

Policy for Children and Young People with Medical Needs

Hackney Learning Trust

Home Tuition Service &
Specialist Teacher for Medical Needs
(Wellbeing and Safeguarding)

HLT Policy for Children and Young People with Medical Needs.

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The Statutory Framework

All children and young people are entitled to a high quality education and Hackney Learning Trust is committed to ensuring that the needs of the most vulnerable groups of learners are met.

In June 2013 the Department for Education published updated statutory guidance entitled, '**Ensuring a Good Education for Children who cannot attend School because of Health Needs**'. The guidance sets out the duties of local authorities to ensure that children and young people with health needs receive a good quality education. In accordance with this guidance, Hackney Learning Trust has a duty to:

Arrange suitable full-time education (or as much education as the child's health condition allows) for children of compulsory school age who, because of illness, would otherwise not receive suitable education.

In 2015 the Department for Education published '**Supporting Pupils at School with Medical Conditions**'. This sets out a duty on schools to meet the needs of children with health needs.

The duty on local authorities to support children and young people with health needs is a statutory duty. There is therefore no charge to schools for support provided by Hackney Learning Trust (Home Tuition and Specialist Teacher for Medical Needs) for supporting such children and young people.

The aims of this policy

- To set out how Hackney Learning Trust, in liaison with partner agencies, strives to provide good quality education for children and young people with health needs.
- To provide guidance to schools, families and partner agencies on their roles and responsibilities in ensuring a good quality education for children and young people with health needs
- To clarify and specify which children and young people are covered by this policy

Principles

This policy and any ensuing procedures and practice are based on the following principles:

- All children and young people are entitled to a high quality education and to work towards their goals and aspirations regardless of their health needs.
- Schools should seek to gain a full understanding of any diagnosed or potential health difficulties in order to make early intervention and minimize any disruption to the education of children with health needs.
- If children can be in school they should be in school. Children's diverse personal, social and educational needs are most often best met in school. Schools are required to make reasonable adjustments where necessary to enable all children to attend school.

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- Effective partnership working and collaboration between schools, families, education services, health services and all agencies involved with a child or young person are essential to achieving the best outcomes for the child
- Children with health needs often have additional social and emotional needs. Attending to these additional needs is an integral element in the care and support that the child requires.
- Children experiencing mental health difficulties should be treated with the same regard as those with physical health difficulties.
- Children and young people with health needs are treated as individuals, and are offered the level and type of support that is most appropriate for their circumstances; workers and agencies should strive to be responsive to the needs of individuals, taking into account the wishes and feelings of the child or young person.

This policy and any ensuing procedures and practice are informed by the '*Access to Education for Children with Medical Needs: A Map of Best Practice*' (Farrell & Harris, 2003). From the research evidence, five factors have been identified that constitute best practice in this area:

- 1 School ownership:** meaning the extent to which the child's school maintains a high profile during the time their pupil is receiving education out of school.
- 2 Partnership and collaboration:** meaning the ways in which the local authority service seeks to establish working relationships with other agencies to ensure that an individual's needs are met during the time they are out of school.
- 3 Flexibility:** meaning the ways in which the service provision is organised to fit individual cases and adjusted when required due to changing circumstances
- 4 Responsiveness:** meaning the ability of the local authority service to respond to the needs of all the stakeholders: pupils, parents, service staff, mainstream schools, medics and other professionals.
- 5 Clarity:** defined as local authority services and schools developing written policies and procedures that outline clearly all the roles and responsibilities of those involved in the education of children and young people with medical needs.

Who is covered by this policy?

This policy applies to all children and young people of compulsory school age who, because of illness, are unable to attend school for health reasons for 15 days or more, whether that is 15 days consecutively or 15 days over the course of one school year. This policy applies to all children and young people whether they attend mainstream schools, academies, free schools, independent schools, special schools and children not on the roll of a school. This policy covers health needs, including mental health needs but does not include self-limiting infectious diseases of childhood, such as measles.

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Roles and Responsibilities

1) The Family

The family should keep the school informed of all relevant information regarding the child or young person's health situation, including any planned medical absences, and any periods of illness. The family should ensure that the child or young person attends all medical appointments. If home tuition is required, the family will obtain medical evidence to confirm their child's entitlement to support. Medical evidence must come from their paediatric medical team and not from Primary Care (i.e. not from their GP). If accessing Home Tuition, the family will ensure that their child attends all lessons offered, unless this is not possible due to exceptional circumstances or severe ill-health.

2) The School

The school where the pupil is on roll should have a policy in place to address how the school will meet the educational requirements of pupils who have health needs (See Appendix C for a school policy template). There should be a named person at the school who will ensure that all pupils have the fullest possible access to educational resources and support. This person could be the school Special Education Needs Coordinator (SENCo), Inclusion Manager or other appropriate member of staff. Every school has a School Health Team with whom the named person can liaise for information, advice and training about pupils in their school who have health needs.

When pupils are too ill to attend, the school will establish, where possible, the amount of time a pupil may be absent and identify ways in which the school can support the pupil in the short term (e.g. providing work to be done at home in the first instance). The school will make a referral to the Home Tuition Service as soon as they become aware that a child is likely to be or has been absent for 15 consecutive or cumulative school days. The school will provide all teaching resources to the Home Tuition Service and will agree to arrange and host 4-6 weekly meetings which will include child, family and all relevant professionals. The purpose of this is to ensure that communication is clear, decisions are made in a timely manner and the child's best interests are at the forefront on any ongoing interventions such as Home Tuition.

Where children have long-term health needs, the pattern of illness and absence from school can be unpredictable, so the most appropriate form of support for these children should be discussed and agreed between the school, the family, Hackney Learning Trust and the relevant medical professionals.

If a child or young person's health needs are likely to have a significant impact on the child's achievement and attainment over time, parents and school should consider requesting an Education, Health and Care assessment from the local authority. This is because where a child's needs become "additional to or different from" the main cohort of children, they would be regarded as having Special Educational Needs and the Code of Practice for SEND should be referenced.

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Schools must not remove a child unable to attend school because of health needs from the school register without parental consent and certification from the school medical officer. Similarly, schools must not seek to persuade parents to educate their child at home (See Elective Home Education policy below), nor would it be recommended for parents to elect to educate their children at home as a way of solving a perceived or ongoing problem for a school [in meeting the child's needs].

Key points to note from the statutory guidance for governing bodies of maintained schools and proprietors of academies in England.

- 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 effectively supported.

Schools should put in place an Individual Healthcare Plan for any child who needs one (See Appendix D for a Care Plan template). This is the responsibility of the Head Teacher (or delegated member of staff) but should be supported by the School Nurse and other medical professionals.

When pupils are absent from school, the appropriate coding should be used (see School Attendance advice below). Where a B code is used, schools are certifying that the education is supervised and measures have been taken to safeguard pupils. This code should not be used for any unsupervised educational activity or where a pupil is at home doing school work.

3) The Specialist Teacher for Medical Needs

The Specialist Teacher for Medical Needs has expertise in supporting pupils with health needs when they are well enough to attend school. Many pupils with health needs are well enough to attend school, but some may require support so that they can attend school regularly and take part in school activities. The Specialist Teacher for children with medical needs can offer practical advice on how schools can support the inclusion of these pupils, including advice and guidance on drawing up care plans.

The Specialist Teacher maintains a relationship with many of the medical professionals in the borough (e.g. CAMHS, Paediatricians, Specialist Nurses, School Nurses) and is able to support communications and at school meetings where a child with medical needs is concerned. There is a termly Health in Education meeting with the Specialist Teacher and medical professionals which addresses issues relating to provision in schools for children with medical needs and for those not currently accessing school.

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Hackney Learning Trust runs regular training for teachers and support staff on special needs and disability issues. They also offer specialist training for staff working with pupils who have health needs. Information is available from and advertised in Hackney Learning Trust's professional development and training brochure and directly from the Specialist Teacher.

4) Home Tuition Service

Hackney Learning Trust has a team of experienced teachers who provide one-to-one tuition to pupils while they are unable to attend school. These sessions usually take place in the home but can be convened in libraries and other public buildings where appropriate. Where face to face learning cannot take place (for example if the child is not able to engage directly or if an adult is not available to supervise in the home) there is a remote learning capability which includes Skype lessons, learning platforms and websites.

The service works in partnership with the pupil, parents/carers, medical health professionals and the named person in the school to provide a high quality core education for children with health needs. The Service aims to provide the equivalent of full-time education, where the child's health needs allow, focusing on English, Maths and Science. This is provided through a balanced combination of 1:1 tuition, homework and remote learning.

The criteria for provision of home tuition are as follows:

- The pupil is a resident of the London borough of Hackney; and
- The pupil is of compulsory school age; and
- The pupil is (or due to be) temporarily absent for at least 15 consecutive school days because of medical reasons, including mental ill-health.

or

- The pupil's long-term medical condition causes them to be absent for at least 15 days over the course of the current academic year.

and

- The referral is supported by medical evidence from a specialist medical consultant of the need for home tuition.

N.B. The Home Tuition Service is intended to be a **short-term, interim provision** for students with medical needs. It should not be used as an Alternative Provision nor regarded as a long term solution for a child's education. Where a child has, or is likely to have long-term medical needs (including mental health) which is preventing their access to education, parents/carers and school should work together to decide on a long-term action-plan. This may involve making provision within the school's offer, and/or requesting an assessment for an Education, Health and Care Plan.

The Home Tuition Service is informed by medical advice. Where medical advice does not recommend home tuition, or in cases where children and young people do not engage with medical services, the Service will not offer lessons, or may withdraw the intervention pending further advice. In addition, where a child or young person does not engage appropriately with the offered service, Home Tuition may be withdrawn.

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Pregnancy

Young women of compulsory school age who are pregnant are entitled to remain at school whenever and for as long as possible. Schools should make reasonable adjustments to enable young pregnant women to remain in school. When there is medical evidence that continuing to attend school would be contrary to the young woman's or the unborn child's wellbeing, the school can make a referral for provision of home tuition. Following the birth of the baby, young mothers may benefit from home tuition for a temporary period before they return to school.

Enquiries and referrals

The role of **Specialist Teacher for Medical Needs** (for children who are able to attend school) and that of **Home Tuition Coordinator** (for children who are too ill to attend school) are both currently carried out by:

Sophie McElroy

T: 020 8820 7494

E: sophie.mcelroy@learningtrust.co.uk

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Services Available

Children unable to attend school will receive education suitable to their needs. In order to support pupils and their families as well as possible, Hackney Learning Trust will work with, or make available, the following services:

Hackney Learning Trust Services	
Admissions	The Admissions Team provides a front-line service to parents on all matters relating to the admission of children to both primary and secondary schools.
Attendance	The Attendance Service works directly with individual pupils and their parents to encourage regular school attendance, and undertakes statutory intervention to ensure attendance when necessary. Through pastoral support, casework, strategic advice and planning and other initiatives, the service strengthens the individual school's capacity to tackle attendance problems.
Educational Psychology Service	The Educational Psychology Service prompts schools to raise any children with health needs at multi-agency planning (MAP) meetings. For pupils with Statements/EHCPs or those going through the Statutory Assessment as part of the process of multi-disciplinary assessment the service would identify additional needs and make recommendations as to interventions aimed at addressing these needs working alongside parent/carers and other key professionals. The service could be involved in supporting transition for those returning to school.
Elective Home Education	The Elective Home Education Team has two duties: to provide support for home educating families (at a level decided by local authorities themselves), and if families wish it; and to intervene with families if the local authority is given reason to believe that a child is not receiving a suitable education.
Inclusion and Specialist Support Team (ISST)	The Inclusion and Specialist Support Team is a team of teachers who work closely with class teachers, SENCOs and support staff to help schools and early-years settings provide access and inclusive education to the whole school environment for all pupils.
Home Tuition Service	Hackney Home Tuition Service is a statutory school support service that provides access to high quality suitable education for children and young people who are unable to attend school because of health needs. The Home Tuition Service provides one to one education, usually in the child or young person's home for a short-term, interim period.
Special Educational Needs and Disability Advice and Guidance Service	Hackney SENDIAGS is based at The Ann Taylor Centre and provides impartial information, advice and support for the parents of children with special educational needs and disabilities, including health needs. They offer an Independent Supporters Service for CYP and families going through the process of assessment for an Education, Health and Care Plan (EHCP).

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Safeguarding in Education	The Safeguarding in Education Service works to provide advice, guidance, and training in regard to all safeguarding and child protection concerns identified by Hackney educational establishments. The service links closely with the City and Hackney Safeguarding Children's Board and Children's Social Care to promote the wellbeing and safeguarding of all children and young people resident in Hackney.
Education, Health and Care Plan (EHCP) Team	Education, Health and Care Planning Team provides advice on and assessment for CYP for an EHC Plan. They work closely with families and schools to carry out assessment and produce the final EHC Plan where appropriate.
Hackney Health and Children and Young People's Services	
The advice of health service professionals is crucial to informing the type of educational provision that is most appropriate for individual children.	
School Health Team	The school health service is made up of School Nurses and School Doctors. They can provide advice on health issues to children, parents and education staff. They also provide liaison with hospital teams, GPs and school staff to ensure that children with medical needs have effective support. In particular, they will support the planned return to school by liaison with families and professionals. They will also support with the writing of a health care plan.
Community Children's Nursing Team	The Community Children's Nursing (CCN) Team works with the multi-disciplinary team to enable a child with a long term medical condition, whether life-limiting/life-threatening to access school. The community children's nursing team will work with school to train and support all staff to undertake tasks which enable the child to normalise within the school environment. The CCN team will work with the school and the family to write the care plan for the child.
Children and Adolescent Mental Health Services (CAMHS)	Specialist and complex children and adolescent mental health services are provided by East London Foundation Trust (ELFT). Early intervention community psychology and Disability CAMHS are provided by Homerton University Hospital Trust. ELFT also provides an integrated Young Hackney CAMH service and a multi systemic therapy service.
Young Hackney	Young Hackney services are for children and young people aged 6 –19, and up to 25 years if the young person has a special education need or disability. The Service runs universal services such as adventure playgrounds, youth clubs and sports & citizenship activities, as well as offering help for children and young people who need additional support. Young Hackney Early Help teams deliver outcome-focused, time-limited interventions designed to reduce or prevent problems from escalating or becoming entrenched. Staff encourage children and young people to engage with universal opportunities through our network of playgrounds, youth hubs and commissioned projects; providing opportunities to participate in positive activities with peers, in settings where support can be sustained Young Hackney Units are linked to all secondary schools

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	across the borough. (For further information see <i>Young Hackney Guide for Professionals</i>).
Hospital schools	There are no hospital schools in Hackney. However, some hospitals in other boroughs have schools within them. If a Hackney child is treated in such a hospital, s/he will have access to the hospital school. Hackney Learning Trust staff work closely with that school to ensure that the education provided is sufficient to discharge the Authority's duty to the child.

Access

This policy will be sent to all Hackney schools and to out of borough schools that have significant numbers of Hackney resident pupils on roll. The policy will be made accessible to the public via the Hackney Learning Trust website and the Local Offer.

This policy was developed collaboratively by the Home Tuition and Medical Needs Service. The following people and agencies were consulted and contributed to the development of this policy:

- Paul Kelly, Head of Wellbeing and Safeguarding, Hackney Learning Trust
- Jo Margrie, 14-19 Project Manager, Hackney Learning Trust
- Ed Chilton, Senior Educational Psychologist, Hackney Learning Trust
- Rhiann Hughes, Area Coordinator, EHC Planning Team, Hackney Learning Trust
- Lizzy N’Gotta, Head of Inclusion and Specialist Support Team, Hackney Learning Trust
- Simone Haynes, Safeguarding in Education Team, Hackney Learning Trust
- Mary Murphy, Elizabeth Nhlumayo, Haldun Sonkaynar and Juliette Harries, Home Tuition Teachers, Hackney Learning Trust
- Helena Marks-Dwyer, Head of SENDIAGS, Hackney Learning Trust
- Breda Maynard, Education Solicitor, Hackney Learning Trust
- Florence Elikwu, School Nurse Lead, Homerton University Hospital NHS Foundation Trust
- Dr Jill Ellis, Consultant Community Paediatrician, Homerton Hospital NHS Trust
- Nadia Sica, Public Health Support Officer, London Borough of Hackney
- Pauline Adams, Head of Service, Young Hackney
- Rebecca Milne, SENCO/Inclusion Manager, Lauriston Primary School

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References and Useful Resources

Farrell, P T., K Harris. 2003. *The Education of Children with Medical Needs: A Map of Best Practice*. 2003. DfES. 156.

<http://www.education.gov.uk/aboutdfe/statutory/g00219676/health-needs-education>

The Department for Education statutory guidance: '*Ensuring a Good Education for Children who cannot attend School because of Health Needs*' (June 2013).

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/484418/supporting-pupils-at-school-with-medical-conditions.pdf

The document *Supporting Pupils at School with Medical Conditions* (DfE, 2015) provides statutory guidance on the role of schools and local authorities in managing the needs of children with health needs. It also includes a range of templates to support in this process.

<http://www.education.gov.uk/schools/pupilsupport/pastoralcare/health/b0013771/managing-medicines-in-schools>

The document *Managing medicines in schools and early-years settings* (DfES/DoH, 2005) provides advice for schools and their employers to help in the practice and the development of policies regarding the management of medicines in schools.

<http://medicalconditionsatschool.org.uk/>

This website offers information to help schools and school healthcare professionals support all pupils with medical conditions

<https://www.learningtrust.co.uk/TPG/happyhealthyandreadytolearn/Documents/Children%20and%20Young%20Peoples%20Services%20Resource%20Guide.pdf>

'*The Children & Young People's Services Resource guide for professionals*' details the diverse range of services for children and families with support needs, as well as their contact details, referral pathways and thresholds.

<https://www.learningtrust.co.uk/schools/schoolsinfo/Documents/Elective%20Home%20Education%20Policy.pdf>

This is the Hackney Learning Trust policy for *Elective Home Education* (HLT, June 2016)

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/564599/school_attendance.pdf

This is the Department for Education Policy for *School Attendance* (DfE, November 2016)

Pathways of Support for Children and Young People with Health Needs

Hackney Learning Trust follows the pathways indicated below in order to ensure clarity and fairness of procedures. Within these pathways, all children and young people with health needs will receive consideration and appropriate support based on their individual requirements.

The criteria for home tuition support are:

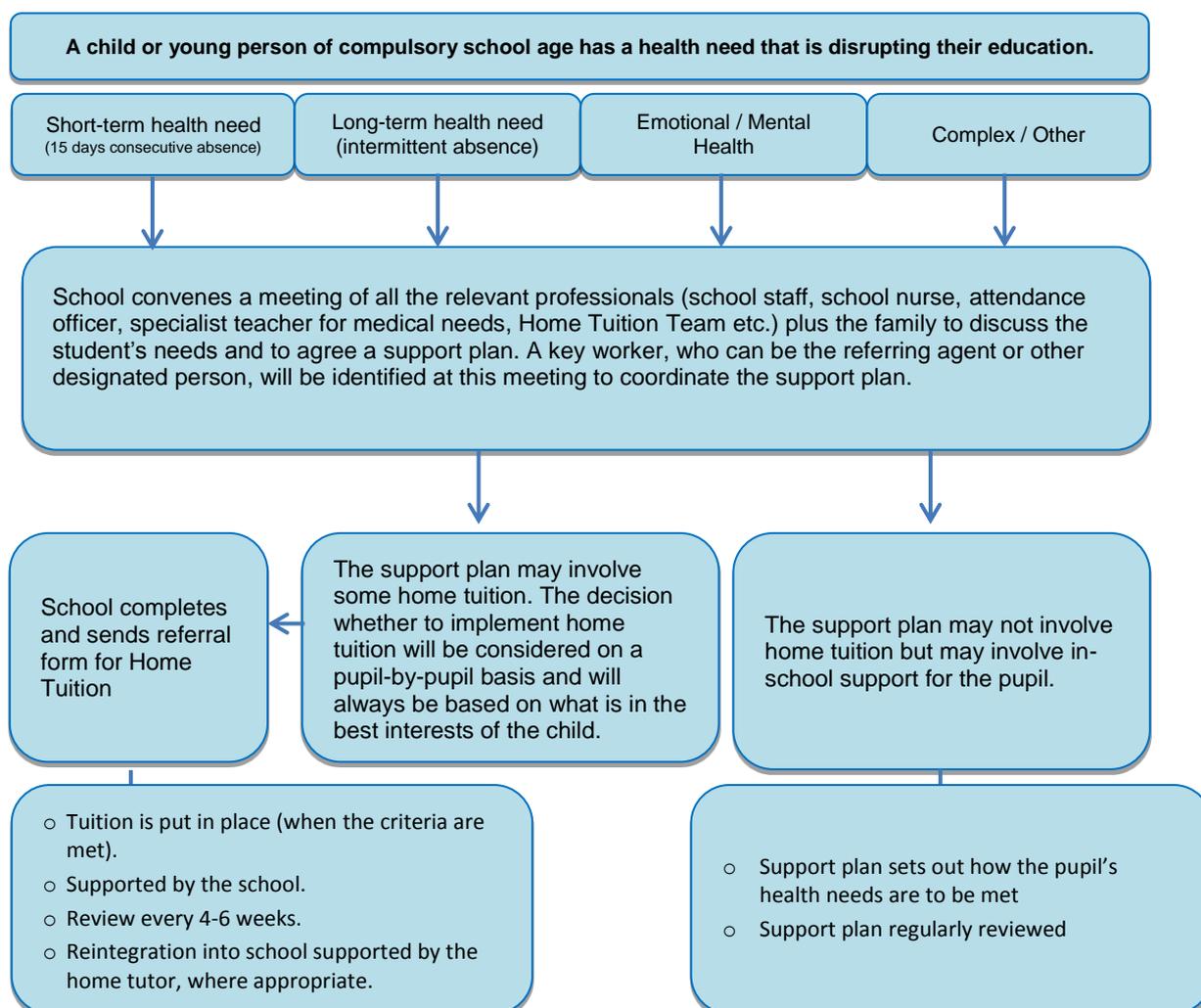
- The pupil is a resident of the London borough of Hackney; and
- The pupil is of compulsory school age; and
- The pupil is (or due to be) temporarily absent for at least 15 consecutive school days because of medical reasons, including mental ill-health.

or

- The pupil's long-term medical condition causes them to be absent for at least 15 days over the course of the current academic year.

and

- The referral is supported by medical evidence from a specialist medical consultant of the need for home tuition (evidence from a GP is not appropriate).



A Guide for Parents and Carers

1 ***What should I do if my child's education is being disrupted because of their health needs?***

Speak with somebody at your child's school and let them know that you are concerned and that you would like support for your child. Ask the person at the school to make a referral to the Home Tuition and Medical Needs Service at Hackney Learning Trust.

2 ***What support can I expect for my child?***

The support your child receives will depend upon his or her individual needs and circumstances. It may be possible to put in place support in school so that your child can continue to attend. Your child may need 1-1 tuition at home at times when he or she is too ill to attend school.

3 ***How will the right support be decided on?***

Your child's school will call a meeting with you and the appropriate health and education professionals to discuss, agree and set up a support plan. You (and your child, if age appropriate) will be fully involved in discussing and agreeing what support is best for your child.

4 ***Who can I talk to about the support my child is receiving?***

Try to speak to your contact person at the school. If this is not possible, you can contact the Specialist Teacher for Medical Needs/Coordinator of the Home Tuition Service at Hackney Learning Trust on 020 8820 7494.

School Policy Template

Medical Needs Policy

----- SCHOOL

Policy for the Education of Children with Health Needs

(This policy should be read in conjunction with the school Policy for Special Educational Needs, the Equal Opportunities Policy and the Accessibility Plan)

At _____(school name)_____ we are committed to providing pupils with access to education whatever their medical needs or individual circumstances. We believe that all pupils should have access to as much education as their particular medical condition allows so that they maintain the momentum of their learning whether they are attending school or going through periods of treatment and recuperation.

Definition of Medical Needs

For the purpose of this policy, pupils with medical needs are:

- children with **chronic or short term medical conditions** involving specific treatments or forms of supervision during the course of the school day, or
- **sick children**, including those who are physically ill or injured or are recovering from medical interventions, or
- children with **mental health problems**.

Named person

The member of staff responsible for ensuring that pupils with medical needs have proper access to education is _____. S/he will be the person who will make arrangements for *parents to discuss particular arrangements to be made in connection with the medical needs of a pupil. It will be her responsibility to ensure all information is passed on to the relevant members of staff.

Partnership with parents/carers and pupils

- Parents hold key information and knowledge and have a **crucial role** to play. Both parents and pupils will be involved in the process of making decisions.
- Parents are asked to keep _____informed about any **changes in the treatment** their children are receiving, including changes in medication.
- Parents will be kept **informed** about arrangements in school and about contacts made with outside agencies.
- Parents and pupils will be **consulted** before any referral to the Home Tuition Service is made by _____.

Absence as a result of a medical condition

- In cases where pupils are absent for periods **less than 15 working days**, parents will follow the normal arrangements for informing** the school. If the length of the period of absence can be anticipated, then it may be appropriate for the school to provide the pupil with a pack of work to do at home.
- Where an absence **exceeds 15 working days**, the Pastoral Care Lead will inform the Education Attendance Service. Parents will need to provide the school with a letter from medical Consultant containing details of the medical condition or intervention and information about the estimated period of absence. The school will also contact the Home Tuition Service.
- If a pupil is to be admitted to **hospital for a period longer than 5 working days**, then _____ will contact the Hospital School and will consult with staff there about ensuring continuity of education.

Arrangements for access to education in the case of long-term absence

- It is essential that **parents/carers inform the school** at the earliest opportunity if it is anticipated that an absence will be long-term (exceeding 15 working days).
- When an absence of more than 15 working days can be predicted, arrangements for continuing the pupil's education will be made by _____. After speaking to the parents, s/he will **contact the Hospital School and/or Home Tuition Service**. S/he will then send on documentation that will inform staff about the pupil's needs, enabling them to plan appropriate provision. Information sent will generally include:
 - curriculum targets
 - a current Individual Education Plan (IEP) and/or personal education plan, if the pupil has either of these
 - extracts from the latest Annual Review (pupils with statements or EHCPs only).
- **Home Tuition** will start as soon as is practicable. Pupils educated at home will receive a minimum of 5 hours teaching per week. This is intensive one-to-one teaching and is normally as much as a child recovering from illness, injury or surgery can benefit from. In exceptional cases the amount of tuition may be increased if the Home Tuition Service has the capacity at the time.
- In cases where a child has **recurrent or regular treatment** and is away from school for a number of shorter periods, the Inclusion Lead will alert the Home Tuition Service and the Home Tuition Coordinator for Hackney Learning Trust will make every effort to organise special provision for the pupil in question.
- _____ or the class teacher, with the parent's cooperation, will **maintain contact with pupils** unable to attend. It may be appropriate for email to be used and if special events are taking place at school it may be possible for a video to be made and a copy sent to the hospital or home. In certain instances a child's class teacher may be able to send material to the education provider that will help to keep the absent pupil up to date with topics being covered in class.
- _____, Assistant Head for Assessment, will continue to **monitor the progress of pupils** unable to attend. This will be done through discussion with teachers working with the child out of school and by examining work samples (where appropriate). In cases of extended absence _____ will arrange for a review to be held, attended by the pupil's parents, the education provider and the class teacher.

Reintegration following absence for medical treatment

- As with the notification of absence, it is very important that parents give the school as much notice as possible about the **pupil's date of return** to school.

- _____ will draw up an individually tailored **reintegration plan** in advance of the pupil's return to school. This plan will set down any new procedures that need to be followed and will ensure that any additional equipment is in place. Particular attention will be given to matters such as handling and lifting and support staff will be given appropriate training. It is essential that all agencies involved with the pupil contribute to the drawing up of the plan, including the School's nurse. In some cases it will be necessary to have outside professionals on site when the child first returns. On the day of return a Risk Assessment will be carried out with the child, parent and _____ to ensure that the child and others will be safe whilst at school.
- For some children, **reintegration will be a gradual process**. A pupil may start with a short visit to school and gradually increase the time spent in class as s/he builds up stamina. Where mobility and independence are reduced, or where additional medical procedures are involved, a preliminary visit will help to establish whether there are any safety issues that need to be resolved before a date is fixed for the pupil's return.
- If it seems as though a pupil will have significant medical needs for the foreseeable future, it may be necessary to consider making a request for **statutory assessment for EHCP** under the SEND Code of Practice (Pupils with Medical Needs). There will be consultation with the parents on this matter.

Catering for pupil's medical needs in school

- The majority of children who have medical needs are able to **attend school regularly** and do not have to undergo extended periods of treatment.
- Parents of new pupils are required to complete the section of the admission form which gives the school **information about individual medical needs**. It is the duty of parents to share all relevant information so that any necessary preparations can be made.
- Information supplied by parents is transferred to the **Medical Needs Register** which lists the children in year groups. A copy of the class Medical Needs Register is kept by the year group teachers and displayed in the classroom so that it can be referred to easily. All staff have access to full copies of the Medical Needs Register but support and admin staff must read full copies of the Medical Needs Register as they may be working with children from several different classes. The Medical Needs Register is also displayed in the staffroom and is kept as a booklet in the office, Learning Mentors' Room and first aid cabinets on each floor.
- Staff must familiarise themselves with the medical needs of the pupils they work with. **Training** will be provided in connection with specific medical needs, e.g. asthma, anaphylactic shock, so that all members of staff know what precautions to take and how to react in an emergency.
- First aid training takes place on a rolling programme. All first aiders renew their certificate every two years.
- During Transition Week the following year's teacher will be given a copy of the medical needs of the children in their class and have an opportunity to discuss these with the Inclusion lead as well as the previous class teacher.
- Before taking **children off the school premises**, the member of staff in charge will check that any medication or equipment that needs to accompany pupils is safely packed.
- **Medication** is kept in the office and is taken under supervision. Medicines are only administered in specific circumstances and parents must fill in a medication form before sending in medication. It is the responsibility of parents to ensure that medicines are not out of date. **However expiry dates are checked each time medication is**

administered. If the medication is near expiry date then parents will be notified and asked to bring in up-to-date medication and given the expired medication to dispose of safely.

- Children with an allergy that requires an epi-pen will need two epi-pens, both will be kept in the office.
- **Asthma inhalers** will be kept in classrooms for ease of access by pupils. A list of children with asthma inhalers in school will be kept alongside the asthma medical list. A record will be kept whenever the inhaler is used and this will be shared with parents when requested or if there is a significant change in usage of the inhaler.
- Emergency asthma inhalers are kept in the office to administer to children having an asthma attack if their inhaler cannot be used for any reason. Parents will be notified immediately by a member of the admin team if a child has been given this medication.
- It is the parent's responsibility to ensure that all medication is up-to-date and that any equipment is working correctly. Parents must check regularly with their child's class teacher and/or the main office.
- Children with more complex medical needs will require a **healthcare plan**. This will be drawn up in consultation with parents and outside professionals. An appropriate adult in liaison with the outside professional will supervise the carrying out of the plan.
- Pupils who have to carry out regular **occupational therapy or physiotherapy programmes** will be supervised by a member of staff who will have received training from an appropriate professional. Where necessary, pupils will be provided with an exercise bed and a degree of privacy whilst carrying out their exercises.
- Pupils who need **special arrangements for toileting** will be assisted by a trained member of staff. Protective gloves and aprons are provided for staff and there are procedures in place for the disposal of soiled nappies and used catheters. Pupils are encouraged to develop as much independence as possible in connection with toileting.
- In an emergency situation where the child needs immediate professional treatment an ambulance will be called by the office staff. They will also phone the parents and inform them of the situation. A familiar member of staff will accompany the child to the hospital unless the parents arrive at the school before the child leaves in the ambulance. The school will keep in regular contact with the parents until it is confirmed that they are with their child at the hospital. Parents are then responsible for keeping the school up-to-date regarding the child's medical condition and needs.

- **Checking in medication**

Parents will be asked to fill out the Request for Administering Medication form yearly for long term medical needs or as required for other medical needs. Office staff will check the administration details on the medication and that the medication is in date. All forms will be checked by the Head of School and initialled. If medication needs to be brought in daily then it must be handed into the office each day.

- **Checking out medication**

Parents are required to collect all medication on the last day of the school year for long term medical needs. For short term medical needs parents must collect medication from the office at the end of the day if needed at home. It is the parent's responsibility to collect the medication we cannot give medication to children to take home. If children no longer require long term medication, e.g. asthma inhalers, then a letter must be handed to the office to inform the school of the change and they must collect the medication.

Identification of medical needs

- Most medical needs will be **identified by the parents** in consultation with a medical professional outside school.
- Any **medical concerns the school has** about a child will be raised with the parents and reported to the school nurse. Most parents will wish to deal with medical matters themselves through their GP. In some instances the school, after consultation with the parent, may write a letter to the GP suggesting a referral to a multi-disciplinary centre such as the Donald Winnicott Centre or Hackney Ark, where a full paediatric assessment can be carried out.
- When pupils enter the reception class, parents are asked to provide permission for the School's Nurse to carry out health checks on their child. Parents can requested a consultation with the school nurse at any time during their child's schooling. If the class teacher is concerned about a child's health the parents will be contacted by Becky Milne to obtain permission for the child to be seen by the School Nurse. At these meeting parents can seek advice on the health of their child.
- The School Nurse has a regular meeting with _____at which the **Medical Needs Register is reviewed** and health matters discussed.

*Parent/s indicate the person/s with legal guardianship of the child.

**Parents are expected to inform the school on the first day that their child is absent. If an absence last for a full week or longer, parents must produce a medical certificate.

Roles and Responsibilities

- Monitoring all medical needs procedures - _____
- Updating all medical registration and informing staff and school nurse of medical needs – _____
- Checking administration form and authorising administration – _____
- Ensuring information is recorded on SIMs – _____
- Administering medication kept in the office - _____

Keeping record of asthma medication administered – Class teachers

Appendices

- Roles and Responsibility chart
- Medical Needs Procedures
- Step by Step Procedures
- Medication Request form

Policy Ratified:

Date: Signed:_____

(Headteacher)

Signed:_____

(On behalf of the Governors)

REQUEST FOR SCHOOL TO ADMINISTER MEDICATION

The school will not give your child medicine unless you complete and sign this form, and the Head of School has agreed that the school staff can administer the medication.

DETAILS OF PUPIL

Surname: _____

Forename: _____

DoB: _____ M/F _____ Class: _____

Address: _____

Condition or illness: _____

MEDICATION

Name/Type of Medication (as described on the container):

For how long will your child take this medication: From _____ to _____

Date Dispensed: _____

FULL DIRECTIONS FOR USE

Dosage and Method: _____

Timing: _____

Special Precautions: _____

Side Effects: _____

Self-Administration: _____

Procedures to take in an Emergency: _____

CONTACT DETAILS

Name/s: _____

Relationship to Pupil: _____ Daytime Phone No: _____

Address (if different from above): _____

I understand that I must deliver any medicines personally to a member of the office staff and accept that this is a service that the school is **not obliged** to undertake.

Name: _____ Date: _____

Signature: _____ Relationship to Pupil: _____

REGISTRATION OF MEDICAL NEED

DETAILS OF PUPIL

Surname: _____

Forename: _____

DoB: _____ M/F _____

Class: _____

Address: _____

Condition or illness: _____

I give permission for the school nurse to contact me and arrange a meeting regarding my child's medical need.

CONTACT DETAILS

Name/s: _____

Relationship to Pupil: _____

Daytime Phone No: _____

Address (if different from above): _____

Name: _____

Date: _____

Signature: _____

Relationship to Pupil: _____

MEDICAL NEEDS PROCEDURES

Parents are responsible for informing the school of the medical needs of their child/ren. If medication is needed to be administered in school then a request for administering medication form needs to be completed by the parents and agreed by the Head of School or member of the senior leadership team on her behalf. Only medicine prescribed by a doctor and labelled clearly will be considered for administration. Long term medication must be replaced by parents on or before the expiry date. Parents should keep a note of when medication is due to run out. This is not the school's responsibility. However the school will always check that medication is in date when administering and if not or close to expiry date then a member of the office staff will notify parents.

Admin Staff will then record the child's medical needs on SIMs and email the Inclusion Lead, Class teacher and Lead Learning Mentor all information. If a food allergy has been diagnosed then the kitchen's staff need to be notified immediately. The Lead Learning Mentor will ensure that afterschool staff members are informed of all relevant medical needs. They will also be given a copy of the Medical Needs Register.

The Inclusion Lead or SENCo will then update the Medical Needs Register and replace existing Registers with the updated version. They will also notify the school's nurse and arrange for a healthcare plan if necessary.

The Inclusion Lead or SENCo will arrange any training needed to administer the medication. If the school does not have any adults trained in administering the medication then parents/carers will need to do so until training is arranged.

All medicines will be kept in the office and the office staff will administer. Asthma inhalers will be kept in the classrooms. Two epi-pen will be kept in the office. Inhalers and epi-pens will be clearly marked with the child's name and class.

Teachers are responsible for ensuring that any medication a child needs, e.g. asthma inhalers, is taken with them on any trip outside of school.

A record of administration of medication will be kept in the office for medicine and in the classroom for inhalers.

In the event of an emergency the office staff will phone for an ambulance and inform parents immediately.

<p>This is a model policy produced by Lauriston School. We thank them for allowing us to share this with other colleagues in the London borough of Hackney</p>
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Health Care Plan

Name of School: _____

Child's Name: _____

Group/Class/Form: _____

Date of Birth: _____

Emergency Contact:

Name: _____

Telephone : _____

Insert child's photo

Date of Assessment

Care plan completed by _____ Date: _____ Review date: _____
Designation _____

Care plan reviewed by _____ Date: _____ Review date: _____
Designation _____

Family Contact Information

Name: _____ Relationship: _____

Phone number (Mobile): _____ (Home): _____

Name: _____ Relationship: _____

Phone number (Mobile): _____ (Home): _____

Clinic/Hospital Contact

Name: _____ Phone number: _____

Name: _____ Phone number: _____

G.P.: _____ Practice: _____

Telephone No: _____

Medical Diagnosis or Condition:

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Medication

Other conditions that Child has are;

-
-
-

Prescribed medication for Child

Other medication Child takes at home are;

-
-
-

Describe medical needs

Triggers :

Possible triggers for Child are ;

Give details of child's symptoms:	
Symptoms	
Care Plan	
SENCO	<ul style="list-style-type: none"> • Ensure that school staff receive appropriate training as required • Ensure that the child's care plan is accessible to relevant staff as required • Check that medication within school has not expired
School Health service	<ul style="list-style-type: none"> • School nurse to ensure that child has up to date care plan in school. • School nurse to liaise with parents and school to update care plan • Care plan to be reviewed as soon as there is any change to care or minimum yearly. • School doctor to review child as necessary
Classroom staff	Administer medicine as prescribed <ul style="list-style-type: none"> • Stay with the child • Call for help if necessary • Contact carer/parent / head teacher
Parent	<ul style="list-style-type: none"> • Up to date medication in school - check expiry date on medication • Parents to inform School Nurse and school staff of any changes to child's care • Parent to ensure that all medication is brought to school as dispersed in the original packaging with clear instruction. • Parents to ensure that the medication is replaced as soon as it has been used.
Child	<ul style="list-style-type: none"> • To be aware of the care plan and content (If applicable) • To be aware of medical condition and symptoms • To be aware of where the medication is kept (If applicable)

Daily care requirements
<ul style="list-style-type: none"> • Up to date medication in school - check expiry date on medication. • Monitor the Child at school to prevent any triggers. • Ensure child receives and have access to medication as required • School staff to ensure that, health care plan and rescue medication is taken (if any) to any school trip off site.

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

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Who is responsible in an emergency (state if different for off-site activities)
If the child is in school – the school staff are responsible If the child is on the school bus – the transport staff are responsible

Follow up
<ul style="list-style-type: none"> • Child’s parents should be contacted • They should be informed which hospital child/young person has been taken to. • All used medication to be replaced.

NB: ALL MEDICATION MUST BE IN THE ORIGINAL CONTAINER, AS DISPENSED BY THE PHARMACY WITH CLEAR INSTRUCTIONS ON HOW MUCH TO GIVE.

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

Parent’s/Carer’s Signature Print Name: Date:.....
 School Nurse Signature Print Name: Date:.....
 SENCO ‘s SignaturePrint Name: Date:.....

Form copied to: School SENCO Child’s Parents other

If Child does not start to feel better or if you are worried at any time call 999.

This template is provided as an example by School Nursing Team