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# SUPPORTING PUPILS WITH MEDICAL CONDITIONS POLICY

## [015]

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PILGRIM  
**PATHWAYS**  
SCHOOL

<b>Approved by:</b>	Management Committee	<b>Date approved:</b>	1 <sup>st</sup> February 2022
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## 1. Policy Introduction

Pilgrim Pathways School includes four hospital school centres: The Croft, Darwin, Phoenix and Addenbrooke's. By definition all the children and young people within the Pilgrim Pathways School have at least one medical condition, which may include both mental and physical health needs. Whilst the four centres are part of Pilgrim Pathways School, each centre has its own educational space and nursing team, who are on hand throughout the duration of the school day. Any medication that is required by the pupils will be administered by the nursing team within the centre at specified times as identified in the Individual Healthcare Plan (IHP).

At Addenbrooke's hospital, teaching staff work with children and young people with a variety of physical medical conditions. Teaching staff may teach by the bedside or in a small teaching area. Children are commonly attached to an intravenous drip and/or pain relief monitor. All staff are made aware of this before teaching commences and have access to a nursing alarm in each room should it be required. The teaching staff work closely with the nursing team and play therapists to ensure patients' welfare is paramount. Infection control is taken very seriously across all sites and teaching staff adhere to the infection control policy at all times.

### 1. Definition

Pupils' medical needs may be broadly summarised as being of two types:

- 1) Short-term: affecting their participation in school activities whilst they are on a course of medication
- 2) Long-term: potentially limiting their access to education and requiring additional care and support

### 2. School Ethos

Schools have a responsibility for the health and safety of pupils in their care. The Health and Safety at Work Act 1974 makes employers responsible for the health and safety of employees and anyone else on the premises. In the case of pupils with special medical needs, the responsibility of the employer is to make sure that safety measures cover the needs of all pupils at the school. This may mean making special arrangements for particular pupils so that they can access their full and equal entitlement to all aspects of the curriculum. In this case, individual procedures may be required. Pilgrim Pathways School is responsible for making sure that relevant staff know what they are, and if necessary, are trained to provide any additional support that pupils with medical conditions (long or short term) may need. This work is in conduction with and under the guidance of the medical team supporting the young person.

The Children and Families Act 2014 places a duty on schools to make arrangements for children with medical conditions. Pupils with medical conditions have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone. However, teachers and other school staff in charge of pupils have a common law duty to act 'in loco parentis' and must ensure the safety of all pupils in their care as the primary responsibility.

### **3. Our Aims**

Our aims are to:

- Support pupils with medical conditions, so that they have full access to education, including physical education and educational visits
- Ensure that school staff are fully informed and adequately trained by a professional in order to administer support or prescribed medication
- Comply fully with the Equality Act 2010 for pupils who may have disabilities or special educational needs
- Respond sensitively, discreetly, and quickly to situations where a child with a medical condition requires support
- Follow support as outlined in the Individual Healthcare Plan (IHP) for each student

### **4. Curriculum Access**

Pilgrim Pathways School provides a broad and balanced curriculum for every child, where possible. We believe that pupils with medical needs have equal entitlement and must receive necessary care and support so that they can take advantage of this. The vast majority of children that attend Pilgrim Pathways School have a linked mainstream school who will have a curriculum plan in place. Where the full breadth of curriculum cannot be matched to the mainstream school, either due to specialism of subject or medical condition hindering access, support is given to seek an appropriate alternative.

We offer a curriculum adapted to engage students from their starting point which can be readapted as new milestones are reached. Our teaching happens in small groups with specialist teachers who help students to achieve their educational goals. The focus of all curriculum access is to support a successful transition back into school and the wider community. The way in which we do this is through our highly adaptive curriculum pathways model:

**Pathway 1** is put into place at the point when making the journey from ward to school is a challenge. The curriculum supports this transition and engages students at their starting point with a view to moving them towards re-engagement in education or training.

**Pathway 2** targets students who are comfortable/ able to attend school. The curriculum supports students to engage in academic work but at this stage is unlikely to be challenging as the focus is still on supporting students to regulate and building them up to a point where they can re-engage in education or training.

**Pathway 3** is for students who are ready to re-engage with learning and challenge. The curriculum supports students to engage in academic work but expectations are still limited to one or two academic subjects with regulation activities planned to support concentration and engagement. The ambition is to move to a broader curriculum but we continue to engage students with an adapted offer from their starting point.

**Pathway 4** supports students who are comfortable engaging with learning and challenge and a broader curriculum offer. Students at pathway 4 will receive a broad and bespoke curriculum which will look to fill gaps in their knowledge and ensure that they are best placed to integrate into a new educational or work placement after discharge.

**Pathway 5** is offered to students who are fully engaged with their home school. Subject leads will plan and support learning which follows the student's home school curriculum plan. We will still look to fill knowledge gaps as they arise but the focus here is on supporting the student to keep up with their peers and to ensure that when they transition

back into their home school, they have covered the same material as their peers and are able to transition back into their educational setting as seamlessly as possible at discharge.

## **5. Communication**

Due to the nature of the admission, communication is paramount. Our procedures and expectations are that:

- Medical professionals involved in the care of children with medical needs will fully inform staff beforehand of the child's condition, its management and implications for the school life of that individual
- School staff will liaise as necessary with Healthcare professionals and services in order to access the most up-to-date advice about a pupil's medical needs and will seek support and training in the interests of the pupil
- Transitional arrangements between schools will be completed in such a way that Pilgrim Pathways School will ensure full disclosure of relevant medical information, Healthcare plans and support needed in good time for the child's receiving school to adequately prepare

## **6. Mental Health and Barriers to Engagement**

If a pupil is suffering from mental health problems that mean they do not believe they can or want to access education, teaching staff will introduce themselves to the student on the ward and work with the nursing team to assess when the student may be well enough to attend school. Students may start school on a part-time timetable and gradually increase their time in school as they are well enough to do so. If a student becomes distressed in school, teaching staff will allow pupils to move to a quiet area and if necessary, call nursing staff from the ward to support them or take them back to the ward. Due to the nature of the conditions, students' attendance to school may fluctuate depending on if they are having a 'good day'. They are however always encouraged to attend in the first instance.

## **7. In an Emergency**

In a medical emergency, teaching staff will alert the onsite nursing team. If an ambulance needs to be called, the ward nursing team will:

- Outline the full condition and how it occurred
- Give details regarding the child's date of birth, address, parents' names and any known medical conditions
- Children will be accompanied to hospital by a member of the nursing team, if this is deemed appropriate
- The incident will be recorded in the child medical file and the schools DSL updated

Staff cars should not be used for this purpose. Parents must always be called in a medical emergency, but do not need to be present for a child to be taken to hospital.

## **8. Allergies**

Epi-pens will be administered following the instruction on the device by a member of the nursing team. Cetrizine may be given if slight tingling of the lips occurs following ingestion of possible irritants for nut allergy sufferers. This is a liquid medicine stored with the epi-pen. If symptoms are more severe, the epi-pen should be given immediately. The nursing team will be alerted, and an ambulance called if necessary.

## **9. Trips and Visits**

On school trips teaching staff may be required to carry medication to give to pupils should it be required to be given at a certain time. They may also be required to carry emergency medication. However, where possible, nursing staff should accompany school staff on trips and will administer the required medication. A full risk assessment must be carried out and approved by the Headteacher and nursing team before approval to the visits and any bookings made.

## **10. Staff Training**

Staff training is delivered by the individual centres / ward teams in the first instance. Where there is a generic whole staff training need, scheduled INSET days may be used to deliver this.

## 11. Linked School Policies

- Data Protection
- Education Visits
- Infection Control
- Responding to self-harm guidelines
- Safeguarding and Child protection

## 12. Glossary

<b>CAF</b>	Common Assessment Framework	<b>IHP</b>	Individual Healthcare Plan
<b>CIN</b>	Child in Need	<b>KCSiE</b>	Keeping Child Safe in Education
<b>CME</b>	Children Missing in Education	<b>LADO</b>	Local Authority Designated Officer
<b>CP</b>	Child Protection	<b>PA</b>	Persistent Absence
<b>CPFT</b>	Cambridge & Peterborough Foundation Trust	<b>SENC</b>	Special Educational Needs Co-ordinator
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<b>DSL</b>	Designated Safeguarding Lead	<b>TAC</b>	Team Around the Child Meeting
<b>EHCP</b>	Education, Health and Care Plan	<b>TAF</b>	Team Around the Family Meeting
<b>EHA</b>	Early Help Assessment	<b>TiC</b>	Teacher in Charge