




# Evelyn Street Primary Academy

## Supporting Pupils with Medical Conditions

Ratified: May 2023

Next Review Date: May 2027

## Policy Responsibilities and Review

Policy type:	School
Guidance:	<p>Equalities Act 2010</p> <p>Keeping Children Safe in Education</p> <p>Warrington LA Policy – March 23</p> <p>DfE 'Ensuring a good education for children who cannot attend school because of health needs' (2013)</p> <p>DfE Supporting pupils at school with medical conditions</p>
Related policies:	<p>School Policies and Procedures:</p> <ul style="list-style-type: none"> <li>• Safeguarding and child protection policy</li> <li>• SEND Policy and statement</li> </ul>
Review frequency:	Annually
Committee responsible:	Local Governing Committee
Chair signature:	
Changes in latest version:	<p>MedicalTracker used for recording medical information</p> <p>Edukey used for creating IHCP</p>

## Contents

1.	Rationale .....	4
2.	Roles and Responsibilities .....	4
2.1	Named Person Responsible .....	4
2.2	Local Governing Body .....	4
2.3	Head Teacher .....	4
2.4	Teachers and Support Staff .....	5
2.5	Pupils .....	5
2.6	Parents .....	5
2.7	School Nurse .....	5
3.	Implementing Support .....	5
3.1	Following notification .....	6
3.2	Individual Health Care Plan (IHCP) .....	6
3.3	Administering Medicines .....	6
3.4	In case of emergency .....	7
4.	Training and Advice .....	7
4.1	Staff Training and Support .....	7
4.2	Support from external services .....	7
5.	Activities Beyond the Usual Curriculum .....	8
6.	Children Missing Education .....	8
6.1	Absence .....	8
6.2	Complex or Long-Term Health Issues .....	9
7.	Unacceptable Practice .....	10
8.	Complaints .....	10
	Appendix A – Pathway for supporting pupils with medical conditions .....	11

## 1. Rationale

- The Children and Families Act 2014 includes a duty for schools to support children with medical conditions.
- Where children have a disability, the requirements of the Equality Act 2010 will also apply. Where children have an identified special need, the SEN Code of Practice will also apply.
- All children have a right to access the full curriculum, adapted to their medical needs and to receive the on-going support, medicines or care that they require at school to help them manage their condition and keep them well.
- We recognise that medical conditions may impact social and emotional development as well as having educational implications.
- Our school will build relationships with healthcare professionals and other agencies and in order to support effectively pupils with medical condition
- Local Governing bodies **must** ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- Local Governing bodies should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported.

## 2. Roles and Responsibilities

### 2.1 Named Person Responsible

The Named Person responsible for children with medical conditions is Staci Cooper assisted by Hazel List.

These people are responsible for:

- Informing relevant staff of medical conditions
- Arranging training for identified staff
- Ensuring that staff are aware of the need to communicate necessary information about medical conditions to supply staff and where appropriate, taking the lead in communicating this information
- Assisting with risk assessment for school visits and other activities outside of the normal timetable
- Developing, monitoring and reviewing Individual Healthcare Plans
- Working together with parents, pupils, healthcare professionals and other agencies

### 2.2 Local Governing Body

The Local Governing Body is responsible for determining the school's general policy and ensuring that arrangements are in place to support children with medical conditions.

### 2.3 Head Teacher

The Head Teacher is responsible for:

- Overseeing the management and provision of support for children with medical conditions
- Ensuring that sufficient trained numbers of staff are available to implement the policy and

- deliver individual healthcare plans, including to cover absence and staff turnover
- Ensuring that school staff are appropriately insured and are aware that they are insured

## 2.4 Teachers and Support Staff

Teachers and Support Staff are responsible for:

- The day to day management of the medical conditions of children they work with, in line with training received and as set out in IHCPs
- Working with the named person, ensure that risk assessments are carried out for school visits and other activities outside of the normal timetable
- Providing information about medical conditions to supply staff who will be covering their role where the need for supply staff is known in advance

NB. Any teacher or support staff member may be asked to provide support to a child with a medical condition, including administering medicines. However, no member of staff can be required to provide this support.

## 2.5 Pupils

Pupils are responsible for:

- Providing information about how their condition affects them. They should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their individual healthcare plan.

## 2.6 Parents

Parents are responsible for:

- Providing the school with sufficient and up-to-date information about their child's medical needs. They may in some cases be the first to notify the school that their child has a medical condition.
- Parents are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting. They should carry out any action they have agreed to as part of its implementation, e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

## 2.7 School Nurse

The school nurse is responsible for:

- Notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible this should be done before the child starts at our school.
- Providing support for staff on implementing a child's individual healthcare plan and providing advice and liaison including with regard to training

# 3. Implementing Support

### 3.1 Following notification

Once the school has received notification that a pupil has a medical condition then:

- The named person will liaise with relevant individuals, including as appropriate parents, the individual pupil, health professionals and other agencies to decide on the support to be provided to the child
- Where appropriate, an Individual Health Care Plan will be drawn up
- Photograph and signage to be display around school what to do in an emergency.

### 3.2 Individual Health Care Plan (IHCP)

- An IHCP will be written for pupils with a medical condition that is long term and complex.
- This is created using an online platform, EduKey, with copies being kept in class and at home.
- It will clarify what needs to be done, when and by whom and include information about the child's condition, special requirements, medicines required, what constitutes an emergency and action to take in the case of an emergency clarity
- Where a child has SEN but does not have a EHC plan, their special educational needs will be mentioned in their IHCP
- IHCPs will be reviewed annually, or earlier if evidence is provided that a child's needs have changed

### 3.3 Administering Medicines

- Written consent from parents must be received before administering any medicine to a child at school – a form is available from the school office.
- Medicines will only be accepted for administration if they are:
  - Prescribed or non-prescription (over-the-counter) medicines
  - In-date
  - Labelled with the child's name
  - Provided in the original container as dispensed by a pharmacist or in manufacturer's original packaging with clear dosage instructions
    - The exception to this is insulin, which must be in date but will generally be available inside an insulin pen or pump rather than in its original container.
- Non-prescription medicines (such as paracetamol, antihistamines or travel sickness tablets) may be administered at the discretion of the Headteacher or named staff member, provided:
  - The school has received written consent from the parent/carer
  - The medicine is appropriate for the child's age
  - The medicine is clearly labelled and supplied by the parent/carer in its original packaging
- Medicines should be stored safely. Children should know where their medicines are at all times.
- A record of all medicines administered to children will be kept on MedicalTracker.
- Parents should be informed if their child has been unwell at school or if medication has been administered.
- Pupils who are competent to manage their own health needs and medicines, after discussion

with parents/carers, will be allowed to carry and self-administer their medicines or devices (e.g. inhalers, epipens), where appropriate.

- Children that have Insulin administered for "Carb Counting" should have an individual record kept with their "Daily Insulin Dose Diary" which is their personal diary. Staff must annotate and initial the diary whenever a dose has been administered.

### 3.4 In case of emergency

A copy of this information will be displayed in the school office

- Request an ambulance – dial 999 and be ready with the information below. Speak slowly and clearly and be ready to repeat information if asked.
- The school's telephone number:
- Your name
- Your location: Evelyn Street Primary Academy, Evelyn Street, Warrington, WA5 1BD
- Provide the exact location of the patient within the school
- Provide the name of the child and a brief description of their symptoms
- Inform ambulance control of the best entrance to use and state that the crew will be met and taken to the patient
- Ask office staff to contact premises to open relevant gates for entry
- Contact the parents to inform them of the situation
- A member of staff should stay with the pupil until the parent/carer arrives. If a parent/carer does not arrive before the pupil is transported to hospital, a member of staff should accompany the child in the ambulance.

Please note a Defibrillator and Salbutamol Inhalers are held on site in the event of an emergency.

## 4. Training and Advice

### 4.1 Staff Training and Support

- Staff training needs are assessed annually and when deemed necessary as roles and responsibilities change. Individual training needs are identified specifically at the time of a new responsibility. Relevant healthcare professionals will normally lead on identification, type and level of training.
- Staff supporting children with medical needs will be trained through a combination of school nurse, parent and NHS hospital staff. Bespoke training needs will be identified as appropriate to individual pupil needs.
- Whole school awareness training is a part of the school's annual CPD safeguarding training which takes place at the start of the school year.
- Staff who start part way through the school year will receive this training as part of their induction in accordance with the schools induction policy.
- Supply staff training is supported by middle leader and admin staff induction.

### 4.2 Support from external services

In addition to the School Nursing Team, support may be provided from the following healthcare services:

- Audiology
- Community paediatricians
- Speech and language therapy
- Physiotherapy
- Occupational therapy
- Mental Health Support Team - NHS (MHST)
- CAMHs.

They are responsible for ensuring that:

- Services are responsive to children's needs and make arrangements to provide the services specified in any child's EHC Plan.
- Health providers (commissioned by the CCG) cooperate with schools supporting children with medical conditions.
- That there are good links between health services and schools, and consider how to encourage health services in providing support and advice (and can help with any potential issues or obstacles in relation to this).
- Children in schools who have long-term conditions and disabilities have access to clinical support. Children in special schools in particular may need care which falls outside the remit of the Council's commissioned school nurses. This will include support for conditions such as gastrostomy and tracheostomy care, or postural support. CCGs should ensure their commissioning arrangements are adequate to provide the ongoing support essential to the safety of these vulnerable children whilst in school.

## 5. Activities Beyond the Usual Curriculum

- Reasonable adjustments will be made to enable pupils with medical needs to participate fully and safely in day trips, residential visits, sporting activities and other activities beyond the usual curriculum
- When carrying out risk assessments, parents/carers, pupils and healthcare professionals will be consulted where appropriate

## 6. Children Missing Education

### 6.1 Absence

Pupils who are absent because of illness can be supported through liaison with the pupil's parents. This may be through schoolwork being provided for completion at home as soon as the pupil is able to cope with it, including the use of Google Classroom. Alternatively, it may be possible for part-time education at school or a gradual phased return to full-time attendance.

The school will give due consideration to which aspects of the curriculum are prioritised, in consultation with the pupil, their family and relevant members of staff.

Reasonable adjustments will be made to allow the pupil to access a suitable full time education (or as much as the child's health condition can manage) in line with statutory guidance 'Supporting pupils at school with medical conditions'. This may include arrangements for school work being sent home for short periods of absence, a part-time time table or remote learning.



Where a pupil is, or likely to be, absent for a period of 15 days or more due to a medical condition, the Named Person Responsible should notify the Pupil Support Coordinator at Warrington Local Authority. The Coordinator will work alongside school personnel to ensure that the pupil has appropriate access to education where the child's consultant has advised that they are not well enough to attend school on a regular basis. The Pupil Support Coordinator may need to escalate the case to the education, health or social care professionals where barriers to learning are identified. School will continue to work alongside the Attendance Team where this is appropriate.

## 6.2 Complex or Long-Term Health Issues

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

The school will support pupils with health needs to attend full-time education wherever possible, or the school may make reasonable adjustments to pupils' programmes of study where medical evidence supports the need for those adjustments. These reasonable adjustments will be recorded in a pupil's individual healthcare plan (IHCPs)

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

Whilst a pupil is away from school, the school will ensure the pupil can successfully remain in touch with their school through school newsletters, emails, invitations to school events, cards or letters from peers and staff. Initially, the school will attempt to make arrangements to deliver a suitable education for children with health needs who cannot attend school. The Headteacher and SENCo will be responsible for making and monitoring these arrangements.

The school will discuss arrangements for working from home or hospital with parents / carers. A plan will be drawn up detailing agreed actions from the discussion, the plan will be signed by school and parents / carers. The plan will then be carried out to deliver education to the child.

Arrangements could include sending work home, the pupil attending a hospital school whilst they are an in-patient, a member of staff attending the home to support work or access to online learning such as Google Classroom. Work will be prepared by class teachers.

Once the pupil is able, they will be integrated back into school with alternative arrangements to make it possible. These will be discussed with parents and the pupil in conjunction with any medical advice from other professionals. To help ensure a pupil with additional health needs is able to attend school following an extended period of absence, adaptations may need to be considered including:

- a personalised or part-time timetable, drafted in consultation with parents and 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.
- alternative provision for break or lunch times.

## 7. Unacceptable Practice

The following items are not generally acceptable practice with regard to children with medical conditions, although the school will use discretion to respond to each individual case in the most appropriate manner.

- preventing children from easily accessing their inhalers and medication and administering their medication when and where necessary
- assuming that every child with the same condition requires the same treatment
- ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged)
- sending 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, sending them to the school office or medical room unaccompanied or with someone unsuitable
- penalising children for their attendance record if their absences are related to their medical condition e.g. hospital appointments
- preventing pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- requiring parents, or otherwise making them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the school is failing to support their child's medical needs
- preventing 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 the child

## 8. Complaints

- An individual wishing to make a complaint about actions regarding the school's actions in supporting a child with medical conditions should discuss this with the school in the first instance
- If the issue is not resolved, then a formal complaint may be made, following the complaints procedure which can be found on the school's website.

## Appendix A – Pathway for supporting pupils with medical conditions

