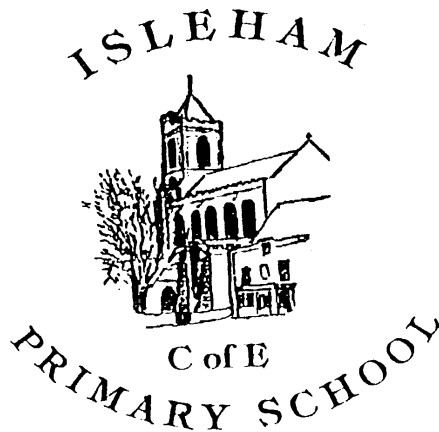


Isleham C of E Primary School



Supporting Children in School
who have Medical Needs

POLICY DOCUMENT	Supporting Children in School who have Medical Needs Policy
Policy Number	60a
Type of Policy –	
Governor Committee	Full Governing Body
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Publication Date	
Chair of Governing Body signature	
Publish on School Website	Yes

Supporting Children in School who have Medical Needs.

This policy was written in line with the requirements of:

- Education Act 1996
- Equality Act 2010
- The UK General Data Protection Regulation (GDPR)
- Data Protection Act 2018
- DfE (2013) 'Ensuring a good education for children who cannot attend school because of health needs'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2022) 'Working together to improve school attendance'

This policy should be read in conjunction with the following school policies SEN policy, Safeguarding policy, First Aid policy, Intimate Care policy, Attendance policy, Accessibility Plan and Complaints policy.

This policy operates in conjunction with the following school policies:

- Attendance and Absence Policy
- Local Authority Medical Needs Policy
- Asthma Policy
- Intimate Care Policy
- First Aid Policy
- Child Protection and Safeguarding Policy
- Children Missing Education Policy
- Pupil Confidentiality Policy
- Data Protection Policy
- Special Educational Needs and Disabilities (SEND) Policy

Local Authority Duties

For the purpose of this policy, the LA's duties when pupils are unable to attend school due to health needs are outlined below. These duties have been included so as to differentiate the responsibilities that lie with the school and those that will be carried out by the LA. The school is not responsible for ensuring that the LA meets its responsibilities – the school's responsibilities are outlined in the '[Roles and responsibilities](#)' section of this policy.

The LA will be responsible for arranging suitable full-time education for children of compulsory school age who, because of illness, would not receive suitable education without such provision. The school will fulfil its duty to effectively collaborate and communicate with the LA as required.

In line with statutory guidance, the LA should:

- Provide such education as soon as it is clear that a pupil will be away from school for 15 days or more, whether consecutively or cumulatively.
- Liaise with the appropriate medical professionals to ensure minimal delay in arranging appropriate provision for the pupil.

- Ensure the education pupils receive is of good quality, allows them to take appropriate qualifications, prevents them from falling behind their peers in school, and allows them to reintegrate successfully back into school as soon as possible.
- Address the needs of individual pupils in arranging provision.
- Have a named officer responsible for the education of pupils with additional health needs and ensure parents know who this is.
- Have a written, publicly accessible policy statement on their arrangements to comply with their legal duty towards children with additional health needs.
- Review the provision offered regularly to ensure that it continues to be appropriate for each pupil and that it provides suitable education.
- Have clear policies on the provision of education for children and young people under and over compulsory school age.
- Maintain good links with the schools in its area and put systems in place to promote cooperation between them when children cannot attend due to ill health.

To comply with statutory guidance, the LA should not:

- Have processes or policies in place which prevent a child from getting the right type of provision and a good education.
- Withhold or reduce the provision, or type of provision, for a child because of how much it will cost.
- Have policies based upon the percentage of time a pupil is able to attend school rather than whether the pupil is receiving a suitable education during that attendance.
- Have lists of health conditions which dictate whether or not they will arrange education for children or inflexible policies which result in children going without suitable full-time education (or as much education as their health condition allows them to participate in).

Definitions of Medical Conditions

“Children with health needs” are children of compulsory school age who are unable to attend school as a result of their medical needs. These medical needs include:

- Physical health issues.
- Physical injuries.
- Mental health problems, including anxiety issues.
- Emotional difficulties or school refusal.
- Progressive conditions.
- Terminal illnesses.
- Chronic illnesses.

Children who are unable to attend mainstream education for health reasons may attend or participate in any of the following:

- **Hospital school** – a school within a hospital setting where education is provided to give continuity whilst the child is receiving treatment.
- **Home tuition** – many LAs have home tuition services that act as a communication channel between schools and pupils on occasions where pupils are too ill to attend school and are receiving specialist medical treatment.
- **Medical PRUs** – these are LA establishments that provide education for children unable to attend their registered school due to their medical needs.

For the purpose of this policy, “**school-based support**” in relation to supporting pupils with additional health needs may include:

Day-to-day support offered at school where the pupil is able to attend as normal.

- Support given to pupils who are absent from school because of illness for a period of less than 15 school days, whether consecutive or cumulative.
- Any educational or extra-curricular provision as requested by the LA as part of its arrangements for pupils who cannot attend school full-time, e.g. where the pupil attends school part-time as an arranged part of their full-time education provision.
- As part of their reintegration into normal school attendance following a period of absence or part-time attendance due to health needs.

“**LA-arranged education,**” for the purpose of this policy, is defined as education provision arranged by the LA where the pupil cannot attend school full time due to medical reasons for a period of 15 school days or more, whether consecutive or cumulative.

• **Roles and responsibilities**

The governing body will be responsible for:

- Ensuring there is a schedule of regular updates on the arrangements made for pupils who cannot attend the school due to their medical needs.
- Ensuring the roles and responsibilities of those involved in any school-based arrangements to support the needs of pupils are clear and understood by all.
- Ensuring robust systems are in place for dealing with health emergencies and critical incidents where a pupil with health needs is able to, or partially able to, attend school and/or extra-curricular activities.
- Ensuring staff with responsibility for supporting pupils with additional health needs are appropriately trained.
- Approving and reviewing this policy on an annual basis.

The headteacher will be responsible for:

- Working with the governing body to ensure compliance with the relevant statutory duties when supporting pupils with additional health needs.
- Working collaboratively with the LA, parents and other professionals, as necessary, to develop any school-based arrangements to meet the needs of pupils.
- Ensuring any school-based arrangements put in place to meet pupils’ health needs are fully understood by all those involved and acted upon.

- Appointing a named member of staff who is responsible for pupils with additional health needs and liaises with parents, pupils, the LA, key workers and others involved in the pupil's care.
- Ensuring any school-based support put in place focusses on and meets the needs of individual pupils.
- Arranging appropriate training for staff with responsibility for supporting pupils with additional health needs who are attending school or attend school part-time.
- Providing teachers who support pupils with additional health needs with suitable information relating to a pupil's health condition and the possible effect the condition and/or medication taken has on the pupil.
- Providing reports to the governing board on the effectiveness of any school-based arrangements in place to meet the needs of pupils of pupils who cannot attend school due to health needs.

Notifying the LA when a pupil is likely to be away from the school for a significant period of time due to their health needs.

The named member of staff will be responsible for:

- The management of any pupils registered at the school who are unable to fully attend school because of their health needs.
- Actively monitoring pupil progress and reintegration into school.
- Supplying any LA-arranged education providers with information about pupils' capabilities, progress and outcomes.
- Liaising with the headteacher, LA-arranged education providers, and parents to help determine pupils' programmes of study whilst they are absent from school, where necessary.
- Keeping pupils who are being educated by LA-arranged education providers informed about school events and encouraging communication with their peers.
- Providing a link between pupils and their parents, the school, and LA where necessary.

Class Teacher will be responsible for:

- Understanding confidentiality in respect of pupils' health needs.
- Designing school-based activities, including lessons, in a way that allows pupils with additional health needs to participate fully and ensuring pupils are not excluded from activities that they wish to take part in without a clear evidence-based reason.
- Understanding their role in any school-based support for pupils with additional health needs and ensuring they attend the required training.
- Ensuring they are aware of the needs of their pupils through the appropriate and lawful sharing of individual pupils' health needs.
- Keeping parents informed of how their child's health needs are affecting them whilst in school-based education.
- Using Teams try to maintain contact with children who are off for longer than a week.

Parents will be expected to:

- Ensure, where school-based provision is in place, the regular and punctual attendance of their child at the school where possible.
- Work in partnership with the school, LA and any LA-arranged provision to ensure the best possible outcomes for their child.
Notify the school, or the relevant education provider, of the reason for any of their child's absences without delay.
- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Attend meetings to discuss how any school-based support, including reintegration, for their child should be planned.

• **Managing absence**

Parents will be required to contact the school on the first day their child is unable to attend due to illness.

Absences due to illness will be authorised unless the school has genuine cause for concern about the authenticity of the illness.

The school will provide support to pupils who are absent from school because of illness for a period of less than 15 school days, whether consecutive or cumulative, by liaising with the pupil's parents to arrange schoolwork, as soon as the pupil is able to cope with it, or part-time education at school. The school will give due consideration to which aspects of the curriculum are prioritised in consultation with the pupil, their parents and relevant members of staff.

For periods of absence that are expected to last for 15 or more school days, either in one absence or over the course of a school year, the named member of staff with responsibility for pupils with additional health needs will notify the LA, who will take responsibility for the pupil and their education.

Where absences are anticipated or known in advance, the school will liaise with the LA to enable education provision to be provided from the start of the pupil's absence.

For hospital admissions, the appointed named member of staff will liaise with the LA regarding the programme that should be followed while the pupil is in hospital.

The LA will set up a personal education plan (PEP) for the pupil which will allow the school, the LA and the provider of the pupil's education to work together.

The school will monitor pupil attendance and mark registers to ensure it is clear whether a pupil is, or should be, receiving education other than at school.

The school will only remove a pupil who is unable to attend school because of additional health needs from the school roll where:

- The pupil has been certified by the school's medical officer as unlikely to be in a fit state of health to attend school, before ceasing to be of compulsory school age; and
- Neither the pupil nor their parent has indicated to the school the intention to continue to attend the school, after ceasing to be of compulsory school age.

A pupil unable to attend school because of their health needs will not be removed from the school register without parental consent and certification from the school's medical officer, even if the LA has become responsible for the pupil's education.

The school will use Teams try to maintain contact with children who are off for longer than a week.

• **Support for pupils**

Where a pupil has a complex or long-term health issue, the school will discuss the pupil's needs and how these may be best met with the LA, relevant medical professionals, parents and, where appropriate, the pupil.

The LA expects the school to support pupils with additional health needs to attend full-time education wherever possible, or for the school to make reasonable adjustments to pupils' programmes of study where medical evidence supports the need for those adjustments.

The school will make reasonable adjustments under pupils' IHPs, in accordance with the Supporting Pupils with Medical Conditions Policy.

Pupils admitted to hospital will receive education as determined appropriate by the medical professionals and hospital tuition team at the hospital concerned.

During a period of absence, the school will work with the provider of the pupil's education to establish and maintain regular communication and effective outcomes.

Whilst a pupil is away from school, the school will work with the LA to ensure the pupil can successfully remain in touch with their school using the following methods:

- School newsletters
- Emails
- Invitations to school events
- Cards or letters from peers and staff

Where appropriate, the school will provide the pupil's education provider with relevant information, curriculum materials and resources.

To help ensure a pupil with additional health needs is able to attend school following an extended period of absence, the following adaptations will be considered:

- A personalised or part-time timetable, drafted in consultation with the named staff member
- Access to additional support in school
- Online access to the curriculum from home
- Movement of lessons to more accessible rooms
- Places to rest at school
- Special exam arrangements to manage anxiety or fatigue

Reintegration

When a pupil is considered well enough to return to school, the school will develop a tailored reintegration plan in collaboration with the LA.

The school will work with the LA when reintegration into school is anticipated to plan for consistent provision during and after the period of education outside school.

As far as possible, the pupil will be able to access the curriculum and materials that they would have used in school.

If appropriate, the school nurse will be involved in the development of the pupil's reintegration plan and informed of the timeline of the plan by the appointed named member of staff, to ensure they can prepare to offer any appropriate support to the pupil.

The school will consider whether any reasonable adjustments need to be made to provide suitable access to the school and the curriculum for the pupil.

For longer absences, the reintegration plan will be developed near to the pupil's likely date of return, to avoid putting unnecessary pressure on an ill pupil or their parents in the early stages of their absence.

The school is aware that some pupils will need gradual reintegration over a long period of time and will always consult with the pupil, their parents and key staff about concerns, medical issues, timing and the preferred pace of return.

The reintegration plan will include:

- The date for planned reintegration, once known.
- Details of regular meetings to discuss reintegration.
- Details of the named member of staff who has responsibility for the pupil.
- Clearly stated responsibilities and the rights of all those involved.
- Details of social contacts, including the involvement of peers and mentors during the transition period.
- A programme of small goals leading up to reintegration.
- Follow-up procedures.

The school will ensure a welcoming environment is developed and encourage pupils and staff to be positive and proactive during the reintegration period.

Following reintegration, the school will support the LA in seeking feedback from the pupil regarding the effectiveness of the process.

• Information sharing

It is essential that all information about pupils with additional health needs is kept up to date.

To protect confidentiality, all information-sharing techniques, e.g. staff noticeboards, will be agreed with the pupil and their parent in advance of being used, in accordance with the Pupil Confidentiality Policy.

All teachers, TAs, supply and support staff will be provided with access to relevant information, including high-risk health needs, first aiders and emergency procedures, via a noticeboard in the staffroom.

Parents will be made aware of their own rights and responsibilities regarding confidentiality and information sharing. To help achieve this, the school will:

- Ensure this policy and other relevant policies are easily available and accessible.
- Provide the pupil and their parents with a copy of the policy on information sharing.
- Ask parents to sign a consent form which clearly details the organisations and individuals that their child's health information will be shared with and which methods of sharing will be used.
- Consider how friendship groups and peers may be able to assist pupils with additional health needs.

When a pupil is discharged from hospital or is returning from other education provision, the school will ensure the appropriate information is received to allow for a smooth return to the school. The named member of staff will liaise with the hospital or other tuition service as appropriate.

• **Record keeping**

In accordance with the Supporting Pupils with Medical Conditions Policy, written records will be kept of all medicines administered to pupils.

Proper record keeping will protect both staff and pupils and provide evidence that agreed procedures have been followed.

• **Training**

Healthcare professionals will be involved in identifying and agreeing with the school the type and level of training required. Training will be sufficient to ensure staff are confident in their ability to support pupils with additional health needs.

Staff will be trained in a timely manner to assist with a pupil's return to school.

Once a pupil's return date has been confirmed, staff will be provided with relevant training before the pupil's anticipated return.

Parents of pupils with additional health needs may provide specific advice but will not be the sole trainer of staff.

• **Individual Healthcare Plans**

Individual Healthcare plans will help to ensure that the school and Nursery effectively supports pupils with medical conditions. They will identify what needs to be done, when and by whom.

A flowchart for identifying and agreeing the support a child needs and developing an individual healthcare plan is provided in Appendix 1.

Individual healthcare plans will be easily accessible to all who need to refer to them while preserving confidentiality. The level of detail within the plan will depend on the complexity of the child's condition and the degree of support needed. Where a child has SEN but does not have a statement or EHCP their special educational needs should be mentioned in their individual healthcare plan.

Individual healthcare plans should be drawn up in partnership between the school, parents/carers and a relevant healthcare professional. Responsibility for ensuring it is finalised and implemented rests with the school. The school and Nursery will ensure that individual health care plans are reviewed at least annually or earlier if necessary.

Appendix 2 is a basic template for an individual healthcare plan, but they should all contain the following information:

- The medical condition, its triggers, signs, symptoms and treatments.
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink, dietary requirements and environmental issues.
- Specific support for the pupil's educational, social and emotional needs (how absences will be managed, requirements for extra time, rest periods)
- The level of support needed.
- Who will provide the support, their training needs, expectations of their role and cover arrangements if they are unavailable.
- Who in school needs to be aware of the child's condition and the support required.
- Arrangements for written permission from parents/carers for medication to be administered by a member of staff or self-administered by the pupil during school hours.
- Separate arrangements or procedures required for school trips or other school activities outside of the normal timetable, i.e. risk assessment.
- What to do in an emergency, including whom to contact and contingency arrangements.
- **The child's role in managing their own medical needs**

If, after discussion with the parent/carer it is agreed that the child is competent to manage his/her own medication and procedures, he/she will be encouraged to do so. This will be reflected in the individual healthcare plan.

If a child self-manages, they may still require a level of supervision and if it is not possible for them to self-manage then relevant staff will help to administer and manage the 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 will be informed immediately so that alternative options can be considered.

- **Managing medicines on school premises and record keeping**

At Isleham CofE Primary School the following procedures are to be followed:

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- School will not store or administer medicines that have not been prescribed to a child, unless the bullet point above applies. (Please make arrangements to come into school if you wish to give your child these medicines).
- In line with other school policies, if medicines are prescribed up to 3 times a day, the expectation is that parents/carers will give these medicines outside of school hours.
- If medicines are prescribed 4 times a day, parents/carers are strongly encouraged to make arrangements to come in and administer these.
- If the school agrees to administer medicines to a child, the parents/carers must provide the medicine in its original container and have the label showing:
 - Name of child:
 - Name of medicine:
 - Method of administration:
 - The instruction leaflet with prescribed medicines should show:
 - Any side effects
 - Expiry date

The school will provide blank medicine record forms (See end of policy), and parents/carers must complete and sign one of these forms if they leave medicine at school.

- **Emergency Procedures**

The headteacher will ensure that arrangements are in place for dealing with emergencies for all school activities wherever they take place.

Where a child has an individual healthcare plan this should define what constitutes an emergency and explain what to do, ensuring that all relevant staff are aware of emergency symptoms and procedures. If a child needs to be taken to hospital, staff should stay with the child until the parent arrives or accompany a child taken to hospital by ambulance.

- **Day Trips, Residential Visits and Sporting Activities**

Children with medical conditions will be actively supported to participate in day trips, residential visits and sporting activities unless there is evidence from a clinician that this is not possible.

A risk assessment will take place to ensure that pupils with a medical condition can be included safely. This will involve consultation with parents/carers, relevant health care staff and informed by HSE guidance on school trips.

- **Unacceptable Practice**

Staff at Isleham should use their discretion and judge each case on its merits with reference to the child's individual healthcare plan. It is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assume that every child with the same condition requires the same treatment.
- Ignore the view of the child or their parents/carers or ignore medical evidence or opinion (although this may be challenged).
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their individual healthcare plans.
- If the child becomes ill send them to the first aid area/office unaccompanied.
- Penalise children for their attendance record if their absences are related to their medical condition, i.e. hospital appointments.
- Prevent pupils from drinking, eating or taking toilet breaks whenever they need to in order to manage their medical condition effectively.
- Require parents/carers or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parents should have to give up working because the school is failing to support their child's medical needs.
- Prevent children from participating or creating unnecessary barriers to children participating in any aspect of school life, including trips.

- **Examinations and assessments**

The named member of staff will liaise with the alternative provision provider over planning and examination course requirements where appropriate.

Relevant assessment information will be provided to the alternative provision provider if required.

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

- **Complaints**

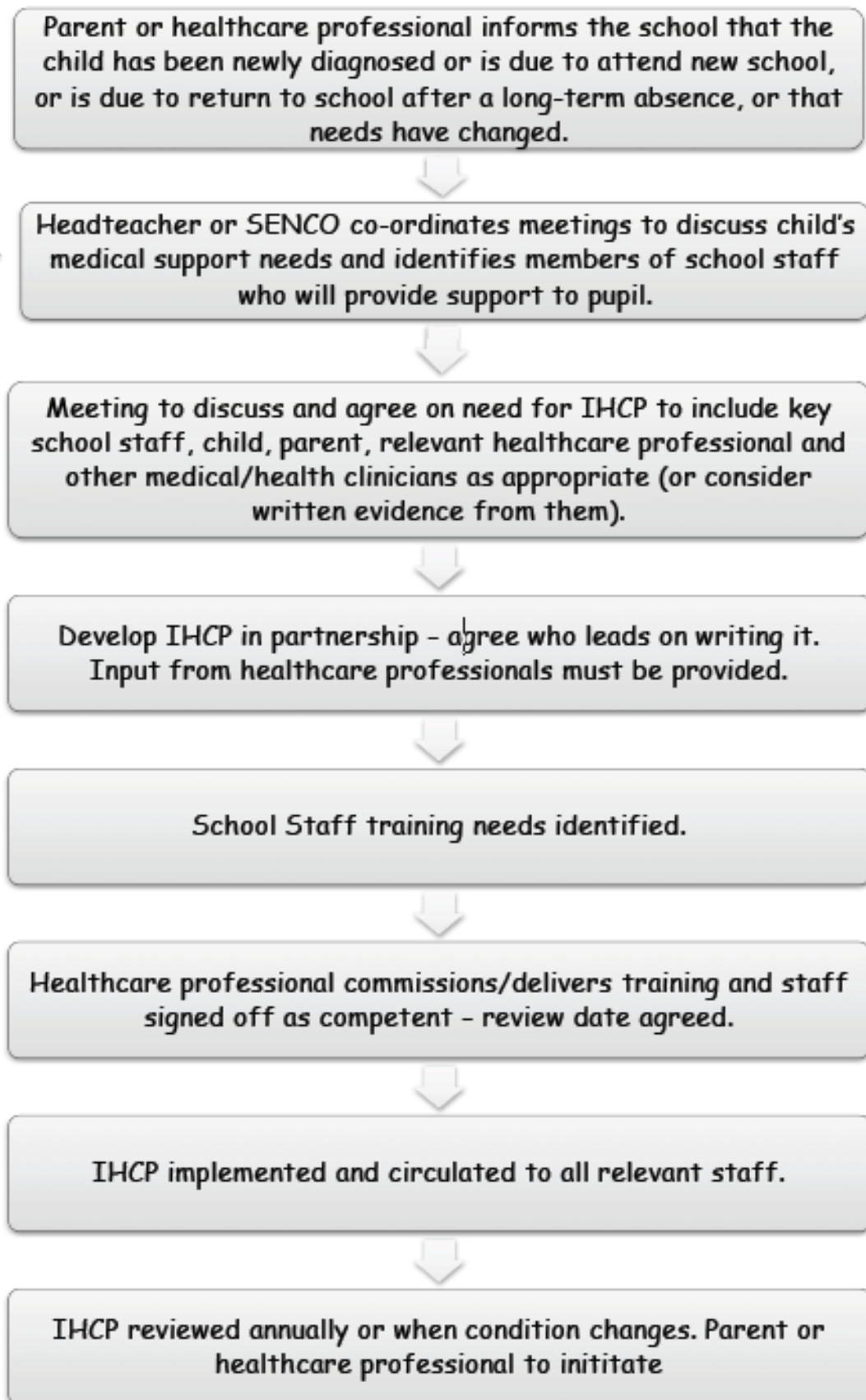
Should parents/carers be unhappy with any aspect of their child's medical care at school they must discuss their concerns with the school. This will be the Class teacher in the first instance. If this does not resolve the problem, then the headteacher should be informed. If this does not resolve the issues, then the parent/carer must make a formal complaint using the Isleham CofE Primary School Complaints Procedure.

- **Monitoring and review**

This policy will be reviewed by the governing board on an annual basis.

Any changes to the policy will be clearly communicated to all members of staff involved in supporting pupils with additional health needs, and to parents and pupils themselves.

Appendix 1:



Appendix 2:

Individual healthcare plan – Isleham CofE Primary School



Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing support
in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-
indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Appendix 3:

Parental agreement for Isleham CofE Primary School to administer medicine



The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that the staff can administer medicine. Parents/carers must provide the medicine in its original container and must have been dispensed by a pharmacist and have the label showing:

- Name of child:
- Name of medicine:
- Method of administration:
- The instruction leaflet with prescribed medicines should show:
- Any side effects
- Expiry date

Date for review to be initiated by

Name of school/setting

Name of child

Date of birth

Group/class/form

Medical condition or illness

Medicine

Name/type of medicine

(as described on the container)

Expiry date

Dosage and method

Timing

Special precautions/other instructions

Are there any side effects that the school/setting needs to know about?

Self-administration – y/n

Procedures to take in an emergency

NB: Medicines must be in the original container as dispensed by the pharmacy

Contact Details

Name

Daytime telephone no.

Relationship to child

Address

I understand that I must deliver the medicine personally to

[agreed member of staff]

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

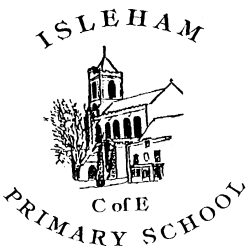
Signature(s) _____

Date _____

Appendix 4:

Record of medicine administered

Child's name



Time	Name of medicine	Dose given	Any reactions	Signature	Print name of staff	Witness (controlled drugs)	Signature