

Contents:

- 1. Statement of intent
- 2. About our policies
- 3. Definitions of Key Terminology
- 4. Key Responsibilities
- 5. Admissions
- 6. Notification Procedure
- 7. Self-Management
- 8. Individual Healthcare Plans (IHCPs)
- 9. Administering Medications
- 10. Storage of Medications
- 11. School-owned Medical Devices
- 12. Allergies
- 13. Students with Asthma
- 14. Managing Absences
- 15. Support for Students
- 16. Reintegration
- 17. Examinations and Assessments
- 18. Staff Training

Appendix: Individual Healthcare Plan

1. Statement of intent

Wider Ambition recognises the importance of ensuring that all students with medical conditions, in terms of both physical and mental health, receive appropriate support allowing them to play a full and active role in school life, remain healthy, have full access to education and achieve their academic potential.

2. About our policies

- 2.1. Our policies have been developed to comply with all relevant legislation and associated guidance. Policies will be updated periodically as necessary.
- 2.2. Our policies are inter-related and are intended to be read, understood and used collectively.
- 2.3. All staff and governors are expected to be familiar with and abide by our policies.



- 2.4. The School Administrator is responsible for ensuring volunteers and visitors are familiar with any policies which are relevant to their involvement and for taking reasonable steps to ensure compliance.
- 2.5. By accepting and maintaining a placement at a Wider Ambition setting, parents agree to support the ethos and policies. Parents are able to access these documents via the website, or by emailing the School Administrator.
- 2.6. The Headteacher is responsible for ensuring policies are implemented fairly, effectively, and consistently in each setting.
- 2.7. The Headteacher is responsible for identifying any training needs in relation to our policies.

 The School Administrator is responsible for arranging the required training. All staff are expected to engage in continuous learning and ongoing training appropriate to their roles.
- 2.8. The effectiveness of our policies and their implementation is monitored by the Governing Body. Unless otherwise stated, the Governing Body reviews each policy annually.
- 2.9. The Governing Bodies for Wider Ambition settings are provided by Governing for Ambition, an independent community interest company. The Governing Body uses its expertise to monitor the performance of each setting and to advise the Proprietor of any recommended actions. Responsibilities assigned to the Governing Body are limited to these advisory and accountability functions.
- 2.10. Wider Ambition Ltd is a subsidiary of Wider Plan Ltd. References to the Proprietor mean a Director of Wider Ambition or a senior representative from Wider Plan with delegated authority.
- 2.11. The Senior Leadership Team (SLT) includes the Proprietor, Pastoral Lead, Headteacher(s), Deputy Head(s), Quality of Education and Professional Development Lead, Leadership Assistants and any member of staff to whom responsibility is temporarily delegated by the Proprietor or Head(s).
- 2.12. All references to parents within our policies should be interpreted to include parent carers. For older students, the extent to which parents are involved in the student's provision is decided in accordance with statutory requirements and the student's own preferences.

3. Definitions of key terminology

- 3.1. Medication any drug or medical device that is available on prescription or over the counter.
- 3.2. Administration the provision of a drug to a person for ingestion (e.g. paracetamol tablets) or injection (e.g. insulin), or for transmucosal (e.g. salbutamol inhaler/chloramphenicol eye drops), or transdermal absorption (e.g. hyoscine patch).



- 3.3. Staff any person or people employed by Wider Ambition to work at a Wider Ambition setting.
- 3.4. Allergy a condition in which the body has an exaggerated response to a substance (allergen). Also known as hypersensitivity.
- 3.5. Allergen a normally harmless substance that triggers an allergic reaction in a susceptible person.
- 3.6. Allergic reaction the body's reaction to an allergen.
- 3.7. Anaphylaxis (anaphylactic shock) a severe and potentially life-threatening reaction to an allergen.
- 3.8. Minimised risk environment An environment where risk management practices have minimised the risk of (allergen) exposure to a reasonable level. Not an allergen free environment.
- 3.9. Patient any person requiring medical attention

4. Key Responsibilities

- 4.1. The Governing Body is responsible for:
 - 4.1.1. Ensuring that the Supporting Students with Medical Conditions Policy, as written, does not discriminate against any person on the grounds of one or more protected characteristics.
 - 4.1.2. Ensuring that no prospective student is denied admission to Wider Ambition because arrangements for their medical condition have not been made.
 - 4.1.3. Ensuring that students' health is not put at unnecessary risk. As a result, the Governing Body holds the right to not accept a student into Wider Ambition at times where it would be detrimental to the health of that student or others to do so, such as where the student has an infectious disease.
- 4.2. The proprietor is responsible for ensuring that the correct level of insurance is in place for supporting students with medical conditions.
- 4.3. The Headteacher is responsible for:
 - 4.3.1. Ensuring that arrangements are in place to support students with medical conditions.
 - 4.3.2. Ensuring that students with medical conditions can access and enjoy the same range of opportunities as any other student at the school.



- 4.3.3. Ensuring that, following long-term or frequent absence, students with medical conditions are reintegrated into Wider Ambition settings effectively.
- 4.3.4. Working with families, health professionals, commissioners, and support services to ensure that students with medical conditions receive a full education.
- 4.3.5. Contacting appropriate professionals where a student with a medical condition requires support that has not yet been put in place.
- 4.3.6. Ensuring that the focus is on the needs of each student and what support is required to support their individual needs.
- 4.3.7. Instilling confidence in parents and students in Wider Ambitions' ability to provide effective support.
- 4.3.8. Ensuring that parents are aware of their responsibilities as outlined in section 4.7 of this document
- 4.3.9. The development of Individual Healthcare Plans (IHCPs).
- 4.3.10. Ensuring that all students' IHCPs are effectively implemented, monitored, and communicated to relevant members of staff.
- 4.3.11. Considering recruitment needs for the specific purpose of ensuring students with medical conditions are properly supported.
- 4.3.12. Ensuring that members of staff who provide support to students with medical conditions are suitably trained and have access to information needed to guarantee that the needs of students with medical conditions are properly supported.
- 4.3.13. Organising another appropriately trained member of staff to take over the role of supporting students with medical conditions in the case of staff absence.
- 4.3.14. Ensuring the proper maintenance of IHCPs and medical records, including those held on the Management Information System.
- 4.3.15. Ensuring that all staff are aware of any allergies which may affect decisions around food prepared and/or consumed in a Wider Ambition setting.
- 4.3.16. Ensuring that staff members understand what information to give to the emergency services to ensure they have the correct location for the Wider Ambition setting.
- 4.3.17. Ensuring that visiting and temporary staff are appropriately briefed regarding students' medical conditions.
- 4.3.18. Where appropriate, sharing information about students' medical conditions with transport services in order to keep them safe in home-school transport.
- 4.4. The School Administrator is responsible for:
 - 4.4.1. Seeking up-to-date medical information about each student, including information about allergies, via a medical form sent to parents.
 - 4.4.2. Ensuring that medical information and Individual Healthcare Plans are regularly disseminated to relevant staff members, including visiting and temporary staff.



- 4.4.3. Ensuring that all necessary risk assessments are carried out regarding support for students with medical conditions, including for offsite visits, in co-operation with the Headteacher.
- 4.5. Trained staff members are responsible for:
 - 4.5.1. Providing support to students with medical conditions, including administering medicines
 - 4.5.2. Achieving the required level of competency before taking responsibility for supporting students with medical conditions.

4.6. All staff are responsible for:

- 4.6.1. Taking into account the needs of students with medical conditions in their lessons when deciding whether or not to volunteer to administer medication.
- 4.6.2. Being familiar with and implementing student's Individual Healthcare Plans where they exist.
- 4.6.3. Responding immediately and appropriately in the event of a medical emergency or potential medical emergency.
- 4.6.4. Maintaining vigilance for students being bullied or harassed as a result of their medical condition(s).
- 4.6.5. Reinforcing effective hygiene practices, including those in relation to the management of food. Promoting hand washing before and after handling food and related items.
- 4.6.6. Monitoring all food, including snacks, supplied to students by both Wider Ambition and parents, ensuring food containing known allergens is not provided.
- 4.6.7. Ensuring all food is shared safely.
- 4.6.8. Educating all students about the importance of protecting people from allergens.
- 4.6.9. Ensuring that students with asthma have their reliever inhaler with them during physical activity and that they are encouraged to use it when needed.
- 4.6.10. Allowing students to stop during activities if any person thinks that they need to for any reason.
- 4.6.11. Reminding students with asthma whose symptoms are triggered by physical activity to use their reliever inhaler before warming up.
- 4.6.12. Ensuring that physical activities are planned to incorporate natural warm-up and cooldown sessions.

4.7. Parents are responsible for:

- 4.7.1. Notifying Wider Ambition of their child's known long-term medical conditions in writing via the medical form provided to them by the School Administrator.
- 4.7.2. Keeping Wider Ambition up to date with their child's medical information. Where one is required, working alongside Wider Ambition staff and any relevant healthcare professionals to develop an Individual Healthcare Plan to accommodate the student's needs, as well as undertaking the necessary risk assessments.



- 4.7.3. Providing Wider Ambition with up-to-date emergency contact information.
- 4.7.4. Carrying out any agreed actions contained in the IHCP.
- 4.7.5. Signing their child's IHCP, where required.
- 4.7.6. Providing written consent for the use of a school-owned AAI if their child has been identified as at high risk of anaphylaxis.
- 4.7.7. Providing written consent for the use of a school-owned reliever inhaler if their child has asthma.
- 4.7.8. Providing written consent for the administration of medication by staff via a medication administration form (Appendix A) prior to or at the same time as bringing medication to a Wider Ambition setting.
- 4.7.9. Where possible, discussing medications and the administration by staff with their child prior to requesting that staff administer medication.
- 4.7.10. Providing Wider Ambition with written medical documentation, including instructions for administering medication as directed by a medical professional.
- 4.7.11. Providing Wider Ambition with any necessary medication in the original container, clearly labelled with the student's name and the medication expiry date. This includes both AAIs, where they are prescribed.
- 4.7.12. Acting in accordance with any allergy-related requests made by Wider Ambition.
- 4.7.13. Where their child has an identified allergy:
 - 4.7.13.1. Ensuring their child is appropriately aware of allergy self-management, including, where appropriate, being able to identify their allergy triggers and how to react.
 - 4.7.13.2. Communicating to Wider Ambition any specific control measures which can be implemented in order to prevent the child from coming into contact with allergens.
 - 4.7.13.3. Providing a supply of 'safe' snacks for any individual attending Wider Ambition events.
 - 4.7.13.4. Raising any concerns that they may have about the management of their child's allergies with a member of staff.
 - 4.7.13.5. Ensuring that any food their child brings to a Wider Ambition setting is safe for them to consume.
 - 4.7.13.6. Liaising with staff members regarding the appropriateness of any food or drink provided.

4.8. Students are responsible for:

- 4.8.1. Being sensitive to the needs of students with medical conditions.
- 4.8.2. Being involved in discussions about their medical needs and contributing to the development of their IHCPs, as far as they are able.
- 4.8.3. Keeping necessary medications in the location agreed with staff members.



- 4.8.4. Working to understand what action to take during a possible medical emergency, as far as they are able.
- 4.8.5. Ensuring that they do not exchange food brought from outside the premises with other students.
- 4.8.6. Notifying a member of staff immediately if they believe they or another student are having an allergic reaction.
- 4.8.7. Where they have a known allergy:
 - 4.8.7.1. Notifying a staff member immediately if they believe they may have had contact with a known allergen.
 - 4.8.7.2. Learning to recognise personal symptoms of an allergic reaction as far as they are able.
 - 4.8.7.3. Developing independence in keeping themselves safe from allergens as far as they are able.
- 4.8.8. Where they have asthma:
 - 4.8.8.1. Telling a member of staff if they are feeling unwell.
 - 4.8.8.2. Treating asthma medicines with respect.
 - 4.8.8.3. Knowing how to gain access to their medication in an emergency.
 - 4.8.8.4. Knowing how to take their asthma medicine.
- 4.9. All people on a Wider Ambition site are expected to be proactive in the care and management of their medical conditions and the avoidance of known allergens, as far as they are able.

5. Admissions

- 5.1. The Wider Ambition admissions process does not discriminate based on health conditions.
- 5.2. A potential student may only be refused admission on medical grounds if it would be detrimental to their health or the health of another student to admit them and to make the provision safe would place an unreasonable burden on the school.

6. Notification Procedure

- 6.1. Where Wider Ambition is notified that a student has a medical condition that requires support, the headteacher will arrange a meeting with parents, any relevant healthcare professionals, and the student, with a view to discussing the implementation of an IHCP.
- 6.2. Wider Ambition does not wait for a formal diagnosis before providing support to students. Where a student's medical condition is unclear, or where there is a difference of opinion concerning what support is required, the wishes of the student and their parents will take priority, unless there is substantial evidence that this would be detrimental to the safety or wellbeing of the student.



- 6.3. For a student joining Wider Ambition in a September uptake, the Headteacher will ensure that an IHCP and associated arrangements are in place prior to their transition and informed by their parents and previous placement.
- 6.4. Where a student joins Wider Ambition mid-term or a new diagnosis is received, the Headteacher on behalf of Wider Ambition makes best endeavours to implement an IHCP and associated arrangements in good time, aiming for within two weeks.
- 6.5. Where there is a significant medical risk, students will not be able to attend Wider Ambition settings until this risk has been mitigated.

7. Self-management

- 7.1. Following discussion with students and parents, students who are competent to manage their own health needs and medicines are encouraged to take responsibility for selfmanaging their medicines and procedures. This is reflected in their IHCP.
- 7.2. If appropriate, students are allowed to carry their own medicines and relevant devices.
- 7.3. Where it is not possible for students to carry their own medicines or devices, they are held in suitable locations that can be accessed quickly and easily.
- 7.4. If a student refuses to take medicine or carry out a necessary procedure, staff will not force them to do so. Instead, the procedure agreed in the student's IHCP is followed. Following such an event, parents are informed so that alternative options can be considered.

8. Individual Healthcare Plans (IHCPs)

- 8.1. Wider Ambition, healthcare professionals and parents agree, based on evidence, whether an IHCP is required for a student, or whether it would be inappropriate or disproportionate to their level of need. If no consensus can be reached, the headteacher makes the final decision.
- 8.2. Wider Ambition, parents and relevant healthcare professionals work in co-production to create and review IHCPs. Where appropriate, the student is also involved in the process.
- 8.3. IHCPs include the following information:
 - 8.3.1. The medical condition, along with any triggers, symptoms, signs, and treatments.
 - 8.3.2. The student's needs, including medication (dosages, side effects and storage), other treatments, facilities, equipment, access to food and drink (where this is used to manage a condition), dietary requirements and environmental issues.
 - 8.3.3. The support needed for the student's educational, social, and emotional needs.



- 8.3.4. The level of support needed, including in emergencies.
- 8.3.5. Who will provide the necessary support, including details of the expectations of the role and the training needs required, as well as who will confirm the supporting staff member's proficiency to carry out the role effectively.
- 8.3.6. Cover arrangements for when the supporting staff member is unavailable.
- 8.3.7. Who needs to be made aware of the student's condition and the support required.
- 8.3.8. Arrangements for obtaining written permission from parents/carers and the headteacher for medicine to be administered by Wider Ambition staff.
- 8.3.9. Separate arrangements or procedures required during offsite trips and activities.
- 8.3.10. What constitutes an emergency and what to do in an emergency, including contact details and contingency arrangements.
- 8.4. Where a student has an emergency healthcare plan prepared by their lead clinician, this is used to inform the IHCP.
- 8.5. IHCPs are easily accessible to those who need to refer to them, but confidentiality is maintained.
- 8.6. IHCPs are reviewed on at least an annual basis, or when a student's medical circumstances change, whichever is sooner.
- 8.7. Where a student has an EHC plan, the IHCP is linked to it.
- 8.8. Where a child is returning from a period of hospital education, alternative provision, or home tuition, Wider Ambition works to ensure that their IHCP identifies the support the student needs to reintegrate.

9. Administration of medication

- 9.1. Medication will only be administered at a Wider Ambition setting if it would be detrimental to the student not to do so.
- 9.2. Where appropriate, students will be encouraged to self-administer their medication under the supervision of trained staff. Students and their parents will always be consulted before they are given approval to self-administer, and these arrangements will be reflected in their IHCP.
- 9.3. No medication will be administered to any student under 18 years old by staff without written consent from their parents in the form of a completed medication administration form.



- 9.4. Medication will not be administered unless it is in date, labelled with the student's name, and provided in the original container with the drug name and dosage instructions visible. The only two exceptions to this rule are as follows:
 - 9.4.1.Insulin may be administered if it is in date but in a different container, such as an insulin pen.
 - 9.4.2.Out of date adrenaline autoinjectors may be administered in an emergency in the absence of a device that is in date.
- 9.5. Only suitably trained staff will administer medication
- 9.6. Where it is not in their job description, staff members have the right to refuse to administer medication. In the event of this, the Headteacher will delegate responsibility to another staff member.
- 9.7. Before medication is administered, trained staff must check the maximum dose and the time at which the previous dose was administered.
- 9.8. Wider Ambition cannot be held responsible for side effects which occur when medication is administered correctly.
- 9.9. Written records are kept of medication administered to students including the date and time of administration, drug name, dosage administered, to whom and by whom the medication was administered. These records are routinely reviewed, and the information used to inform Wider Ambition procedures.
- 9.10. Where a student refuses to take their medication, staff will not force them to do so, but will follow the procedure agreed upon in their IHCP and the student's parents will be informed so that alternative options can be considered.
- 9.11. Aspirin will only be administered to students under 16 years old where there is evidence of a prescription from a doctor in their name.
- 9.12. Controlled drugs will only be administered where there is evidence of a prescription in the student's name.
- 9.13. Needles and sharp objects are placed in a sharps bin which is taken to a local pharmacy for safe disposal when full.

10. Storage of medication

10.1. Medications which do not require refrigeration are stored securely in a cupboard in the office.



- 10.2. All medications are stored in line with manufacturers' instructions.
- 10.3. Adrenaline autoinjectors, asthma inhalers and seizure rescue medication are never locked away.
- 10.4. Where a student does not wish to keep their prescribed AAIs in their possession, they are stored in the office alongside the Emergency Anaphylaxis Kit and access arrangements are detailed in students' IHCPs.
- 10.5. Medication which requires refrigeration is stored in a locked box in the fridge in Bonsai.
- 10.6. Students will never be prevented from accessing their medication unless it is reasonable to believe that they are likely to use it to harm themselves or another person.
- 10.7. A maximum of four weeks' supply of medication may be provided to Wider Ambition at any one time.
- 10.8. When medications are no longer required, they will be returned to the student's parents.
- 10.9. In the event of an offsite visit, medicines and devices, such as insulin pens, AAIs, seizure rescue medication, and asthma inhalers, will be taken with the students in a staff backpack, or given to individual students to look after as appropriate, along with the necessary paperwork to allow offsite administration.
- 10.10. Staff members who are trained to administer medication are encouraged to recommend improvements to the procedure.

11. Wider Ambition-owned Medical Devices

- 11.1. Under the Human Medicines (Amendment) Regulations 2017 Wider Ambition is able to purchase AAI devices for emergency use from a pharmaceutical supplier without a prescription.
- 11.2. The Headteacher will seek the advice of a medical professional and decide which brand of AAI to purchase. Where possible, this will be the same brand as prescribed to people attending or working in the Wider Ambition setting.
- 11.3. All Wider Ambition-owned AAIs are clearly labelled to avoid confusion with those prescribed to individuals.



- 11.4. Wider Ambition-owned AAIs are stored in an Emergency Anaphylaxis Kit in clearly labelled boxes alongside the IHCPs of any students identified as being at risk of anaphylaxis. The Emergency Anaphylaxis Kit includes the following:
 - 11.4.1. One or more in-date AAIs.
 - 11.4.2. Instructions on how to use the device(s), written by the manufacturer.
 - 11.4.3. Instructions on storage of the device(s), written by the manufacturer.
 - 11.4.4. Other manufacturer's information.
 - 11.4.5. A checklist of injectors, identified by the brand, batch number, and expiry date, alongside records of monthly checks.
 - 11.4.6. Information on the arrangements for replacement of AAIs.
 - 11.4.7. An administration record.
- 11.5. The Emergency Anaphylaxis Kit is located in the office, which is within five minutes' walk of any place where they may be required.
- 11.6. The First Aiders are responsible for conducting half-termly checks to maintain the Emergency Anaphylaxis Kit to the standards set out in 9.3.1.4 of this document.
- 11.7. Any expired school-owned AAIs are disposed of in accordance with the manufacturer's instructions, only after a replacement has been procured.
- 11.8. Wider Ambition makes reasonable efforts to keep a supply of salbutamol inhalers for use in emergencies when a student's own inhaler is not available. These are kept in 'Emergency Asthma Kits'.
- 11.9. Emergency Asthma Kits contain the following:
 - 11.9.1. A salbutamol metered dose inhaler
 - 11.9.2. One plastic, compatible spacer
 - 11.9.3. Instructions on using the inhaler and spacer
 - 11.9.4. Instructions on cleaning and storing the inhaler
 - 11.9.5. Instructions for replacing inhalers and spacers
 - 11.9.6. The manufacturer's information
 - 11.9.7. A checklist, identifying inhalers by their batch number and expiry date
 - 11.9.8. A list of students with parental consent and/or individual healthcare plans permitting them to use the emergency inhaler
 - 11.9.9. A record of administration showing when the inhaler has been used and approximately how many doses remain in the inhaler.
- 11.10. Wider Ambition buys a supply of salbutamol inhalers from a local pharmacy.



- 11.11. The emergency inhaler will only be used by students for whom written parental consent has been received and who have been either diagnosed with asthma or prescribed an inhaler as reliever medication.
- 11.12. Parental consent for the use of an emergency inhaler should form part of any student with asthma's individual healthcare plan.
- 11.13. When not in use, emergency inhalers are stored in the office, according to the manufacturer's instructions, out of reach and sight of students, but not locked away.
- 11.14. Expired or used-up emergency inhalers are returned to a local pharmacy to be recycled.
- 11.15. Emergency inhalers may be reused, provided that they have been properly cleaned after use.
- 11.16. The designated first aiders are responsible for:
 - 11.16.1. Checking that inhalers and spacers are present and in working order, with a sufficient number of doses, on a monthly basis.
 - 11.16.2. Ensuring replacement inhalers are obtained when expiry dates are approaching.
 - 11.16.3. Ensuring replacement spacers are available following use.
 - 11.16.4. Ensuring that plastic inhaler housing has been cleaned, dried, and returned to storage following use, and that replacements are available where necessary.

12. Allergies

- 12.1. Prevention of allergic reactions.
 - 12.1.1. Wider Ambition maintains a policy of acting to prevent the occurrence of allergic reactions in order to minimise distress and disruption for our staff and students. Appropriate precautions will be taken to minimise contact with allergens. These include but are not limited to the following:
 - 12.1.2. Prevention of allergic reactions to foods
 - 12.1.2.1. Wider Ambition requests that staff, students, and visitors do not bring foods containing nuts on to the premises unless a specific individual risk assessment has been agreed. If staff identify nuts or foods containing nuts onsite, these will be stored in the office until they are removed from the site.
 - 12.1.2.2. Learning activities which involve food and drink will be planned in accordance with students' IHCPs, taking into account any known allergies.
 - 12.1.2.3. Food with unknown ingredients or food brought onto the premises by students will not be shared between students or staff unless allergen checking has taken place.



- 12.1.2.4. Food or drink which is purchased by and stored at a Wider Ambition setting and contains common allergens is labelled in line with the Food and Food Hygiene Policy.
- 12.1.3. Prevention of seasonal allergic reactions
 - 12.1.3.1. The term 'seasonal allergies' refers to common outdoor allergies, such as hay fever and insect bites.
 - 12.1.3.2. The paddock and lawns will not be mown while students are outside.
 - 12.1.3.3. Staff will review published pollen levels and make a professional judgement as to whether students with severe seasonal allergies should stay inside on a particular day to avoid contact with seasonal allergens.
 - 12.1.3.4. Students with known seasonal allergies will be encouraged to wash their hands after spending time outside.
 - 12.1.3.5. Staff members will be diligent in the identification of wasp, bee, and ant nests on the premises and in nearby proximity, reporting any concerns to the School Administrator.
 - 12.1.3.6. The School Administrator is responsible for ensuring the appropriate removal of wasp, bee, and ant nests on and around the premises.
- 12.1.4. Individual risk assessments will be developed for students with identified allergies to work alongside their IHCPs.
- 12.2. Identification and management of mild to moderate allergic reactions
 - 12.2.1. The signs and symptoms of a mild to moderate allergic reaction include, but are not limited to:
 - 12.2.1.1. Swelling of lips, face, or eyes
 - 12.2.1.2. Appearance of hives or welts
 - 12.2.1.3. Tingling mouth
 - 12.2.1.4. Abdominal pain and/or vomiting
 - 12.2.1.5. Sudden, unexplained change in behaviour
 - 12.2.1.6. Generalised flushing of the skin
 - 12.2.1.7. Unexplained rising anxiety
 - 12.2.1.8. Unexplained alterations in heart rate
 - 12.2.2. Where one or more of the above is identified in a patient without a prescribed AAI or diagnosis of being at risk of anaphylaxis, the on-duty first aider will be consulted about the management of the patient's condition.
 - 12.2.3. Where one or more of the above is identified in a patient with a prescribed AAI or diagnosis of being at risk of anaphylaxis, the AAI will be administered in line with appropriate staff training.



- 12.2.4. For a mild to moderate allergic reaction, the administration of an AAI will normally be sufficient to halt the reaction; however, the patient will be closely monitored for signs of progression to anaphylaxis.
- 12.2.5. In the event of progression to anaphylaxis, Wider Ambition will act in accordance with section 10.3 of this policy.
- 12.2.6. Where an AAI has been administered, if no there is improvement in the patient's condition after five minutes, a staff will administer a second AAI in line with their training and seek emergency medical advice.
- 12.2.7. Any used AAIs will be disposed of according to the manufacturer's instructions.
- 12.2.8. The Headteacher will ensure that any staff required in the management of an allergic reaction have appropriate cover in place for their timetabled responsibilities.
- 12.3. Identification and management of severe allergic reactions
 - 12.3.1. Where a trained staff member identifies the onset of anaphylaxis in a patient with a prescribed AAI or a diagnosis of being at risk of anaphylaxis, their AAI will be administered in line with appropriate staff training and the on-duty first aider summoned.
 - 12.3.2. Where a trained staff member identifies the onset of anaphylaxis in a patient without a prescribed AAI or a diagnosis of being at risk of anaphylaxis, staff will contact emergency services and seek advice as to whether a school-owned AAI should be administered. An AAI will not be administered in these circumstances without contacting the emergency services.
 - 12.3.3. A staff member will remain present with the patient at all times. A second staff member will be required to collect two AAIs from the designated storage area.
 - 12.3.4. In the event of anaphylaxis, the emergency services will always be contacted, and staff will follow the emergency procedures set out in section 5 of the Wider Ambition First Aid Policy.
 - 12.3.5. Where an AAI has been administered and no there is improvement in the patient's condition after five minutes, staff will administer a second AAI, in line with their training.
 - 12.3.6. Upon arrival of the emergency services, any used AAIs will be given to emergency services staff and the following information given:
 - 12.3.6.1. Any known allergies the patient has
 - 12.3.6.2. The approximate time and circumstances of onset of the allergic reaction
 - 12.3.6.3. The time of administration of any AAIs
 - 12.3.7. Any used AAIs which are not taken by an ambulance crew will be disposed of according to the manufacturer's instructions.



- 12.3.8. Following the occurrence of anaphylaxis, the Headteacher and Proprietor will review Wider Ambition's response and consider the need for any additional training or other corrective action.
- 12.3.9. No part of the Restrictive Physical Intervention section of the Behaviour Policy precludes a person from restraining a patient in order to safely administer an AAI.
- 12.4. Where any AAIs are administered, the following information will be recorded:
 - 12.4.1. The circumstances of the reaction.
 - 12.4.2. The rationale for administering an AAI.
 - 12.4.3. The brand, batch number, and expiry date of the AAI(s) administered.
 - 12.4.4. The dose(s) administered.
 - 12.4.5. By whom the AAI was administered.

13. Students with Asthma

- 13.1. Exercise and Physical Activity
 - 13.1.1. Outside suppliers of physical activities are provided with information about students with asthma taking part in the activity in the form of IHCPs.
 - 13.1.2. Students with asthma are encouraged to participate fully in physical activity when they are able to do so. Students whose asthma is triggered by exercise will be allowed ample time to thoroughly warm up and cool down before and after the session.
 - 13.1.3. During physical activity, each student's labelled inhaler will be kept in a box at the site of the activity.

13.2. Environment

- 13.2.1. Wider Ambition does all that it can to ensure that the environment is favourable to students with asthma and has a definitive no-smoking policy throughout the premises.
- 13.2.2. As far as possible, Wider Ambition does not use any chemicals in lessons that are potential triggers for asthma.
- 13.2.3. If the use of chemicals that are known to be asthmatic triggers cannot be avoided (in Art or Science lessons), asthmatic students will be taken outside of the classroom and provided with support and resources to continue learning.

13.3. Management of asthma attacks

- 13.3.1. Asthma attacks are treated as a medical emergency.
- 13.3.2. Staff will follow the procedure set out in section 5 of the Wider Ambition First Aid Policy



- 13.4. Where the emergency inhaler is used, the incident is recorded in the corresponding record of administration.
- 13.5. Wider Ambition keeps a record of all students with asthma, complete with medication requirements, on the Management Information System.

14. Absences

- 14.1. Parents are asked to contact Wider Ambition on the first day their child is unable to attend due to illness.
- 14.2. Absences due to illness will be authorised unless Wider Ambition has genuine cause for concern about the authenticity of the illness.
- 14.3. Wider Ambition will provide support to students who are absent from school because of illness for a period of less than 15 school days by liaising with the student's parents to arrange schoolwork as soon as the student is able to cope with it or part-time education at school. Wider Ambition will give due consideration to which aspects of the curriculum are prioritised in consultation with the student, their family and relevant members of staff.
- 14.4. For periods of absence that are expected to last for 15 or more school days, , Wider Ambition will offer a bespoke education package on a case-by-case basis. Wider Ambition will inform all relevant agencies.
- 14.5. Wider Ambition will lead a team around the child which will allow a personal education plan (PEP) to be written to meet the ongoing needs of the student.
- 14.6. Wider Ambition will monitor student attendance to ensure it is clear whether a student is, or should be, receiving education otherwise than at school.
- 14.7. Wider Ambition will only remove a student who is unable to attend school because of additional health needs from the school roll where:
 - 14.7.1. The student has been certified by a medical healthcare professional as unlikely to be in a fit state of health to attend school, before ceasing to be of compulsory school age.
 - 14.7.2. Neither the student nor their parent has indicated to the school the intention to continue to attend the school, after ceasing to be of compulsory school age.
- 14.8. A student unable to attend a Wider Ambition setting because of their health needs may require an emergency EHC review.

15. Support for Students



- 15.1. Where a student has a complex or long-term health issue, Wider Ambition will discuss the student's needs and how these may be best met with their parents, relevant medical professionals and, where appropriate, the student.
- 15.2. Wider Ambition will support students with health needs to attend full-time education wherever possible. The school will make reasonable adjustments to students' programmes of study where medical evidence supports the need for those adjustments and are within the scope of the Wider Ambition offer.
- 15.3. Students admitted to hospital will receive education as determined appropriate by the medical professionals and hospital tuition team at the hospital concerned.
- 15.4. During a period of absence, Wider Ambition will work with the provider of the student's education to establish and maintain regular communication and effective outcomes.
- 15.5. Whilst a student is away from school, Wider Ambition will work with the parents and healthcare professionals to ensure the student can successfully remain in touch using the following methods:
 - 15.5.1. Emails
 - 15.5.2. Microsoft Teams meetings.
 - 15.5.3. Cards or letters from peers and staff
- 15.6. Where appropriate, Wider Ambition will provide the student's education provider with relevant information.
- 15.7. To help ensure a student with additional health needs is able to attend Wider Ambition following an extended period of absence, Wider Ambition will work in collaboration with the student, their parents, and relevant professionals to make the necessary arrangements.

16. Reintegration

- 16.1. When a student is considered well enough to return, Wider Ambition will develop a tailored reintegration plan.
- 16.2. Wider Ambition will work with healthcare professionals and parents when reintegration is anticipated to plan for consistent provision during and after the period of education outside school.
- 16.3. As far as possible, the student will be able to access the curriculum and materials that they would have used in school.



- 16.4. If appropriate, healthcare professionals will be involved in the development of the student's reintegration plan, to ensure they can prepare to offer any appropriate support to the student.
- 16.5. Wider Ambition will consider whether any reasonable adjustments need to be made to provide suitable access to the school and the curriculum for the student.
- 16.6. For longer absences, the reintegration plan will be developed near to the student's likely date of return, to avoid putting unnecessary pressure on an ill student or their parents in the early stages of their absence.
- 16.7. Wider Ambition is aware that some students will need gradual reintegration over a long period of time and will always consult with the student, their parents and key staff about concerns, medical issues, timing, and the preferred pace of return.
- 16.8. The reintegration plan will include:
 - 16.8.1. The date for planned reintegration, once known.
 - 16.8.2. The planned frequency of reviews of the integration plan.
 - 16.8.3. How the student's views will contribute to the review.
 - 16.8.4. Details of the named member of staff who has responsibility for monitoring the reintegration plan.
 - 16.8.5. How the student will be supported through reintegration.
- 16.9. Reintegration plans will be flexible and responsive to the student's changing progress and views.
- 16.10. Wider Ambition will ensure a welcoming environment is developed and encourage students and staff to be positive and proactive during the reintegration period.
- 16.11. Following reintegration, Wider Ambition will seek feedback from the student and their parents regarding the effectiveness of the process.

17. Examinations and Assessments

- 17.1. Where a student needs to take public examinations off-site due to their medical condition, a key member of staff will liaise with the alternative provision provider over planning and examination course requirements where appropriate.
- 17.2. Relevant assessment information will be provided to the alternative provision provider if required.



17.3. Awarding bodies may make special arrangements for students with permanent or long-term disabilities and learning difficulties, or temporary disabilities and illnesses.
Applications for such arrangements will be submitted by the school, as early as possible.

18. Staff Training

- 18.1. Wider Ambition provides ongoing whole-school awareness training so that all staff are aware of this policy and understand their roles in its implementation.
- 18.2. All staff receive awareness training related to this policy as part of their induction.
- 18.3. A first aid qualification does not constitute appropriate training for the administration of medication. Other appropriate training must always be undertaken before staff administer medication for students.
- 18.4. The School Administrator will provide staff members with opportunities for training in supporting students with medical conditions as part of their professional development.
- 18.5. Staff will be trained in a timely manner to assist with a student's return to school.
- 18.6. Once a student's return date has been confirmed, staff will be provided with relevant training at least one week before the student's anticipated return.
- 18.7. Healthcare professionals should be involved in identifying and agreeing with Wider Ambition the type and level of training required.
- 18.8. Training will be sufficient to ensure staff are confident in their ability to support students with additional health needs.
- 18.9. Parents of students with additional health needs may provide specific advice but will not be the sole trainer of staff.

Individual Healthcare Plan



Student name

Person(s) responsible for support at Wider Ambition (including cover arrangements)

Medical Condition	
Symptoms	
Triggers	
Medication(s) required to manage this condition*	
Daily care requirements	
Other important information	
Medical Condition	
Symptoms	
Triggers	
Medication(s) required to manage this condition*	
Daily care requirements	
Other important information	
Please indicate if any of	these medications need to be administered at a Wider Ambition setting. Long-term

^{*}Please indicate if any of these medications need to be administered at a Wider Ambition setting. Long-term prescription medication cannot be administered to students at a Wider Ambition setting without both a completed medication administration permission form and an up-to-date Individual Healthcare Plan (IHCP). Medication administration permission forms must be updated at each IHCP review.

Individual Healthcare Plan



Arrangements required to support the student's educational, social, and emotional needs.							
Arrangements required for offsite visits.							
Attracting of the control of the con							
Emergencies							
Signs of medical emergency or potential medical emergency							
Actions to be taken							
Staff Training Requirements							
Training		Persons to undertake training		In-house/external provider			
Plan developed with:							
Role	Name	Signature			Date		
					1		

Date of next planned review:

IHCP finalised: