



## Children with health needs who cannot attend school Policy

Leading Staff Responsible	Mrs Das-Mahon
Reported to	Local Governing Committee
Date	Autumn 2 2024
Date of Next Review	Autumn 2025

## Introduction and Rationale

At St Mary's Hampton Church of England Primary School, we believe that learning should be a rewarding and enjoyable experience and should take place in an environment where everyone feels safe and secure. Our Children with health needs who cannot attend school policy supports us in working together to build a caring, inclusive community, in which we all grow and flourish under God's guidance. Our core values of Faith, Hope and Love are rooted in how we nurture good attitudes and behaviours for all.

### ***Faith***

- We have understanding, appreciation and respect for all faiths and views.
- We have courage in the choices we make.

### ***Hope***

- We are ready, respectful and responsible at all times.
- We find solutions to problems to stay hopeful and resilient in the face of challenges.

### ***Love***

- We will treat others as we would wish to be treated and realise that our actions, thoughts and words matter.
- We show understanding, tolerance and compassion of others emotional, academic and social starting points.
- We are honest, loyal and forgiving.

## Aims

This policy aims to ensure that:

- Suitable education is arranged for pupils on roll who cannot attend school due to health needs
- Pupils, staff and parents understand the school's responsibility when this education is being provided by the local authority

Our school rules are embedded within our Children with Health Needs who Cannot Attend School Policy.

Our school rules encourage all children to be ***Ready, Respectful and Responsible learners***. These are displayed in every classroom and are understood by all children.

Ready, Respectful and Responsible learners are defined as:

### ***Ready***

- Being in a regulated state to learn
- Having access to self-regulation strategies to learn
- Having courage and resilience to take on challenges and learn something new.

### ***Respectful***

- Being understanding and respectful of others
- Being compassionate at all times
- Treating others as we would wish to be treated.

### ***Responsible***

- Being honest, loyal and forgiving
- Realising that our actions, thoughts and words matter.

## Legislation and guidance

This policy reflects the requirements of the [Education Act 1996](#).

It also based on guidance provided by our local authority (Accessible via:

[https://kr.afcinfo.org.uk/local\\_offer](https://kr.afcinfo.org.uk/local_offer))

This policy complies with our funding agreement and articles of association.

## The responsibilities of the school

St Mary's Hampton CoE Primary School recognises pupils at school with medical conditions should be properly supported so they have full access to education, including school trips and physical education. Some children with medical conditions may be disabled and where this is the case St Mary's Hampton CoE Primary School will comply with its duties under the Equality Act 2010. Some pupils may also have special educational needs (SEND) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision and the SEND Code of Practice (2014) is followed. The arrangements for each pupil will be made on entry to St Mary's Hampton CoE Primary School and will be personal to each children's needs.

### If the school makes arrangements:

Initially, the school will attempt to make arrangements to deliver suitable education for children with health needs who cannot attend school.

### Further details:

The Assistant Headteacher for Inclusion, Monika Das-Mahon, will be responsible for making and monitoring these arrangements, in partnership with the Co-Headteachers.

*Arrangements may include:* virtual tours for trips, online learning and packs of learning/ projects sent home for pupils to complete.

Parents and children will be consulted about the methods of learning best suited for the child. For example, regular monitoring and review meetings will take place between the Assistant Headteacher and the family to measure the effectiveness of the method of learning taking place out of school.

Children will be reintegrated back into school; the arrangements for which will be determined by the Assistant Headteacher and class teacher's consultation with parents. In some cases, a phased return will be considered.

### If the local authority makes arrangements:

If the school can't make suitable arrangements, Richmond will become responsible for arranging suitable education for these children.

In cases where the local authority makes arrangements, the school will:

- Work constructively with the local authority, providers, relevant agencies and parents to ensure the best outcomes for the child
- Share information with the local authority and relevant health services as required
- Help make sure that the provision offered to the child is as effective as possible and that the child can be reintegrated back into school successfully
- When reintegration is anticipated, work with the local authority to:
  - Plan for consistent provision during and after the period of education outside the school, allowing the child to access the same curriculum and materials they would have used in school as far as possible

- Enable the child to stay in touch with school life (e.g. through newsletters, emails, invitations to school events or internet links to lessons from the school)
- Create individually tailored reintegration plans for each child returning to school
- Consider whether any reasonable adjustments need to be made.

### **Monitoring arrangements**

This policy will be reviewed annually by the Assistant Headteacher for Inclusion: Monika Das-Mahon. At every review, it will be approved by the local governing committee.

### **Supporting Children with Medical Conditions who cannot attend school**

Children with medical conditions will often be best placed to provide information about how their condition affects them. Children should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

### **Legislation and statutory responsibilities**

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on local governing committee to make arrangements for supporting children at their school with medical conditions.

It is also based on the Department for Education's statutory guidance on [supporting children with medical conditions at school](#).

### **Roles and responsibilities**

#### **The local governing committee**

The governing board has ultimate responsibility to make arrangements to support children with medical conditions. The local governing committee will ensure that sufficient staff have received suitable training and are competent before they are responsible for supporting children with medical conditions.

#### **The Co-Headteachers**

The Co-Headteacher will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs
- Make sure that school staff are appropriately insured and aware that they are insured to support children in this way
- Contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date.

## **Staff**

Supporting children with medical conditions during school hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to children with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support children with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Teachers will take into account the needs of children with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

## **Parents**

Parents will:

- Provide the school with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

## **School nurses and other healthcare professionals**

Our school nursing service will notify the school when a pupil has been identified as having a medical condition that will require support in school. This will be before the pupil starts school, wherever possible. They may also support staff to implement a child's IHP.

Healthcare professionals, such as GPs and pediatricians, will liaise with the school's nurses and notify them of any children identified as having a medical condition. They may also provide advice on developing IHPs.

## **Equal opportunities**

Our school is clear about the need to actively support children with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.

The school will consider what reasonable adjustments need to be made to enable these children to participate fully and safely on school trips, visits and sporting activities.

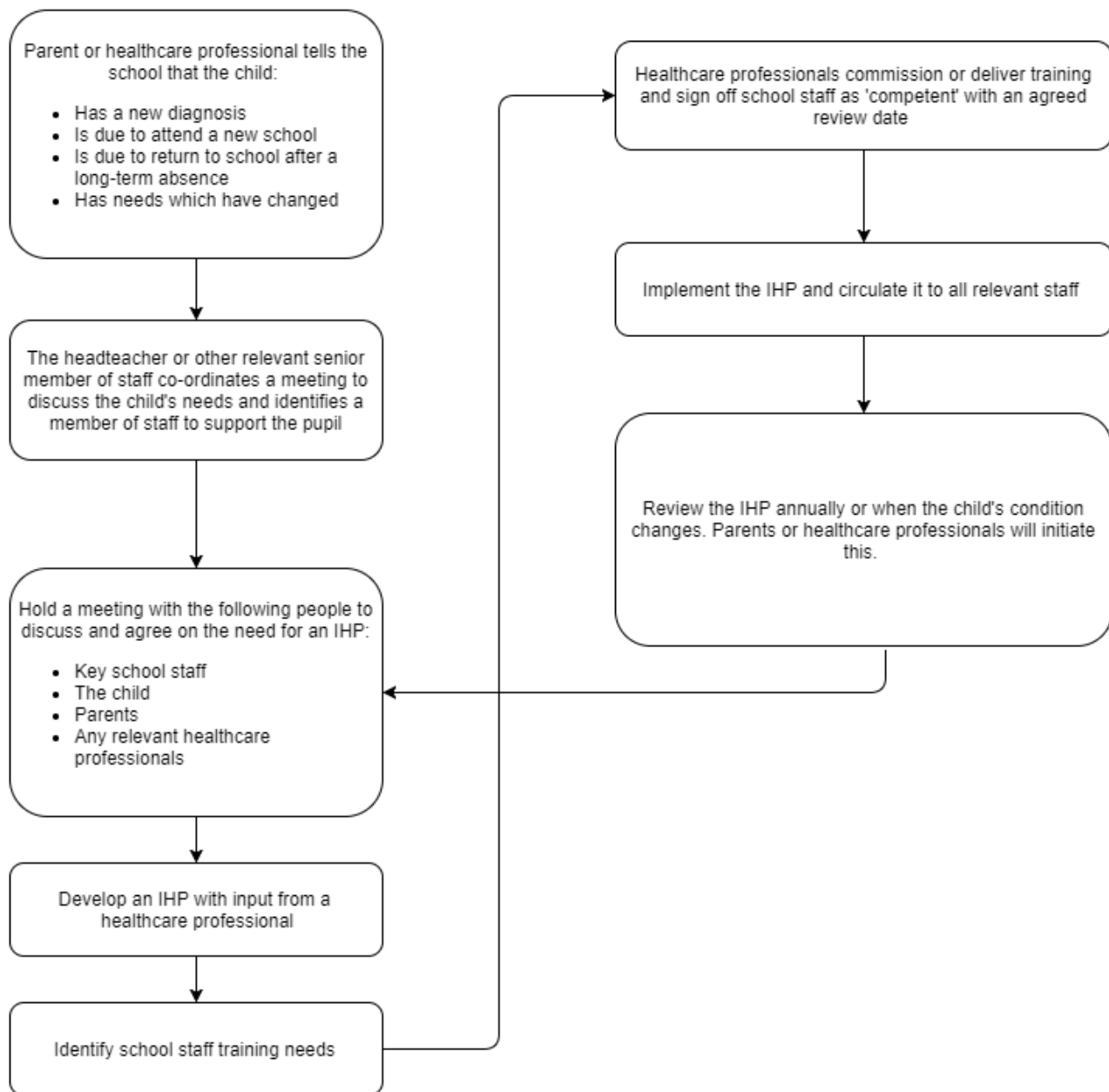
Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that children with medical conditions are included. In doing so, children, their parents and any relevant healthcare professionals will be consulted.

## **Being notified that a child has a medical condition**

When the school is notified that a child has a medical condition, the process outlined below will be followed to decide whether the child requires an IHP.

The school will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for children who are new to our school.

## Being notified a child has a medical condition



### Individual healthcare plans

The headteacher has overall responsibility for the development of IHPs for children with medical conditions. This has been delegated to the Assistant Headteacher.

Plans will be reviewed at least annually, or earlier if there is evidence that the child's needs have changed.

Plans will be developed with the child's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all children with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or paediatrician, who can best advise on the child's specific needs. The child will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a child has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The local governing committee and Assistant Headteacher with responsibility for developing IHPs, will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The child's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the school needs to be aware of the child's condition and the support required
- Arrangements for written permission from parents and the co-headteacher 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 school timetable that will ensure the pupil can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition
- What to do in an emergency, including who to contact, and contingency arrangements

## Managing medicines

Prescription and non-prescription medicines will only be administered at school:

- When it would be detrimental to the child's health or school attendance not to do so **and**
- Where we have parents' written consent.

**The only exception to this is where the medicine has been prescribed to the child without the knowledge of the parents.**

Children under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a child any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

The school will only accept prescribed medicines that are:

- In-date
- Labelled

- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The school will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Children will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

### **Controlled drugs**

[Controlled drugs](#) are prescription medicines that are controlled under the [Misuse of Drugs Regulations 2001](#) and subsequent amendments, such as morphine or methadone.

Controlled drugs are kept in a secure cupboard in the school office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

### **Children managing their own needs**

Children will not administer their own medication, unless they have received appropriate training and it is the wish of the child and their parent. This will be recorded on their IHP. A member of staff must be present to supervise and be prepared to intervene if necessary to ensure the child's health and safety are not compromised.

Staff will not force a child to take a medicine or carry out a necessary procedure if they refuse, but will follow the procedure agreed in the IHP and inform parents so that an alternative option can be considered, if necessary.

### **Unacceptable practice**

School staff should use their discretion and judge each case individually with reference to the child's IHP, but it is generally not acceptable 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 views of the child or their parents
- Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHPs
- If the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- Penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments



- Prevent children from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their pupil, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips, e.g. by requiring parents to accompany their child
- Administer, or ask children to administer, medicine in school toilets

### **Emergency procedures**

Staff will follow the school's normal emergency procedures (for example, calling 999). All children's IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a pupil needs to be taken to hospital, staff will stay with the pupil until the parent arrives, or accompany the child to hospital by ambulance.

### **Training**

Staff who are responsible for supporting children with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to children with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with Assistant Headteacher with responsibility for Inclusion. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the children
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

### **Record keeping**

The local governing committee will ensure that written records are kept of all medicine administered to children for as long as these children are at the school. Parents will be informed if their child has been unwell at school.

IHPs are kept in a readily accessible place which all staff are aware of.

## **Liability and indemnity**

The local governing committee will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

The school has a DfE approved Confirmation of risk protection arrangement (RPA) membership.

## **Complaints**

Parents with a complaint about their child's medical condition should discuss these directly with the Assistant Headteacher in the first instance. If the Assistant Headteacher cannot resolve the matter, they will direct parents to the school's complaints procedure.

## **Links to other policies**

This policy links to the following policies:

- Accessibility plan
- SEND Information Report
- Safeguarding & Child Protection
- Complaints
- Equality information and objectives
- First aid
- Health and safety