City Academy Bristol

MEDICAL CONDITIONS POLICY



Date of policy implementation: 01/02/2016

Approved By: IAB Date: 25/01/2016

Next Review: January 2017

Contents

Content	Page
History of most recent policy changes	3
Context	4
Vision	4
Introduction and Rationale	5
Aims and Objectives	5
Key Principals	5
Medical Care Plans	6
Medication	6
Responsibilities	8
	History of most recent policy changesContextVisionIntroduction and RationaleAims and ObjectivesKey PrincipalsMedical Care PlansMedication

1 History of most recent policy changes

History of most recent policy changes Version	Date	Page	Change	Origin of Change e.g. TU request, Change in legislation
New Policy	25/01/2016			

2 Context

City Academy is a 950 place mixed gender academy situated in East Central Bristol. It serves an area of high deprivation and take students mainly from the local community (Lawrence Hill, Barton Hill, Easton, St Pauls, St George and Whitehall). The student profile is multi-cultural, multi-ethnic and multi-faith, with over 46 different languages spoken and 47.42% of students speaking English as an additional language. 34.3% are free school meals, 70.8% Pupil Premium and approximately 16.8% students are special educational needs.

Bristol is eighth largest city in the UK, with a population of approximately 437500. 18.7% are children with 28% of those being BME (Black Minority Ethnic).

3 Vision

City Academy is a warm, welcoming school where everyone is valued. We believe that **"Every student a graduate -Every student a leader"**, because we believe that each and every student has the talent and potential to succeed. At City Academy we aim to promote equality and tackle any form of discrimination, but more than that we believe in equity. We want to ensure that not only do our students have opportunities but they also have access to those opportunities. We seek to remove any barrier to access, progress, participation, achievement and attainment. We are able to do this by providing a broad and balanced curriculum both in and out of the classroom through structured lessons, Learning Family Time and assemblies. The learning experience we provide to our students aims to eliminate discrimination, advance equality of opportunity and foster good relationships.

Our vision is built on the following values:

Challenge - We challenge our students in their lessons, we challenge ourselves around our performance and delivery.

Trust - We constantly build trust with our community by being honest, transparent and welcoming of external review.

Commitment - We demand the commitment of the staff to work with our students, the commitment of the students to their learning and the commitment of the community to work with the academy.

We are committed to fulfilling our duty to community cohesion. We promote the notion of pride in living in Britain alongside the British values of democracy, individual liberty, the rule of law and tolerance and respect for those who may have a different belief or culture.

4 Introduction and Rationale

The City Academy is a secondary mainstream academy which welcomes young people with a wide range of needs and diversities. Ensuring that students with medical needs are included, that they achieve and that they stay safe is a vital part of our inclusive ethos.

Many students will, at some time, have a medical condition that may affect their day-today experience of school. In addition to this, some students are likely to have significant and / or long-term medical conditions during their time at school.

We are mindful that all medical conditions need to be properly supported and managed in order to ensure full and fair access to education. We recognise that students with medical conditions should have full access to school life, including school trips and physical education.

We aim to work alongside families and young people to ensure that appropriate arrangements are in place. Where necessary, we also consult with health and social care professionals to ensure that the needs of children with medical conditions are effectively met.

This policy is intended to fully reflect the guidance and spirit of the 2014 Statutory DFE Guidance **Supporting Pupils at School with Medical Conditions.**

5 Aims and Objectives

Students with medical needs are entitled to:

- Access a broad and balanced curriculum and a good quality of education;
- Be included in as wide a range of activities as possible;
- Stay safe;
- Have their medical needs supported in school;
- Have their needs known by those responsible for them;
- Be signposted or referred for further medical support and advice where necessary; this may include the school nurse or the NHS School Nursing service.

6 Key Principles

Parents and guardians have prime responsibility for their child's health and are responsible for providing school with information about any medical conditions and associated support needs. If a child's care needs or condition should change at any time, parents are responsible for ensuring that school is aware of these changes.

In the first instance, parents need to contact the Curriculum Leader for Inclusion to makes sure that we are aware of their child's medical needs, or of any change to these needs.

Medical information will be shared with the school staff who work with your child, to ensure that they are aware of your child's needs and any adjustments that might be necessary.

Teachers who have students with medical needs in their classes should understand the nature of the condition and when and where the student might need extra attention. This information is available through SIMS.

7 Medical Care Plans

Some students who have medical needs and conditions will require an individual Medical Care Plan. Where a child has medical or health care needs, the parent, carer or guardians should contact the Curriculum Leader for Inclusion directly to make these known and to arrange a Medical Care Plan meeting. The Medical Care Plan is drawn up by the Curriculum Leader for Inclusion and the School First Aider in collaboration with parents, carers or guardians, and outlines:

- The nature of the medical condition;
- Involved professionals;
- The young person's symptoms;
- The support or care to be put in place;
- Actions to take in an emergency.

This Medical Care Plan is circulated to staff who are involved in working with the child. This would usually include the first aid team, TAs and mentors, the Head of House and Assistant Head of House, and teachers. Medical Care Plan are kept on file and are electronically available for staff to access as necessary. Care plans are usually reviewed and updated on an annual basis, but in situations where a child's condition is rapidly changing or support needs to be altered, this can be done more frequently.

Students with long-term medical need requiring support, but who do not require medication, may still need a health care plan. Students with a long-term medical need but for which medication is self-administered, such as asthma, may not require a Medical Care Plan. In any case, we would ask that parents make contact in the first instance so that their child's needs can be discussed.

We will assist any student in a life threatening situation. If a student who has a Medical Care Plan should find themselves in an emergency situation, then we will aim to ensure that emergency services are provided with a copy of Medical Care Plan.

8 Medication

Some students may need to take medication at points in their school lives, e.g. finishing a course of antibiotics, or applying a cream. Supporting these students will minimise their absence from school and ensure that they have full access to school life as outlined in the Children's and Families Act 2014.

Medication will only be given under guidance of parents and when absolutely essential. No student under 16 will be given medicine without parental consent. In some cases young people will be able to take responsibility for managing their own medicines and procedures and this will be outlined in their care plan.

Parents of students who require medication are responsible for:

- providing school with any medication that their child requires, in a full labelled box, and with the original leaflet kept inside. Only complete packets of medication can be brought into school;
- ensuring that it is in-date;
- checking regularly that school has sufficient stocks of the child's medication and that these are in date, and addressing this if not;
- disposing of it when it's out of date.

Prescribed medication can only be given to a student with the parents' written consent and will not be given unless this has been provided.

Parents are responsible for supplying information about medicines that their child needs to take at school, and for letting school know of any changes to a prescription or support needed – these might include changes to:

- the name of the medication;
- the dosage;
- the method of administration;
- other treatment;
- any side effects.

Medication is then kept in a locked cabinet in the school medical room and can be dispensed by the school first aider.

On occasion, students carry their own medication (such as in the case of inhalers.) This decision is based on wishes of parents, age, maturity and ability of individual child.

Non-prescribed drugs such as paracetamol and ibuprofen will not be given to students without parental consent.

Students will sometimes ask for painkillers. Staff should not give non-prescribed medicines to students. Parents of students who regularly require painkillers, for example, for migraine or dysmenorrhea, should request that a Medical Care Plan is written up to support the administering of medication for the child's use and to supply appropriate painkillers.

If medication needs to be administered in school, the medication will be placed in a tub on a table in the medical room. The student then takes the medication and this is logged in a record book by the School First Aider who then signs the record. This is to prevent the student from taking repeat doses.

There are two keys to the medicine cabinet, one of which is kept by the School First Aider and the other of which is stored in the Inclusion Office.

No student should ever use another student's medication.

Only the School First Aider can give medication.

If one our students should refuse medication, then we will inform the student's parents or carers, and if it is thought medically necessary we will contact emergency services

One exception of this staffing arrangement is school trips, where the First Aider will not be in attendance. On trips and activities, prescribed medication can be given only by named and willing staff who have had training. There is no legal duty requiring school staff to administer medication: this is a voluntary role. It is however the school's responsibility to make sure that those who do so have support from parents, access to information and training. They must know possible side effects and what to do if they occur. Any member of staff who is attending a trip and considering becoming an identified person for the administration of medication should discuss this issue with their professional organisation. Staff organising trips are responsible for writing individual risk assessments for students with medical care needs, and for ensuring that they have printed copies of students' Medical Care Plans ready to take with them. School must make sure that insurance arrangements provide full cover for staff acting within the scope of their employment although it is the employer, not the employee who is likely to be held responsible. It is the employer's responsibility to ensure that correct procedures are followed.

9 Responsibilities

- The Governors, the Principal or Acting Principal/s retain the main responsibility for ensuring the Academy systems comply with the law and keep both students and staff safe.
- The Assistant Principal with oversight of Inclusion is responsible for the (a) design and monitoring of those systems (b) the agreed procedures (c) support and help for the Curriculum Leader for Inclusion and (d) to ensure that all staff have broad training.
- There is a designated teacher with clearly described responsibility for procedures (see below) at an operational level, supported by appropriately trained administrative officers.
- Teachers have a responsibility for ensuring that they are aware of student's medical needs, follow advice given and procedures for trips.
- Our Attendance Team and First Aid Team need to be aware of which students have medical conditions, what they are and what the implications are.
- Health Professionals are responsible for sharing information and skills with staff as needed.
- The Curriculum Leader for Inclusion and School First Aider are jointly responsible for writing Medical Care Plans which will be saved on SIMS.
- The School First Aider is responsible for administering medical support and medications.
- Parents, carers and guardians are responsible for maintaining appropriate supplies of medications and for informing school of any changes to medical needs.

Date Equality Impact Assessment completed:

Policy to be reviewed: October 2016