

Hardenhuish School Pupils With Medical Needs and Medical Conditions Policy

If you would like any policy in a more accessible version, please contact the Administration Manager

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1. Introduction

Most pupils at some time have a medical need or condition, which may prevent them from attending school. For the majority this will be short term. For pupils who have long term or recurrent illness, access to school may be limited. The Department for Education has produced the following legislation and statutory guidance to support schools in ensuring that pupils are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential:

- Access to Education for Children & Young People with Medical Needs (2001)
- The Equality Act (2010)
- Ensuring a good education for children who cannot attend school because of health needs (January 2013)
- Supporting pupils at school with medical conditions (2014)
- Children and Families Act (2014)

This policy statement has been written to comply with such legislation and guidance.

Hardenhuish School seeks to maintain a high quality, continuing education for those pupils on roll who have a medical condition or medical needs which may result in them being unable to attend school full time.

All staff should be aware of the contents of this policy and their role in its implementation, this should include emergency and preventative measures. All new staff to the school should be provided with training through the Induction programme.

Hardenhuish School works closely with the Local Authority (LA), health professionals and other agencies to ensure that their pupils receive access to appropriate education provision when they are not able to attend school.

2. Management Responsibility

The designated member of staff with responsibility for pupils with medical needs at Hardenhuish School is the Deputy Headteacher with responsibility for attendance. The designated member of staff has a duty to ensure that:

- Sufficient staff are suitably trained to support children in managing their medical condition
- All relevant staff are aware of the medical needs and conditions of pupils
- Risk assessments are completed for pupils with medical conditions and needs involved in school visits and other school activities outside of the normal timetable
- For pupils with long term medical needs that require specialist knowledge of the condition and related medication, Individual Healthcare Plans are in place and monitored at least annually
- For pupils whose health needs are affecting their attendance, Personal Education Plans (PEPs) are put in place and record the health needs of the pupil and the subsequent, appropriate support that the school will put in place during the time of ill-health. PEPs are reviewed at least every 6 weeks.
- Arrangements are made within two weeks of a pupil joining Hardenhuish for their medical needs or condition to be supported

The Deputy Headteacher will be supported in this role by the Attendance Officer, the relevant Pastoral Manager, Learning Manager and the school's Medical Officer where applicable.

3. School trips and visits

Pupils with medical needs and conditions should be fully supported in participating in trips and visits if appropriate. Teachers should be aware of how the child's needs/condition will impact on their participation, but there should be as much flexibility as possible to allow all pupils to participate with reasonable adjustment. Staff undertake training in relevant subjects to support pupil safety, e.g. EpiPen training, and provided with first aid kits and appropriate medication when required.

4. Emergency procedures

In case of emergency the Medical Officer should be contacted immediately on 01249 650693 on Extension 2114 unless a judgement is made that the emergency services should be contacted directly.

A defibrillator is located in the E Centre foyer, S Centre foyer, L Centre foyer and in the medical room.

5. Supporting Pupils with Medical Needs that affects Attendance

In cases of long-term recurrent absence, the Pastoral Manager will ensure that a Personal Education Plan (PEP) is put in place for the pupil (see Appendix 1). This will be written in conjunction with, the parent and the pupil.

6. Monitoring and Recording Absence

All pupils who are unable to attend school for more than 15 school days due to medical needs will be regularly monitored and reviewed by the designated member of staff. Ongoing medical advice will be taken into account at all times.

Absence will be recorded on the register as medical (e.g. code I) **only when** appropriate medical advice/evidence has been received. When a pupil commences education with an alternative education provider, the absence will be recorded as educated off site (e.g. code B). This is in accordance with the LA attendance policy.

Pupils absent for medical reasons will not be removed from the school roll unless advice is received from a medical professional stating they will not be fit to return to school before ceasing to be of compulsory school age. Parents will be fully consulted and their consent sought if their child is to be removed from the school roll in these circumstances.

7. Pupils with Long Term or Recurring Absence

Some pupils will be away from school long-term or with recurrent bouts of illness. In these cases, the designated member of staff will ensure that alternative education provision is put in place as soon as possible. The school will have responsibility for ensuring that the education provider has information regarding work programmes and curriculum plans. It is acknowledged that continuity of education is important for these pupils. For pupils whose learning progress is being severely affected by long term medical absence, the Special Educational Needs Co-ordinator (SENCO) will be consulted.

8. Pupils with an Education, Health and Care Plan (EHCP)

These pupils may be able to access alternative educational provision through the LA sometimes with assistance from specialist teaching services. The SENCO will notify the Assessment and Placement Service that a pupil with a Statement of SEN or EHCP is going to be absent from school through medical need.

The school will retain responsibility for co-ordinating the Annual Review meetings and for inviting the appropriate people to such reviews.

9. Reintegration

For pupils who have been absent from school it may be necessary to have a staged reintegration plan. The Learning Manager will ensure that regular PEP meetings are held to review provision and ensure successful integration.

The reintegration will be monitored and reviewed regularly with all parties to ensure success.

10. <u>Contact between School/Pupil</u>

Hardenhuish School is committed to ensuring that even if a pupil is absent for medical reasons they should retain contact with the school.

After consultation with the pupil and taking into account their wishes in relation to the level of contact, the Pastoral Manager will put a plan into place to ensure contact is maintained.

Hardenhuish School has the following modes of contact available:

- Website
- Hardenhuish Headlines
- Peer group home visits
- Inclusion in trips and social events
- Homework clubs
- Contact with peers and members of staff via e-mail

11. <u>Public Examinations</u>

Wherever possible pupils will be entered for public examinations. Hardenhuish will endeavour to work with other education providers to ensure that coursework is completed and that sufficient education input is made to enable each pupil to reach their full potential.

In some cases the school may make special arrangements with Awarding Bodies for pupils who are unable to attend school because of their medical need.

As the time for public examinations nears, pupils and parents will be fully consulted with by the designated member of staff so that their wishes may be taken into consideration.

12. Supporting pupils with Medical Conditions

Pupils with medical conditions are fully supported so that they have the fullest participation possible in all aspects of school life, including school trips and physical education. It is clear that all children must receive a full-time education, unless this would not be in their best interests because of their health needs (as determined by a medical professional and confirmed in writing.)

13. <u>Individual Healthcare Plans (IHPs)</u>

Individual Healthcare Plans (IHP) should be drawn up for all pupils with diagnosed medical conditions (this should include pupils with musculoskeletal problems, cancer, asthma, epilepsy, diabetes, Crohn's disease, heart problems and pupils with significant mental health problems.) in partnership between the pupil and their parents, the most appropriate member of Hardenhuish staff (this may be a Pastoral Manager or Medical Officer) and any relevant healthcare professional (see Appendix 2).

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IHPs should be reviewed at least annually and should assess and manage risks related to the medical condition to ensure ongoing monitoring of the pupil's health and wellbeing and minimise disruption.

Where a child has SEN but does not have an EHC Plan, their special educational needs should be mentioned in their IHP.

14. Management of medication and procedures

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

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

When in doubt further advice will be sought from the School Nursing Team or other healthcare professionals as appropriate.

Prescribed medicines will only be accepted by Medical Officer if they are in date, labelled, in their original container and include instructions for administration, dosage and storage. Medication (except asthma inhalers, blood glucose testing meters and adrenaline pens) should be stored in the locked medicine cupboard in the medical room.

Controlled drugs prescribed for a pupil should be stored securely in the medical room and access should be limited to named members of staff. A record should be kept of any doses used and the amount of controlled drug being held in school.

Where possible, and after consultation with parents, all pupils who are competent, should be encouraged to take responsibility for managing their own health. Where possible, pupils should be allowed to carry their own asthma inhalers, adrenaline pens and glucose testing meters around with them. Spare asthma inhalers and adrenaline pens are also kept in the medical room by the Medical Officer. Other medication must be stored in the locked cabinet in the Medical Room. Passing prescribed or controlled drugs to another pupil is an offence which will be dealt with by the School's Behaviour Policy. No pupil will be given prescription or non-prescription medicines without their parent's written consent and details of dosage instructions. Written records are to be kept by the Medical Officer of all medicines administered to pupils.

15. Complaints Procedure

Any concerns regarding the support provided to pupils with medical needs or a medical condition should in the first instance be discussed with the Deputy Headteacher with responsibility for attendance. If this does not resolve the issue, a formal complaint can be made via the school's complaints procedure.

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PEP Procedure

Identification

 In cases of long-term recurrent absence or where a medical need is affecting a pupil's school experience, a Personal Education Plan will be written to support the pupil.

The Meeting

- •This will be chaired by the LM/PM
- •The pupil and their parents should attend
- •The Attendance Officer (AO) may participate
- •The PM will take minutes.

Outcome

- The curriculum of the pupils should be adjusted according to their specific need and the PEP may explain the removal of an option, flexible schooling or short term measures to support re-integration
- Medical evidence will be provided to support any reduced curriculum
- •The ultimate outcome, wherever possible is that the pupil is supported to return to full time education when well enough to do

Review

 The PEP should be reviewed every 6 weeks and more often if the medical needs gets worse or better.

Maintenance of PEP Register

- The PEP form should be completed by the PM/LM as appropriate and emailed to Leadership Team Support who will file and add to the PEP register
- Leadership Team Support will then remind LM/PM of review dates.

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IHP Procedure

