



**Supporting Children with Medical Needs and
Life Threatening Illness**
Tees Valley Education Trust

Version:	3.0
Next review date:	July 2024
Directorial lead:	Emma Lowe
Operational lead:	Emma Lowe
Document reviewer:	Emma Lowe
Statutory (Y/N):	Y
Published on website (Y/N):	N
Type of document:	Policy
Approved by:	Trust Board

TABLE OF CONTENTS

1	INTRODUCTION	3
2	SCOPE.....	3
3	PRINCIPLES	4
4	SUPPORTING CHILDREN WITH MEDICAL NEEDS / LIFE THREATENING ILLNESS	4
5	EMPLOYEE TRAINING AND EDUCATION	5
6	CLASSROOMS	6
7	EDUCATIONAL VISITS	6
8	TRANSPORT	7
9	EXTERNAL PROVISION (E.G. AFTER ACADEMY CLUBS, OTHER EXTERNAL PERSONNEL).....	7
10	FOOD SERVICE/ DINING ROOM.....	7
11	LONG-TERM ILLNESS / EDUCATION AT HOME.....	8
12	PALLIATIVE CARE FOR CHILDREN WITH LIFE-LIMITING CONDITIONS	8
13	DEATH OF A CHILD WHILST UNDER ACADEMY SUPERVISION	9
14	REVIEWING THE POLICY	9

INTRODUCTION

To safeguard and promote the welfare of all pupils and staff within the Tees Valley Education Trust of Academies (hereafter referred to as the 'Trust'), the TVE Senior Leadership Team and Trust Board (hereafter referred to as the 'Board') will act in accordance with Section 100 of the Children and Families Act 2014, which places a duty on governing bodies of maintained schools, proprietors of academies, and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.

The TVE Trust Board has a designated Trustee with responsibility for overseeing Safeguarding across the Trust; the Board must have regard to guidance issued to schools and academies on behalf of the Secretary of State.

This policy is written with reference to the following TVE policies and Government documents:

- DfE Keeping children Safe in Education (current version)
- DfE Supporting pupils at school with medical conditions (December 2015)
- DfE 'Ensuring a good education for children who cannot attend school because of health needs' (September 2013)
- Equality Act 2010
- TVE First Aid Policy
- TVE Attendance Policy
- TVE SEND Policy
- TVE Education Visits Policy
- TVE Intimate & Invasive Care Policy
- TVE Medicines Policy
- TVE Oxygen Policy
- NICE – Disabled children and young people up to 25 with severe complex needs: integrated service delivery and organisations across health, social care and education (March 2022)

SCOPE

The Trust takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care. Meeting a pupil's medical needs is one aspect of safeguarding.

In order to minimise the incidence of life-threatening incidents, all academies within the Trust will maintain the same procedure for addressing life threatening conditions by maintaining Individual Health Care Plan's (IHCP) for any student whose parent / guardian, physicians and other stakeholders have informed the Academy in writing that the student(s) has a medical need and/or potentially life-limiting or life-threatening illness.

It includes the following group(s) of children:

- Any child with a diagnosed medical condition
- Any child with a life threatening illness
- Any child with a life limiting condition

It applies to all children who are registered on roll of an academy, whilst:

- Being educated on academy premises (or other off-site provision by agreement)

- On an educational visit

Certain aspects of this policy will extend to those children who are:

- Being educated at home during illness by the Home & Hospital Teaching Service (whilst still on an academy roll)
- Being educated in hospital by the Home & Hospital Teaching Service (whilst still on an academy roll)
- Returning to the academy with a time-limited medical need (not long-term) that will require some reasonable adjustments to be made and/or restrictions to what they can access

PRINCIPLES

All pupils with medical conditions and/or life threatening/life limiting illness will be properly supported so that, wherever possible, they have full access to education, including school trips and physical education. To ensure children with medical needs are not discriminated against, every effort will be undertaken to make reasonable adjustments or modifications to allow equal participation for all.

Where the Academy is unable to offer equal participation, for example because it would be unsafe for the child to do so, the HT or Head of Academy and SLT, will, in partnership with the teacher and parents work together to consider offering alternative options which would enable the child(ren) concerned to participate possibly with some modifications.

The Trust will ensure that parents/carers are made fully aware of their responsibilities in relation to making the Academy aware of their child's medical needs. This will be communicated to parents/carers in written and electronic format.

The Board will ensure that arrangements are in place in each academy to support pupils with medical conditions. Support, for the purposes of this policy, refers to staff, the main educational environment, medication or equipment.

Employees will never assume that every child with the same condition requires the same treatment.

The Board and senior leaders will ensure that designated staff consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively recorded and supported.

SUPPORTING CHILDREN WITH MEDICAL NEEDS / LIFE THREATENING ILLNESS / LIFE LIMITING CONDITIONS

In order to support children with medical needs and minimise the incidence of life-threatening incidents, the academy's SENDCo will have responsibility for ensuring that all aspects of the system of identifying children with life threatening illnesses and preparations to deal with life-threatening reactions are properly undertaken.

This will include:

- Working alongside the ABM to plan for and arrange provision of training and education for all academy employees (and volunteers) to provide emergency treatment for children medical needs, life-threatening or life-limiting illnesses.
- Ensuring that the procedures documented in this policy are fully maintained and form part of the annual academy CPD/training calendar.

The SENDCo will write the Individual Health Care Plan (IHCP) in conjunction with the child's parent/ guardian. This information is then checked by the appropriate healthcare practitioner(s) at the first opportunity. The academy accepts that the information given by the parents is accurate up until the point where the information has been verified by the lead healthcare practitioner. Any concerns at this point would be raised with the parent, the academy lead dealing with the healthcare plan and any other appropriate professionals.

Photographs of a student with a medical condition or life-threatening allergy will be attached to the IHCP.

Parents must accept that in order for the academy to effectively manage the child's illness there is a need for whole academy awareness. This will mean that the information relating to the treatment of their child's illness is available in communal areas. This will be discussed with parents during the initial meeting.

A parent or guardian of a student with a life-threatening condition is responsible for providing medication and other items related to the child's needs (as stipulated in the child's IHCP).

Ensuring that at all times when the child is the responsibility of academy staff, that there is a member of staff who is trained in the management and treatment of the child's medical needs, with access to the child's medicines, available on the academy premises when the child is there, or who accompanies any educational visit which the student participates in which is away from the academy premises.

IHCPs will be reviewed annually (parents, academy, relevant professionals) or when there is a change to the child's medical condition.

After IHCPs have been completed the SENDCo and ABM will ensure that all relevant staff are appropriately trained.

Copies of IHCP's will be made available to: Class Teacher & TA; Cook/Catering Manager (when relevant); Senior Lunchtime Supervisor; Office Staff; Staff Room notice board; Senior Leadership Team; Designated First Aid staff; Sports Leads; SENDCo.

Supply staff, or other non-academy adults leading interventions and classes may not be familiar with children in the group; these adults MUST be informed by the class teacher if any children they are supervising has a IHCP or inhaler. The IHCP must be made available to the group leader prior to the session commencing, with clear instructions of the protocols in place and who they should call for in the event the child requires medical assistance.

EMPLOYEE TRAINING AND EDUCATION

TVE will provide employee training and education, in line with the requirements of their specific job role, which will include (but not be limited to):

- First Aid Training / Paediatric First Aid Training.
- Other medical training specific to the condition(s) the child has, **that TVE Trust Board and Trust SLT has agreed an employee can undertake in line with their job role, pay grade and job description.**
- A description / definition of the child's condition, likely triggers, signs and symptoms and treatment processes.
- Specific steps to follow in the event of an emergency.
- An up-to-date medical record of training.
- Activating Emergency Medical Response – Dial 999.

- Location of emergency medicines.

NHS and CCG's will provide:

- Regular, specific training and competency sign off, with follow-up supervision, for each TVE employee who is providing healthcare to a child with complex medical conditions during school hours and on academy premises. Prior agreement must be given by TVE Trust Board and Trust SLT for certain procedures to be undertaken by TVE employees.

All staff have information on each child in their Academy year group with a medical need. This is refreshed for the beginning of each new academic year and copies of IHCP's are given to staff prior to the children returning to school. New starters joining the academy who require a IHCP will require a plan drafting prior to the child commencing. It is essential staff can familiarise themselves in advance and be given an opportunity to approach SENDCo and SLT with any queries.

CLASSROOMS

Teachers who are trained in providing emergency first aid treatment must be familiar with the IHCP of students in their class, and respond to emergencies in the manner set out in the student's IHCP. The Academy Business Manager will keep an up to date register of all staff who hold First Aid and Paediatric First Aid certificates and pre-arrange renewal training in a timely manner.

All IHCP's should be kept together in a clearly visible area, and within easy reach in each classroom but not on open display for others to read.

It is the responsibility of the Class Teacher to ensure that all supply staff are aware of students in their class with a medical condition or life-threatening illness and the location of IHCP's. In this event, a note should be made in the class register indicating that a child has a life-threatening condition.

EDUCATIONAL VISITS

Prior to an educational visit taking place, a discussion will take place between the parent and a member of the academy staff in order to clarify the appropriateness of the visit in relation to the child's medical needs (For further information please see Educational Visits Policy). Any pupil with a IHCP must be noted on the visit risk assessment with the precise details of the care required throughout the duration of the visit made clear, including the journey to and from the venue. This must also take account of any additional adults that may be required so that the ratio of adults meets the needs of all of the children participating.

Children who have a short-term medical need who have returned to the academy (e.g broken or fractured bone) will need to be risk assessed to determine whether it is safe to participate.

When planning educational visits, the lead member of staff for the visit or EVC should, as part of their risk assessment, give consideration to children in the group with medical needs, and in particular to:

- the correct ratio of staff is in attendance in relation to the children's Key Stage
- staff hold the relevant First Aid certificate in relation to the children's Key Stage
- the proximity of the venue to the nearest Hospital
- site accessibility for emergency service personnel and response vehicles
- the quality and consistency of mobile phone connectivity, or other means of communication

The central school nursing team or specialist hospital nursing teams (i.e. Diabetes, Epilepsy, and Urology) can be consulted, and will assist if necessary.

TRANSPORT

The Local Authority Transport team has a duty to ensure that appropriate arrangements are in place in relation to supporting pupils with medical conditions travelling to and from school by Local Authority Transport and conducting their own risk assessment. This should include what should be done in emergency situations whilst children are being transported. It is the responsibility of a Local Authority to ensure they have their own pupil transport care plans in place. Local Authorities ask schools to complete a detailed pupil transport referral form prior to any LA transport commencing, schools should complete all sections so that the LA has as much detail as possible to allow them to prepare their own transport care plans.

Where pupils have life threatening medical conditions, the LA's own IHCP should be carried on the home to school transport vehicle (Mini bus and Taxi).

Trust staff must follow the Trust Oxygen Policy for pupils who require oxygen on visits, as there are strict guidelines regarding the safe transportation of oxygen.

Parents are responsible for making the LA Transport Team, Bus Escorts and Drivers aware if a child's medical needs have changed or if they require the use of emergency rescue medication (e.g Inhaler, EpiPen or Buccal Medazolam). This must not be kept in the child's school bag during transportation.

EXTERNAL PROVISION (E.G. AFTER ACADEMY CLUBS, BREAKFAST CLUB OR OTHER EXTERNAL PERSONNEL)

Activities organised by the academy must be consistent with academy policies and procedures regarding medical conditions and life-threatening illnesses, that is, there should always be a trained adult who is familiar with the child's IHCP and knows where and how to access treatment.

With written parental permission, the coach or member of staff in charge of the activity will be provided with a list of students who have medical needs and/or a life-threatening condition.

Where permission is given, it is the responsibility of the HT/Head of Academy and SENDCo to ensure that all outside agencies are aware of the child's medical condition, emergency procedures and the location of the nearest trained member of staff.

If parents refuse permission for information to be shared, the academy will refuse to allow the child to attend for safety reasons.

When the Board has granted permission for a parent to choose to employ their own health professional(s) to work in the academy to care for their child's medical needs (usually via a Direct Payment), then this Policy, along with the Intimate Care Policy, Medicines Policy and Academy Staff Handbook will be adhered to, without exception.

Children who have a short-term medical need (e.g broken or fractured bone) who are able to safely return to the academy must be risk assessed to determine whether it is safe to participate in extended provision, or attend an academy visits/trips.

FOOD SERVICE/ DINING ROOM

The SENDCo will provide the Cook/Catering manager with a list (and photographs) of children whose medical needs are deemed to be life threatening.

Where the child's medical needs relate to diet, further guidance will be sought from the parents/ carer and where appropriate a meeting will be held with relevant bodies to identify the child's dietary requirements. A letter will be completed where this affects what the child should eat in academy.

The SENDCo holds responsibility for ensuring all breakfast club, lunchtime staff and after school staff are aware of children with life threatening medical conditions and will provide the IHCP to those adults. This is imperative if food and drink intake forms part of the IHCP. In the event of an emergency, the nearest first aider will be called who will determine if emergency medical help needs to be sought.

LONG-TERM ILLNESS / EDUCATION AT HOME

Local Authorities (LAs) are responsible for arranging suitable education for children who, because of illness or other reasons, would not receive suitable education without such provision. This means that where a child cannot attend school (for 15 days or more) because of health problems, and would not otherwise receive a suitable full-time education, the LA is responsible for arranging provision. This provision is usually coordinated by a LA Home & Hospital Teaching Service; staff supporting children at home are usually qualified Teachers.

Depending upon the illness and length of time out of school, the child may still remain on the academy roll whilst they are being educated at home. It is considered good practice, and Trust policy, for links to be maintained with the parent, child and Home & Hospital Teaching Service throughout this period. Whilst at home or in hospital, the child may receive a blended learning package, this could involve remote working led by the academy, in addition to learning and teaching resources provided by the Home & Hospital Teaching Service.

Academies will ensure that:

- A named member of Pastoral Staff will act as liaison and a point of contact between parent, child and Home & Hospital Teaching Service.
- The named member of staff will liaise between the parent and Class Teacher and coordinate work to be hand delivered to the family home, at a time convenient to the parent, usually on a weekly/fortnightly basis.
- The named member of staff will check upon the welfare of the child whilst attending the family home and make any necessary referrals to support services, as deemed appropriate, and record this on the academy MIS.
- The named member of staff will liaise with the appropriate medical professional(s) to consult with, and draw up plans and risk assessments for, the safe re-integration of the child to the Academy. By agreement with parents and other professionals, the return may be on a part-time basis, in the initial stages.
- In certain circumstances, written medical confirmation is required before the child is allowed to return (e.g. following a major operation, reconstructive surgery).

12 PALLIATIVE CARE FOR CHILDREN WITH LIFE-LIMITING CONDITIONS

Children with complex and life-limiting conditions, may, at some stage during their education, require palliative care because their condition has deteriorated to an extent that it would be difficult for them to access school either on a part-time or full-time basis. Because a greater level of care is required, a

coordinated transition is usually made with the child being cared for in various settings: in hospital, at home, or in a children's hospice. In some circumstances, care can also continue in the school setting whilst the child is being educated, providing the child, the parents and all professionals involved agree that it is safe to do so and within the child's best interest. Arrangements such as this usually involve the child accessing school for a specified number of hours each week. Remote or blended learning, with live web-links to participate with the class should also be considered, and may be more appropriate in certain circumstances.

The HT reserves the right to make the final decision on educating children who are receiving palliative care on TVE premises.

13 DEATH OF A CHILD WHILST UNDER ACADEMY SUPERVISION

Death at any time is traumatic for relatives and friends of the deceased, but more so when it is the unexpected death of a child.

Within TVE academies, risk assessments are carried out every day in order to keep children safe from harm, however, other factors such as pre-existing health conditions may contribute to the sudden death of a child.

If the unfortunate incident of a sudden child death on academy premises or a visit occurs, the following steps will be taken:

- Every effort will be made to revive the casualty by a trained first aider unless there is a specific DO NOT RESCUSITATE directive from parents.
- Emergency services will be contacted immediately by a member of staff.
- Any children in the area will be moved away from the scene by staff to minimise any trauma.
- The Headteacher or Deputy Head will immediately notify the parents/carers or next of kin, informing them that the child has been taken to hospital by the emergency services. Only healthcare professionals can pronounce a death and notify next of kin.
- The Headteacher will immediately inform the Local Safeguarding Children's Board (LSCB) and members of the Board. Local protocols will determine the relevant services that the LSCB should involve (i.e. Police, Social services, Ofsted, Department of Health, Health & Safety Executive, Coroner). A full investigation will then commence.
- The Headteacher will take advice from the LSCB on addressing those staff who were in the vicinity when the death occurred, those who had direct involvement in resuscitation, and staff who have any information which could prove helpful for those investigating the death.
- Staff will be required to formally record the details of their involvement on CPOMS and sign a copy of the transcript. A copy of this record will be retained by the academy and given to the investigation team. All recorded information may form part of the investigation and be used as legal evidence.
- The Headteacher will make arrangements to inform other parents/carers and provide relevant support to staff, children and parents.
- The academy will consult with the LSCB to consider the most appropriate course of action to allow the academy community to move forward. This could include asking specially trained Bereavement Counsellors and Child Psychologists to work with those who have been most affected.

REVIEW THIS POLICY WILL BE REVIEWED BY TVED SLT. ANY AMENDMENTS WILL BE SHARED WITH THE BOARD FOR APPROVAL.