

Learners with Medical Needs Policy

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Overview

The purpose of this policy is to make sure that all staff are aware of how we meet the needs of a child within our school community who has a long-term or a short-term medical condition. Hamilton Primary School is an inclusive community and we understand that it is important both the child and the parents feel confident and safe in school.

Aims and Objectives

This policy aims to set out how we adhere to guidance found in the following important documents so that all stakeholders are clear and safeguarded:

Children and Families Act 2014

Children and Families Act 2014 (legislation.gov.uk)

Section 100 "The appropriate authority for a school to which this section applies must make arrangements for supporting pupils at the school with medical conditions."

Supporting Pupils at School with Medical Needs 2015

https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions "Key points

- Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- Governing bodies must ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- 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 properly understood and effectively supported." (page 4)

SEND Code of Practice 2015

SEND Code of Practice January 2015.pdf (publishing.service.gov.uk)

Section 1.26 "...the UK Government is committed to inclusive education of disabled children and young people and the progressive removal of barriers to learning and participation in mainstream education." (page 25)

Equality Act 2010

Equality Act 2010 (legislation.gov.uk)

"You're disabled under the Equality Act 2010 if you have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on your ability to do normal daily activities." (Definition of disability under the Equality Act 2010 - GOV.UK (www.gov.uk))

Ensuring a good education for children who cannot attend school because of health needs Statutory guidance for local authorities January 2013

"7. Children unable to attend school because of health needs should be able to access suitable and flexible education appropriate to their needs. The nature of the provision must be responsive to the demands of what may be a changing health status." (page 7)

Education for children with health needs who cannot attend school - GOV.UK (www.gov.uk)

Additional documentation that may also referred to by the school to provide the best support and care can be at <u>Supporting pupils with medical conditions</u>: <u>links to other useful resources - GOV.UK (www.gov.uk)</u>

Responsibilities

The head teacher is responsible on behalf of the Governing Body to ensure appropriate provision and resources are in place to support individual children with IHCPs and EHCPs.

The SENCo is responsible for liaising and working in partnership with class teachers, parents & medical professionals to develop and review Individual Health Care Plans (IHCP) and Educational Health Care Plans (EHCP).

Often the responsibility of developing and reviewing an IHCP is delegated to the SENCo, however some are written by a specialist medical team in consultation with the parents. This would be the case for a condition such as epilepsy. An IHCP will state what constitutes an emergency for the child, symptoms to be aware of and how to respond. A paper copy of the IHCP can be found in the school office. Electronic copies are stored on the schools shared server, in line with GDPR procedures, and it is the responsibility of ALL staff to have read and understood the needs of the children in their class or club.

EHCPs are reviewed by the SENCo. If a child has SEND but does not have an EHCP then these special educational needs must be clearly stated on the IHCP. An electronic copy of a child's EHCP is stored on the shared drive, in line with GDPR procedures, and it is the responsibility of ALL staff to have read and understood the needs of the children in their class or club.

For a child with a physical disability the SENCo will work closely with parents and outside agencies to create a risk assessment and consider access arrangements to ensure that reasonable adjustments are made so that the site is a safe place. This will be reviewed regularly with all parties. Where appropriate, the child will also have a voice in the provision agreed in order to maintain their dignities.

The SENCo will liaise with secondary schools (or other schools) at transition points to ensure that a child's individual needs will be met in their new educational setting. The SENCo, in partnership with the class teacher and parents, will consider reintegration needs of any child after a period of long absence.

Any arrangements should be agreed with parents and may include part-time attendance, counselling support or alternative timetable provision. Class teachers and support staff are collectively responsible for ensuring any supply staff working with children with IHCPs and EHCPs should be fully aware of their needs.

Parents are responsible for sharing information that is relevant. This would include, but is not restricted to, information about the medical condition and advice provided by medical professionals. Parents must keep the school updated with appointments and their outcomes so that the school can make any adjustments to the provision in place as soon as possible.

Support From Outside Agencies

The school, following GPDR procedures, will always seek permission from parents to share information in order for the school to work closely with professionals pertinent to the care of the child. This may be:

- Medical Experts Hospital Consultants, Doctors
- Occupational Therapists
- School Nursing Team
- Community Paediatrics

- Education Welfare Officer
- Family Support Services
- The Local Authority
- Specialist Teacher Team

Where necessary, the school would arrange training for members of staff who will be working/caring for the child. We believe it is important for children with chronic or long-term health conditions that meetings are held with the school, parents and medical professionals to understand the child's needs and adapt provision accordingly. Through such meetings, we are in a better place to support the child in managing their condition and ensure the learner knows how to keep themselves safe. Pupils with chronic or long-term health conditions need to feel confident that staff can support them and offer reassurance when needed.

Access to Education for Pupils with Long-term Medical Conditions

It is important that a child who is unable to attend school because of medical needs is identified and receives educational support quickly and effectively. The school will ensure that they liaise between all the involved parties (e.g. hospital consultants, GPs, LA). The SENCo will make a referral for home education if necessary and will talk with the Education Access Team and Inclusion Partner for further advice.

The school's 'Attendance Register' will indicate if a child is, or should be, receiving education otherwise than at school. The school will notify the LA/EWO if a child is, or is likely to be, away from school due to medical needs for more than 15 working days. If a child is likely to be at home for more than 15 working days, or who regularly misses school due to chronic illness, the school will liaise with home and hospital teaching services to draw up a support plan to cover the education of the child.

The school will try, as much as is reasonably possible, to support learners at risk of missing a significant amount of schooling because they require hospitalisation or need to be at home but they are still able to study. Learning for short term home study will be supplied by the class teacher and made available through an online platform. This may be in the form of an email or links to the Oak Academy. We will try, as much as is reasonably possible, to amend the teaching, curriculum and resources to meet the needs of the learner. The school will monitor the work that the child has missed and develop a strategy with the hospital and/or Home Teaching Services for helping a child 'keep up' rather than having to 'catch up'. The school may also research Alternative Provision, to see if this will support the pupil.

It is important for children's emotional wellbeing that they continue to feel part of the school community as much as possible while they are not onsite and 'have a voice'. The class teacher will ensure that children in their class who are unable to attend school because of long-term medical needs are kept informed about school social events and are able, where appropriate, to participate in these. This may be by making special arrangements for the child to come onsite or through the use of technology where the child can join in virtually for weekly assemblies or class community meets, or to stay connected with friends.

Short-Term Medical Needs

The needs of learners with short-term medical needs can usually be met via the existing school protocols for the administration of medicine. Please refer to the following:

Administration of Prescribed Medication

Whenever possible parents should ask their GP to prescribe medication in dose frequencies which enable it to be taken outside school hours. However, if parents wish the school to administer the

medication (in loco parentis) they should give the office a written request (using the appropriate form) detailing the medication to be given along with the frequency, dosage and any other relevant information (e.g. interaction with other medicines such as paracetamol). Oral information from the pupil or parent will not be acted upon. A copy of the form required from parents can be obtained from the Office.

If required, the parents will be asked to visit the school during the day to administer medication in person.

The parent must supply the medication in a suitable container clearly labelled with:

- the child's name
- the name of the medicine
- the method, dosage and timing of administration
- the date of issue
- the expiry date

Details of possible side effects should also be given.

The medicines should preferably be packed and labelled professionally. Where possible not more than one week's supply should be sent at one time.

It is important that an up-to-date record of the parent's home and work telephone numbers be kept so that they can be contacted at any time.

Medicines will be kept in a safe place, separate from the first aid box. Bronchodilators and medications needed in an emergency will be readily accessible.

A designated member of staff will be made responsible for administering medication.

We are not able to store medicines in a fridge

Medicines no longer required will be handed back to the parent. If parents do not collect medicines after a reasonable period of time they will be given to a pharmacist for disposal.

CONDITIONS APPERTAINING TO THE SCHOOL AGREEING TO ADMINISTER MEDICINES DURING THE SCHOOL DAY

We are willing to help parents by administering medicines when required, provided that this form clearly states dosage requirements. When agreeing to administer medicines, it is on the understanding that the pupil is well enough to be at school. We cannot, however, accept responsibility for reminding pupils to take their medicines or for ensuring they take their medicine home at night. We suggest that if your child's dosage is for three times a day, that they do not need to take any of the doses in school, as they can take the 2nd dose as soon as they get home. All medicines must be left in the School Office for the health and safety of other pupils. As a fridge is not available for medicines, parents/carers will need to ensure that medicines that need to be cooled are given to the office in a container that can hold ice packs to keep the medicine cool.

REQUEST FOR SCHOOL TO ADMINISTER MEDICATION

TERROLOT FOR COLLEGE TO A DIMINIO FER INLEDIO ATTORY						
Pupil's Full Name						
Address						
						Date dispensed
						Frequency of dosage Timing
						Additional instructions/information (e.g. before/after food, interaction with other medicines, possible side effects N.B. We are not able to store medicines in fridge)
Emergency contacts:						
Name						
Daytime telephone No						
or						
Name Relationship to child						
Daytime telephone No						
I understand that I must deliver the medicine personally to any of the office staff and collect any remaining medication when course completed. I accept that the school has a right to refuse to administer medication.						
Nama						

Relationship to child	
Signed	Date
School use: Remaining medication returned to parer	nt on (insert date)
or disposed of via	n