



Grace Academy

Medical and Health Policy (Students)

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1. Introduction

Most students at some time have a medical condition which affects their participation in school activities. Grace Academy will endeavour to help all students to access the curriculum and support their medical needs in the Academy. The Academy aims to provide first aid provision at all times for staff and students.

Throughout this policy where it states parents this should also be read as carers and guardians.

The Academy will, as far as is practicable, comply with the guidelines and statutory guidance in the DfE Publication 'Supporting Pupils at school with Medical conditions' dated April 2014. Consideration has been given to the DfE publication 'Health and Safety: advice on legal duties and powers' dated February 2014. Consideration has also been given to the Children and Families Act 2014 and in particular, although not limited to, section 100 that will come into force on 1 September 2014.

2. Medical Support in the Academy

A designated room is available in each Academy for students who are feeling unwell. Reception staff or a first aider will provide direction. The Principal has overall responsibility for policy implementation. This includes ensuring that sufficient staff are suitably trained and that all relevant staff are made aware of the student's condition (including cover and supply staff where appropriate). At GAC and GAS only the Principal or member of ALT is authorised to send a student home due to sickness. Training needs will be identified with the Principal through CPD and, where necessary, organisations outside of the Academy will be approached to facilitate training. The Administration Manager will take overall responsibility for ensuring that any medication stored by the Academy on a long term basis is refilled and within date.

3. Short term medical needs:

- The trained Academy staff will only administer any prescribed medication to students with written permission from parents. This includes Sabutamol inhalers purchased by the Academy and used in an emergency with overall responsibility for their use by the Administration Manager or delegated qualified first aider. Appendix C form may be used.
- Parents are advised to send student's medications to school, only when absolutely necessary. Any medication brought to the Academy will be handed into reception and a medical consent form completed by the parent/carer. However, some medication i.e. inhaler or epipens should be kept in the students bag.
- The Academy will not administer any non-prescribed medication to students. Parents/carers will be required to attend the Academy to provide this directly to the student.
- It is the responsibility of the parent with parental responsibility to ensure the Academy is notified in writing of any medical issues concerning the student.
- Parents are advised not to send students to school if they are too ill to manage a normal school day.

- Parents are requested to contact the Academy if students have a contagious illness.

4. Long term medical needs:

- Any students who have long term medical needs may have a Care Plan. The Academy, healthcare professional and parent should agree, based on evidence when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the Principal is best placed to take a final view (see Appendix B).
- Care plans will be drawn up with parents on the student's admission to the Academy or when the condition is diagnosed. These will be kept in the medical file and a copy in the student's electronic file. Care plans should capture key information and actions that are required to support the student effectively and reviewed annually or earlier if the student needs change.
- The Academy relies on parents to give full information about the students condition in writing and preferably with supporting information on the condition, student needs and what the school need to know to support the student by the hospital/GP etc. this should be duly signed by a parent with parental responsibility and provide the medication needed.

The Academy will contact the appropriate agencies when necessary for advice and support. The Academy will draw a list of all students who have a medical condition. This will be circulated to the appropriate staff, including, although not limited to the Head of Year and class tutor. The Academy will store medication in the medical cabinet or at reception. However, students will be expected to manage their own medication. Parents should inform us immediately if students haven't taken any medication that impacts on their behaviour i.e. ADHD medication. Written records are kept of all medicines administered to students.

Whilst all staff have a duty to take reasonable care of the Health and Safety of students in the Academy they are not required to administer medicines or supervise a student taking it. Where staff do agree to participate in these duties it is important to recognise that their participation is of a voluntary nature. They should not agree to do so without first receiving appropriate information and training.

The Academy will not, under any circumstances, accept medicines that have been taken out of their container as originally dispensed nor make changes to dosages on parental instructions.

We do not chase students to take their medication. We agree to administer medicine on the basis that the student comes to reception to request their medication then the first aider on rota or another nominated appropriate person will provide this.

If students are participating in an extra-curricular activity or visit out of the Academy, parents will be expected to notify the Academy on the consent form. If a medical issue has arisen since the consent form was signed it is the parent's responsibility to notify the Academy in writing.

5. Intimate Care

Staff who work with students who have special needs will realise that the issue of intimate care is a difficult one and will require staff to be respectful of student's needs. Intimate care can be defined as care tasks of an intimate nature, associated with bodily functions, body products and personal hygiene which demand direct or indirect contact with or exposure of the genitals. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing or bathing. Student's dignity will be preserved and a high level of privacy, choice and control will be provided to them. Staff who provide intimate care to students have a high awareness of protection issues. Staff behaviour is open to scrutiny and Grace Academy will work in partnership with parents/carers to provide continuity of care to students wherever possible. We are committed to ensuring that all staff responsible for the intimate care of students will undertake their duties in a professional manner at all times and recognises that there is a need to treat all students with respect when intimate care is given. No student should be attended to in a way that causes distress or pain.

- All students who require intimate care are treated respectfully at all times; the student's welfare and dignity is of paramount importance.
- Staff who provide intimate care are trained to do so (including Child Protection and Health and Safety training in moving and handling) and are fully aware of best practice.
- Staff will be supported to adapt their practice in relation to the needs of individual students taking into account developmental changes such as the onset of puberty and menstruation. Wherever possible, staff who are involved in the intimate care of students will not usually be involved with the delivery of sex and relationship education as an additional safeguard to both staff and young people involved.
- Wherever possible the student will not be cared for by the same adult on a regular basis; there will be a rota of carers known to the student who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, while at the same time guarding against the care being carried out by a succession of completely different carers.
- Each student's right to privacy will be respected. Careful consideration will be given each individual's situation to determine how many carers might need to be present when a student needs help with intimate care. Where possible one student will be cared for by one adult unless there is sound reason for having two adults present. However, another adult will be in the vicinity at all times.
- Parents/carers will be involved with the student's intimate care arrangements on a regular basis; a clear account of the agreed arrangements will be recorded on the care plan. The needs and wishes of students and parents will be carefully considered alongside any possible constraints; e.g. staffing and equal opportunities legislation.
- Each student will have an assigned member of staff, for example, their Head of Year or Form Tutor, to act as an advocate to whom they will be able to communicate any issues or concerns that they may have about the quality of care they receive.

- As a basic principle they will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each student to do as much for themselves as they can. This may mean, for example, giving them responsibility for washing themselves, when possible. Individual intimate care plans will be drawn up as appropriate to suit the circumstances of the student.
- Where appropriate, all students will be taught personal safety skills carefully matched to their level of development and understanding.
- If a member of staff has any concerns about physical changes in a student's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the appropriate designated person for child protection. A clear record of the concern will be completed and referred to social care and/or the police if necessary. Parents will be asked for their consent or informed that a referral is necessary prior to it being made unless doing so is likely to place the student at greater risk of harm.
- If a student makes an allegation against a member of staff, all necessary procedures will be followed.

6. First Aid

First aid is administered by trained first aiders (First Aid at Work qualified). Their training is updated regularly in accordance with current legislation. A first aider must hold a valid certificate of competence (currently valid for 3 years) issued by an organisation whose training and qualifications are approved by the HSE (Health and Safety Executive). Provision is available at all times. A first aid certificate does not constitute appropriate training in supporting students with medical conditions. Therefore such staff will not give prescription medicines or undertake healthcare procedures without appropriate training.

The Academy staff will use their best endeavour at all times, particularly in emergencies, to secure the welfare of the students at the Academy in the same way that parents might be expected to act towards their children.

The Academy will treat minor problems that arise in the Academy, but will refer serious cases to parents or hospital. Parents will be notified immediately if any student requires hospital treatment and parents will be contacted to take the student to hospital. If for whatever reason parents/carers are unable to accompany the student and an ambulance is required a member of staff will accompany the student in the ambulance and arrangements will be made for the parents/carers to meet the student at hospital. It is the parent's responsibility to ensure that their contact details are up to date at the Academy.

The first aid kits are kept fully stocked. First aid kits must be available for staff to use on visits out of the Academy and PE staff have kits for lessons outdoors.

7. Additional information for Trips and Visits

This is in conjunction with the Trips and visits policy and the medical information contained therein.

The Academy want all students to experience a wide range of activities and therefore health and safety measures should help them to do this safely, not stop them. Managing risk is part of a normal life and therefore a common sense and proportionate approach will be used in assessing and managing the risk of any activity.

Some activities, especially those happening away from the Academy, can involve higher levels of risk. If these are annual or infrequent activities, a review of an existing assessment may be all that is needed. A regular check to make sure the precautions remain suitable is all that is required. If it is a new activity, a specific assessment of significant risk will be carried out.

Within any risk assessment information provided by parents as to the student's medical condition will be considered. If such information is not provided by the parents the Academy cannot take it into account thereby potentially causing unnecessary risks to other students and staff members.

Any injuries will be recorded and reported in line with Academy procedure.

Team leaders should have a working knowledge of first aid. The level of knowledge or qualification required will depend upon the nature of the activity, the extent of outside assistance, the remoteness of the environment and the current health of the group.

As part of the organisation of trips team leaders should ensure that they have received a copy of certification for first aid and, where applicable, insurance of any outside provider. This will form part of any risk assessment and documentary evidence should be provided.

Team leaders who supervise water activities should take account of seasonal differences and be competent in water rescue and life saving techniques including cardio-pulmonary resuscitation. This should be reflected in their qualifications and experience or evidence provided that a recognised instructor with appropriate qualifications will always be in attendance. Emergency procedures are set out in the Trips and Visits policy with a copy of the flowchart attached as Appendix A.

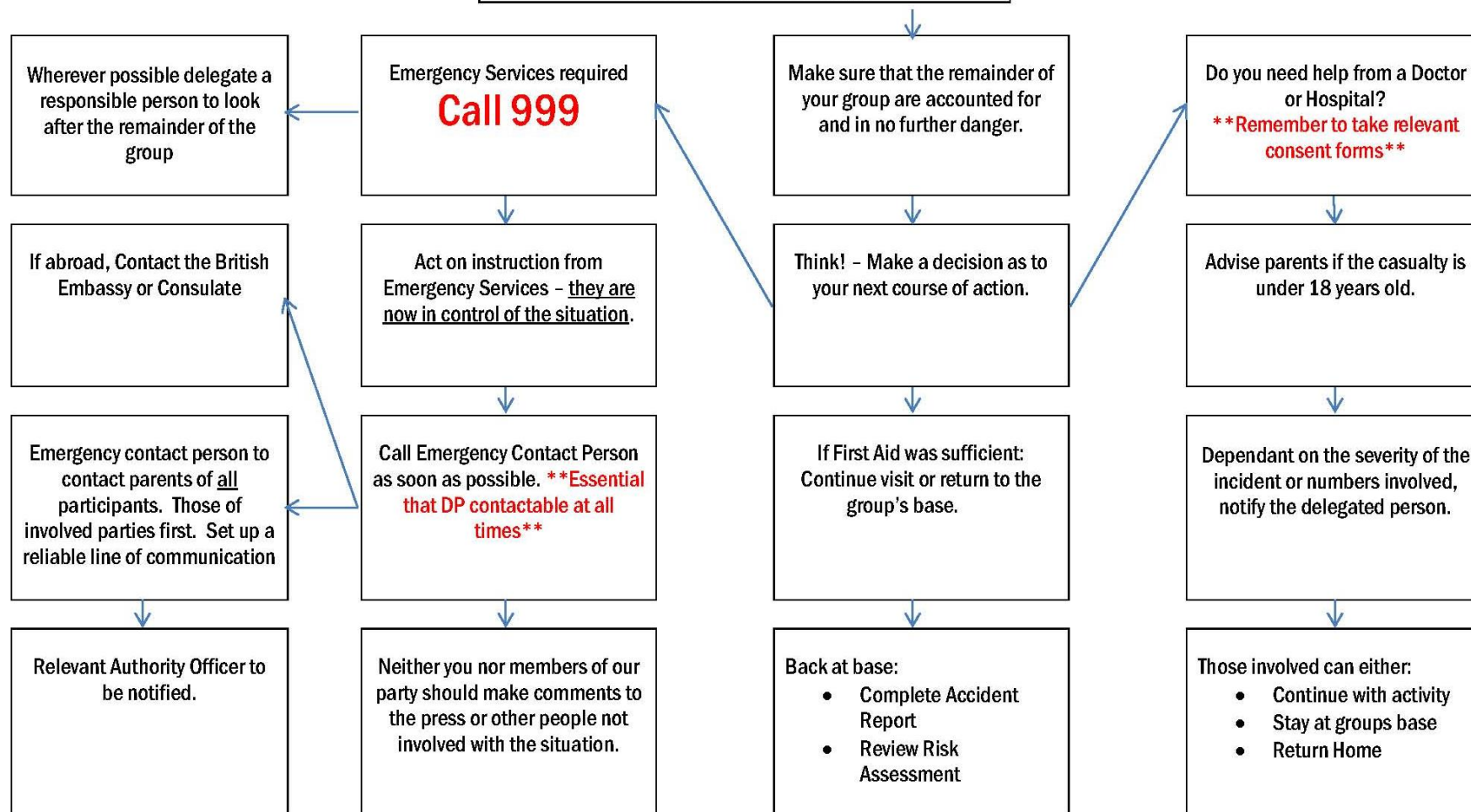
8. Other Matters

Any issues concerning the Academy insurance arrangements which cover staff should be obtained, where appropriate, from the Director of Finance and Operations.

Should parents or students be dissatisfied with the support provided they should discuss their concerns with the Academy. If the issue is not resolved the parent should be given a copy of the complaints policy.

Incident Management Flowchart for Visit Leaders

An Incident Develops



Appendix B:

When deciding what information should be recorded on individual healthcare plans, the following should be considered:

- the medical condition, its triggers, signs, symptoms and treatments;
- the students 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 students 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, (some students will be able to take responsibility for their own health needs), including in emergencies. If a student is self-managing their medication, this should be clearly stated with appropriate arrangements for monitoring;
- who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the student's medical condition from a healthcare professional; and cover arrangements of when they are unavailable;
- who in the Academy needs to be aware of the student's condition and the support required;
- arrangements for written permission from parents and the Principal for medication to be administered by a member of staff, or self-administered by the student during Academy hours;
- separate arrangements or procedures required for school trips or other Academy activities outside of the normal Academy timetable that will ensure the student can participate, e.g. risk assessments;
- where confidentiality issues are raised by the parent/student, the designated individuals to be entrusted with information about the student's condition; and
- what to do in an emergency, including whom to contact, and contingency arrangements. Some students may have an emergency healthcare plan prepared by their head clinician that could be used to inform development of their individual healthcare plan.

Although Academy staff should use their discretion and judge each case on its merits with reference to the student's individual healthcare plan, it is not generally acceptable practice 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 students or their parents; or ignore medical evidence or opinion (although this may be challenged);
- send students with medical conditions home frequently or prevent them from staying for normal Academy activities; including lunch, unless this is specified in their individual healthcare plans;
- if a student becomes ill, send them to the Academy 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 students, including with toileting issues. No parent should have to up working because the Academy is failing to support their students medical needs; or
- prevent students from participating, or create unnecessary barriers to students participating in any aspect of Academy life, including Academy trips, e.g. by requiring parents to accompany students.

A Care Plan is a written agreement that clarifies for staff, parents and the child the help that the Academy can provide and receive. A Care Plan is for a child with individual medical needs, but **not all pupils with medical needs will require a full Care Plan**. For some pupils with medical needs, the Academy may simply require a written agreement in which parents authorise the Academy to administer medicine.

Care Plan for Child with Medical Needs – Part 1 of 2

Name of child:	Photo:
Address:	
Date of birth:	
Condition:	

Name of Academy		Year/Group		Date	
Review Dates					

CONTACT INFORMATION		
Family Contact 1	Name:	Tel Work:
		Tel Home:
		Tel Mobile:
Relationship		
Family Contact 2	Name:	Tel Work:
		Tel Home:
		Tel Mobile:
Relationship		

Clinic/Hospital Contact	
Name	
Clinic/Hospital	
Tel No	
Name of GP	
Tel No	

Describe condition and give details of child's individual symptoms:

Daily care requirements where relevant (e.g. before sport/at lunchtime):

Describe what constitutes an emergency for the child and the action and follow up required if this occurs:

Completed by		Date	
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Care Plan for Child with Medical Needs – Part 2 of 2

This form completes the Care Plan and it is a record that parent/carer, staff and school nurse/doctor all agree with the Care Plan. The original will be kept at the Academy, and copies made for parent/carer, school nurse/health visitor/specialist nurse and GP.

Due to the complexity and unstable nature of some children's medical conditions, the Care Plan can be altered in an emergency to ensure the child's safety. This should be done through consultation between staff and health professionals who are present during the incident. Parents/carers should be contacted and the incident documented on the pupil's records.

It is always the responsibility of parents/carers to keep staff and health professionals fully informed of changes in their child's condition. They must agree the Care Plan and supply necessary medication, ensuring it is in date on a termly basis.

Name of child	
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Name of parent/carer			
Signature of parent/carer		Date	

On behalf of Grace Academy			
Name of Principal			
Signature of Principal		Date	

On behalf of the local NHS Trust			
Name of Doctor/Nurse			
Signature of Doctor/Nurse		Date	

STAFF INDEMNITY statement

Grace Academy fully indemnifies its staff against claims for alleged negligence, providing they are acting within the scope of their employment and have been provided with appropriate training. For the purposes of indemnity, the administration of medicines falls within this definition and hence staff can be reassured about the protection their employer provides. In practice, indemnity means Grace Academy and not the employee will meet the cost of damages should a claim for negligence be successful. It is very rare for the Academy staff to be sued for negligence and instead the action will usually be between the parent/carer and the employer. Staff should at all times follow the guidance provided by the NHS and Grace Academy.

Appendix C

Consent Form to Administer Medicines

The Academy staff will not give any medication unless this form is completed and signed.

Dear Principal or Administration Manager

I request and authorise that my child *be given/gives himself/herself the following medication: (*delete as appropriate)

Name of child		Date of Birth	
Address			
Daytime Tel no(s)			
Academy			
Class (where applicable)			
Name of Medicine:			
Special precautions e.g. take after eating			
Are there any side effects that the school/setting needs to know about?			
Time of Dose		Dose	
Start Date		Finish Date	

This medication has been prescribed for my child by the GP/other appropriate medical professional whom you may contact for verification.

Name of medical professional:	
Contact telephone number:	

I confirm that:

- It is necessary to give this medication during the school/setting day
- I agree to collect it at the end of the **day/week/half term** (delete as appropriate)
- This medicine has been given without adverse effect in the past.
- The medication is in the original container indicating the contents, dosage and child's full name and is within its expiry date.

Signed (parent/carer)	
Date	