



Students who cannot attend school for medical reasons

Signed – Governor

Dawn Laverick-Brown


Print Name

Date: November 2021

Review: November 2023

Children's Services Integrated Services for Learning

ACCESS TO EDUCATION FOR CHILDREN & YOUNG PEOPLE UNABLE TO ATTEND SCHOOL FOR MEDICAL REASONS

PUBLICATION SCHEDULE NUMBER:	CS3956
PUBLICATION DATE:	SEPTEMBER 2015 (ISSUE NO: 5)
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TEAM:	EDUCATION SUPPORT TEAM FOR MEDICAL ABSENCE
REVIEW DATE:	SEPTEMBER 2018
TARGET AUDIENCE:	ALL CS STAFF

Access to Education for Children & Young People unable to Attend School for Medical Reasons (CS3956)

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INTRODUCTION

EDUCATION SUPPORT TEAM FOR MEDICAL ABSENCE (ESTMA)

- The Education Support Team for Medical Absence (ESTMA) is not an Alternative Educational Provision - its role is to provide support to Hertfordshire schools which have pupils who are temporarily unable to attend school full time for medical reasons.
- The work of the service is underpinned by the following Government documents:-
 - **Education Act 1996 (Section 19)**
 - **Equality Act 2010**
 - **Statutory Guidance for Local Authorities January 2013**
 - **Out of School Out of Mind 2011**
 - **Ofsted Subsidiary Guidance 2012**
 - **Alternative Provision Statutory Guidance January 2013**

PURPOSE OF THE SERVICE

- To minimise the interruption and disruption to the pupil's schooling by continuing education as normally as the child's condition permits and working towards reintegration into school as soon as possible.
- To work closely with the school to ensure continuity of educational provision.
- To provide as far as possible a relevant curriculum, which reflects that of the school and the requirements of the National Curriculum.
- To work in partnership with pupils, parents/carers, schools, medical and all Children's Services colleagues to ensure the best possible outcome for each young person.

SERVICE PROVISION

- Advice and support to pupils, parents/carers, schools and other agencies working with the pupil.
- Education support for pupils resident in Hertfordshire and absent from school for an aggregated period due to illness.
- A multi-agency approach to supporting the education needs of pupils with medical conditions.
- Support re-integrating pupils back into school.
- Continuity of education for pupils with long stay or recurrent admissions to hospital.

SERVICE PROVIDED FOR

- Pupils of statutory school age resident in Hertfordshire.
- Pupils who have an anticipated absence from school for a significant period for medical reasons.
- Pupils whose attendance has been impacted due to medical reasons.
- Pregnant school girls and young mothers from 29 weeks of pregnancy. (Pupils are encouraged to stay in school as long as possible before the birth of the baby. Support can be offered for up to 18 working weeks in total, if needed. ESTMA works closely with the young person and family, school and relevant agencies to ensure that the support provided is appropriate for each individual case.)
- Local Authorities have a power (not a duty) to arrange educational provision, where not already available, for pupils aged 16-18. ESTMA will support post 16 pupils who were working with ESTMA and whose education has been significantly disrupted due to medical reasons so

require additional support in year 12 to complete a GCSE course.

- Pupils reintegrating back into school following a period of absence due to medical reasons.

MEDICAL EVIDENCE

- All referrals must be accompanied by a letter from a medical practitioner, such as a Consultant Paediatrician or member of a CAMHS team. The evidence should explain the impact the medical condition has on the pupil's ability to access education in school.

ACCESS TO THE SERVICE

- A Senior Teacher leads the ESTMA team in each area and all referrals will be reviewed at a fortnightly Multi-Agency Panel Meeting.
- The ESTMA Eligibility Criteria will be applied to all referrals (see Appendix C)
- ESTMA staff will ensure that race, gender, ethnicity, religion and beliefs, sexual orientation and disability are taken into account when making decisions about the provision offered.

EDUCATION PROVISION

- ESTMA will ensure that the education provided by ESTMA staff is of a consistently high quality, and follows the principle of equality of opportunity.
- ESTMA staff will have annual performance appraisal in line with statutory guidance.
- ESTMA staff will be given training opportunities to ensure that they have up to date curriculum knowledge.
- ESTMA will ensure that the views of pupils, parents and carers are taken into consideration when decisions are made about the provision offered by ESTMA.
- Equal opportunity training is provided to all permanent staff and disseminated to all teachers working with the service.
- Provision will be monitored regularly in accordance with County guidelines.

MONITORING & EVALUATION

- The ESTMA Senior Teacher/Co-Ordinator will regularly monitor and evaluate the effectiveness of teaching.
- The feedback from individual pupil evaluations is monitored by the Senior Teacher responsible. If there are any issues which need to be addressed immediately the Senior Teacher is responsible for taking the appropriate actions.
- All policies and procedures will be monitored regularly over the year.
- Evaluations are reviewed annually. Appropriate changes to policies and procedures are made as a result of the feedback received.

CHILDREN & YOUNG PERSONS PLAN / TARGETS / PRACTICES

- ESTMA provides support within the framework of ISL and the CYPP.
- ESTMA pupils will have the impact of their medical condition on their ability to access the curriculum minimised:
- ESTMA will work with other agencies to identify pupils who may be missing education because of a medical condition
- ESTMA staff will liaise regularly with Children's Services staff, schools and medical teams

to ensure pupils who may need ESTMA support are identified.

- ESTMA staff support pupils to access their examinations in school.
 - ESTMA staff work with other agencies such as Youth Connexions to ensure pupils are prepared for post sixteen provisions.
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Information about illness and impact on ability to access the curriculum

- School and ESTMA staff will liaise with pupils, parents/carers and medical teams to ensure there is a clear understanding of the impact the pupil's illness has on his/her ability to access the curriculum. Reasonable adaptations to the curriculum will be made to help the pupil to achieve despite their illness.
- ESTMA pupils will achieve curriculum and reintegration targets. Pupils will develop a positive self-image and be happy to be in school.
- Targets will be achievable yet challenging. Curriculum targets are set based on assessments made by ESTMA staff and assessment information provided by the school. Reintegration targets are set following liaison with medical staff and in consultation with pupils and their families at regular review meetings.
- ESTMA staff will encourage pupils to achieve their full potential, taking into account the challenges that their illness may present.

Access to peers, school and school activities to maximise physical and mental wellbeing

- Arrangements will be made where possible to keep pupils in contact with their peers when they are unable to attend school eg. texts, email, letters and visits.
- Schools will be requested to send information home so that pupils do not lose contact with the activities happening in and after school.
- ESTMA staff to promote positive relationships with pupils, parents and carers.
- ESTMA staff to prepare pupils for group sessions where possible, in school and with other ESTMA pupils where appropriate.
- ESTMA staff work with the school, the pupil and parents/carers to ensure curriculum targets are realistic and set with future college/employment opportunities in mind where appropriate.
- ESTMA staff to encourage and provide opportunities to pupils to return to school as quickly as possible to ensure access to a broad and balanced curriculum.

Maximise opportunities to lead fulfilling lives regardless of health problems

- ESTMA staff will work closely with pupils, parents/carers, schools and medical professionals, to ensure that pupils with medical conditions have equal access to all activities as far as their medical condition will allow.
- Pupils will be encouraged to think positively about themselves, by being involved in setting their own targets. Academic achievement, achieving reintegration targets and personal targets are all equally recognised.
- ESTMA staff will encourage their pupils to become involved with other activities to increase their opportunities to achieve in all aspects of their lives.
- Pupils' views are always sought by ESTMA staff. They are encouraged to attend meetings, are asked to fill in pupil report forms and are actively involved in decisions made about their personal education plans.
- Where possible ESTMA pupils will be able to attend school regularly and be able to access the curriculum safely.

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- ESTMA staff to provide a positive role model for their pupils.

ESTMA staff will follow Safeguarding Practices

- All staff that have direct contact with pupils will have enhanced DBS checks, will carry Hertfordshire Children's Services ID and attend Safeguarding training.
- School staff and ESTMA managers will undertake and implement risk assessments for the teaching venues of pupils.
- School and ESTMA staff will liaise with the medical teams working with pupils to ensure that all precautions needed are taken to ensure the pupil's safety.

APPENDIX A

STATUTORY GUIDANCE & LEGISLATION

- This policy takes account of the statutory guidance contained in:
 - **Ensuring a good education for children who cannot attend school for health reasons** (Statutory guidance for local authorities January 2013)
 - **Implementing the Disability Discrimination Act in Schools and Early Years Settings. (2005) (DCSF and Disability Rights Commission)**
 - **Removing Barriers to Achievement 10 year Government strategy for SEN (2004).** DfES ES/0117/2004 DfES ES/0118/2004 (summary).
 - **The Education Act 1996 (DfES)**
The Local Education Authority (LEA) has a duty set out in the Education Act 1996 to "... Make arrangements for the provision of suitable education at school or otherwise than at school for those children of compulsory school age who, by reason of illness, exclusion from school or otherwise, may not for any period receive suitable education unless such arrangements are made for them."
 - **Race Relations (Amendment) Act 2000 (RRAA)**
 - **Hertfordshire County Council Equality and Diversity Policy (revised July 2009)**

APPENDIX B

SCHOOL EXEMPLAR POLICY

- Appendix B offers a model exemplar policy for a school to modify and adopt formally through their Governing Body:

CONTEXT OF SCHOOL

SCHOOL NAME: BATCHWOOD SCHOOL

The named member of school staff responsible for this medical conditions policy and its implementation is:

NAME: Jonathan Kemp

ROLE: Headteacher

MISSION STATEMENT

This school is an inclusive community that supports and welcomes pupils with medical conditions.

- This school is welcoming and supportive of pupils with medical conditions. It provides children with medical conditions with the same opportunities and access to activities (both school based and out-of-school) as other pupils. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been made.
- This school will listen to the views of pupils and parents/carers/carers.
- Pupils and parents/carers/carers feel confident in the care they receive from this school and the level of that care meets their needs.
- Staff understand the medical conditions of pupils at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability and confidence
- All staff understands their duty of care to children and young people and knows what to do in the event of an emergency.
- The whole school and local health community understand and support the medical conditions policy.
- This school understands that all children with the same medical condition will not have the same needs; our school will focus on the needs of each individual child.
- The school recognises its duties as detailed in Section 100 of the Children and Families Act 2014. (Other related legislation is referenced in DfE guidance p21). Some children with medical conditions may be considered to be disabled under the definition set out in the Equality Act 2010. Where this is the case, this school complies with their duties under that Act. Some may also have special educational needs (SEN) and may have a statement, or Education, Health and Care (EHC) plan which brings together health and social care needs, as well as their special educational provision. For children with SEN, this policy should be read in conjunction with the Special educational needs and disability (SEND) code of practice.

This school's medical conditions policy is drawn up in consultation with a wide range of local key stakeholders within both the school and health settings.

- Stakeholders include pupils, parent/carers, school nurse, school staff, governors, and relevant local health services.

The medical conditions policy is supported by a clear communication plan for staff, parent/carers/carers and other key stakeholders to ensure its full implementation.

- Pupils, parent/carers/carers, relevant local healthcare staff, and other external stakeholders are informed of and reminded about the medical conditions policy through clear communication channels.

All staff understand and are trained in what to do in an emergency for children with medical conditions at this school.

- All school staff, including temporary or supply staff, are aware of the medical conditions at this school and understand their duty of care to pupils in an emergency.
- All staff receives training in what to do in an emergency and this is refreshed at least once a year.
- All children with medical conditions that are complex, long-term or where there is a high risk that emergency intervention will be required at this school have an individual healthcare plan (IHP), which explains what help they need in an emergency. The IHP

will accompany a pupil should they need to attend hospital. Parental permission will be sought and recorded in the IHP for sharing the IHP within emergency care settings.

- This school makes sure that all staff providing support to a pupil have received suitable training and ongoing support to ensure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHP. This should be provided by the specialist nurse/school nurse/other suitably qualified healthcare professional and/or parent/carer. The specialist nurse/school nurse/other suitably qualified healthcare professional will confirm their competence and this school keeps an up to date record of all training undertaken and by whom.

All staff understand and are trained in the school's general emergency procedures.

- All staff, including temporary or supply staff should be aware of the content of this policy, know what action to take in an emergency and receive updates at least yearly.
- If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent/carer arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car.

This school has clear guidance on providing care and support and administering medication at school.

- This school understands the importance of medication being taken and care received as detailed in the pupil's IHP.
- Medication will only be administered when it would be detrimental to a child's health or school attendance not to do so.
- This school will make sure that there are sufficient members of staff who have been trained to administer the medication and meet the care needs of an individual child. This includes escort staff for home to school transport if necessary. This school will ensure that there are sufficient numbers of staff trained to cover any absences, staff turnover and other contingencies. This school's governing body has made sure that there is the appropriate level of insurance and liability cover in place.
- This school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances, and every effort will be made to encourage the pupil to involve their parent/carer, while respecting their confidentiality.
- When administering medication, for example pain relief, this school will check the maximum dosage and when the previous dose was given. Parents/carers will be informed. This school will not give a pupil under 16 medicine containing aspirin unless prescribed by a doctor.
- This school will make sure that a trained member of staff is available to accompany a pupil with a medical condition on an off-site visit, including overnight stays.
- Parents/carers/carers at this school understand that they should let the school know immediately if their child's needs change.
- If a pupil misuses their medication, or anyone else's, their parent/carer is informed as soon as possible and the school's disciplinary procedures are followed.

This school has clear guidance on the storage of medication and equipment

- This school makes sure that all staff understand what constitutes an emergency for an individual child and makes sure that emergency medication/equipment, eg asthma inhalers, epi-pens etc are readily available wherever the child is in the school and on off-site activities, and are not locked away.
- Pupils may carry their own medication/equipment, or they should know exactly where to access

it. Those pupils deemed component to carry their own medication/equipment

with them will be identified and recorded through the pupil's IHP in agreement with parents/carers.

- Pupils cannot carry controlled drugs. All medications are locked in the medical cabinet in the Staff room which can only be accessed by medical administration staff only. Staff at this school can administer a controlled drug to a pupil once they have had specialist training.
- This school will make sure that all medication is stored safely, and that pupils with medical conditions know where they are at all times and have access to them immediately. Under no circumstances will medication be stored in first aid boxes.
- This school will only accept medication that is in date, labelled and in its original container including instructions for administration. The exception to this is insulin, which though must still be in date, will generally be supplied in an insulin injector pen or a pump.
- Parents/carers are asked to collect all medications/equipment at the end of the school term, and to provide new and in-date medication at the start of term.
- This school disposes of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

This school has clear guidance about record keeping.

- As part of the school's admissions process and annual data collection exercise parents/carers are asked if their child has any medical conditions. These procedures also cover transitional arrangements between schools.
- This school uses an IHP to record the support an individual pupil needs around their medical condition. The IHP is developed with the pupil (where appropriate), parent/carer, designated named member of school staff, specialist nurse (where appropriate) and relevant healthcare services. Where a child has SEN but does not have a statement or EHC plan, their special educational needs are mentioned in their IHCP. Appendix 2 is used to identify and agree the support a child needs and the development of an IHCP.
- This school has a centralised register of IHPs, and an identified member of staff has the responsibility for this register.
- IHPs are regularly reviewed, at least every year or whenever the pupil's needs change.
- The pupil (where appropriate) parents/carers, specialist nurse (where appropriate) and relevant healthcare services hold a copy of the IHP. Other school staff are made aware of and have access to the IHP for the pupils in their care.
- This school makes sure that the pupil's confidentiality is protected.
- This school seeks permission from parents/carers before sharing any medical information with any other party.
- This school keeps an accurate record of all medication administered, including the dose, time, date and supervising staff.

This school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment, as well as social, sporting and educational activities.

- This school is committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. This school is also committed to an accessible physical environment for out-of-school activities.
- This school makes sure the needs of pupils with medical conditions are adequately

considered to ensure their involvement in structured and unstructured activities, extended school activities and residential visits.

- All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's anti bullying policy, to help prevent and deal with any problems. They use opportunities such as PSHE and science lessons to raise awareness of medical conditions to help promote a positive environment.
- This school understands the importance of all pupils taking part in off site visits and physical activity and that all relevant staff make reasonable and appropriate adjustments to such activities in order they are accessible to all pupils. This includes out-of-school clubs and team sports. Risk assessments will be conducted as part of the planning process to take account of any additional controls required for individual pupil needs.
- This school understands that all relevant staff are aware that pupils should not be forced to take part in activities if they are unwell. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.

This school makes sure that pupils have the appropriate medication / equipment / food with them during physical activity and offsite visits.

- This school makes sure that pupils with medical conditions can participate fully to the best of their ability in all aspects of the curriculum and enjoy the same opportunities at school as any other child, and that appropriate adjustments and extra support are provided.
- All school staff understand that frequent absences, or symptoms, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition.
- This school will not penalise pupils for their attendance if their absences relate to their medical condition.
- This school will refer pupils with medical conditions who are finding it difficult to keep up educationally to the SENCO/INCO who will liaise with the pupil (where appropriate), parent/carers and the pupil's healthcare professional.
- Pupils at this school learn what to do in an emergency.
- This school makes sure that a risk assessment is carried out before any out-of-school visit, including work experience and educational placements. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

This school is aware of the common triggers that can make common medical conditions worse or can bring on an emergency. The school is actively working towards reducing or eliminating these health and safety risks and has a written schedule of reducing specific triggers to support this.

- This school is committed to identifying and reducing triggers both at school and on out-of-school visits.
- School staff have been given training and written information on medical conditions which includes avoiding/reducing exposure to common triggers. It has a list of the triggers for pupils with medical conditions at this school, has a trigger reduction schedule and is actively working towards reducing/eliminating these health and safety risks.
- The IHP details an individual pupil's triggers and details how to make sure the pupil remains safe throughout the whole school day and on out-of-school activities. Risk assessments are carried out on all out-of-school activities, taking into account the needs of pupils with

medical needs.

- This school reviews all medical emergencies and incidents to see how they could have been avoided, and changes school policy according to these reviews.

Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.

- This school works in partnership with all relevant parties including the pupil (where appropriate), parent/carers, school's governing body, all school staff, employers and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.
- Key roles and responsibilities are outlined in flowchart 1.

The medical conditions policy is regularly reviewed, evaluated and updated. Updates are produced every year.

- In evaluating the policy, this school seeks feedback from key stakeholders including pupils, parents/carers, school nurses, specialist nurses and other relevant healthcare professionals, school staff, local emergency care services and governors. The views of pupils with medical conditions are central to the evaluation process.
- Should parents and pupils be dissatisfied with the support provided, they should direct these concerns to the Headteacher.

Early Identification of pupils whose attendance has been affected

- All staff takes responsibility for the identification of the children/young people who are on school roll but are absent from school with a medical need which may impact on their ability to access the curriculum. This will be monitored through the Designated Teacher and key staff identified.
- All staff will support the Designated Teacher to establish, where possible, the amount of time a pupil might 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 Designated Teacher will have the responsibility for liaising with ESTMA, parents or carers and various agencies where the pupils are too ill to attend school.

Referrals – if a referral to ESTMA is required

- The Designated Teacher will then discuss a referral to ESTMA with the parents/carers and will fill in a Hertfordshire Service Request Form clearly identifying the Education Support Team for Medical Absence (ESTMA) as the requested provider and request medical evidence from the parent/carers.
- The school will ensure that where pupils with long-term and recurrent conditions are absent, the ESTMA will be informed and medical evidence secured. Following the acceptance of the referral the school staff will communicate with other parties, attend reviews and facilitate communication between the pupil and the school.
- This contact will ensure that procedures are followed when a pupil is absent from school for medical reasons including procedures to support:
 - Early identification
 - Referrals
 - Personal education plans
 - Reintegration into school
 - Pupils working towards public examinations

Access to Education for Children & Young People unable to Attend School for Medical Reasons (CS3956)

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- Involvement of the pupil
 - Pregnant schoolgirls and schoolgirl mothers
 - Post 16 (GCSE relevance)
 - Evaluation of provision

Evaluation

- The School's policy for the education of pupils with medical needs is accessible for all stakeholders.
- This policy statement and the school's performance in supporting pupils with medical needs will be monitored and evaluated regularly.
- The school policy takes account of the statutory guidance and legislation contained in:
 - Statutory Guidance for local authorities January 2013
 - Implementing the Disability Discrimination Act in Schools and Early Years Settings'. (2005) (DCSF and Disability Rights Commission)
 - 'Removing Barriers to Achievement' 10 year Government strategy for SEN (2004). DfES ES/0117/2004 DfES ES/0118/2004 (summary)
 - The Education Act 1996 (DfES)
 - CS ESTMA County Policy
 - Race Relations (Amendment) Act 2000 (RRAA)
 - Hertfordshire County Council Equality Policy

ADDITIONAL INFORMATION

1) ROLES & RESPONSIBILITIES

Governing Bodies

- Must make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented.
- Should ensure that pupils with medical conditions are supported to enable the fullest participation possible in all aspects of school life.
- Should ensure that sufficient staff has received suitable training and are competent before they take on responsibility to support children with medical conditions.
- Should also ensure that any members of school staff who provide support to pupils with medical conditions are able to access information and other teaching support materials as needed.

Headteacher

- Should ensure that their school's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.
- Should ensure that all staff who need to know are aware of the child's condition.
- Should also ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.
- Headteachers have overall responsibility for the development of individual healthcare plans.
- Should also make sure that school staff are appropriately insured and are aware that they are insured to support pupils in this way.

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- Should contact 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.

School Staff

- Any member of school staff may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so. Although administering medicines is not part of teachers' professional duties, they should take into account the needs of pupils with medical conditions that they teach.
- School staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.
- Any member of school staff should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

School Nurse

- Every school has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible, they should do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's individual healthcare plan and provide advice and liaison, for example on training.
- School nurses can liaise with lead clinicians locally on appropriate support for the child and associated staff training needs - for example, there are good models of local specialist nursing teams offering training to local school staff, hosted by a local school.
- Community nursing teams will also be a valuable potential resource for a school seeking advice and support in relation to children with a medical condition.

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.
- Provide advice on developing healthcare plans.
- Specialist local health teams may be able to provide support in schools for children with particular conditions (eg asthma, diabetes, epilepsy).

Pupils – with medical conditions will often be best placed to provide information about how their condition affects them.

- They 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 individual healthcare plan.
- Other pupils will often be sensitive to the needs of those with medical conditions.

Parents/carers – should provide the school with sufficient and up-to-date information about their child's medical needs.

- They may in some cases be the first to notify the school that their child has a medical condition.
- Parents/carers are key partners and should be involved in the development and review of their child's individual healthcare plan, and may be involved in its drafting.

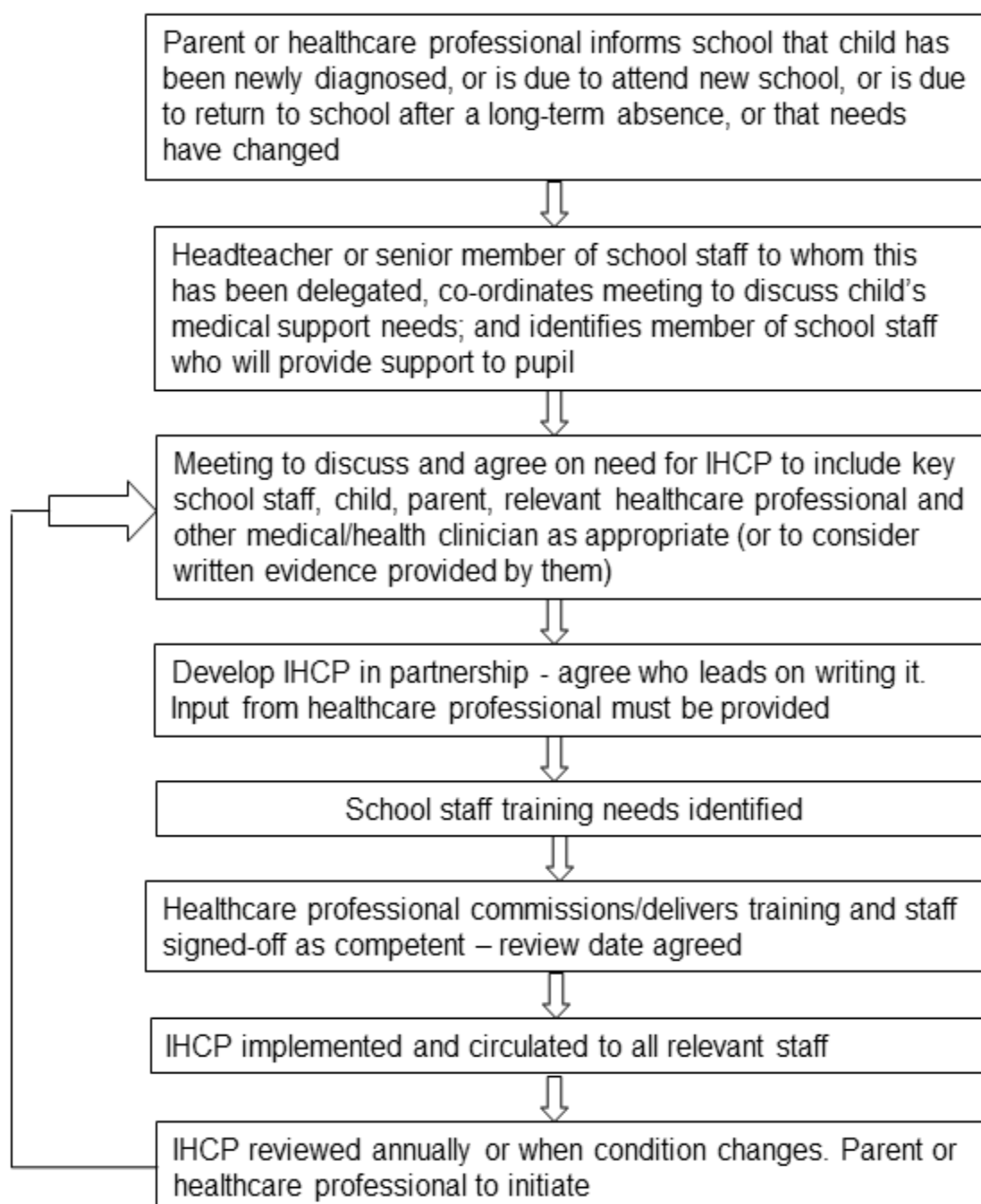
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- They should carry out any action they have agreed to as part of its implementation, eg provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

2) INHALERS

- *If the school has chosen to hold an emergency salbutamol inhaler for use by pupils who have been prescribed a reliever inhaler and for whom written parental consent for its use has been obtained.*
- The protocol for the use of this inhaler follows the Department of Health Guidance on the use of emergency salbutamol inhalers in schools:
 - The use, storage, care and disposal of the inhaler and spacers will follow the school's policy on supporting pupils with medical conditions.
 - Specific guidance on storage and care is provided on page 12 of the Department of Health Guidance on the use of emergency salbutamol inhalers in schools.
 - The school holds a register of children prescribed an inhaler and this list is kept with the emergency inhaler.
 - Written parental consent is sought for the use of the emergency inhaler. Where consent is received the use of the emergency inhaler will be included in the pupils IHP.
 - Parents/carers will be informed if their child has used the emergency inhaler regularly and concerns hi-lighted to parents
 - Appropriate support and training has been provided in line with the school's policy on supporting pupils with medical conditions. School nurse due to train all staff in January/February 2020 on how to recognise an asthma attack.
- The school's two volunteers for ensuring this protocol is followed are
 - **Volunteer 1:** Nina Waters
 - **Volunteer 2:** (Alison Hakim

FLOWCHART

MODEL PROCESS FOR DEVELOPING INDIVIDUAL HEALTHCARE PLANS



APPENDIX C

ELIGIBILITY CRITERIA

- Process:
 - Referrals to be made via HSR or CAF to relevant team for consideration.
 - Referrals must be accompanied by a letter from a medical practitioner, such as a Consultant Paediatrician or member of a CAMHS team. The evidence should indicate the impact the medical condition has on the pupil's ability to access education in school.
 - The first 3 weeks of absence remains school's responsibility from their in-house support procedures

REASON FOR REFERRAL	EXAMPLES OF SUPPORT
Absent or anticipated absence from school for a significant period due to medical reasons.	<ul style="list-style-type: none"> ☐ Advice to schools re: support mechanisms for pupils to help access school curriculum ☐ Identified number of individual teaching hours delivered at appropriate venue e.g. in school, library, ESC, home etc. ☐ Allocation of TA time to enable pupil to access the curriculum in school.
Admitted to hospital for long stay i.e. five days or more or recurrent periods.	<ul style="list-style-type: none"> ☐ Identified number of individual teaching hours delivered in the hospital ☐ Access to computers/other learning aids ☐ Limited teaching/TA support for reintegration
Absence or anticipated absence due to pregnancy and motherhood. (pending medical advice)	<ul style="list-style-type: none"> ☐ Identified number of individual teaching hours delivered at appropriate venue if child is unable to attend school due to medical issues related to pregnancy /motherhood. This may be from 29 weeks of pregnancy. ☐ Support for 18 working weeks.
Children returning to school following an extended period of absence due to medical reasons. (Referral received post medical absence)	<ul style="list-style-type: none"> ☐ Generally up to *3 hours per week teaching support or equivalent TA time provided at school to support and establish reintegration ☐ Agreed phased reduction ☐ Support available for up to 10 weeks.
Interim transition support (support into new school placement due to medical issues)	<ul style="list-style-type: none"> ☐ Teaching support or equivalent TA time to support process of transition ☐ Agreed phased reduction ☐ Support available for up to 10 weeks
Interim transition support (when not on school roll but evidence of medical issues provided)	<ul style="list-style-type: none"> ☐ Teaching support or equivalent TA time to support process of transition ☐ Agreed phased reduction ☐ Support available for up to 4 weeks and then to be reviewed if placement in process but not finalised

The hours of teaching support allocated are based on pupils' individual needs.

EXIT CRITERIA

EXIT CRITERIA	ACTIONS TAKEN
<p>Pupil recovered from illness and no longer requires support.</p> <p>Pupil able to attend majority of the agreed timetable.</p>	<ul style="list-style-type: none"> No further action required
<p>Pupil reintegrated to school on a timetable agreed with the pupil, parents, school, medical team and any other professionals working with the pupil.</p> <p>Pupil transfers to new school placement</p>	<ul style="list-style-type: none"> Senior Teacher and Attendance Personnel to monitor for 4 weeks.
<p>Pupil not accessing ESTMA support. For example:</p> <ul style="list-style-type: none"> Not attending. Too ill to access. 	<ul style="list-style-type: none"> Meeting arranged with pupil, parents/carers, school and professionals involved to review suitability of provision and agree future support. Attendance Personnel to be informed.
<p>Pupil not accessing medical services. For example:</p> <ul style="list-style-type: none"> Pupil refusing to access mental health services. Pupil discharged by mental health services. 	<ul style="list-style-type: none"> Meeting arranged with pupil, parents/carers, school and professionals involved to review suitability of provision and agree future support. Attendance Personnel to be informed (and CME where appropriate)
<p>Pupil moves out of Hertfordshire.</p>	<ul style="list-style-type: none"> Senior Teacher will close case and inform Senior AIO