

Care & Education of Pregnant Students & Young Parents Policy

Summary

This policy document is to detail the arrangements for managing the care and education of pregnant students and young parents within settings of Eastern Multi-Academy Trust.



If you are unsure about the validity of the content of this policy please refer to the Policy Owner.

Please Note: This policy is applicable to All Employees / Teachers / Support Staff / Volunteers including Trustees and Governors within the Group.

Policy owner	Board
Policy holder	Director of Education
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Policy Inventory ID Number	E09
Group Policy Area	Education

Approved by

Consultation Group	Board
Approval Committee	Board
Implementation date	May 2025
Review Date	May 2028

Version Control

Control No	Change summary	Consultation Group	Effective date
01	Review of policy with no change	Trust board	May 2028

1. When an adult becomes aware a student is pregnant

1.1 Students will sometimes disclose a suspected pregnancy to an adult in school. It is important to follow this policy to safeguard the health and safety of the student and protect the professional integrity of the member of school staff.

1.2 If a student discloses a suspected pregnancy, adults should not ask questions or offer advice. The Trust's confidentiality policy requires adults who become aware that a student may be pregnant to inform the Designated Safeguarding Lead (DSL). Adults should seek the consent of the student to disclose this information but should make it quite clear that they cannot guarantee unconditional confidentiality. Adults should reassure the student that only the DSL will be told initially and nobody else will be told unless the student agrees. The student should be told that the DSL will ensure the student has access to the appropriate agencies who can give support and advice.

1.3 The adult should inform the DSL and nobody else.

2. Role of the Designated Safeguarding Lead

2.1 The DSL will agree which adult in school will facilitate the student's access to appropriate agencies. This decision is likely to be different in each case, and will, where possible, be reached in agreement with the student. In most cases the facilitator will be one of a small experienced group of staff. On occasion it may be an adult requested by the student, in conjunction with the DSL.

2.2 If there is a child protection issue, the DSL will follow child protection procedures and involve the relevant statutory agencies.

3. Initial role of the facilitating adult

3.1 The designated adult will offer support to the young person to tell her parent/carer, if she has not already done so. She will not be forced to do this if it is against her wishes. However, it is essential to ensure that she gets the right advice and support.

3.2 The designated adult will support with one of the following:

- Involvement of parent
- Appointment with the School Nurse in school or at the clinic
- Appointment with own GP

4. Access to appropriate support

4.1 The student may request the support of the facilitating adult in keeping an appointment with health professionals. The adult will not ask questions, offer opinions or advice. The adult will not be present at the health interview but may wait if requested by the student.

4.2 If a pregnancy is not confirmed the health professional will offer appropriate

support and advice. School will have no further role and the facilitating adult will reassure the student that there will be no further discussion or action.

4.3 If a pregnancy is confirmed, the health professional will offer support and arrange any further appointments. The health professional will advise the student to tell their parent/carer and will offer support to do so.

5. Further role of the facilitating adult

5.1 If a pregnancy is confirmed, the student may request further support from the facilitating adult. At this point the adult will encourage the student to tell their parent/carer and offer support to do so.

5.2 The facilitating adult may also elicit support from other agencies in liaison with the DSL.

6. The education of pregnant students

6.1 Students who become pregnant remain on the school roll. In most cases, pregnant students can continue their education in school where they can access daily support from adults who know them well and this offers continuity in learning. In some cases, or at certain stages of pregnancy, an alternative timetable may be agreed.

6.2 Pregnant students will have a key person in school who will monitor her welfare and progress. A care plan will be agreed by the student herself in conjunction with parents, staff and health professionals.

6.3 Once a student has made a decision about proceeding with a pregnancy a discussion will take place about the disclosure to staff and other students for health and safety purposes.

7. Support for students after the birth

7.1 Teenage parents are encouraged to return to school as soon after the birth as is medically possible. We will support the student with her new and increased responsibilities, including flexibility around timetables, but it is important to note that the responsibility for child care whilst she continues her education lies with her parents.

7.2 The key person will meet regularly with the student to review the care plan and ensure that her educational needs are considered alongside her other needs.

8. Termination, miscarriage, stillbirth, infant death

8.1 Students should receive impartial professional advice from health services about the choices they have. One of these choices is to terminate the pregnancy. It is crucial that school staff do not express their views on this choice, regardless of whether the pregnant student wishes to have a termination or not. School staff views on this matter are inappropriate, regardless of their source and however well-intentioned.

8.2 Care needs to be taken with any young person who chooses to have a termination, in allowing for appropriate recovery time and arranging counselling and advice afterwards, if needed and even if this is not immediately requested. Support may be needed and requested at any time.

8.3 Particular care and sensitivity must be employed should, for any reason, a pregnant student experience a miscarriage, a still birth or an infant death. The key person allocated to the student/s should seek further professional advice and look to arrange specialist counselling, though this will often be arranged by the health services directly via liaison services based in the maternity unit. However, this should not be taken for granted and the provision offered must be checked with the students' parents if possible and if not, with the student themselves.

9. Teenage fathers

9.1 If a male student informs a member of staff that he is about to become a father, the same procedures are followed as for a female student and the same level of support will be offered.

9.2 Where appropriate and whilst trying to maintain minimum disruption to his education, school will encourage the boy to be involved with the girl's pregnancy, attend ante-natal classes, appointments and the birth and be fully involved in the care of the baby.