HEALTH AND WELLBEING POLICY

Policy & Procedure No.	**ED07**
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Reference to

RESPECT Agenda

PIES

The 1996/02/11 Education Act (Section 55O A)

'Guidance on the Use of reasonable force in schools'; DfE 2013

'Guidance on the Use of Restrictive Physical Interventions for Pupils with Severe Behavioural Difficulties;' DfE 2003

'Screening, Searching & Confiscation', DfE November 2012'

OP01 Complaints

OP02 Child Protection

HR01 Staff Discipline, Conduct and Grievance

C6 Risk Assessment

ECS08 Managing Challenging Behaviour

ECS07 Exclusion Policy

1. Rationale

Amberley Court School (ACS) aims to:

• The physical, mental, social, emotional and sexual health of young children and young people is promoted as effectively as possible, by facilitating encouraging healthy lifestyle decisions.

2. Our Principles and Aims

2.1 Our Policy Principle

The policy places emphasis on the health, wellbeing, safety and security of all stakeholders including the pupils, staff, visitors, volunteers, contractors and families.

It outlines how ACS will safeguard stakeholders' health, learning (both formal and informal, medical care and treatment, record keeping, training and monitoring.

2.2 Our Aims

ACS seeks to ensure that the physical, mental, social, emotional and sexual health of children and young people is promoted as effectively as possible, by facilitating encouraging healthy lifestyle decisions.

Each child or young person attending or residing at an ACS service is enabled to develop skills and abilities to the optimum individual level possible in relation to living a healthy lifestyle and making informed choices about their personal health.

3. School Expectations

By health and well-being, the school definitions mean the physical, mental, social, emotional and sexual health of children, young people, staff and other stakeholders.

For children and young people with day placements healthcare responsibilities for the school will generally be limited to the day-to-day good health by adhering to health and medical arrangements outlined in the EHCP and Individual Risk Assessments.

All healthcare treatment must be delivered in accordance with relevant policy and guidance in relation to consent to treatment.

At ACS we work towards standards of health and wellbeing based on the basic principles of mutual respect, consideration, caring and responsibility for oneself and others and honesty. It follows that acceptable standards of behaviour are those which reflect these principles.

4. School Ethos

All school staff have an important responsibility to model high standards of health and wellbeing, both in their dealings with the pupils and with each other. As adults we aim to:

- Enhance pupils outcomes holistically – academically, wellbeing, social and emotional.
- Create a positive climate with realistic, but challenging, individual expectations for pupils.
- Emphasise the importance of being valued as an individual within the group.
- Promotes, through example, respect for others, courtesy and fair treatment for all regardless of age, gender, race, culture, religion, ability, disability and LGBTQ+ orientations.
- Provides a caring and effective learning environment.

Commented [CC1]: Use PACE and WIN strategies and terminology to enhancing pupil's understanding of their behaviours. Possibly? I don't know if that should be there or not?

- Encourages relationships based on kindness, respect and understanding of the needs of others in order to promote their health and wellbeing.
- Ensures, acknowledges and celebrates the achievements, efforts and contribution of all.
- Create a positive climate with realistic, but challenging individual, expectations for pupils.

5. Health Promotion

5.1 Principles of Health Promotion

All colleagues at ACS are responsible for ensuring the active promotion of healthy lifestyles through their actions and adherence to group and divisional policies.

This includes but is not limited to:
(a) Healthy eating
(b) Non-smoking
(c) Regular exercise
(d) Emotional well-being and the elimination of all types of bullying
(e) Recognition and valuing of diversity
(f) Avoidance of substance misuse
(g) Good hygiene procedures

5.2 Learning (Formal and Informal)

All staff are expected to enable children and young people, in accordance with their individual skills and abilities, to develop the ability to make informed choices about their health and wellbeing.

The formal education curriculum will cover aspects of health and well-being: Staff supporting children and young people in the school settings should be aware of what is being delivered through the formal education curriculum in all year groups in order to enhance pupils knowledge and understanding of health and wellbeing thus supporting and developing learning informally when in the community, talking to parent/carers and keyworkers.

Within ACS informal learning in relation to health and well-being is expected to take place both through day-to-day practice in the home, and through forums such as link-working with parents/carers and community (young person) meetings. This should be noted in the appropriate records.

5.3 Medical Care and Treatment

For all ACS placements the Headteacher is responsible for ensuring that the child or young person has the correct paperwork and medication, on-site if necessary, and this is administered correctly and in a timely manner – see the 'Controlled Medication Administration Policy', to assure access to appropriate healthcare and treatment: This will always include evidence of medication prescribed by a medical professional and consent from parents/carers recorded on Arbor.

These would generally be expected to be placements during term time and ACS cannot be responsible for medication outside of school times, weekends or school holidays.

Each child or young person who requires any particular prescribed medical care or treatment (permanently, intermittently or temporarily) must have a record on Arbor of requirements and Controlled Medical Administered Records both on and off-site. Their Individual Risk Assessment must

also include details of all medication required and this will be transferred to any trip or activity risk assessment as appropriate.

Trained medical administration staff are responsible for ensuring that all prescribed medical care or treatment is delivered as required during the time the child or young person is within the care of the school, and that the appropriate records of such treatment are maintained. Records will be checked periodically by a member of the SLT.

Colleagues may escort (support) children and young people to medical appointments, however, colleagues must recognise that children and young people may, where 'Gillick Competent' chose not to be accompanied into appointments.

5.4 Records

Records of healthcare treatment or the refusal of such treatment must be maintained in children and young people's individual case records.

This includes the administration of First Aid – See First Aid Policy HS02 and the administration of Medication – See Medication Policy HS04.

Records of health promotion activity and learning should be maintained as appropriate within individual case records and education records.

When a child or young person leaves a residential care placement colleagues must ensure that they take with them a clear record of health and medical care and treatment to their next provision.

6. Training

All staff will have relevant training and some will have extended training such as the administration of controlled medication and First Aid training. The SLT and HR personnel will be responsible for keeping the appropriate training up to date, recorded and monitored.

Where additional, specific, requirements are identified through the needs of the children and young people placed at the school (For example, training in relation to diabetes, epilepsy, self-harming) additional training will be allotted to specific members of staff such as the SLT, class teacher, activity leads etc.

7. Monitoring

The Senior Leadership Team are responsible for regular monitoring of health and well-being arrangements and their impact through the Governance and Monitoring Processes outlined in the Governance and Monitoring Policy. Quality Assurance and Internal Compliance visits are also conducted by members of the governing body and the directors of the school.

For Schools in England, Ofsted inspections and Local Authority Monitoring Visits will review the effectiveness of health and wellbeing arrangements at the school on a regular basis. Local Authority monitoring visits will be organised annually.

8. Classroom Health and Wellbeing Management

The School believes that classroom management, routines, environmental structure and teaching methods have an important influence on pupils' health and wellbeing. The classroom environment should be set up to support this and give clear messages to the pupils about the extent to which they and their efforts are valued.

Classrooms will be organised to support pupil access to learning, alternative appropriate social and interactional skills, healthy eating and independence. Materials and resources should be arranged to aid communication, understanding, accessibility and reduce anxiety, uncertainty, frustration and disruption, e.g. clear timetables.

Displays should help develop knowledge and understanding through demonstrating the value of every individual's contribution to their own, and others, overall health and wellbeing.

The classroom should provide a welcoming environment. Teaching methods should reflect differentiation and support active participation in the study and learning of what is health and how it should be maximised. PSHE lessons specifically, should aim to develop the skills, knowledge and understanding that will enable the pupils to work, play and socialise in co-operation with others. Where appropriate, specialised teaching and learning approaches, styles and structures will be incorporated within pupils' learning programmes.

All pupils will have a case study attached to their paperwork devised by the classroom teacher. These case studies will consist of three parts – where the **pupil has come from**; their needs, academic levels, issues that have affected their education to date and their SEND requirements. What we do for the **pupil now**; how ACS and its staff are going to support this pupil. What the **pupils wants to attain in the future**; what do they see their future including – further education, health, wellbeing, career, apprenticeship, etc.

END

POSITION	Headteacher	**NAME**	**James Eagle**	**SIGNATURE**	***J Eagle***	**DATE**	**01/09/2026**
POSITION	Governor	**NAME**	**Dave Johns**	**SIGNATURE**	***D Johns***	**DATE**	**01/09/2026**
POSITION		**NAME**		**SIGNATURE**		**DATE**	