternative programmes of study at alternative venues. Support must take into account the needs of children and young people as individuals and should work towards increasing the individual's confidence and ability to self-care.
- Ensuring that relevant training is delivered to staff members who take on responsibility to support children with medical conditions.
- Guaranteeing that information and teaching support materials regarding supporting children with medical conditions are available to members of staff with responsibilities under this policy.
- Ensuring that the relevant staff are keeping written records of any and all medicines administered to individual children and across the academy population. This is done via MedicalTracker services.
- Ensuring that parents and children remain confident in the academy's ability to provide effective support for children and young people with medical conditions at the academy.
- Ensuring the level of insurance in place reflects the level of risk, and that suitable risk assessments are in place for academy trips and other activities outside of the normal timetable.

## 2.3 The Head Teacher is responsible for:

- The day-to-day implementation and management of the Managing Medical Conditions and Medicines Policy and procedures of academy.
- Ensuring the policy is developed effectively with partner agencies.
- Making all staff aware of this policy and ensure that they understand their role in its implementation.
- Liaising with healthcare professionals regarding the training required for staff including ensuring that the academy nursing service is consulted in the case of any child who has a medical condition
- Making staff who need to know aware of a child's medical condition.
- Developing and implementing Individual Healthcare Plans (IHCPs) in line management of the Health and Wellbeing Lead (Safeguarding) and in the case of children with SEND, Education and Health Care Plans (EHCPs) in liaison with the SENCO.
- Ensuring a sufficient number of trained members of staff are available to implement the policy and deliver IHCPs in normal, contingency and emergency situations.
- If necessary, facilitating the recruitment of a member of staff for the purpose of delivering the promises made in this policy.
- Ensure that academy staff are appropriately insured to support children.
- Ensure that all educational visits are appropriately risk assessed and that the medical needs of children participating have been identified and provision is in place, as monitored by the Associate Headteacher in collaboration with the DSL.
- Ensure leaders and designated roles are in place that ensure effective implementation and monitoring of this policy within the academy. While the staffing model will vary between academies within the Trust.
- Ensure the actions and responsibilities as listed within 2.4a, 2.4b, 2.5 and 2.6 are clearly delegated to identified post-holders within the academy and made explicit to all staff.
- Confirm and include the academy specific procedures and staffing outlined within the Trust Policy.

## 2.4a At Senior Leadership/Strategic Level – Assistant Headteacher is responsible for:

- Overseeing the provision of First Aid.
- Overseeing the Medical support provision in academy.
- To co-ordinate, as appropriate, a back-up team to cover emergency first aid responsibilities within academy when the First Aid Lead is not available.
- Working with the Health and Safety Lead and Safeguarding Manager to address any health and safety issues affecting child safety and wellbeing.
- Monitoring and quality assuring the production of Individual Heath Care Plans and Education Health Care plans for all children in need of medical support in liaison with the Health and Wellbeing Lead.
- Overseeing the distribution of information to appropriate staff as required in partnership with commissioning services and Health and Safety Lead to ensure appropriate provision is in place to respond to the changing needs of the whole academy body.
- Ensuring both children and parents of children with medical needs are regularly consulted to gather feedback on provision of medical support in academy.
- Ensure the pastoral and admission team collect and share relevant medical information on new entrants with the Health and Wellbeing Lead.
- Ensure that the EVC liaises with the Health and Wellbeing Lead on the risk assessment of trips involving children with medical needs.
- To monitor first aiders in order to ensure training and certificate renewals are offered at appropriate intervals in consultation with the Health and Safety Lead.

## 2.4b At Senior Leadership/Strategic Level – Health and Safety Lead is responsible for:

- · Overseeing the provision of First Aid.
- Liaising with the Safeguarding Manager, Health and Wellbeing Lead and Assistant Headteacher to ensure sufficient procedures/guidance are written and in operation for first aid responsibilities.
- Address any health and safety issues affecting staff.
- Monitoring and quality assuring first aid and emergency procedures and record keeping.
- Overseeing the distribution of health and safety information to appropriate staff as required in
  partnership with commissioning services to ensure appropriate provision is in place to respond to
  the changing needs of the whole academy body.
- Monitoring and quality assuring record keeping procedures and systems within First Aid.
- To advise and provide guidance on safe working practices.
- To ensure a central record of all accidents and relevant accident report forms are in place in partnership with the Health and Wellbeing Lead.
- To attend Health & Safety meetings and present half-termly statistical analysis on injuries.

## 2.5 Health and Wellbeing Lead is responsible for:

- The day to day management of First Aid and Medical support provision in academy to staff and children.
- •To work, when necessary, alongside external stakeholders, eg NHS School Nursing Team.
- •To lead on support for children with individual medical plans.
- •To ensure that all First Aid boxes within academy are checked on a monthly basis and stock replenished as and when necessary. A track record to be kept of this to ensure a constant review of equipment.
- •To ensure all defibrillators within the academy are checked on a monthly basis and stock replenished when necessary. A track record to be kept of this to ensure a constant review of equipment.
- To collate medical information of all new entrants to the academy, up-dating academy records accordingly on academy's Arbor and MedicalTracker.
- To ensure existing child medical records are accurate and up-to-date, advising staff of any changes as and when appropriate.
- To liaise with the Designated Safeguarding Lead regarding any Child Protection concerns.
- To consult with both children and parents of children with medical needs to gather feedback on provision of medical support in academy.
- Ensuring individual healthcare plans are devised in partnership with the Academy Nurse, parents and, where appropriate SENCO and children.
- Reviewing plans as required to ensure that they remain accurate and that this is communicated to all staff.
- Ensuring information about children with medical needs is displayed in the designated area within the academy building, as well as the appropriate portals with regular updates
- Consult the child, parents and the child's healthcare professional to ensure the effect of the child's medical condition on their academy work is properly considered.
- Additionally, the SENCO is appropriately trained and can provide advice and guidance to staff, parents and children.

## 2.6 Health and Wellbeing Lead (and other academy first aiders as directed) is responsible for:

To administer first aid to children within the academy site, including supervising children,

- contacting parents and taking them to hospital where this is necessary.
- To administer prescribed drugs with permission from parents, eg antihistamines, etc.
- Informing reception and the Attendance and Pastoral Teams of any child leaving the premises through injury in order that Attendance records are updated.
- To maintain a central record of all accidents/incidents on MedicalTracker.
- To order medical supplies and monitor stock.
- Ensuring medicines are kept securely with clear access.
- Logging medical emergencies on Medical Tracker.
- Logging medicines administered on Medical Tracker.

## 2.7. Staff members are responsible for:

- Taking appropriate steps to support children with medical conditions.
- Where necessary, making reasonable adjustments to include children with medical conditions into lessons.
- Administering medication, if they have agreed to undertake that responsibility.
- Undertaking training to achieve the necessary competency for supporting children with medical conditions, where the support may be emergency in nature, e.g. Calling an ambulance or (if trained and consenting) administering Epipens.
- Familiarising themselves with procedures detailing how to respond when they become aware that a child with a medical condition needs help
- Referring students to the Health and Wellbeing Lead if they have any concerns about a student's health and log this on CPOMS.
- Referring students to the Safeguarding team if they have any concerns about a child or young person's health or wellbeing and log this on CPOMS.
- Being aware of the potential for students with medical conditions to have special educational needs (SEND.)
- Referring students with medical conditions who are finding it difficult to keep up with their studies to the Health and Wellbeing Lead and log on CPOMS.

## 2.8. NHS nurses are responsible for:

- Notifying the academy when a child has been identified with requiring support in academy due to a medical condition.
- Liaising locally with lead clinicians on appropriate support.
- Providing advice on developing Individual Healthcare Plans and support academies with particular conditions.

## 2.9a Parents and carers are responsible for:

- Notifying academy on enrolment about their child's medical needs.
- Keeping the academy informed about any changes to their child/children's health
- Completing a parental agreement for academy to administer medicine form before bringing medication into academy.
- Providing the academy with the medication their child requires and keeping it up to date.
- Collecting any leftover medicine at the end of the course or year.
- Discussing medications with their child/children prior to requesting that a staff member administers the medication.
- Where necessary, engaging in the development and review of an Individual Healthcare Plan (IHCP) for their child in collaboration with the Health and Wellbeing Lead, SENCO (for EHCP), other staff members and healthcare professionals.
- Carrying out actions agreed in Individual Healthcare Plan, such as provide medicines and ensure

they, or another nominated adult, are contactable at all times.

## 2.9b The role of the child/young person:

- Wherever competent to, the academy actively seeks that children take responsibility for being fully involved in discussions about their medical support needs and for managing their own medicines and procedures.
- Where this is not possible, the First Aider will help administer medicines and manage procedures, and aid the student to develop greater independence.
- Where possible, children will be allowed to carry their own medicines and devices. Where this is not possible, their medicines will be located securely in the medical room.
- If children refuse to take medication or to carry out a necessary procedure, parents will be informed so that alternative options can be explored.
- Children will contribute as much as possible to the development of, and comply with, their Individual Healthcare Plan.
- Children will endeavor to develop independence in managing their own medical needs where appropriate.
- Where appropriate, children will be encouraged to take their own medication under the supervision of a teacher

## PART 3

## 3.1 Training of staff

- All Staff are aware of the most common serious medical conditions and what to do in an emergency.
- Teachers and support staff will receive training on the Supporting Students with Medical Conditions Policy as part of their new starter induction.
- Teachers and support staff will receive regular and ongoing training as part of their development.
- through access to Individual Healthcare Plans
- Via annual refresher updates from healthcare professionals
- Teachers and support staff who undertake responsibilities under this policy will receive appropriate first aid training.
- No staff member may administer prescription medicines or undertake any healthcare procedures without undergoing training specific to the responsibility.
- No staff member may administer drugs by injection unless they have received training in this responsibility.
- The Business Manager within each academy will keep a record of training undertaken and a list of staff qualified to undertake responsibilities under this policy.
- The Health and Wellbeing lead will keep a record of training undertaken by first aid staff.
- The Health and Wellbeing lead is to liaise with School Nursing Team and organize annual first aid refresher courses for first aiders.

## 3.2 Medical emergencies

- In an emergency situation, academy staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.
- Action for staff to take in an emergency for the common serious conditions at each academy is displayed in prominent locations for all staff including academy to confirm locations.
- If a child needs to be taken to hospital, a member of staff will always accompany him/her and will stay with him/her until a parent or carer arrives. A copy of the child's Individual Healthcare Plan will be sent to the emergency care setting with the child.

PLEASE REFER TO THE APPENDICES OF THIS POLICY FOR FURTHER DETAILS ABOUT ACADEMY MEDICAL PROCESSES AND PROCEDURES.

## PART 4

## 4.1 Administration of emergency medication

- All children have easy access to their emergency medication in the First Aid room,
- All children are encouraged to carry and administer their own emergency medication, when it has been determined that they are able to take responsibility for doing so. All children carry their emergency medication with them at all times, except if they are controlled drugs as defined in the Misuse of Drugs Act 1971. This is also the arrangement on any off-site or residential visits.
- No drugs (including non-prescription drugs such as paracetamol) should be in the possession of

children, except for those identified to and by the lead for First Aid as being competent to carry their medication with them. Any child found in possession of drugs not already identified, should be escorted to the designated person immediately.

- All use of medication defined as a controlled drug, even if the child can administer the medication him/herself, is done under the supervision of staff.
- Administration of asthma inhalers and response should be in line with the most recent guidance. An emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication. The inhaler can be used if the student's prescribed inhaler is not available (for example, because it is broken, or empty).
- There is no legal duty for any member of staff to administer medication unless they have been specifically contracted to do so, though many are happy to take on the role. Staff may administer prescribed and non-prescribed medication to children under the age of 16 with the written consent of the child's parent.
- Training is given to all staff members who agree to administer medication to children, where specific training is needed. When suitably risk assessed, the academy insurance provides full indemnity.
- All 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.
- If a child's medication changes or is discontinued, or the dose or administration method changes, parents should notify the academy immediately.
- If a child at the academy refuses their medication, staff will record this and follow procedures. Parents/carers are informed as soon as possible.
- Off-site visits are fully risk assessed and staff are made aware of any children with medical
  conditions on the visit. They receive information about the type of condition, what to do in an
  emergency and any other additional support necessary, including any additional medication or
  equipment needed.
- If a child misuses medication, either their own or another child's, their parents are informed as soon as possible. These children are subject to the academy's usual disciplinary procedures.

## 4.2 Storage of emergency medication

- Most children at this academy carry, and securely keep, their own medication. They are reminded to ensure that their emergency medication is with them at all times. Back-up medication is available in First Aid room.
- Where a child is not yet able to self-manage and carry his/her own emergency medication, he/she knows where to access the emergency medication.
- Emergency asthma inhalers are stored in key areas around the academy building and the relevant staff are aware of their locations.

## 4.3 Non-emergency Medication

- All non-emergency medication is kept in a secure place, in a lockable cupboard in a cool dry place. Children with medical conditions know where their medication is stored and how to access it.
- Staff ensure that medication is only accessible to those for whom it is prescribed

## 4.4 General

- An up-to-date list of members of staff who have received relevant training and agreed to administer or supervise students who self-administer medication is kept in academy.
- The designated Health and Wellbeing Lead ensures the correct storage of medication at the academy.
- All controlled drugs are kept in a locked cupboard, paying particular note to temperature, and only named staff have access, even if children normally administer the medication themselves.
- Three times a year the First Aid Lead checks and logs the expiry dates for all medication stored at academy. This is updated on Medical Tracker and parents notified of expired medication.
- All emergency and non-emergency medication brought in to academy must be clearly labelled
  wherever possible, in its original containers, with the child's name, the name and dose of the
  medication and the frequency of dose, expiry date and the prescriber's instructions. This includes all
  medication that children carry themselves.
- All refrigerated medication is stored in an airtight container and is clearly labelled. Refrigerators used for the storage of medication are located in the First Aid room.
- All medication is sent home with children at the end of the academy year. Medication is not stored during the summer holidays.
- It is the parents' responsibility to ensure new and in date medication comes into academy on the first day of the new academic year.
- An accurate record of each occasion an individual child is given or supervised taking medication is kept. Details of the supervising staff member, child, dose, date and time are recorded.

## 4.5 Safe Disposal

- Academy will request parents/carers to collect and dispose of out of date medicines.
- Sharps boxes are used for the disposal of needles. Parents obtain sharps boxes from the child's GP or pediatrician on prescription. All sharps boxes in this academy are stored in a locked cupboard unless alternative safe and secure arrangements are put in place on a case-by-case basis.
- If a sharps box is required for an off-site or residential visit, a named member of staff is responsible for its safe storage and return to a local pharmacy, to the academy or to the child's parent/carer.

### PART 5

## 5.1 Enrolment and Admissions

Parents are asked if their child has any health conditions/issues on the admission form; this information is collated by the Admin & Admissions and shared with the designated Health and Wellbeing Lead

## 5.2 Individual Healthcare Plans

- The Individual Healthcare Plan records important details about individual child's medical needs at academy, their triggers, signs, symptoms, medication and other treatment.
- An Individual Healthcare Plan, accompanied by an explanation of why and how it is used, is sent to all parents of children with a long-term medical condition. This is sent:
  - o At the start of the academy year
  - At admission (if this is not the start of the academy year)
  - When a diagnosis is first communicated to the academy.
- Parents, healthcare professionals and children with a medical condition are asked to fill out the child's Individual Healthcare Plan together. Parents then return the completed forms to the academy.
- This academy ensures that a relevant member of academy staff is also present, if required, to help draw up an Individual Healthcare Plan for children with complex healthcare or educational needs.
   A copy is sent to parents.
- Where necessary, an Individual Healthcare Plan (IHCP) or EHCP (SEND) will be developed in collaboration with the student, parents/carers, the First Aid Lead (if different from the SENCO), Special Educational Needs Coordinator (SENCO) and medical professionals.
- IHCPs will be easily accessible whilst preserving confidentiality.
- Where a student has an Education, Health and Care plan or special needs statement, the IHCP will be linked to it or become part of it.
- IHCPs will be reviewed at least annually or when a child's medical circumstances change, whichever is sooner.
- Where a child is returning from a period of hospital education or alternative provision or home tuition, the academy will work with the LA and education provider to ensure that the IHCP

identifies the support the child needs to reintegrate.

• Whilst on academy visits / trips, the protocol in the Individual Healthcare Plan will be adhered to.

## 5.3 Academy Medical Register

- Individual Healthcare Plans are used to create a centralised register of children with medical needs and are kept in a secure central location at academy (and also attached as a linked document in SIMS).
- Parents are regularly reminded to update their child's Individual Healthcare Plan if their child has a medical emergency, if there have been changes to their symptoms (getting better or worse), or when their medication and treatments change.
- Every child with an Individual Healthcare Plan has their plan discussed and reviewed at least once a year.
- All staff have access to the Individual Healthcare Plans of children in their care.
- All staff are responsible for the protection of child confidentiality.
- Before sharing any medical information with any other party, such as when a child takes part in a work experience placement, permission is sought from parents.

## 5.4 <u>Educational Visits / Education Off-Site (Please see Educational Visits Policy for further</u> guidance)

Risk assessments are carried out by the academy prior to any out-of-academy visit and medical conditions are considered during this process. Factors considered include: how all children 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.

Parents are sent a residential visit form to be completed and returned to academy shortly before their child leaves for an overnight stay. This requests up-to-date information about the child's current medical condition and how it is to be managed whilst away.

Staff on educational visits and out-of-academy hours activities are fully briefed on children' individual medical needs. They will have access to the Individual Healthcare Plan and any necessary medication / medical equipment for the duration of the activity.

For all residential visits, a member of staff is appointed as the designated first aider and the appropriate first aid equipment will be taken on the trip.

Risk assessments are carried out before children undertake a work experience or off-site educational placement. It is the academy's responsibility to ensure that the placement is suitable and accessible for a child with medical needs. Permission is sought from the child and their parents before any medical information is shared with an employer or other education provider.

## **Appendices**

Appendix 1 – Academy Individual Healthcare Plan Implementation Procedure

**Appendix 2 – Academy Individual Healthcare Plan Template** 

**Appendix 3a – Academy Medical Procedures (non-Emergency)** 

**Appendix 3b – Academy Medical Procedures (Emergency)** 

**Appendix 4 – Academy Medication Procedures** 

## Appendix 1

## Individual healthcare plan implementation procedure

- Parent or healthcare professional informs academy that child has medical condition or is due to return from long-term absence, or that needs have changed.
- The Health and Wellbeing Lead and SENCO (if an EHC plan is in place) liaise to co-ordinate meeting to discuss child's medical needs and identifies member of academy staff who will provide support to the child.
- Meeting held to discuss and agree on the need for IHCP to include key academy staff, child, parent and relevant professionals.
- Develop IHCP in partnership with other professionals and agree on who leads. Academy staff training needs identified.
- Training delivered to staff (if required.)
- IHCP review date agreed

## Appendix 2

## Individual healthcare plan template

IDENTIFICATION DETAILS	
Student photo	NAME:
	DATE OF BIRTH:
	ADDRESS: FORM:
MEDICAL DETAILS	FORIVI:
IVIEDICAL DETAILS	
MEDICAL CONDITION:	
TREATMENT REGIME:	
n/a	
SIDE EFFECTS: None identified.	
WHAT AN EMERGENCY IS AND ACTION IN C	CASE OF EMERGENCY:
CONTACT DETAILS	
PARENTS/CARERS:	
ALTERNATE FAMILY CONTACT: n/a	
DOCTOR/PAEDIATRICIAN:	
ANY OTHER HEALTH PROFESSIONAL:	
FACILITIES REQUIRED	
EQUIPMENT AND ACCOMMODATION WITH	IIN THE ACADEMY:
<b>EQUIPMENT AND ACCOMMODATION FOR E</b>	EXTERNAL VISITS/TRIPS: n/a
STAFF TRAINING/MANAGEMENT/ADMIN:	
SENDCo to deliver CPD staff training.	
	other (identified) support staff are trained in how to administer
the student's medication log when necessa	ry.
Provision of IHCP.	
CONSENT:	
Student:	Name:

Parent/carer:	Name:
Head Teacher:	Name:
Health and Wellbeing Lead:	Name:
DATE CREATED:	
REVIEW DATE:	

## Appendix 3a

## **Academy Medical Procedures (non-Emergency)**



## ACADEMY PROCEDURES FOR FIRST AID (CHILD FEELING UNWELL)

## CHILD FEELING UNWELL

Eg. complaining of a headache/migraine, stomach-ache, pain in neck, back etc AND HAS NO SEVERE MEDICAL CONDITIONS THAT THE ACADEMY HAVE BEEN MADE AWARE OF.



### **KEEP IN LESSON & CALMLY REASSURE**

REASSURE them and ensure that the classroom ENVIRONMENT REMAINS CALM too.



## COMFORT AND REST

Allow them to TAKE A BREAK from their work for a reasonable period of time OR allow them to slow down their rate of work, as this may help. If removing school blazer/jumper will help the child feel more COMFORTABLE then let them do so.



## CHILD STILL UNWELL? CALL FOR FIRST AIDER.

If their condition doesn't improve or begins to worsen then call for First Aid via email: firstaid@hwga.org.uk

CHILD FEELING UNWELL IS KNOWN TO BE ASTHMATIC, DIABETIC, EPILEPTIC OR HAS A HEART CONDITION



CALL FOR FIRST AID TO COME TO THE CHILD



## KEEP IN LESSON & CALMLY REASSURE

REASSURE them and ensure that the classroom ENVIRONMENT REMAINS CALM too.



IF CHILD'S CONDITION
WORSENS – TREAT INCIDENT
AS A MEDICAL EMERGENCY

## FIRST AID PROCEDURE



## SYMPTOMS THAT CAN BE TRIAGED IN LESSONS AND HOW:

- Feeling sick > sit the student next to an open window and encourage them to drink water. If they need to be sick, allow them to go to the toilet with a sensible student. If they have been sick, email first aid.
- Headaches > allow student to rest their head for few minutes. Ensure they have drank and eaten today, please encourage this if they haven't.
- Period cramps> please
   encourage student to stay in
   lesson. If they state they have
   medication in school to help with
   this, email first aid to confirm.
   Email first aid for advice if
   needed.
- Stomach pain> try to find the cause, encourage student to drink plenty of water. If medicaion available in school, email first aid to confirm.
- Toothaches> If student states medication available in school, email first aid to confirm. Student can otherwise complete lessons.

## **EMAIL FIRST AID**

FIRSTAID@HWGA.ORG.UK



A MEMBER OF THE
FIRST AID TEAM WILL
EMAIL BACK - DO NOT
SEND ANY STUDENT
DOWN TO MEDICAL
UNLESS INSTRUCTED
BY A FIRST AIDER.



## **Appendix 3b**

## **Academy Medical Procedures (Emergency)**

## ACADEMY PROCEDURES FOR FIRST AID (MEDICAL EMERGENCY)

## MEDICAL EMERGENCY

- 1. STAY CALM [STEPS 2-7 SHOULD HAPPEN SIMULTANEOUSLY]
- 2. CALL FOR HELP
- REMOVE ANY VISIBLE DANGERS TO THE CHILD AND MOVE AWAY ANY OTHER CHILDREN (AS BEST POSSIBLE)
- 4. IF REQUIRED PUT CHILD IN RECOVERY POSITION
- CALL 999 (USE ANY PHONE AVAILABLE TO YOU TO DO MAKE THIS CALL)
- BE PREPARED TO GIVE THE FOLLOWING INFORMATION, AS BEST AS YOU CAN, TO THE AMBULANCE SERVICES:
  - NAME AND ADDRESS OF ACADEMY (KING EDWARD VI HANDSWORTH WOOD ACADEMY, CHURCH LANE, HANDSWORTH WOOD B20 2HL)
  - b. YOUR NAME AND ROLE
  - c. NAME, AGE, DOB OF CHILD
  - d. PHYSICAL STATE OF CHILD
- 7. SEND A CHILD TO RECEPTION TO ALERT THEM OF:
  - a. THE MEDICAL EMERGENCY
  - b. NAME OF CHILD
  - c. LOCATION OF CHILD
  - d. THAT A 999 CALL IS BEING MADE
- IF CHILD IS UNCONSCIOUS KEEP CHECKING THAT THEY ARE BREATHING
- IF CHILD IS SLIPPING IN AND OUT OF CONSCIOUSNESS OR IS FULLY CONSCIOUS, REASSURE THEM AND KEEP TALKING TO THEM TO KEEP THEM AWAKE.

## **School Trip Medical Procedure**



## 4 Weeks prior to the trip

Make a list of all students going



Identify those with medical conditions and sort out in groups based on the condition e.g. those with asthma, those with allergies etc

Email Health and Wellbeing Lead for copies of those students IHCP's to take with you and follow on the trip



Ensure those students are aware to bring their own medication - otherwise they will not be able to go on the trip

## 2 Weeks prior to the trip

Email Health and wellbeing Lead for First Aid bags - please specify how many you will need, the date it's needed for and how long it will be kept for

## The morning of/day before trip (If weekend trip then the Friday before)



First Aid bags will be provided and are to be signed out of school and signed back in upon return from the trip - please state if any supplies have been used on trip also

First Aid room can be checked for any Spare Individual student medication if student has forgotten their own. If not found, student not allowed on the trip.

## Appendix 4

## **Academy Medication Procedures (that all staff adhere to)**

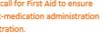


## ACADEMY PROCEDURES FOR MEDICATION ADMINISTRATION ON-SITE



### RESPONSE - READY MEDICATION

If a diabetic or asthmatic child needs to administer medication let them do so in the classroom and call for First Aid to ensure that they can check the student post-medication administration and also log the medication administration.





IF YOU SEE A CHILD SELF-ADMINISTERING MEDICATION AND IT IS RESPONSE-READY (ASTHMATIC, DIABETIC) ALLOW THEM TO ADMINISTER BUT THEN INFORM S.SAEED, E. JONES OR **K.SAEED (WITH AS MANY DETAILS AS** POSSIBLE) ASAP



### TIME SPECIFIC MEDICATION

If a child needs to administer medication at a specific time (eg\_Temporary antibiotics, eczema cream) then they will have a medical pass to this effect allowing them to do so. When they are on their way to the medical room (where all medication is stored) then First Aid also need to be informed to go to the medical room to supervise the medication administration.



IF YOU SEE A CHILD SELF-ADMINISTERING MEDICATION AND IT IS NOT RESPONSE-READY, STOP THEM AND REPORT IT TO S. SAEED ASAP. CONFISCATE THE MEDICATION AND GIVE TO S. SAEED, S. AKTAR OR E. JONES





IF THE CHILD REACTS BADLY TO MEDICATION (IE THEIR CONDITION WORSENS OR DOESN'T IMPROVE AFTER TAKING MEDICATION)

> THEN FOLLOW ACADEMY FIRST AID PROCEDURES IMMEDIATELY.

## **Academy Medication Forms**

Change

## INDIVIDUAL STUDENT MEDICATION LOG Student name: Address: GP: Date of birth: If your child is currently taking medication which needs to be administered during Academy hours, including trips, please provide details of this medication below. You will also need to provide the Academy with said medication which will be kept in the Medical office (if not a trip) or with a designated member of staff (if for a trip.) Please hand all medication into reception in a box labelled with your child's name, date of birth and form group. **MEDICATION BEING PROVIDED BY:** The medical information and medication being provided is, to the best of my knowledge, accurate at the time of writing. I give my consent for my child to self-administer this medication whenever required. If the medication my child needs is response-ready medication (Epipen, Asthma inhaler or Diabetic medication) then I give consent for a designated member of staff to administer it if my child is unable to selfadminister. If my child is asthmatic, I give consent for my child to use one of the academy's emergency inhalers in the case of a medical emergency. If I am providing medication that I have bought over the counter (eg Paracetamol, Ibuprofen, Piriton etc) I give consent for my child to self-administer this medication whenever the need arises. I will inform the academy immediately if there is a change to anything (regarding the named child's medication or medical condition.) Name: \_ Relation to child: Signed: \_\_\_\_ Date: Emergency contact details (phone number): \_\_\_ **Medical condition** Name and strength of Prescription Quantity Date of When medication to be Any other medication medication Only (eg. medication given and dose (how much instructions Medication Number of expiry to be taken) (POM) or tabs. **bought Over** bottles, The Counter inhalers (OTC?) etc) MEDICATION CHANGE NOTIFICATION - Change of dosage, treatment ending etc.

Date of change

## **Academy Medical Risk Assessment**



# MEDICAL RISK ASSESSMENT

Student name:	Form:	DOB:		Date of risk assessment:	S	Student Photo	Photo	
Medical incident/history/context resulting in the need of a medical risk assessment.	ext resulting in	the need of a medi	cal risk assessment.		Who is at risk		Severity	Probability
Severity: 1 = Minimal risk 2 = moderate risk					Probability: 1= 2=	· Unlikely	1 = Unlikely to happen 2 = May happen sometime	
2	RISK		HO What pi	HOW TO MANAGE IT What procedures will we have		мно тс	WHO TO BE INFORMED	
			0)	(Control measures)	Parents/Carers	ers	Staff	Student/s
0					yes		yes	yes
					Yes		Yes	Yes
					Yes		Yes	Yes
					Yes		Yes	Yes