

# WILL ADAMS ACADEMY



## Children with Health Needs Who Cannot Attend School Policy

Date of last review	October 2023
Review cycle	Annual
Policy due for review and approval by Local Governing Body	Autumn Term 2024

## Legislation and Guidance

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This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Education Act 1996
- Equality Act 2010
- Data Protection Act 2018
- DfE (2013) 'Ensuring a good education for children who cannot attend school because of health needs'
- DfE (2015) 'Supporting pupils at school with medical conditions'.

## Definition of a Student with Medical Needs

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Students may at some time have a medical condition that may affect their participation in school activities. For many, this will be short-term; perhaps finishing a course of medication. Other students have medical conditions that, if not properly managed, could limit their access to education. Such students are regarded as having medical needs. Most children with medical needs are able to attend school regularly and, with some support from the school, can take part in most normal school activities. However, school staff may need to take extra care in supervising some activities to make sure that these students, and others, are not put at risk.

### **Children who are unable to attend school as a result of their medical needs may include those with:**

- Physical health issues.
- Physical injuries.
- Mental health problems, including anxiety issues.
- Emotional difficulties or school refusal.
- Progressive conditions.
- Terminal illnesses.
- Chronic illnesses.

Medical PRUs: these are LA establishments that provide education for children unable to attend their registered school due to their medical needs.

**An Individual Healthcare Plan (IHCP)** (see *Appendix 1*) can help to identify the necessary safety measures to support students with medical needs and ensure that they and others are not put at risk.

## Aims

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This policy and the procedures within it aim to:

- Enable regular school attendance
- Inform parents/carers of the school's approach to taking medication during school hours

## **Students with medical conditions are:**

- Included and play a full and active part in school life, including participation in trips and sports that will enable them to flourish and achieve to the best of their ability.
- Treated as individuals; recognising that medical conditions can be wide-ranging in their effects, duration and complexity and will affect quality of life and students' ability to learn.
- Supported in order to increase confidence and promote self-care where appropriate.
- Supported by properly trained staff working in effective partnerships with families, education and health services and other agencies to achieve the best outcomes for the student.

## **Roles and Responsibilities**

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### **The Local Governing Body (LGB) and Head of School are responsible for:**

- Ensuring arrangements for students who cannot attend school as a result of their medical needs are in place and are effectively implemented.
- Ensuring the termly review of the arrangements made for students who cannot attend school due to their medical needs.
- Ensuring the roles and responsibilities of those involved in the arrangements to support the needs of students are clear and understood by all.
- Ensuring robust systems are in place for dealing with health emergencies and critical incidents, for both on and off-site activities.
- Ensuring staff with responsibility for supporting students with health needs are appropriately trained.
- Appointing a named member of staff who is responsible for students with healthcare needs and liaises with parents/carers, students, the Local Authority (LA), key workers and others involved in the student's care.
- Providing teachers who support students with health needs with suitable information relating to a student's health condition and the possible effect the condition and/or medication taken has on the student.
- Notifying the LA when a student is likely to be away from the school for a significant period of time due to their health needs.

### **The SENCo is responsible for:**

- Dealing with students who are unable to attend school because of medical needs.
- Actively monitoring student progress and reintegration into school.
- Supplying students' education providers with information about the child's capabilities, progress and outcomes.
- Liaising with the Head of School, education providers and parents/carers to determine students' programmes of study whilst they are absent from school.
- DSL will provide a link between students and their parents, and the LA.
- Co-ordinating information and will be a first point of contact for parents/carers, outside agencies, staff and supply teachers.

### **Teachers, Support Staff and the Designated Safeguarding Lead (DSL) are responsible for:**

- Understanding confidentiality in respect of students' health needs.
- Designing lessons and activities in a way that allows students with health needs to participate fully, ensuring they are not excluded from activities that they wish to take part in without a clear evidence-based reason.
- Understanding their role in supporting students with health needs and ensuring they attend the required training.

- Ensuring they are aware of the needs of their students through the appropriate and lawful sharing of the individual student's health needs.
- Ensuring they are aware of the signs, symptoms and triggers of common life-threatening medical conditions and know what to do in an emergency.
- Keeping parents/carers informed of how their child's health needs are affecting them whilst in the school.

**Parents/Carers are responsible for:**

- Making sure that their child is well enough to attend school.
- Providing information on the treatment and care their child requires

**Parents/Carers should:**

- Provide the school with sufficient and up to date information about their child's medical conditions, in conjunction with their child's GP or paediatrician, as appropriate
- Carry out any action they have agreed to as part of a health care plan's implementation, for example, provide medicines and equipment, and ensuring they or another nominated adult are contactable at all times.

Parents and carers have prime responsibility for their child's health and should provide the school with information about their child's medical condition.

**The Senior Leadership Team is responsible for:**

- Making arrangements to support students with medical conditions in school
- Ensuring that this policy is developed and implemented
- Ensuring that all students with medical conditions at Will Adams Academy are supported to enable the fullest participation possible in all aspects of school life
- Ensuring that no child with a medical condition is denied admission or prevented from taking up a place in school because arrangements for their medical condition have not been made. However, in line with safeguarding duties, the Local Governing Body ensure that students' health is not put at unnecessary risk from, for example, infectious diseases, and at such times where they feel it would be detrimental to the health of the child or others, they do not have to accept a child in school.
- Ensuring that the focus is on the needs of the individual student
- Ensuring that sufficient staff have received suitable training and are competent before they take on the responsibility to support students with medical conditions
- Ensuring that written records are kept of all medicines administered to students. *(There is no legal duty that requires school staff to administer medication; this is a voluntary role.)*
- Ensuring that the appropriate level of insurance is in place.

**The Head of School will ensure that:**

- All staff are aware of this policy and understand their role in its implementation
- All staff who need to know are aware of a student's condition.
- Sufficient numbers of trained staff are available to implement the policy and deliver against all IHCPs, including in contingency and emergency situations.
- IHCPs are implemented, developed and monitored.
- Staff are appropriately insured and are aware that they are insured to support students with medical conditions

- Contact is made with the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.
- All members of staff know what to do and respond accordingly when they become aware that a student with a medical condition needs help.
- All staff familiarise themselves with the medical needs of the students they work with.
- All staff receive suitable and sufficient training and achieve the necessary level of competency before they undertake the responsibility to support students with medical conditions. (*Information on how Will Adams Academy supports students with medical conditions is included in our induction procedure for all new staff.*)
- Staff keep parents/carers informed about arrangements in school and about contacts made with outside agencies.
- Parents/Carers are informed if their child has been ill at school.
- Staff undertake the appropriate risk assessment and will take into account how a student's medical condition might impact on their participation in school trips or in sporting activities.
- The school accesses the school nursing service for advice and support, when required.

### **School Nurses are responsible for:**

- Notifying the school when a student has been identified as having a medical condition which will require support in school. This should be done before the student starts at the school, wherever possible.
- Providing necessary support for staff on implementing a student's IHCP and provide advice and guidance.
- Liaising with healthcare professionals for appropriate support for the student and for staff training needs.

The school nurse service can provide advice on health issues to students, parents/carers, teachers, education officers and LAs to ensure that Health Authorities, LAs and the LGB are working together to ensure students with medical needs and school staff have effective support in schools.

### **Other involved parties:**

- Other healthcare professionals, including GPs and Paediatricians, should notify the school nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans.
- Specialist local health teams may be able to provide support in schools for children with particular conditions (e.g., asthma, diabetes, epilepsy).
- Parents/carers should be involved in the development and review of their child's IHCP; however, confirmation of any medical need will always be sought from a suitable healthcare professional.
- Students 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 IHCP. On notification of a student with a medical condition the school will implement suitable arrangements; these may be provided when a student starts at school, receives a new diagnosis, or when existing needs change.

### **Individual Healthcare Plans (IHCPs)**

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- The main purpose of an IHDCP is to identify the level of support that is needed in school. The plan should be agreed with parents/carers and staff and parents/carers should agree on

how frequently it needs to be reviewed. All plans will reflect individual need. In drawing up an IHCP input is required from:

- The Head of School
  - The Parent or Carer
  - The child, if mature enough
  - The class tutor
  - Care Assistant/Support Staff
  - Any member of staff who has agreed to be trained in emergency procedures or administer medication.
  - Outside agents, for example, GP, or Healthcare Professional
- IHCPs and their review may be initiated by a member of school staff or a healthcare professional in consultation with the parent/carer. (A letter inviting parents/carers to contribute to the development of an IHCP is provided in Appendix 1.)
  - A plan will be drawn up with input from healthcare professionals who are able to determine the level of detail needed, in consultation with the school, parents/carers and the student.
  - Each IHCP will provide clarity about what needs to be done, when and by whom. The level of detail within plans will depend on the complexity of the student's condition and the degree of support needed. It is recognised that different students with the same health condition may require very different support.
  - The IHCP will define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of symptoms and procedures. Some students may have an emergency healthcare plan prepared by their lead clinician.
  - Plans will be reviewed at least annually, or earlier, if evidence is presented that the student's needs have changed.
  - Where a student has a special educational need but does not have a statement or EHCP, their special educational needs will be referred to in their Individual Healthcare Plan.
  - The plan must also identify if there are any training needs for staff.
  - All information relating to the medical condition on the plan is to be confidential.

#### **If the Local Authority makes arrangements, they should:**

- Provide such education as soon as it is clear that a student will be away from school for 15 days or more, whether consecutive or cumulative. They should liaise with the appropriate medical professionals to ensure minimal delay in arranging appropriate provision for the student.
- Ensure the education students receive is of good quality, allows them to take appropriate qualifications, prevents them from falling behind their peers in school, and allows them to reintegrate successfully back into school as soon as possible.
- Address the needs of individual students in arranging provision.
- Have a named officer responsible for the education of children with additional health needs and ensure parents/carers know who this is.
- Have a written, publicly accessible policy statement on their arrangements to comply with their legal duty towards children with additional health needs.
- Review the provision offered regularly to ensure that it continues to be appropriate for the child and that it is providing suitable education.
- Give clear policies on the provision of education for children and young people under and over compulsory school age.  
Work constructively with local providers, relevant agencies and parents/carers to ensure the best outcomes for the student.
- Share information with relevant health services as required.
- Help make sure that the provision offered to the student is as effective as possible and that the child can be reintegrated back into school successfully.
- Plan for consistent provision during and after the period of education outside the school, allowing the student to access the same curriculum and materials that they would have used in school as far as possible.

- Enable the student to stay in touch with school life (e.g., through newsletters, emails, internet links to lessons from their school or invitations to school events).
- Create individually tailored reintegration plans for each child returning to school.
- Consider whether any reasonable adjustments need to be made.

**The LA should not:**

- Have processes or policies in place which prevent a child from getting the right type of provision and a good education.
- Withhold or reduce the provision, or type of provision, for a child because of how much it will cost.
- Have policies based upon the percentage of time a child is able to attend school rather than whether the child is receiving a suitable education during that attendance.
- Have lists of health conditions which dictate whether or not they will arrange education for children or inflexible policies which result in children going without suitable full-time education (or as much education as their health condition allows them to participate in).

**Unacceptable Practice**

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As a school we will not:

- Prevent students from easily accessing their inhalers and medication, or from administering their medication when and where necessary.
- Assume that every student with the same condition requires the same treatment.
- Ignore the views of the student or the parents/carers or ignore medical evidence or opinion (although this may be challenged).
- Send students with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their IHCP.
- Send a student who becomes ill to the school office unaccompanied or with someone unsuitable.
- Penalise students for their attendance record if their absences are related to their medical condition e.g., hospital appointments.
- Prevent students from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Require parents/carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including support with toileting issues.
- Prevent students from participating or create unnecessary barriers to students participating in any aspect of school life, including school trips, for example, by requiring parents/carers to accompany their child.

**Managing Medicines on School Premises:**

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Parents/Carers must give prior written agreement for any medication, prescription or non-prescription, to be given to a student. An agreement form for administering medication in school is provided in Appendix 3.

All medicines will be stored safely. Students will be informed of the location of their medicines and will be able to access them immediately. The form for recording any medicine administered to a student is provided in Appendix 4.

A student under 16 will never be given medicine containing aspirin unless prescribed by a doctor. Medication, for example for pain relief, will never be administered without first checking maximum dosages and when the previous dose was taken.

A student who has been prescribed a controlled drug may legally have it in their possession, if they are competent to do so. Otherwise, the school will store them securely and only named staff will have access; they will be easily accessible in an emergency. A record is kept of any doses used and the amount of the controlled drug held in school.

It is recommended that two adults, one of the same gender as the student, should administer any intrusive or invasive medication. The dignity of the student must be preserved at all times.

A form for recording staff training on the administration of medicines is provided in Appendix 5.

Complaints or concerns relating to a student's medical conditions should be discussed directly with the school. Formal complaints will be handled in line with the school's complaints procedure.

## **Emergency procedures**

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All staff should know how to call emergency services and know who is responsible for carrying out any emergency procedure if required.

Within each centre, two members of the staff team are trained in Paediatric First Aid and will be able to administer first aid until emergency services arrive. A member of staff must accompany and stay with any child taken to hospital until the parent/carer arrives.

## **Monitoring, evaluation and review**

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This policy will be reviewed annually as part of the policy review cycle of Will Adams Academy – part of the Alternative Learning Trust. An assessment will be made of the policy's implementation and effectiveness.

The policy will be promoted and implemented throughout Will Adams Academy – part of the Alternative Learning Trust.



## **APPENDIX 1: Letter inviting parents/carer to contribute to individual healthcare plans**

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Dear Parent/Carer,

### ***Developing an individual healthcare plan for your child.***

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting student at school with medical conditions for your information. A central requirement of the policy is for an individual healthcare plan to be prepared, which will set out what support your child needs, and how this will be provided. The plan will be developed in partnership between yourselves, your child, the school and the relevant healthcare professional, who will be able to advise us on your child's case.

The aim of this partnership is to ensure that the school is aware of how to support your child effectively, and provide clarity about what needs to be done, when and by whom. The level of detail within the plan will depend on the complexity of your child's medical condition and the degree of support needed. It may be that the decision is made that your child will not need an Individual Healthcare Plan, but we will need to make judgements about how your child's medical condition will impact on their ability to participate fully in school life, and whether an Individual Healthcare Plan is required to facilitate this.

A meeting to discuss the development of your child's Individual Healthcare Plan has been arranged for \_\_\_\_\_.

I hope that this is convenient for you and would be grateful if you could confirm if you are able to attend. The meeting will involve the following people: \_\_\_\_\_.

Please let me know if you would like us to invite any other medical practitioners, healthcare professionals or specialists that would be able to provide us with any other evidence which would need to be considered when developing the plan. If you are unable to attend, please could you complete the attached Individual Healthcare Plan template and return it, with any relevant evidence, for consideration at the meeting.

If you would like to discuss this further, or would like to speak to me directly, please feel free to contact me on the number above.

Yours sincerely,

SENCo  
Will Adams Academy

## APPENDIX 2: Individual Healthcare Plan (IHCP)

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### Individual Healthcare Plan (IHCP)

#### Student Details

Name:

Date of Birth:

Address:

Medical diagnosis or condition:

Review Date:

#### Family Contact Information

First Contact Name:

Relationship to Student:

Phone number (mobile):

Phone number (home):

Phone number (work):

#### Clinic/Hospital Contact Information

Clinic/Hospital Name:

Contact Name:

Phone number:

GP Name:

Phone number:

Person(s) responsible for providing support in school:

Describe the medical needs of the student and give details of the student's symptoms.

What are the triggers and signs?

What treatment is required?

Name of medication and storage instructions:

Can the student administer their own medication? YES/NO

Does the student require supervision when taking their medication? YES/NO

Arrangements for monitoring the taking of medication dose, when to be taken, and method of administration:

Describe any side effects any other facilities/equipment/devices/etc that might be required to manage the condition.

Describe any environmental issues that might need to be considered.

Arrangements for school visits/trips/out of school activities required:

Any other relevant information.

Describe what constitutes an emergency and the action to be taken when this occurs:

Named person responsible in case of an emergency in school:

Off-site activities:

Does the student have an emergency healthcare plan? YES/NO

Staff training required/undertaken by:

## APPENDIX 3: Parental agreement for school to administer medication

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### Parental agreement for school to administer medication

The school will not give your child medication unless you complete and sign this form.

Student Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
Group/class/form: \_\_\_\_\_  
Medical condition or illness: \_\_\_\_\_

#### Details of medication

(Note: medication must be stored in the original container as dispensed by the pharmacy)

Name/type of medication (as described on container): \_\_\_\_\_

Expiry date: \_\_\_\_\_ Dosage: \_\_\_\_\_  
Method of administration: \_\_\_\_\_  
Timing of administration: \_\_\_\_\_  
Any special precautions or other instructions: \_\_\_\_\_

Can the student self-administer medication? YES/NO

#### Emergency Procedures

Procedures to take in an emergency: \_\_\_\_\_

#### Emergency Contact Details

Emergency Contact Name: \_\_\_\_\_  
Relationship to student: \_\_\_\_\_  
Daytime phone number: \_\_\_\_\_

I understand I must deliver the medication personally to \_\_\_\_\_ YES/NO

Date of review: \_\_\_\_\_

The above information is, to the best of my knowledge, accurate at the time of writing. I give my consent for the school staff to administer medication in accordance with the school's policy, and the instructions given with 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.

Signed: \_\_\_\_\_ Print name: \_\_\_\_\_

Date: \_\_\_\_\_

## APPENDIX 4: Record of medication administered to an individual child

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### Record of medication administered to an individual child

**Student Name:**

**Date of Birth:**

Name and strength of medication:

Expiry Date:

Dose and frequency of medication:

Quantity returned:

Staff signature: \_\_\_\_\_

Parent/carer signature: \_\_\_\_\_

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Date given:

Time given:

Dose given:

Name of staff member:

Staff initials:

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Date given:

Time given:

Dose given:

Name of staff member:

Staff initials:

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Time given:

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Name of staff member:

Staff initials:

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Date given:

Time given:

Dose given:

Name of staff member:

Staff initials:

**APPENDIX 5: Staff training record – Will Adams Academy**

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**Staff Training Record  
Will Adams Academy  
Part of Alternative Learning Trust**

*To be completed by trainer.*

Name of staff member:

Type of training received:

Training provided by:

Profession and title:

Date training was completed:

I confirm that \_\_\_\_\_ (*insert staff members name*) has received the training detailed above and is competent to carry out any necessary treatment/administer medication.

I recommend that this training is updated \_\_\_\_\_ (*date*)

Trainer signature:

Date:

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*To be completed by the member of staff that participated in the training.*

I confirm that I have received the training detailed above.

Staff signature:

Date:

Suggested review date: