



WIJPS Policy for children who are unable to attend school because of health needs

Signature of Headteacher: 

Reviewed: November 2022

Next review: November 2024

1. INTRODUCTION

Every child should have the best possible start in life through a high quality education, which allows them to achieve their full potential. A child who has health needs should have the same opportunities as their peer group, including a broad and balanced curriculum. At WIJPS, we believe that, as far as possible, children with health needs and who are unable to attend school should receive the same range and quality of education as they would have experienced by attending school in-house at WIJPS.

The Children and Families Act 2014 brought with it a change in the law meaning that from September 2014 all schools have to make arrangements to support pupils with medical conditions.

The Department for Education (England) published new statutory guidance to accompany this change, called "Supporting pupils at school with medical conditions", which can be found online at:

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

The statutory guidance contains detailed information about what a school policy for supporting pupils with medical conditions should contain, and the roles and responsibilities of governors, staff, health professionals and parents.

2. KEY ROLES AND RESPONSIBILITIES

The LA, school and its partners are aware of their responsibility regarding children and young people who have health needs and have ensured that arrangements are in place to minimise, as far as possible, the disruption to normal schooling by continuing education as normally as the incapacity allows.

2.1 The pupil's role in managing their own medical needs

1. The Governing Body of WIJPS supports the view that the school's policies cover any arrangements for children who are competent to manage their own health needs and medication.
2. Children who can take their own medication themselves or manage procedures will do so with an appropriate level of supervision.

2.2 The family is responsible for

- Ensuring the school is made aware of any changes to the treatment plans.
- Keeping the school updated regarding any absences.
- Attending meetings to discuss how support should be planned.
- Providing any medication in line with the school's medicine policy.
- Working with the school to ensure the best possible outcomes for their child.

2.3 The school is responsible for

- Ensuring arrangements are in place to support our pupils with medical conditions.
- Staff should not force a child to take any medicine or carry out a necessary procedure if a pupil refuses. Instead they should follow the procedures agreed in the individual healthcare plan and inform the child's parents.
- Ensuring our policy clearly identifies roles and responsibilities and is implemented effectively.
- Ensuring the school policies supporting pupils with medical conditions do not discriminate on any grounds including, but not limited to protected characteristics: ethnicity/nationality/origin/religion or belief/sex/gender reassignment/disability or sexual orientation.
- Ensuring that the policy covers arrangements for pupils who are competent to manage their own health needs.
- Ensuring that all pupils with medical conditions are able to play a full and active role in all aspects of school life, participating in school visits/trips/sporting activities/remaining healthy and achieving their academic potential.
- Ensuring that relevant training is delivered to those staff who will have responsibility to support the pupils with medical conditions and that they are competent in such support. Staff to have access to information, resources and materials.
- Ensuring written records are kept of, any and all, medicines administered to pupils.
- Ensuring the policy sets out procedures in place for emergency situations.
- Ensuring the level of insurance is in place to reflect appropriate levels of risk.
- Handling complaints regarding this policy are to be referred to the school's Complaints Policy.

2.2 Role of the Governing Body

- All governors to be aware of the statutory guidance as outlined in introduction - page 1.
- The Governing Body to be legally responsible under Section 100 of the Children and Families Act 2014 to make arrangements to support pupils with medical conditions and to have regard to all guidance for such.
- The Governing Body to ensure that arrangements are in place to support pupils with medical conditions and that all related policies, plans, procedures and systems are properly and effectively implemented.

2.3 The Local Authority (LA) is responsible for:

- Promoting co-operation between relevant partners regarding supporting pupils with medical conditions.
- Providing support, advice/guidance and training for staff to ensure individual healthcare plans are effectively delivered.
- Working with the school to ensure that pupils attend full-time, or make alternative arrangements for the education of pupils who need to be out of school for fifteen days or more due to a health need and who otherwise would not receive a suitable education. See link to statutory guidance in introduction above.

The role of health professionals:

Health professionals have a vital role in liaising with our school's educational staff to ensure that the planned provision is appropriate and that all needs of the child: health, social educational and emotional are being addressed including:

- Ensuring a holistic approach is taken regarding the welfare of the pupil which addresses their health, social, educational and emotional needs throughout the period of their illness.
- Establishing clear procedures for staff which enable pupils to participate in education.
- Making arrangements at a strategic level for co-operation and planning between health and educational professionals and establishing clear procedures for the sharing of information.
- Participating in multi-agency meetings to plan and monitor the pupil's education and return to school, where needed.
- Support clarity, where needed re: the nature of the pupil's illness, e.g. mental health problems, resulting in possible truancy, school refusal or disruptive behaviour, making every effort to provide medical evidence necessary for the pupil to secure eligibility for educational support as quickly as possible.

3. SCHOOL STRUCTURES

- Clerk to GB to ensure that effective policy implementation is sustained.
- First Aid Lead to liaise with School Business Manager to ensure that staff are suitably trained to support pupils and in their absence suitable cover is provided.
- Health and Safety Lead (SBM) to ensure that risk assessments are completed by staff covering any school visits, holidays and other school activities outside the normal timetable.
- Safeguarding Link Governor to be aware of the way in which the school supports medical conditions and that staff are suitably trained and competent for the roles undertaken.
- First Aid Lead to seek advice from Designated Safeguarding Lead, SENDCO, school nurse, EWO and other LA, medical professionals, parents and pupils, as needed, to ensure effective collaboration in working arrangements are agreed to benefit the individual pupil and their needs.
- Headteacher to ensure sufficient training is provided for staff to meet needs of IHP's, including contingency and emergency situations.
- Headteacher to ensure staff are appropriately insured to support pupils with medical needs/conditions.
- SENDCO to ensure that where opportunities are provided for access to school nurse, these roles are used appropriately and steps taken to support children with medical conditions, eg advice sought, help with IHP's, training etc.
- Any member of staff may be asked to provide support for children with medical conditions, including the administering of medicines, although they cannot be required to do so.
- School staff providing support for pupils should be able to access information and other support materials as needed.

3.1 Individual Health care Plans

- Healthcare plans should be drawn up through partnership consultation between First Aid Lead, SENDCO, school nurse and the class teacher working with parents/guardian and pupils to seek their views and advice.
- IHPs should capture the key information and actions that are required to support the pupil effectively.
- The governor responsible for child protection to ensure that IHPs are reviewed at least annually or earlier if evidence is presented that the pupil's needs have changed.
- In producing IHPs, the governors will consider the following:-
 1. The medical condition;
 2. Its triggers;
 3. Signs, symptoms and treatment - including medical, educational, social and emotional needs, and level of support needed (including in emergencies)
 4. Who will provide the support, their training needs, confirmation of their proficiency from a healthcare provider and cover arrangements;
 5. Arrangements for written permission from parents and the Headteacher for medication to be administered by a member of staff (e.g. Epi-pen), or self-administered by the pupil during school hours - separate arrangements required for school trips and/or other school activities outside of the normal school timetable - e.g. risk assessments.
- Where a pupil has a special education need identified in a statement or EHC plan, the individual healthcare plan should be linked to or become part of that statement or EHC plan.

3.2 Emergency Procedures

- Individual healthcare plans should clearly define what constitutes an emergency and explain what to do.
- If a child is taken to hospital, staff should stay with the child until the parent arrives, or accompany a child taken to hospital by ambulance.

3.4 Staff training and support

- The Governing Body of WIJPS will ensure that the practice demonstrates the policy is effective, setting out how staff will be supported in carrying out their role to support pupils with medical conditions and comment upon outcomes during review, in order that practice may be reviewed and reflected upon for the good of the pupils. This will include assessment of training needs, and how and by whom training will be commissioned and provided.
- Healthcare providers should lead on identifying and agreeing the type and level of training required and how this can be obtained, this includes the school nurse, who can provide confirmation on the proficiency of staff in conducting a medical procedure, or in providing medication.
- Training should be sufficient to ensure staff are confident and have confidence in their ability to support pupils with medical conditions. They will need an understanding of the specific medical conditions they are asked to deal with.

- A first-aid certificate does not constitute appropriate training in supporting children with specific medical conditions.
- Staff must not give prescription medicines, or undertake healthcare procedures without appropriate training (updated to reflect any individual healthcare plans).
- Staff who provide support to pupils with medical conditions should be included in relevant meetings.
- Parents may provide specific advice but should not be the sole trainer for the staff.

4. MANAGING MEDICINES ON SCHOOL PREMISES

- See policy: First Aid and medications, including supporting pupils with medical conditions.
- Medicine is only to be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No pupil is to be given medication without their parents' written consent, or following health advice from an ambulance crew member/health service contact in an emergency situation.
- Children should know where their medicine is stored and can access it via a member of staff. Where relevant, they know who to speak to for medicines stored in a locked cupboard.
- School staff may administer a controlled drug to the child for whom it has been prescribed. Schools should keep a record of all medicines administered to individual children, stating what, how and how much was administered, when and by whom.

5. DAY TRIPS, RESIDENTIAL VISITS AND SPORTING ACTIVITIES

WIJPS always endeavours to be inclusive of all pupils, including participating in extra-curricular events. Consideration of pupil's medical conditions should always form part of the process for trip preparation, including risk assessments and adjustments made (in consultation with parents), to ensure that pupils can participate safely. All pupils will be encouraged to attend day trips, residential visits and sporting activities, unless evidence from a clinician states that this is not possible. See also HSE guidance on school trips.

6. ENSURING SUCCESSFUL REINTEGRATION INTO MAINSTREAM SCHOOL

Returning to school after a period of illness can be an emotional hurdle for a child or young person. Friendships can be damaged by long absence and peer group contact during an absence, for example cards, letters, invitations to school events, are as important as formal contact. WIJPS aims to ensure a welcoming environment and encourages pupils and staff to be as positive and proactive as possible during the transition period. Consultation with the child and parents and key staff about concerns, medical issues, timing and pace of return is vital.

If a child can attend school part time, this is preferable to teaching at home and usually enables speedier and more successful reintegration and monitoring of the pupil's needs.

Strategies for successful reintegration are the key element of the child's PEP (personal education plan). The reintegration strategy should include:

- Date for planned reintegration once known.
- Details of regular meetings to discuss reintegration.

- Clearly stated responsibilities and rights of all those involved.
- Details of social contacts including the involvement of peers as "buddies" (mentors), during the transition period.
- A programme of small goals leading up to reintegration.
- Follow up procedures.

7. THE EDUCATION WELFARE SERVICE

Education Welfare Officers (EWOs) play a key role in supporting WIJPS when resolving attendance issues, importantly that of identification of attendance problems related to medical issues. Where the EWOs feel that the needs of a pupil with medical needs are not being met, they will advise the appropriate cause of action.

8. OTHER ISSUES FOR CONSIDERATION

- The school does not currently have a defibrillator as part of its first aid equipment.
- Following legislation in October 2014, parents provide an asthma inhaler for their children for use when needed. Use is logged by the child and signed by an appropriate adult.
- Governors and staff at WIJPS agree that the school is explicit about acceptable practice within this policy, but that discretion and judgement should be used for each case, considering merits of practice in relation to the individual pupil's healthcare plan. It is not good practice to prevent children from easily accessing their inhalers and medication, or failing to administer medication when and where necessary, nor to assume that every child with the same condition requires the same treatment. Staff should never ignore the views of the child or their parents, or ignore medical evidence or opinion (although this may be challenged), frequently send children with medical conditions home from school or prevent them from staying in school to learn, participate in extra-curricular activities, enjoy lunchtime with peers etc., unless this is specified in their individual healthcare plans.
- If a child becomes ill they will be sent to the school office medical room - see First Aid and medications, including supporting pupils with medical conditions policy.
- Pupils should not be penalised for their attendance record if their absences are proven to be related to their medical condition e.g. hospital appointments, or prevented from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.

9. LIABILITY AND INDEMNITY

- The Governing Body of WIJPS is responsible for ensuring the appropriate level of insurance is in place and to check that the policy covers staff in providing support to pupils with medical conditions, recognising individual cover may be needed for any health care procedures undertaken.
- Requirements of the insurance indicating that staff need to be trained should be made clear to all and complied with at all times.
- The insurance policy should be accessible to staff providing such support.
- In the event of a claim alleging negligence by a member of staff, civil actions would be brought against the Governing Body as the employer.

10. PUBLIC TESTS, eg: SATs

Pupils with medical conditions may be entitled to variations of time when sitting their SATs tests. Where a young person, with a medical condition, is being supported by Hospital Education, provision for tests will be discussed at review meetings.

11. TRANSPORT

The provision of temporary transport for a pupil on medical grounds to and from school can sometimes enable a pupil to attend school. A 'request for transport on medical grounds' should be completed by the school, signed by the parents and passed to the SEN and inclusion transport section at the local authority on 0208 708 8214/5, or emailing sen.transport@redbridge.gov.uk (see also online application at: <https://eforms.redbridge.gov.uk/home-to-school-travel-assistance-form/>.) Transport can be arranged for pupils in wheelchairs. The special education needs and inclusion service will decide what form of transport can be included. Please note the team will normally require 4 weeks to process a transport application.