



CHIPPING NORTON SCHOOL

Policy for the Education of children with Health Needs (STATUTORY)

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| Date reviewed: | 25 April 2025 |
| Next review: | 25 April 2028 |
| Committee: | Impact Committee |
| Member of staff responsible: | Yvette Armistead (DHT) |

Overview

This Policy shall be read in conjunction with:-

- the Policy for Special Educational Needs
- the Policy for Equal Opportunities
- the Accessibility Plan

This Policy takes account of Section 100 of the Student and Families Act 2014 which places a duty on governing bodies to make arrangements for supporting students at their school with medical conditions.

Definition of Health Needs

A student has Health Needs if they have a disability or a physical or mental impairment that has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. These may be: students with chronic or short term health conditions or a disability involving specific access requirements, treatments, support or forms of supervision during the course of the school day or sick students, including those who are physically ill or injured or are recovering from medical interventions or students with mental health problems. The term Health Needs does not cover time limited infectious diseases of childhood, e.g. measles.

Over-riding principles

Chipping Norton School is committed to providing students with a high quality education whatever their Health Needs or individual circumstances. In particular the school is firmly of the view that all students:-

- should have access to the maximum amount of education as their particular medical condition allows
- should be assisted to maintain the momentum of their learning whether they are attending school or going through periods of treatment and/or recuperation
- should be entitled to have all reasonable adjustments made by the school so as to ensure that (*irrespective of any disability, health need or SEN that they may have*) they are not discriminated against or treated less favourably than other students.
- should have as much attention paid to their emotional wellbeing as to their educational progress and achievement on the basis that emotional wellbeing is supportive of educational progress and achievement.

Duties and Procedures to be used

The duties of the school and the procedures to be used are set out in Schedules 1 to 12 of this policy:-

- The general duties of all parties are set out in Schedule 1 to this Policy
- The personnel responsible for the duties are set out in Schedule 2 to this Policy
- The procedures for identifying the Health Needs of a particular student are set out in Schedule 3
- The procedures for promoting liaison between the different parties are set out in Schedule 4.
- The procedures for training of various members of staff are set out in Schedule 5.
- The procedures for record keeping is set out in Schedule 6
- The procedures for meeting the needs of students with Health Needs are set out in Schedule 7.
- The specific duties of parents/carers in respect of absences from school are set out in Schedule 8
- The specific duties of the school in respect of absences from school are set out in Schedule 9
- The specific duties of the school in respect of students taken off the school premises are set out in Schedule 10
- Unacceptable behaviour by the school and its staff are set out in Schedule 11
- The school's "whole school" approach for all of its students and staff is set out in Schedule 12

It is accepted that the procedures set out in the Schedules above can be amended to reflect necessary changes in practice so long as any amendments are in keeping with the over-riding principles as set out above and so long as anything other than minor amendments are brought to the attention of the Governing Body via the Student Support Committee.

Complaints

Should parents or pupils be dissatisfied with the support provided they should discuss their concerns directly with the school. If this does not resolve the issue, they may make a formal complaint via the school's complaints procedure.

Review

This policy will be reviewed by the Impact Committee of the Governing Body every three years, or when necessary, and will be updated when appropriate.

SCHEDULE 1

The duties of the school

The Headteacher has overall responsibility for ensuring that the over-riding principles as set out at the beginning of this Policy are promoted and achieved and that the detail of this Policy is adhered to but the Headteacher may delegate particular aspects of his/her duties to members of staff.

The Governing Body must ensure this Policy is developed and implemented and must in particular ensure that sufficient numbers of staff are trained to implement the Policy and that the appropriate level of insurance is in place and that the insurance appropriately reflects the level of risk incurred by the school and individual members of staff.

Irrespective of whether particular duties have been delegated to a member of staff, supporting a student with a medical condition during school hours is not the sole responsibility of one person and the duties owed to all students including those with specific Health Needs must be attended to by all staff and all staff must familiarise themselves with the Health Needs of the students they work with. For this reason, there must be measures in place so that all staff are aware of this Policy and understand their role in its implementation and so that all staff who need to know are informed of a student's Health Needs.

The school must work collaboratively with any relevant person outside of the school or any agency to provide effective support for all students including those with Health Needs.

Parents/carers and students must always be involved in the process of making decisions and the school must have measures in force at all times to promote co-operation from parents/carers and, as appropriate, the particular student.

Various tools and devices are in place to enable the Headteacher and staff and governors can fulfil their duties as set out above.

SCHEDULE 2

Personnel responsible for the duties set out in this Policy

| <u>Personnel</u> | <u>Name</u> |
|--|----------------------------------|
| Headteacher | Barry Doherty |
| SENCO | Wendy Smart/Selina Chard |
| School Nurse | Michaela Guest/Wendy Bull |
| SLT member responsible for Student Support | Natalie Hancock/Yvette Armistead |
| Named First Aider | Lisa Craig |

Roles and Responsibilities

Local Governing Bodies

Governing bodies should ensure that:

- pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life.
- any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.
- ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are properly understood and effectively supported.
- consider that many of the medical conditions that require support at school will affect quality of life and may be life-threatening. Some will be more obvious than others.
- ensure that the focus is on the needs of each individual child and how their medical condition impacts on their school life.
- ensure that its arrangements give parents and pupils confidence in the school's ability to provide effective support for medical conditions in school.

Headteachers

The Headteacher ensures that the policy is effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.

Headteachers should ensure that all staff who need to know are aware of the child's condition. They should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations. This may involve recruiting a member of staff for this purpose.

Headteachers have overall responsibility for the development of individual healthcare plans. They should also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way. They should contact the school nursing service in the case of any child 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.

Parents

Parents and carers must notify the school as soon as possible if their child has a medical condition. This can be done on the Registration Form. For more complex needs, a meeting should be arranged with appropriate staff to ensure that any training that may be required can be arranged before the child starts school. Parents should provide the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition. Parents are key partners and should be involved in the development and review of their child's individual healthcare plan and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Pupils

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan. Other pupils will often be sensitive to the needs of those with medical conditions. After discussion with parents, children who are competent should be encouraged to take responsibility for managing their own medicines and procedures. This should be reflected within individual healthcare plans.

Wherever possible, children should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication quickly and easily. Children who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, relevant staff should help to administer medicines and manage procedures for them. If a child refuses to take medicine or carry out a necessary procedure, staff should not force them to do so, but follow the procedure agreed in the individual healthcare plan. Parents should be informed so that alternative options can be considered.

School Staff

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

School Health Nurses

Every school has access to school nursing services. If the nurse is aware of a medical condition, they can notify the school if a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school.

They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training.

School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs; for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school. Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

Other Healthcare professionals

Other healthcare professionals, including GPs and paediatricians, should notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may

provide advice on developing individual healthcare plans. Specialist local health teams may be able to provide support in schools for children with particular conditions (e.g. asthma, diabetes, epilepsy).

SCHEDULE 3

Identification of a particular student's Health Needs

Most health needs will be identified by the parents/carers in consultation with a medical professional outside school.

Any medical concerns the school has about a student will be raised with the parents/carers and discussed with the school nurse. Most parents/carers will wish to deal with medical matters themselves through their GP. In some instances the school, after consultation with the parent/carer, may write a letter to the GP (*with a copy to the parents/carers*) suggesting further referral.

Information about medical needs or SEN is requested on admission to the school. Parents/carers are asked to keep the school informed of any changes to their student's condition or treatment. Whenever possible, meetings with the parents/carers and other professionals are held before the student attends school to ensure a smooth transition into the class.

When students enter the school, parents/carers are offered the opportunity of attending a personal interview with the school nurse. At this meeting parents/carers can seek advice on the health of their child.

The School Nurse and Senior Pastoral Leaders will have regular meetings with the Headteacher or SLT member at which the Medical Needs Register is reviewed, and health matters discussed.

If it seems that a student will have significant medical needs which may impact on their education for the foreseeable future, it may be necessary for the school to make an application for an Education Healthcare Plan (EHCP) under the Code of Practice (Students with Medical Needs). The school (SENCO) will consult with the parents/carers on this matter.

The school should contact the appropriate external agency in the case of any student with Health Needs who has not been brought to the attention of the school.

SCHEDULE 4

Liaison between all parties responsible for the care of a student with Health Needs

It is recognised by the school that parents/carers hold key information and knowledge about students in their care and have a crucial role to play.

Parents/carers of all new students will be required to complete a form which gives the school information about the Health Needs of a student, and it is the duty of parents/carers to return this form promptly so that any necessary preparations can be made.

It is also the duty of parents/carers to keep the school informed about any changes in their student's medical condition or in the treatment their student is receiving, including changes in medication. There is, however, no obligation for a student, parent or carer to disclose their HIV or hepatitis status to teachers, LSAs or other staff.

In addition to the formalities set out above, liaison must take place between the school and parents, carers and students both at the point when a particular student's Health Needs are identified and subsequently. Information obtained must be shared with all relevant members of staff so that all relevant members of staff are provided with the necessary information as to the Health Needs of students with whom they are dealing.

A student's parents/carers must be informed about arrangements made by the school. Appropriate liaison must take place with such other agencies and professionals as are involved with the care of the particular student.

A student's parents/carers must be kept informed about contacts made with outside agencies and parents and students will be consulted by the school before a referral is made to other services. Any information shared will be treated in confidence and all information shared with other staff and parties will be on a need to know basis.

The school will work to build up trust and communication methods with all relevant outside bodies and healthcare professionals so as to help ensure that such bodies will notify the school when a student has been identified as having Health Needs that will require support at school and also to secure relevant general advice on developing healthcare plans and perhaps arrange for specialist local teams to provide support for particular conditions (*e.g. Asthma, diabetes*)

SCHEDULE 5

Training

Training will include specific training for specialised staff (*e.g. medical training in particular Health needs*); training for all staff in the recognition of Health Needs that students at the school have or are likely to have; training of relevant staff in the Health Needs of students with whom they have dealings; awareness raising of all students at the school of the Health Needs that students at the school have or are likely to have and the ways in which such students should be dealt with by their fellow students and communication to the parents/carers of students with Health Needs of what they must do in order to support and facilitate staff in carrying out their duties. Specifically:

- All relevant members of staff within the school must be properly trained and informed so they can identify key specialised staff with additional skills.
- Training will be provided in connection with specific medical needs, so that staff know how to meet individual needs, what precautions to take and how to react in an emergency.
- Key staff will be trained to deal with First Aid incidents with protective gloves using universal procedures and the school has a number of First Aiders who regularly attend refresher courses.
- Any member of staff who is asked to take on the responsibility of supporting student with medical conditions should receive sufficient and suitable training and achieve the necessary level of competency before doing so
- Any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.
- Whole-school awareness training will take place so that all staff are aware of the school's policy for supporting pupils with medical conditions and their role in implementing that policy. Induction arrangements for new staff should be included. This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.
- A list of trained first aiders is displayed in reception and a list of staff trained to administer medicines should be available, including those who have had specialist training, e.g. EpiPen is shared with all staff on our G Drive.

SCHEDULE 6

Record keeping

The recording of a particular student's Health Needs and the associated duties by way of one or other of the following devices:

- Medical Needs Register - Information supplied by parents or carers or by students themselves must be transferred to the Medical Needs Register which lists the students in the school in year groups. This can be found on Bromcom and on the G Drive.
- Bromcom records - Necessary information will also be recorded using Bromcom so that staff are aware of each student's needs.
- Care Plan - Any student with a medical condition requiring medication or support in school should have an individual Care Plan or Action Plan which details the support that the student needs. This will be drawn up in consultation with the student and the parents or carers and the school nurse or other outside health professionals. A delegated member of the support staff will supervise the carrying out of the plan. Staff will use the model flow chart process for developing individual healthcare plans

found on p28 of 'Supporting Pupils at School with Medical Conditions' and in the Guidance notes provided by River Learning Trust. Individual healthcare plans and Action Plans (and their review) may be initiated, in consultation with the parent, by a member of school staff or a healthcare professional involved in providing care to the child. Plans should be drawn up in partnership between the school, parents, and a relevant healthcare professional, e.g. school nurse, specialist or children's community nurse or paediatrician, who can best advise on the particular needs of the child. Pupils should also be involved whenever appropriate. If the parents or healthcare professional and school agree that a Care Plan is inappropriate or disproportionate, a record of the student's medical condition and any implications for the student will be kept in the school's Medical Needs Record and in the student's individual record on Bromcom.

- At CNS the following information should also be considered when writing an individual healthcare plan:
 - the medical condition that the student with Health Needs suffers from and its triggers, signs, symptoms and treatments
 - the pupil's resulting needs, including medication and other treatments, times, facilities, equipment, testing, dietary requirements and environmental issues
 - any exercise plan that is needed
 - specific support for the pupil's educational, social and emotional needs
 - the level of support needed including in emergencies
 - who will provide support, their training needs, expectation of their role, confirmation of their proficiency and cover arrangements
 - who in school needs to be aware of the student's condition and the support required
 - arrangements for written permission from parents for medication to be administered by a member of staff or self-administered (student who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision)
 - 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
 - confidentiality
 - what to do if a student refuses to take medicine or carry out a necessary procedure
 - what to do in an emergency, who to contact and contingency arrangements
 - where a student has SEN but does not have an Education, Health and Care plan, their special educational needs should be mentioned in their Care Plan.

SCHEDULE 7

How the needs of students with Health Needs will be met by the school

Whenever the school is notified that a pupil has a medical condition the school must ensure that:

- sufficient staff are suitably trained
- all relevant staff are made aware of a student's condition
- cover arrangements in case of staff absence/turnover is always available
- cover supervisors are briefed
- risk assessments for visits and activities out of the normal timetable are carried out
- individual healthcare plans are monitored (at least annually)
- transitional arrangements between schools are carried out
- if a student's needs change, the above measures are adjusted accordingly

Where a student is joining the school at the start of a new academic year, these arrangements should be in place for the start of term. Where a student joins mid-term or a new diagnosis is given, arrangements should be in place as soon as possible, ideally within two weeks.

In meeting the needs of individual students with Health Needs and in caring for all students the school will make use of medical equipment, medication and layout of the school and arrangement and procurement of furniture. Medical equipment, medication and furniture organisation will include items and organisation that is specific to the student in question (*e.g. wheelchair, crutches, asthma drugs or furniture of a particular height or structure*) or generic (*e.g. defibrillator, first aid equipment, ergonomic furniture or paracetamol*).

Students who need special arrangements for toileting will be able to use the school's specially adapted toilets. Protective gloves and aprons are provided for staff, and there are procedures in place for the disposal of soiled nappies/continence pads and used catheters. Students are encouraged to develop as much independence as possible in connection with toileting.

The school has a community defibrillator available for use in an emergency. These are located in the school reception and outside the finance office. Students who require asthma inhalers are required to carry these with them at all times. Epi-pens should be carried by students and spares provided will be kept safe and accessible in the school reception. Diabetes kits are kept safe and accessible in reception. Other medication (such as paracetamol) is kept in a locked cabinet in the pastoral offices and will only be taken under appropriate supervision and will be logged.

Medicines are only administered in specific circumstances and parents/carers must reach a written agreement with the school before sending in any medication to be administered. There will be one named person to administer drugs with a backup in case of absence. Any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so

It is the responsibility of parents to ensure that medicines are not out of date. Advice recommended by the Department for Education and the Department of Health: *"Managing Medicines in Schools and Early Years Settings"* will be followed. If a student refuses to take medication, the school staff will not force them to do so but the school will inform the parents/carers as a matter of urgency and, if necessary, emergency services will be called.

Students who have to undertake regular exercise programmes will be supervised by a member of staff who has received training from an appropriate professional. When necessary, students will be provided with an exercise bed and a degree of privacy whilst carrying out their exercises. The school will promote back care for students and staff and support those with back pain by considering seating, work stations, lifting and carrying, locker provision, physical activity and awareness training.

The school will provide the necessary support for individual needs. This may include: a suitable eating environment (*e.g. appropriate table height, chair, cutlery, quiet surroundings*) and/or assistance with feeding/drinking which may include specialist training for modified diets or tube feeding. Staff will be trained to ensure the feed is appropriate and hygienically administered. Students will be involved in regular mealtimes whenever possible to ensure social integration.

The Emotional Wellbeing of students with Health Needs will be promoted at all times in recognition of the fact that this will assist the student and his parents/carers in dealing with the health problems of the student in question and also aid the educational progress and achievement of the student.

SCHEDULE 8

Parental duties in respect of a student's absence as a result of Health Needs

Parents/Carers must inform the school if their child is going to be absent on or before the first day. Parents may wish to follow this up in writing to explain the reason for the absence. If no reason is given within 2 weeks the absence will become unauthorised.

When making medical/dental appointments, every effort must be made to ensure appointments are outside school hours but we acknowledge that this is not always possible.

As with the notification of absence, it is very important that parents/carers give the school as much notice as possible about the student's expected date of return to school.

SCHEDULE 9

The school's duties in respect of a student's absence as a result of Health Needs

The school will contact home for all students on the first day of absence if there are no messages left explaining the absence. (Particularly important for vulnerable students)

If a student is away from school for three days without any communication from home and communication from school has not been successful then the student will be reported as a missing person. A letter will be sent home explaining the communication that has been attempted and asking the family to contact the school as a matter of urgency.

If the length of the period of absence can be anticipated, then it may be appropriate for the school to provide the student with work to do at home.

If there is a concern relating to high level of absence due to illness, for example if the student has missed more than 15 days in one year, the school may seek permission to contact the GP, via a letter to parents. Where there is a Child Protection concern relating to absence due to illness, the GP may be contacted directly by the Pastoral Leader/SLT.

If a student is signed off medically unfit to attend school by the GP or CAMHS then the Pastoral Leader/SLT will make a referral to the Hospital School in order for their education to continue outside school.

If a student is to be admitted to hospital for a period longer than 5 working days, then the SLT/PL will contact the Hospital School and will consult with staff there about ensuring continuity of education. When an absence of more than 15 working days can be predicted, arrangements for continuing the student's education will be made by the Pastoral Leader.

The school, with the parents' or carers' cooperation, will maintain contact with students unable to attend school. It may be appropriate for email to be used for this contact and it is helpful if parents/carers sign up for Bromcom messaging service to obtain regular school correspondence to all pupils.

The school will draw up an individually tailored reintegration plan in advance of the student's return to school. This plan will set down any new procedures that need to be followed in school, and will ensure that any additional equipment is in place. Particular attention will be given to matters such as handling and lifting, and support staff will be given appropriate training. It is essential that all agencies involved with the student contribute to the drawing up of the plan. In some cases it will be necessary for outside professionals to be on site when the student first returns to assess the student's needs directly.

For some children, reintegration will be a gradual process. Where mobility and independence are reduced, or where additional medical procedures are involved, a preliminary visit will help to establish whether there are any safety issues that need to be resolved before a date is fixed for the student's return. The school will continue to monitor the progress of students unable to attend. This will be done through discussion with teachers working with the student out of school. In cases of extended absence, the Pastoral Leader will arrange for regular review meetings to be held, attended by the student's parents/carers and appropriate staff members.

The school recognises that the majority of students who have Health Needs are able to attend school regularly and do not have to undergo extended periods of treatment. Such students, however, may need to attend frequent medical appointments which will impact upon their school timetable and, where this occurs, suitable arrangements will be put in place.

SCHEDULE 10

Taking students with Health Needs out of school

Before taking students with Health Needs off the school premises, the member of staff in charge of the visit will ensure the Care Plan is followed and that any medication or equipment needing to accompany students is safely packed and that the school policy on educational visits will be followed.

Any staff member on a trip may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. A Risk Assessment may need to be carried out.

SCHEDULE 11

Unacceptable behaviour that is not in keeping with the spirit of this Policy

The school does not have to accept a student identified as having Health Needs if it does not have the resources to deal appropriately with the Health Needs of that student. For that reason, the following behaviour is not acceptable:

- preventing a student from easily accessing their medication and administering it when and where necessary
- assuming a student with the same condition requires the same treatment
- ignoring the views of the student or their parents or carers or ignoring medical advice or opinion
- sending a student with Health Needs home frequently or preventing them from staying for normal school activities (*unless specifically provided for in that student's Care Plan*)
- penalizing a student for their attendance record if their absences are related to their Health Needs
- preventing a student from drinking, eating or taking toilet breaks whenever they need to in order to manage their Health Needs effectively
- requiring parents or carers to attend school to administer medication or provide medical support to their child, including toileting issues (*no parent or carer should have to give up working because the school is failing to support their student's Health Needs*)
- preventing a student from participating or creating unnecessary barriers to a student participating in any aspect of school life, including school trips (*such as requiring parents to accompany the child*) unless specifically provided for in that student's Care Plan or unless a Risk Assessment has been carried out and it is deemed too high risk for the student to participate on the trip.

SCHEDULE 12

A Whole School Approach

Lifestyle health will be promoted through the 'Healthy Schools Policy' and the 'Personal, Health, Social and Citizenship Education' (PHSCE) curriculum, and tutor programme.

The school will promote healthy eating and physical activity for students and will meet the need for a balanced diet in line with the DfE/DoH school food standards. Support will also be offered to vulnerable students who may be over or under-weight. The PHSCE curriculum will address issues including sex and relationship education and drug and substance misuse. The school will promote positive Emotional Wellbeing in the school community and help students understand and express their feelings to build their confidence, emotional resilience and capacity to learn.

Reviewed 25 April 2025