

Medical Policy Venture Learning

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Introduction

This policy is written to make arrangements to support pupils with medical conditions and to have regard to statutory guidance supporting young people at Venture Learning with medical conditions.

The Children and Families Act 2014 places a duty on schools to make arrangements to support pupils with medical conditions. Individual healthcare plans will normally specify the type and level of support required to meet the medical needs of such pupils. Venture Learning will work closely with the commissioning school to ensure that agreed healthcare plans are implemented at our setting.

We recognise that young people may require on-going support, medicines or care while at school to help them manage their condition and keep themselves well.

We receive and fully consider advice from healthcare professionals and listen to and value the views of parents and students. We recognise the social and emotional implications associated with medical conditions and will support young people and their families to achieve the best outcomes possible.

Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Some may have special educational needs (SEN) and may have a Statement, or Education, Health and care Plan (EHCP) which brings together health and social care needs, as well as their special educational provision. This policy should be read in conjunction with the Special Educational Needs & Disabilities Policy.

Venture Learning believes that students at our provision with medical conditions should be properly supported so that they have full access to all educational opportunities, including off-site visits and physical education.



Key Staff and Contacts

Provision Based Contacts

Name	Role
Rhys Griffiths	Head of Provision
Contact details:	Venture Learning 19A Forester Street Netherfield Nottingham NG4 2LJ www.venturelearning.co.uk
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Section 1: Roles and Responsibilities

2.1 Head of Provision

Takes responsibility for:

- ensuring that staff are aware of this policy and it is implemented effectively;
- ensuring that healthcare plans are shared by commissioning schools;
- implementing healthcare plans, in liaison with healthcare professionals and parents/carers, where circumstances dictate (for example, if the student is diagnosed with a condition after they have started attending Venture Learning); and,
- identifying staff training needs around specific medical conditions or day-to-day medical administrative duties.

2.2 All Staff

Any member of staff working with students may be asked to provide support for students with medical conditions, including the administering of medicines, although they cannot be required to do so.

Staff undertaking medical duties will receive sufficient training to undertake medical tasks and will achieve the necessary level of competency before they take on responsibility to support children with medical needs.

2.3 Students

Students are often best placed to provide information about how their condition affects them and should be fully involved in discussions as much as possible about their medical support needs. This will include encouraging young people who are competent managing their own medicines and procedures to do so, as reflected in their plans.

2.4 Parents/Carers

Parents/carers should provide Venture Learning with the most up to date information about their child's medical needs.

Parents should carry out any actions identified on their child's health care plan and/or medical requirements e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

If a student requires medication to be administered at school, parents/carers must ensure:

- complete written and signed instructions for the administration of medication are provided;
- new medication is supplied in a timely manner when Venture Learning informs them that quantities are running low or nearing expiry dates;
- medication is delivered in a secure container and clearly labelled;
- Venture Learning is notified immediately if the young person's need for the medication has ceased.



Section 2: Procedures for Administering Medication

2.1 Managing Medicines

Medicines should only be administered on site when it would be detrimental to a young person's health or attendance not to do so.

All medicines must be prescribed by a Doctor and in the original container. They must be in date, labelled with the young person's name, instructions for administration, dosage and storage.

All medicines will be stored safely in a room that is monitored or locked at all times so that other students cannot access the medication. Staff will know where their medicines are kept and must be able to access them immediately. Healthcare plans, medicines and equipment will accompany young people on all off-site visits.

Staff administering medication will follow the written instructions provided by parents/carers and will keep a record.

Medicines no longer required will be returned to parents to arrange for safe disposal. Sharps boxes will be made available for the safe disposal of needles when required.

If a student refuses to take medicines, staff will not force them to do so, and will inform the parents/carers of the refusal, as a matter of urgency, on the same day. If a refusal to take medicines results in an emergency, Venture Learning's medical emergency procedures will be followed.

2.2 Healthcare Plans

Healthcare plans ensure that the focus remains on the individual's needs and consider how their medical condition impacts on their day-to-day education.

Healthcare plans provide clarity of what actions need to be taken, when they need to be carried out by and whose responsibility these actions are. All healthcare plans are reviewed annually.

2.3 Unacceptable Practice

In accordance with DfE guidelines, Venture Learning considers the following practices to be unacceptable:

- preventing young people from accessing their medication;
- assuming every child with the same condition requires the same treatment;
- ignoring views of the child and parent (although these may be challenged);
- sending students with medical conditions home frequently and unnecessarily;
- penalising students for their attendance record if absences are related to their medical condition e.g. hospital appointments;
- preventing children from drinking, eating or taking toilet breaks whenever they need in order to manage their medical condition effectively;
- preventing students with medical conditions from participating in any aspect of their educational provision.



Section 3: Medical Emergencies

In the event of a medical emergency, whereby a student has an identified protocol written into their healthcare plan, all procedures will be followed.

In the event of a medical emergency, whereby a young person does not have any identified conditions or illnesses, staff will contact the Emergency Services (999) to attend. In a medical emergency, staff should take emergency action without waiting for parent/guardian consent (if the incident relates to a student). Delays in these circumstances could compromise safety. Once the action has been taken, staff should notify parents/guardians or the student's emergency contact immediately.

In the event of an accident on site whereby the student does not require emergency care, parents should be contacted and advice taken.

Where a student receives a head injury, the First Aider, will assess the situation. Parents/carers will be advised of the incident to ensure appropriate aftercare can be provided.

In the event of an accident on site and the child does not require emergency care and parents cannot be contacted, the First Aider, in consultation the Head of Provision will decide if the student should attend hospital. Parents/carers should be contacted as a matter of urgency and arrange to meet staff at the hospital.

Where parents are unable to be contacted, staff will follow advice and guidance of the medical professionals as to the care which should be administered to a student.

Following an accident within the setting which results in more than minor first aid (i.e. cuts, bruises, bumps), the Head of Provision will be responsible for ensuring that the accident book has been updated accurately and, if appropriate, the commissioning school and local authority for the young person have been informed.

If the accident could be considered, in anyway, the responsibility of Venture Learning, this should be reported through the RIDDOR process.



Section 4: First Aid

4.1 First Aiders

At least one member of staff with current first aid training must be on the premises at any one time. It is the responsibility of the Head of Provision to ensure that there are enough first aiders on staff to fulfil this obligation and to ensure that first aiders have access to the relevant training to keep their status valid. First aiders' names are clearly displayed around the site.

Our current named first-aiders are:

Rhys Griffiths – Head of Provision

Holly Crann – Deputy Head of Provision

Our First Aid Kits:

- are HSE British Standard compliant (2019);
- are regularly checked;
- are restocked as necessary;
- are easily accessible to adults; and,
- are kept out of the way of students.

4.2 Accident Book

The accident book is kept in the staff office where it is accessible to first aiders. All accidents are recorded in this book and shared with the Head of Provision.

The accident books keeps a record of any first-aid treatment given by first aiders and other members of staff. These accident books MUST be written in pen, completed on the same day of the incident, and include:

- The date, time and place of the incident.
- The name of the injured or ill person.
- Details of the injury or illness and first-aid given.
- What happened to the person immediately afterwards (for example, whether they went home, went back to class, or went to hospital).

The information in the accident books can:

- Help usl identify accident trends and possible areas for improvement in the control of health and safety risks;
- Be used for reference in future first-aid need assessments;
- Be helpful for insurance and investigative purposes.

