

# **YSGOL GYMRAEG PONTARDAWE**

# POLISI MEDDYGINAIETH I BLANT PUPILS WITH MEDICAL NEEDS POLICY

Reviewed Sept 2024

Signed: M Evans

COG: Mrs R Davies

and

Mae Confensiwn y Cenhedloedd Unedig ar Hawliau'r Plentyn wrth wraidd cynllunio, polisïau, arfer ac ethos ein hysgol. Fel Ysgol sy'n Parchu Hawliau, nid yn unig yr ydym yn addysgu am hawliau plant ond rydym hefyd yn modelu hawliau a pharch ym mhob perthynas – Cysylltiedig ag Erthyglau 3, 32 (CRC)

#### 1. Introduction

This policy is written in response to the guidance contained in the Welsh Assembly Government circular "Access to Education and Support for Children and Young People with Medical Needs". The school will continue to be responsible for all children and young people unable to attend school for medical reasons and they should be able to access education without stigma or exclusion.

Children and young people covered by this policy may:

- be recovering from an illness or injury keeping them away from school during recovery;
- have a long term or recurring illness;
- have an illness or clinically defined mental health disorder which causes them to be absent for a period in excess of 15 days where medical opinion states they are still unable to access mainstream school.

#### 2. Aim

Our aim is to ensure that all children and young people in our school continue to have access to as much education as their medical condition allows so that they are able to maintain the momentum of their education and to keep up with their studies. The nature of the provision will be responsive to the demands of medical conditions that can sometimes be changeable.

#### 3. Responsibilities

The school's headteacher is the designated contact responsible for the education of children and young people with medical needs whose role it is to facilitate communication with all parties and ensure that the school is meeting the needs of all those identified. Where the headteacher accepts responsibility, in principle, for school staff giving or supervising children and young people taking prescribed medication, they should ensure prior written agreement is obtained for any medication to be given.

Areas of general responsibility will include:

- > maintaining a list of children and young people with medical conditions in the school.
- ensuring that contact is maintained with children and young people (and their families) who are away from school due to illness for a period of less than 15 working days, setting of work if they are well enough, forwarding of newsletters etc, welcoming them back to school, ensuring that all staff are aware of their up to date medical situation and ensuring that any adjustments to accommodation, curriculum are made, together with ongoing monitoring of their situation and needs whilst in school.
- keeping the EWO informed of all attendance issues regarding children and young people where there may be medical needs, either physical or mental.
- > ensuring that the school register is marked appropriately.
- > maintaining contact with the school nurse.
- notifying the Medical Needs Team if a child or young person is (or is likely to be) away from school due to medical needs for more than 15 working days. This includes those with a recurring illness.
- ensuring that close contact is maintained with them (and their family) and that arrangements are in place for the setting and marking of work. This is particularly important for those for whom a support programme is being arranged.
- > assisting children and young people with long term or complex medical needs.

#### 4. Referral to the Medical Needs Team

Children who will be absent from school for 15 working days, trigger intervention.

Educational provision will be made in collaboration with the service providing alternative education. The school will hold, chair and document a planning meeting. The designated school contact for children and young people with medical needs will be responsible for:

- ensuring that Medical Needs referral forms (Request for Involvement and Request for Medical Information forms) are completed and passed to the relevant agencies as quickly
- > as possible.
- drawing up an Individual Education Plan (IEP) and ensuring that the child or young person is on School Action Plus of the SEN Code of Practice.
- arranging for a member of the school staff to attend an initial meeting with the Medical Needs team to plan a way forward.
- > ensuring that regular half termly review meetings are in place.
- ensuring the prompt provision (as agreed with the Medical Needs Team) of information about a child or young person's capabilities programmes of work, and resources. Work provided by school will be relevant, appropriate and of comparable level to work being done in school by peers in the same set/group.
- passing on details of the child or young person's special educational needs and a copy of the current IEP.
- ensuring that children and young people who are unable to attend school because of medical needs are kept informed about parents evening and are able to participate, for example, in homework clubs, study support and other activities.
- encouraging and facilitating liaison with peers for example, through visits, emails, letter, and telephone calls.
- ensuring that all children and young people covered by this policy have access to statutory assessment, including guidance on the completion of appropriate coursework as appropriate. The school will also be responsible for requesting special arrangements where necessary.

## 5. Parents/Carers and Children and young people

Through weekly discussions (in person if possible, by phone if necessary) parents/carers will be full collaborative partners and how they will have access to information, advice and support during their child's illness. Opportunities to allow the individual child to be involved in making decisions and choices will also be addressed according to need and changing circumstances. The school's policy on children and young people carrying their own medication is that any medication which is to be administered can be done by:

- a member of the family who is available to attend the school at pre-arranged times for that purpose,
- a member of staff who has agreed to administer a dose according to written and signed directions by the parent/carer, [\* Please note that members of staff may only agree to administering pre-measured doses of medication e.g. pills and only on completion of the appropriate form as found at the end of this policy.]
- the child him/herself with written consent and assurance of competence from the parent/carer for self administered medicines e.g. asthma pumps, measured doses for diabetes etc.

Members of staff are not medically trained and may not be expected to accept responsibility for measuring medication for administration orally, by direct application or by injection.

Staff at the school are trained in administering First Aid and also an "Epipen" for emergency situations involving specific children in specific circumstances. Although the above remains policy, staff at the school will always place the welfare of the child foremost in all circumstances and provide the assistance they can. (See the school's First Aid policy.)

## 6. Reintegration

The school will have a key role to play in successful reintegration and will be proactive in working with all agencies to support a smooth transition and in ensuring that peers are involved in supporting child or young person's reintegration. The plan will always have multi-agency approval.

#### 7. Involvement of Governors

This policy will be regularly reviewed and overseen by the Governing Body.

#### 8. Emergency Arrangements

In emergency situations the school will put the child's welfare foremost and seek to ensure that appropriate medical help is made available. Parents / carers will be contacted immediately but priority will be given to the child's well-being and safety which would probably involve a 999 call to the emergency services.