Healthcare Needs Policy



The wellbeing of our school community is at the heart of all that we do and is linked to our Core Values of Belief, Effort, Community & Kindness. These values help us to better understand and improve the wellbeing of our school community with this policy, and all others, being consistent in promoting those values.

| Approved by: | Governing Body | Date: 8 October 2024 |
|---------------------|----------------|----------------------|
| Last reviewed on: | October 2024 | |
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1. Key Principles

St Ethelwold's VA School is committed to ensuring that learners with healthcare needs are properly supported so that they have full access to education, including trips and Physical Education. The Governing body will ensure that arrangements are in place to support learners with healthcare needs.

Healthcare issues affect each learner individually therefore, we are committed to ensuring arrangements focus on meeting the needs specific to the learner and how this impacts on their education, attainment and well-being.

We aim to ensure arrangements properly support learners and minimise disruption or barriers to their education. Arrangements also consider any wider safeguarding duties while seeking to ensure all learners can access and enjoy the same opportunities.

Many learners will have a short-term healthcare need at some point. With appropriate support they should be able to regularly attend and take part in most activities. However, some learners may have significant or long-term healthcare needs affecting their cognitive or physical abilities, their behaviour or their emotional state, which may require additional support.

Consideration is given to flexible delivery of the curriculum to help learners reintegrate with school during periods of absence, e.g. through suitable part-time study, alternative provision from Flintshire County Council and phased returns.

A collaborative approach when making decisions around support is crucial. We aim to listen to the wishes and advice of the learner, parent / carer, education and health professionals.

2. <u>Legal Context</u>

This policy must be read in accordance with the Welsh Government **Statutory Guidance**: Supporting Learners with Healthcare Needs. Guidance. Welsh Government 215/2017. Follow the link below:

https://www.gov.wales/sites/default/files/publications/2018-12/supporting-learners-with-healthcare-needs.pdf

Within the educational context, various duties are placed on both schools and local authorities that are relevant to the safeguarding and welfare of learners. The main provisions for schools are outlined below.

2.1 Statutory duties on governing bodies of maintained schools

In discharging their functions relating to the conduct of the school, governing bodies of maintained schools (including maintained nursery schools) must promote the well-being of learners at the school. (Section 21(5) of the Education Act 2002). This duty relates to all learners, including those with healthcare needs.

Governing bodies of maintained schools (including maintained nursery schools) must make arrangements for ensuring that their functions relating to the conduct of the school are exercised with a view to safeguarding and promoting the welfare of children (i.e. those under 18) who are learners at the school (see section 175(2) of the Education Act 2002).

Governing bodies are also subject to duties under the Equality Act 2010 and will have due regard for the following legislation:

- Social Services and Well-being (Wales) Act 2014
- United Nations Convention on the Rights of the Child (UNCRC)
- Data Protection Act 1998
- Learner Travel (Wales) Measure 2008

3. Roles and Responsibilities

3.1 Governing body

The Governing body at St Ethelwold's VA School will oversee the development and implementation of arrangements, which will include:

- complying with applicable statutory duties, including those under the Equality Act
 2010 (e.g. the duty to make reasonable adjustments in respect of learners with healthcare needs if they are disabled, as outlined above)
- having a statutory duty to promote the well-being of learners. Schools should give
 consideration to how they can meet these needs, including providing learners access to
 information and material aimed at promoting spiritual and moral well-being and physical
 and mental health (Article 17 of the UNCRC)
- considering how they can support learners to develop the skills, knowledge and emotional resilience required to uphold their rights, and the rights of others
- ensuring the roles and responsibilities of all those involved in the arrangements to support
 the healthcare needs of learners are clear and understood by all those involved, including
 any appropriate delegation of responsibilities or tasks to a head teacher, member of staff or
 professional as appropriate
- working collaboratively with parents and other professionals to develop healthcare arrangements to meet the best interests of the learner
- developing and implementing effective arrangements to support learners with healthcare needs. This should include a policy on healthcare needs and where appropriate, IHPs for particular learners
- ensuring arrangements are in place for the development, monitoring and review of the healthcare needs arrangements
- ensuring the arrangements are in line with other relevant policies and procedures such as health and safety, first aid, risk assessments, the Data Protection Act 1998, safeguarding measures and emergency procedures
- ensuring robust systems are in place for dealing with healthcare emergencies and critical incidents, for both on- and off-site activities, including access to emergency medication such as inhalers or adrenaline pens

- ensuring staff with responsibility for supporting learners with healthcare needs are appropriately trained
- ensuring appropriate insurance cover is in place, any conditions are complied with and staff are clear on what this means for them when supporting learners having an infection prevention policy that fully reflects the procedures laid out in current guidance – refer to Section 15 for further details.

3.2 Head teacher

The head teacher at St Ethelwold's VA School will ensure arrangements to meet the healthcare needs of their learners are sufficiently developed and effectively implemented. This can include:

- working with the governing body to ensure compliance with applicable statutory duties when supporting learners with healthcare needs, including duties under the Equality Act 2010 (as included within the Strategic Equality Plan / Accessibility Plan)
- ensuring the arrangements in place to meet a learner's healthcare needs are fully understood by all parties involved and acted upon, and such actions maintained. The head teacher should directly supervise this arrangement as part of the regular reporting and supervision arrangements
- ensuring the support put in place focuses on and meets the individual learner's needs, also known as person-centred planning
- extending awareness of healthcare needs across the school in line with the learner's right to
 privacy. This may include support, catering and supply staff, governors, parents and other
 learners. Supply staff will be made aware of procedures in the Supply Staff Policy.
 Healthcare Needs are up to date and displayed in the staffroom and on the insides of
 cupboards in classrooms relevant visitors are directed to these where necessary.
- appointing a named member of staff who is responsible for learners with healthcare needs, liaising with parents, learners, the home tuition service, the local authority, the key worker and others involved in the learner's care. In St Ethelwold's VA School this will be Rebecca Ellis.
- ensuring a sufficient number of trained staff are available to implement the arrangements set out in all IHPs, including contingency plans for emergency situations and staff absence
- having the overall responsibility for the development of IHPs
- ensuring that learners have an appropriate and dignified environment to carry out their healthcare needs, e.g. private toilet areas for catheterisation – medical room.
- checking with Flintshire County Council whether particular activities for supporting learners with healthcare needs are appropriately covered by insurance and making staff aware of any limits to the activities that are covered
- ensuring all learners with healthcare needs are appropriately linked with the school's health advice service
- ensuring when a learner participates in a work experience placement or similar, that appropriate healthcare support has been agreed and put in place
- providing annual reports to the governing body on the effectiveness of the arrangements in place to meet the healthcare needs of learners
- ensuring all learners with healthcare needs are not excluded from activities they
 world normally be entitled to take part in without a clear evidence-based reason notifying
 the local authority when a learner is likely to be away from the school for a significant

period, e.g. three weeks (whether in one go or over the course of the academic year) due to their healthcare needs. Ultimately, what qualifies a period of absence as 'significant' in this context depends upon the circumstances and whether the school can provide suitable education for the learner. Shorter periods of absence may be significant depending upon the circumstances

• being mindful of the Social Services and Well-being (Wales) Act 2014. The school is aware of the legislation and ensure assistance to learners is provided using a holistic approach.

3.3 Teachers and Support Staff and all other members of staff (e.g. catering staff or reception staff);

Any staff member at St Ethelwold's VA School may be asked to provide support to learners with healthcare needs, including assisting or supervising the administration of medicines on a voluntary basis.

Whilst it may form part of the job role for some employees (e.g. teaching assistants) staff members must receive sufficient and suitable training and achieve the necessary level of competence before they take on the responsibility. In addition to the training provided to staff that have volunteered or are contracted to support learners with healthcare needs, St Ethelwold's VA School will ensure that staff:

- fully understand the school's healthcare needs policies and arrangements this will be conducted through staff meetings.
- are aware of which learners have more serious or chronic healthcare needs, and, where appropriate, are familiar with these learners' IHPs. This includes knowing how to communicate with parents and what the triggers for contacting them are, such as when the learner is unwell, refuses to take medication or refuses certain activities because of their healthcare needs
- Through regulat training, are aware of the signs, symptoms and triggers of common lifethreatening medical conditions and know what to do in an emergency. This includes knowing who the
 - first aiders are and seeking their assistance if a medical emergency takes place
- fully understand the school's emergency procedures and be prepared to act in an emergency
- ask and listen to the views of learners and their parents, which should be taken into consideration when putting support in place
- ensure learners (or their friends) know who to tell if they feel ill, need support or changes to support
- listen to concerns of learners if they feel ill at any point and consider the need for medical assistance (especially in the case of reported breathing difficulties)
- make sure learners with healthcare needs are not excluded from activities they wish
 to take part in without a clear evidence-based reason, including any external
 trips / visits. This includes ensuring learners have access to their medication and that
 an appropriately trained member of staff is present to assist where required
- are aware of bullying issues and emotional well-being regarding learners with healthcare needs, and are prepared to intervene in line with the school's policy
- are aware that healthcare needs can impact on a learner's ability to learn and

- provide extra help when needed
- support learners who have been absent and assist them with catching up on missed work – this may involve working with parents and specialist services
- through frequent parental contact.keep parents informed of how the healthcare need is affecting the learner in the school. This may include reporting any deterioration, concerns or changes to learner or staff routines

3.4 Parents / Carers

Parents and carers of St Ethelwold's VA School will:

- receive updates regarding healthcare issues/changes that occur within the school
- be involved in the creation, development and review of an IHP (if any). The parent and learner may be best placed to provide information about how their healthcare needs affect them. They should be fully involved in discussions about how the learner's healthcare needs will be met in the education setting, and contribute to the development of, and compliance with, their IHP
- provide the school with sufficient and up-to-date information about healthcare needs, including any guidance regarding the administration of medicines and/or treatment from healthcare professionals.
- inform the school of any changes such as type of medication, dosage or method of administration
- provide relevant in-date medicines, correctly labelled, with written dosage and administration instructions
- ensure a nominated adult is contactable at all times and all necessary forms are completed and signed
- inform the school if their child has/had an infectious disease or condition while in attendance.

3.5 Learners

Learners at St Ethelwold's VA School will:

- inform a parent/carer or staff member/s if feeling unwell
- inform relevant staff member/s of any medication or healthcare needs, or changes
- participate in drafting and agreeing individual healthcare plan (IHP), where appropriate;
- take care when carrying medicines to and from school, and not sharing with others
- participate in discussions around sharing/confidentiality of personal information
- Where appropriate, learners should be encouraged and enabled to manage their own healthcare needs.

3.6 Local Authority

Flintshire County Council will ensure education provision is available to learners, and:

- must make reasonable adjustments to ensure disabled children and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory.
- must make arrangements to promote cooperation between various bodies or persons, with a view to improving, among other things, the well-being of children in relation to their physical and mental health, their education, training and recreation.
- when making these arrangements, Flintshire County Council should ensure appropriate agreements are in place for data sharing.
- must make reasonable provision of counselling services for young people aged 11–
 18 and learners in Year 6 of primary school. Within schools, this provision should
 complement the different approaches already in place to support the health, emotional and
 social needs of learners
- should work with schools to ensure learners with healthcare needs receive a suitable education. Where a learner of compulsory school age would not receive a suitable education for any period because of their health, the local authority has a duty to make arrangements to provide suitable education. If a learner is over that compulsory school age but under 18, the local authority may make such arrangements
- should provide support, advice and guidance, including how to meet the training needs of school staff, so that governing bodies can ensure the support specified within the individual healthcare plan (IHP).

3.7 NHS Wales school health nursing service, health and other professionals, third sector organisations and other specialist services

Healthcare and practical support can be found from a number of organisations. Schools have access to a health advice service and a designated school nurse. The scope and type of support the service can offer may include:

- offering advice on the development of IHPs
- assisting in the identification of the training required for the education setting to successfully implement IHPs
- supporting staff to implement a learner's IHP through advice and liaison with other healthcare, social care and third sector professionals.

Health advice and support can also be provided by specialist health professionals such as GPs, paediatricians, speech and language therapists, occupational therapists, physiotherapists, dieticians and diabetes specialist nurses. In addition, third sector voluntary bodies can provide advice and practical support. Proactively engaging with

specialist services can provide practical help when writing and implementing IHPs. They can also provide training and awareness-raising resources, including video links.

4. Individual Healthcare Plans (IHPs)

4.1 Overview

The aim of the Individual Healthcare Plan is to help a learner manage their condition and overcome any potential barriers to participating fully in education. Those devising the plan should agree who will take the lead, but responsibility for ensuring it is finalised and implemented rests with the school.

IHP's are essential where healthcare needs are complex, fluctuating, long term or where there is a high risk that an emergency intervention will be needed. However, not all learners with healthcare needs require an IHP and there should be a process in place to decide what interventions are most appropriate.

The following diagram outlines the process for identifying whether an IHP is needed:

Identify learners with healthcare needs

- Learner is identified from enrolment form or other route.
- Parent or learner informs the school of healthcare need.
- Transition discussions are held in good time, e.g. eight weeks before either the end of term or moving to a new school.



Gather Information

• If there is potential need for an IHP, the school should discuss this with the parent and learner.



Establish if an IHP should be made

• The school should organise a meeting with appropriate staff, the parents, the learner and appropriate clinicians to determine if the learner's healthcare needs require an IHP, or whether this would be inappropriate or disproportionate. If consensus cannot be reached, the head teacher should take the final decision, which can be challenged through the complaints procedure.



If an IHP should be made

- The school, under the guidance of the appropriate healthcare professionals, parents and the learner, should develop the IHP in partnership.
- The school should identify appropriate staff to support the learner, including identifying any training needs and the source of training, and implement training.
- The school should circulate the IHP to all appropriate individuals.
- The school should set an appropriate review date and define any other triggers for review.

In most cases, especially concerning short-term illnesses such as those requiring a course of antibiotics, a detailed IHP may not be necessary. In such circumstances it may be sufficient to record the name of medication, dosage, time administered and any possible side effects. These procedures should be confirmed in writing between the learner (where appropriate), the parents and the school.

However, when a learner has continual or episodic healthcare needs, then an IHP may be required. If these needs are complex and the learner is changing settings, then preparation should start early to help ensure the IHP is in place at the start of the new term.

4.2 Roles and Responsibilities in the Creation and Management of IHPs

The development of detailed IHPs may include:

- the learner
- parents
- input or information from previous school or setting
- appropriate healthcare professionals
- social care professionals
- the head teacher and/or delegated responsible individual for healthcare needs across the setting
- teachers and support staff, including catering staff
- any individuals with relevant roles such as a first aid coordinator, a well-being officer, and special educational needs coordinator (ALNCo).

4.3 An IHP should be tailored to each individual learner, and may include the following:

- details of the healthcare need and a description of symptoms
- specific requirements such as dietary requirements, pre-activity precautions (e.g. before physical education classes)
- medication requirements, e.g. dosage, side effects, storage requirements, arrangements for administration
- an impact statement (jointly produced by a healthcare professional and a teacher)
 on how the learner's healthcare condition and/or treatment affects their learning and what actions are required to mitigate these effects
- actions required
- emergency protocols and contact details
- the role the school will play, e.g. a list of things to be aware of review dates and review triggers
- roles of particular staff, e.g. a contact point for parents, staff responsible for administering / supervising medication, and arrangements for cover in their absence consent / privacy / sensitive information-sharing issues
- explain how information is shared and who will do this
- staff training needs, such as with regard to healthcare administration, aids and adaptive technologies
- record keeping how it will be done, and what information is communicated to

others

 home-to-school transport – this is the responsibility of the local authority, who may find it helpful to be aware of the learner's IHP and what it contains, especially in respect of emergency situations.

The Governing body will ensure the plans are <u>reviewed at least annually</u> or more frequently should there be new evidence that the needs of the learner have changed.

Where a learner has an SEN the IHP should be linked or attached to any individual education plan, Statement of SEN, or learning and skills plan.

All administration of medication must be recorded on the appropriate forms, either hard copy or electronically and comply with the Data Protection Act 1998.

Please refer to **Appendix 9** for a template IHP. **NOTE**: Many third sector organisations have online condition-specific IHPs that could be useful to tailor for your learners' needs. For example;

https://www.diabetes.org.uk/Guide-to-diabetes/Your-child-and-diabetes/Schools/IHP-a-childs-individual-healthcare-plan/

https://www.asthma.org.uk/advice/child/manage/action-plan/

4.4 Confidentiality

It is important that relevant staff (including temporary staff) are aware of the healthcare needs of their learners, including changes to IHPs. IHPs will likely contain sensitive or confidential information. The sharing and storing of information must comply with the Data Protection Act 1998 and not breach the privacy rights of or duty of confidence owed to the individuals.

4.5 The Learner's role in Managing their own Healthcare Needs

Learners who are competent to do so should be encouraged to take responsibility for managing their own medicines and procedures. This should be reflected within the learner's IHP.

Where possible, learners should be allowed to carry their own medication and relevant devices, or be able to quickly access their medication. Some learners may require an appropriate level of supervision.

If a learner refuses to take their medicine or carry out a necessary procedure, staff should not force them to do so, but follow the school's defined arrangements, agreed in the IHP. Parents should be informed as soon as possible so that an alternative arrangement can be considered and health advice should be sought where appropriate.

5. Creating an Accessible Environment

Flintshire County Council and the governing body should ensure that St Ethelwold's VA School is inclusive and accessible in the fullest sense to learners with healthcare needs. This includes the following:

5.1 Physical access to education setting buildings

A duty is placed on local authorities to produce a written accessibility strategy for all schools they are responsible for under the Equality Act 2010. The duty to make reasonable adjustments under the Equality Act may apply depending on the circumstances.

'improving the physical environments of schools for the purpose of increasing the extent to which disabled learners are able to take advantage of education and benefits, facilities or services provided or offered by the schools' (Schedule 10, Equality Act 2010).

This strategy must relate to a prescribed period, be consulted upon, available for inspection and kept under review. Similarly, individual schools must carry out accessibility planning and are under a duty to prepare an accessibility plan following the same principles as the strategies prepared by the local authorities.

5.2 Reasonable Adjustments – Auxiliary Aids or Services

The Equality Act 2010 places a duty on learning establishments to make 'reasonable adjustments' for learners who are disabled as defined by the Act. In regard to these learners, auxiliary aids or services (with the appropriate number of trained staff) must be provided.

In addition, there are duties under the Equality Act 2010 to prepare and implement accessibility strategies and plans. These strategies and plans deal with matters related to increasing participation by disabled learners.

5.3 Day Trips and Residential Visits

The Governing body will ensure that St Ethelwold's VA School actively supports all learners with healthcare needs to participate in trips and visits. The Governing body is aware of their legal requirements to make reasonable adjustments to trips and residential visits ensuring full participation from all learners.

Staff at school are aware of how a learner's healthcare needs may impact on participation, and seek to accommodate any reasonable adjustments which would increase the level of participation by the learner. Staff will consider how to accommodate the sharing of personal information with third parties if necessary for off-site activities (in compliance with the Data Protection Act 1998 and in respecting the learner's right to privacy). This may include information about the healthcare needs of learners, what to do in an emergency and any additional support, medication or equipment needed.

5.4 Social Interactions

The Governing body will ensure the involvement of learners with healthcare needs is adequately considered in structured and unstructured social activities, such as during breaks, breakfast club, productions, after-hours clubs and residential visits.

School will make all staff aware of the social barriers learners with healthcare needs may experience and how this can lead to bullying and social exclusion. A proactive approach is needed to remove any barriers.

5.5 Exercise and Physical Activity

St Ethelwold's VA School will fully understand the importance of all learners taking part in physical activities and staff should make appropriate adjustments to sports and other activities to make them accessible to all learners, including after-hours clubs and team sports.

Staff should be made fully aware of learners' healthcare needs and potential triggers. They should know how to respond appropriately and promptly if made aware that a learner feels unwell. They should always seek guidance when considering how participation in sporting or other activities may affect learners with healthcare needs.

Separate 'special provisions' for particular activities will be avoided, with an emphasis instead on activities made accessible for all. Where this might not be possible, advice from healthcare or physical education professionals and the learner should be sought.

Staff at school also understand that it may be appropriate for some learners with healthcare needs to have medication or food with them during physical activity; such learners are encouraged to take the medication or food when needed.

5.6 Food Management

Where food is provided by or through the school, consideration is given to the dietary needs of learners, e.g. those who have diabetes, coeliac disease, allergies and intolerances.

Where a need occurs, the school will provide menus to parents and learners, with complete lists of ingredients and nutritional information. NOTE: If this relates to school meals provision, please contact Newydd Catering & Cleaning Ltd. Gluten and other intolerances or allergens must be clearly marked. Providing information will help facilitate parent and catering teams' collaborative working. This is especially important when carbohydrate counting is required. Consideration will be given to availability of snacks. Sugar and gluten-free alternatives should always be made available. As some conditions require high calorific intake, there should always be access to glucose-rich food and drinks.

Food provided for trips reflects the dietary and treatment needs of the learners taking part. Food provided for snacks in classroom settings should also take the dietary and treatment needs of these learners into account. While healthy school and 'no sweets' policies are recognised as important, learners with healthcare needs may need to be exempted from these policies. Learners needing to eat or drink as part of their condition should not be excluded from the classroom or put in isolation.

5.7 Risk Assessments

Staff should be clear when a risk assessment is required and be aware of the risk assessment systems in place. They should start from the premise of inclusion and have built into them a process of seeking adjustments or alternative activities rather than separate provision.

6. **Sharing Information**

ST Ethelwold's VA School will communicate information effectively and confidentially with teachers, school staff, parents, carers and learners.

6.1 Teachers, Supply Teachers and Support Staff (this may include other staff such as catering staff or relevant contractors)

The school will:

- ensure staff have access to the relevant information, particularly if there is a possibility of an emergency situation arising.
- Use a noticeboard in the staff room to display information on high-risk health needs, first aiders and certificates, emergency procedures, etc
- Use the secure intranet area / Simms and staff meetings to help ensure staff are aware of the healthcare needs of learners they have or may have contact with.

6.2 Parents / Carers and Learners

The school will:

- make healthcare needs policies easily available and accessible, online and in hard copy
- provide the learner/parents with a copy of their information sharing policy. This should state the type of bodies and individuals with whom the learner's medical information may be shared
- ask parents to sign a consent form which clearly details the bodies, individuals and methods through which their learner's medical information will be shared. Sharing medical information can be a sensitive issue and the learner should be involved in any decisions. The school will keep a list of what information has been shared with whom and why, for the learner/parent to view on request
- consider including a web link to the healthcare needs policies in relevant communications sent to parents, and within the learner's IHP
- include school councils, 'healthy schools' and other learner groups in the development of the setting's healthcare needs arrangements, where appropriate
- consider how friendship groups and peers may be able to assist learners, e.g. they could be taught the triggers or signs of issues for a learner, know what to do in an emergency and who to ask for help. The school should discuss with the learner and parents first and decide if information can be shared.

7. <u>Procedures and Record Keeping for the Management of Learners' Healthcare</u> Needs

St Ethelwold's VA School will ensure procedures which state the roles/responsibilities of all parties involved in the identification, management and administration of healthcare needs are in place. The following documentation will be collected and maintained, where appropriate:

- 1. Contact details for emergency services
- 2. Parental agreement for educational setting to administer medicine
- 3. Head of educational setting agreement to administer medicine
- 4. Record of medicine stored for and administered to an individual learner
- 5. Record of medicines administered to all learners by date
- 6. Request for learner to administer own medicine
- 7. Staff training record administration of medicines
- 8. Medication incident report

New records should be completed when there are changes to medication or dosage. The school should ensure that the old forms are clearly marked as being no longer relevant and stored in line with their information retention policy.

All administration of medication must be recorded on the appropriate forms. If a learner refuses their medication, staff should record this and follow the defined procedures where parents will be informed of this non-compliance as soon as possible.

The best examples of record keeping include systems where the learner's healthcare needs records have been computerised to allow quick and easy access by the appropriate staff. Data systems can also allow for easy access to the required information for staff that may be placed into classrooms where they are not familiar with the healthcare needs of the learners. The operation of such systems must comply with the Data Protection Act 1998.

Refer Appendix 1-8.

8. Storage, Access and the Administration of Medication and Devices

While all medicines should be stored safely, the type and use of the medication will determine how this takes place. It is important for learners to know where their medication is stored and how to access it.

8.1. Refrigeration

Some medicines need to be refrigerated. The refrigerator temperature will need to be regularly monitored to ensure it is in line with storage requirements. Medicines can be kept in a refrigerator containing food, but should be in an airtight container and clearly labelled. A lockable medical refrigerator should be considered if there is a need to store large quantities of medicine.

8.2 Emergency Medication

Emergency medication must be readily available to learners who require it at all times during the day or at off-site activities. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline auto-injectors (pens) should be readily available to learners and <u>not locked away</u>. This is particularly important to consider when outside of the education setting's premises, e.g. on trips.

If the emergency medication is a controlled drug it should be kept as securely as possible so as to minimise the risk of unauthorised access while also allowing quick access if this might be necessary in an emergency. For example, keys should not be held personally by a member of staff. A learner who has been prescribed a controlled drug may legally have it in their possession, if they are competent to do so, and they must not pass it to another learner or other unauthorised person. Monitoring may be necessary. Where staff administer emergency medication to a learner, this should be recorded.

8.3 Non-Emergency Medication

All non-emergency medication should be kept in a secure place with appropriate temperature or light controls. If it is a controlled drug, additional security measures and controls are advisable.

8.4 Disposal of Medicines

When no longer required, medicines should be returned to parents to arrange safe disposal. Sharp boxes must always be used for the disposal of needles and other sharp instruments, and disposed of appropriately.

8.5 Administration of Medicines

- Where the learner is under 16, assistance or administration of prescribed or non-prescribed medicines requires written parental consent, unless Gillick competence is recorded. The administration of all medication should be recorded.
- Where medication is prescribed to be taken in frequencies which allow the daily course of
 medicine to be administered at home, parents should seek to do so, e.g. before and after
 school and in the evening. There will be instances where this is not appropriate.
- Learners under 16 should never be given aspirin or its derivatives unless prescribed to them.
- Unless there is an agreed plan for the learner to self-medicate (16 years and above or Gillick competent), all medication should be administered by a member of staff. In other cases, it may need to be supervised in accordance with the IHP.
- Medication should only be administered by suitably trained staff. The movement and location of these trained staff should always be in conjuncture with the learners they support.
- Staff should check the maximum dosage and the amount and time of any prior dosage administered.
- Certain medical procedures may require administration by an adult of the same gender as the learner, and may need to be witnessed by a second adult. The learner's thoughts and feelings regarding the number and gender of those assisting must be considered when

- providing intimate care. There is no requirement in law for there to be more than one person assisting. This should be agreed and reflected in the IHP and risk assessment.
- St Ethelwold's VA School has an Intimate Care Policy in place. The policy should be followed, unless alternative arrangements have been agreed, and recorded in the learner's IHP.

Definition: Intimate care can be defined as any care which involves washing or carrying out a procedure to intimate personal areas which most people usually carry out themselves but some learners are unable to do because of their young age, physical difficulties or other special needs. Examples include care associated with continence and menstrual management as well as day-to-day tasks such as help with washing, toileting or dressing. It also includes supervision of learners involved in intimate self-care.

- If a learner refuses their medication, staff should record this and follow their defined procedures informing parents as soon as possible.
- If a learner misuses any medication, their parents should be informed as soon as possible. The school will ask parents to seek healthcare advice as appropriate. If parents cannot be contacted immediately, staff need to consider seeking immediate healthcare advice.
- Staff involved in the administration of medication should be familiar with how learners consent to treatment.
- All staff supporting off-site visits should be made aware of learners who have healthcare needs. They should receive the required information to ensure staff are able to facilitate an equal experience for the learner. This information may include health and safety issues, what to do in an emergency and any other additional necessary support that the learner requires, including medication and equipment.

9. **Emergency Procedures**

At St Ethelwold's VA School the member of staff responsible for Emergency Procedures is Paul Oliver The Emergency Procedures (or equivalent) can be found on staff common.

In situations requiring emergency assistance, 999 should be called immediately – see **Appendix 1** for guidance. The location of learners' healthcare records and emergency contact details should be known to staff.

Where a learner has an IHP, this should clearly define what constitutes an emergency and explain what to do. Staff should be made aware of emergency symptoms and procedures.

Other learners in the education setting should also know what to do in general terms in an emergency, such as to inform a member of staff immediately. If a learner needs to be taken to hospital, a staff member should stay with the learner until a parent arrives. This includes accompanying them in an ambulance to hospital. The member of staff should have details of any known healthcare needs and medication.

10. Training

The Governing body emergency first aid / paediatric first aid, first aid at work training. INSET days /staff meetings are used to train staff, e.g. epi-pen / asthma.

St Ethelwold's VA school will ensure records of all training undertaken by staff will be maintained which include the following details: date and name of training, trainer, staff attended and any certification. Training must be kept up-to-date.

When assisting learners with their healthcare needs, it should be recognised that for many interventions no specialist training is required and the role of staff is to facilitate the learner to meet their own healthcare needs.

IHPs may reflect complex needs requiring staff to have specific information and training. This training may also be in the use of aids such as hearing aids (staff could be shown how to change batteries) and various adaptive technologies. If these have been instigated by health professionals, they can be asked to provide advice suitable for education settings as well as learners and families.

Training provided should be sufficient to ensure staff are competent, have confidence in their ability to support learners and fulfil IHP requirements. Crucially this training should involve input from the learner and parents, who often play a major role in providing information on how needs can be met. However, parents should not be solely relied upon to provide training about the healthcare needs of their child.

If a learner has complex needs, input may be needed from healthcare services and the local authority who will be able to advise and signpost to further training and support.

All staff, irrespective of whether they have volunteered to assist or support learners with healthcare needs, may come into contact with learners who have healthcare needs. It is therefore advisable that all staff have a basic understanding of common conditions to ensure recognition of symptoms and understand where to seek appropriate assistance. All staff at school will be made aware of learners will healthcare needs and common conditions by *staff meetings*.

New and temporary staff should especially be made aware of what preventative and emergency measures are in place so staff can recognise the need for intervention and react quickly.

If the trained staff who are usually responsible for administering medication are not available, the IHP should set out alternative arrangements. This also needs to be addressed in risk assessment and planning of off-site activities.

must ensure staff who volunteer or who are contracted to support those with healthcare needs, are provided with appropriate training. 3 staff have received

11. Learners Qualifications and Assessments

Efficient and effective liaison is imperative when learners with healthcare needs are approaching assessments, including those undertaking examinations in hospital or at home. Liaison between the school and the hospital teacher or home teacher is most important, especially where the learner is moving from education setting or home to the hospital on a regular basis.

Awarding bodies may make special arrangements for learners with permanent or long-term disabilities and learning difficulties, or temporary disabilities and illnesses, who are taking public examinations such as GCSEs or A levels. Applications for special arrangements should be submitted by schools to the awarding bodies as early as possible.

Full guidance on the range of special arrangements available and the procedures for making applications is given in the Joint Council for Qualifications' circulars Adjustments for candidates with disabilities and learning difficulties (2016) and A guide to the special consideration process (2016), which are both accessible from the Joint Council for Qualifications' website by following the link below:

https://www.jcq.org.uk/exams-office/access-arrangements-and-special-consideration/regulations-and-guidance

Adjustments, adaptations or additional time for learners taking the National Reading and Numeracy Tests should be based on normal classroom practice for particular needs. Teachers are expected to use their professional judgement to support learners. Guidance is provided in the current National Reading and Numeracy Tests – Test administration handbook.

12. Education Other Than At School (EOTAS)

A learner who is unable to attend St Ethelwold's VA School because of their healthcare needs should have their educational needs identified, and receive educational support quickly so they continue to be provided with suitable education.

In the case of a short absence (likely to last for less than 15 school days) school will provide work to be completed at home, if the learner's condition permits, and support the learner to catch up on their return.

Flintshire County Council will make arrangements for learners in cases where it is clear that the learner is likely to be absent from school for a significant period, e.g. more than 15 school days, whether consecutive or cumulative over the course of an academic year. Flintshire County Council will provide as many lessons as the learner's condition allows, and as is beneficial, taking into account what is suitable for the learner. Consideration will be given to a learner who is on a course leading to qualifications.

Where absences are anticipated or known in advance, close liaison between the school and local authority should enable the EOTAS service to be provided from the start of absence.

Learners with complex healthcare needs may be discharged from hospital with a written care plan. Where this happens, the written care plan should be integrated into any IHP

13. School Transport

There are statutory duties on local authorities, head teachers and governing bodies in relation to learners travelling to the place where they receive their education or training.

In some circumstances, Flintshire County Council may be required to arrange home-to-school transport for a learner, or provide appropriately trained escorts for such journeys to facilitate the attendance of a learner.

Information and guidance on this is set out in the Learner Travel: Statutory Provision and Operational Guidance (2014) document which can be found using the link below:

http://gov.wales/topics/educationandskills/allsectorpolicies/learner-travel/?lang=en

14. Unacceptable Practice

It is not acceptable practice to:

- prevent learners from attending an education setting due to their healthcare needs, unless their attending the setting would be likely to cause harm to the learner or others
- prevent learners from easily accessing their inhalers or other medication, and prevent them from taking their medication when and where necessary
- assume every learner with the same condition requires the same treatment
- ignore the views of the learner or their parents, or ignore healthcare evidence or opinion (although these views may be queried with additional opinions sought promptly)
- send learners with healthcare needs home frequently or prevent them from staying for normal activities, including lunch, unless this is suitably specified in their IHP
- send a learner who becomes ill or needs assistance to a medical room or main office unaccompanied or with someone unable to properly monitor them
- penalise a learner for their attendance record if the absence is related to their healthcare needs. 'Authorised absences' including healthcare appointments, time to travel to hospital or appointment, and recovery time from treatment or illness should not be used to penalise a learner in any way. This includes, but is not limited to, participation in activities, trips or awards which are incentivised around attendance records
- request adjustments or additional time for a learner at a late stage. They should be applied for in good time. Consideration should also be given to adjustments or additional time needed in mock examinations or other tests
- prevent learners from drinking, eating or taking toilet or other breaks whenever needed in order to manage their healthcare needs effectively
- require parents, or otherwise make them feel obliged, to attend the school, trip or other
 off-site activity to administer medication or provide healthcare support to the learner,
 including for toileting issues
- expect or cause a parent to give up work or other commitments because the school is failing to support a learner's healthcare needs
- ask a learner to leave the classroom or activity if they need to administer non-personal medication or consume food in line with their health needs
- prevent or create unnecessary barriers to a learner's participation in any aspect of their education, including trips, e.g. by requiring a parent to accompany the learner.

15. Insurance Arrangements

The Governing body will ensure an appropriate level of insurance is in place to cover the setting's activities in supporting learners with healthcare needs. The level of insurance should appropriately reflect the level of risk. Additional cover may need to be arranged for some activities, e.g. off-site activities for learners with particular needs.

16. Complaint Procedure

If the learner or parent is not satisfied with school's health care arrangements they are entitled to make a complaint. Please refer to the Complaints Procedure / Policy for further information. The policy is available on request.

17. Monitoring

This policy will be reviewed <u>annually</u> by the head teacher, staff and governors, or if any amendments occur in legislation, or in consideration of changes in working practices. IHPs may require frequent reviews depending on the healthcare need – this should involve all key stakeholders including, where appropriate, the learner, parents, education and health professionals and other relevant bodies.

18. References

- Welsh Government: Statutory Guidance: Supporting Learners with Healthcare Needs. Guidance. Welsh Government 215/2017.
- Welsh Government: Healthcare Needs Template Policy 2017
- Welsh Government: Healthcare Needs Templates 2017
- Denbighshire County Council Managing Healthcare Needs Model Policy 2017
- Department for Education: Supporting pupils at school with medical conditions
- Statutory guidance for governing bodies of maintained schools and proprietors of academies in England April 2014
- Department for Education: Templates Supporting pupils with medical conditions May 2014

19. Appendix

Appendix 1 Contacting Emergency Services

Appendix 2 Parental Agreement for School to Administer Medicine

Appendix 3 Head teacher Agreement to Administer Medicine

Appendix 4 Record of Medicine stored for and administered to an Individual Learner

Appendix 5 Record of Medicines Administered to All Learners – by date

Appendix 6 Request for Learner to Carry / Administer their own Medicine

Appendix 7 Staff Training Record – Administration of Medicines

Appendix 8 Medication / Healthcare Incident Report

Appendix 9 Template Individual Healthcare Plan

Appendix 10 Model Letter inviting Parents to contribute to Individual Healthcare Plan Development

Appendix 1

Contacting Emergency Services

Request for an Ambulance

Dial 999, ask for an ambulance, and be ready with the following information where possible.

- 1. State your telephone number.
- 2. Give your location as follows St Ethelwold's VA School, Melrose Avenue, Shotton, Deeside, Flintshire
- 3. State that the postcode is CH5 1NG
- 4. Give the exact location in the School
- 5. Give your name.
- 6. Give the name of the learner and a brief description of symptoms.
- 7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to the patient.
- 8. Don't hang up until the information has been repeated back.
- 9. Speak clearly and slowly and be ready to repeat information if asked to.
- 10. Put a completed copy of this form by all the telephones in the school.

Appendix 2 Parental Agreement for School to Administer Medicine St Ethelwold's VA School needs your permission to give your child medicine. Please complete and sign this form to allow this. Name of School Name of child Date of birth Group/class/form Healthcare need Medicine Name/type of medicine (as described on the container) / / Expiry date Date dispensed Agreed review date to be initiated by [name of member of staff] Dosage and method

| Timing | |
|-------------------------------|--|
| Special precautions | |
| | |
| Are there any side effects th | at |
| the school needs to | |
| know about? | |
| Self-administration (delete a | as appropriate) Yes/No |
| Procedures to take in an em | ergency |
| Contact details | |
| Name | |
| Daytime telephone no. | |
| Relationship to child | |
| Address | |
| I understand that I must del | iver the medicine personally to [agreed member of staff] |
| | |
| | |
| | |

| i understand that I must notify the setting of any changes in writing. |
|--|
| Date / / Signature(s) |
| |
| |
| Appendix 3 |
| Head teacher Agreement to Administer Medicine |
| |
| Name of School |
| It is agreed that [name of learner] will receive |
| [quantity or quantity range and name of medicine] |
| every day at [time medicine to be administered, e.g. lunchtime/afternoon |
| break] |
| [Name of learner] will be given/supervised while |
| they take their medication by [name of member of staff] |
| This arrangement will continue until [either end date of course of medicine or until |
| instructed by parents/carers] |

| Date |
|---|
| Signed |
| Head St Ethelwold's VA School |
| Appendix 4 |
| Record of medicine stored for and administered to an individual learner |
| Name of School |
| Name of learner |
| Date medicine provided by parent |
| Group/class/form |
| Quantity received |
| Name and strength of medicine |
| Expiry date |
| Quantity returned |
| |

| Dose and frequency of med | icine | | |
|---------------------------|-------|----|-------|
| Staff signature | | | |
| Signature of parent/carer | | | |
| Date | | | |
| Time given | | | |
| S | | | |
| Dose given | | | |
| | | | _ |
| Name of member of staff | | | |
| Staff initials | | | |
| | | | |
| | | | |
| Date | | | |
| Time cives | | | |
| Time given | | | |
| Dose given | | | |
| | | | |
| Name of member of staff | | | |
| Chaff in think | | | |
| Staff initials | | | |
| Date | | | |
| | | | |
| | | 27 | |

| Time given | | |
|-------------------------|--|--|
| Tillie given | | |
| Dose given | | |
| Name of member of staff | | |
| Staff initials | | |
| Date | | |
| Time given | | |
| Dose given | | |
| Name of member of staff | | |
| Staff initials | | |
| Date | | |
| Time given | | |
| Dose given | | |
| Name of member of staff | | |
| Staff initials | | |

| Date | | | |
|--|------------------|---------------------|---------------|
| Time given | | | |
| Dose given | | | |
| Name of member of staff Staff initials | | | |
| Appendix 5 Record of | Medicines Admini | stered to All Learn | ers – by date |
| Name of School | | | |

| Date | Learner's name | Time | Name of medicine | Dose given | Any reactions | Signature of staff | Print name |
|------|-------------------|------|------------------|---------------|------------------|--------------------|---------------|
| | | | | | | | |
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| Appendix | v 6 | | | | | | |
| Appendix | | | | | | | |
| | | | | A -l | | 8.0 - 11 - 1 | |
| | | or Lear | ner to Carry / | Adminis | ter their ow | n Medicine | |
| | Request f | | | | ter their ow | n Medicine | |
| This form r | Request f | leted by | the parent/carer | ·. | | | |
| This form r | Request f | leted by | | ·. | | | |
| This form r | Request f | leted by | the parent/carer | ·. | | | |
| This form r | Request f | leted by | the parent/carer | ·. | | | |
| This form r If staff hav Name of So | Request f | leted by | the parent/carer | ·. | | | |
| This form r If staff hav Name of So | Request f | leted by | the parent/carer | ·. | | | |
| This form r If staff hav Name of So Learner's n | Request f | leted by | the parent/carer | ·. | | | |
| This form r If staff hav Name of So Learner's n | Request f | leted by | the parent/carer | ·. | | | |
| This form r | Request f | leted by | the parent/carer | ·. | | | |
| This form r If staff hav Name of So Learner's n Group/clas | Request f | leted by | the parent/carer | ·. | | | |

| Name of medicine |
|--|
| Carry and administer |
| Administer from stored location |
| |
| Procedures to be taken in an emergency |
| |
| Contact information |
| Name |
| Daytime telephone no. |
| Relationship to learner |
| I would like my child to administer and/or carry their medicine. |
| Signed parent/carer Date |

| I agree to administer and/or then this agreement will be | carry my medicine. If I refuse to administer my medication as agreed, reviewed. |
|--|---|
| Learner's signature | Date |
| | |
| | |
| | |
| | |
| | |
| | |
| Appendix 7 | |
| Staff Tr | aining Record – Administration of Medicines |
| Please ensure that the Educ | ation Workforce Council registration is updated accordingly. |
| Name of School | |
| Name | |
| | |

| Type of training received |
|--|
| Date of training completed / / |
| Training provided by |
| Profession and title |
| I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment. |
| I recommend that the training is updated [please state how often] |
| Trainer's signature Date |
| I confirm that I have received the training detailed above. |
| Staff signature Date |
| Suggested review Date |
| Appendix 8 |
| Medication / Healthcare Incident Report |
| Learner's name DOB |
| Home address Telephone no |
| Date of incident Time of incident |

| Correct medication and dosage: | | | | |
|--|---|--------|--|--|
| Medication normally administered by: | Learner | | | |
| | Learner with staff supervision Nurse/school staff member | | | |
| Гуре of error: | | | | |
| Dose administered 30 minutes after sch | eduled time $\ \square$ | | | |
| Omission Wrong dose | Additional dose | | | |
| Wrong learner □ | | | | |
| Dose given without permissions on file | □ Dietary □ | | | |
| Dose administered by unauthorised pers | son □ | | | |
| Description of incident: | | | | |
| | | Action | | |
| taken: | | | | |
| ☐ Parent notified: name, date and time_ | · | | | |
| | | | | |
| □ School nurse notified: name, date and | I time | | | |
| | | | | |
| □ Physician notified: name, date and tim | ne | | | |
| ☐ Poison control notified ☐ Learn | ner taken home | oital | | |
| □ Other: | | | | |
| J Other. | | | | |
| Note: | | | | |
| | | | | |
| | | | | |
| Appendix 9 | | | | |
| | ealthcare Plan (IHP) Template | | | |
| marviadarne | earthcare Flan (IIIF) Template | | | |
| | | | | |
| Name of school | | | | |
| Child's name | | | | |
| Group/class/form | | | | |
| Date of birth | | | | |
| Child's address | | | | |

| Medical diagnosis or condition | |
|--|--|
| Date | |
| Review date | |
| Family Contact Information | |
| Name | |
| Phone no. (work) | |
| (home) | |
| (mobile) | |
| Name | |
| Relationship to child | |
| Phone no. (work) | |
| (home) | |
| (mobile) | |
| Clinic/Hospital Contact | |
| Name | |
| Phone no. | |
| G.P. | |
| Name | |
| Phone no. | |
| Who is responsible for providing support in school | |
| | child's symptoms, triggers, signs, treatments, facilities, s etc. |
| equipment or devices, environmental issues | |
| equipment or devices, environmental issues | |
| | nistration, when to be taken, side effects, contra-indication thout supervision |
| Name of medication, dose, method of admin | |
| Name of medication, dose, method of admin | |

| Specific support for | the pupil's educational, social and emotional needs |
|----------------------|---|
| Arrangements for s | chool visits/trips etc. |
| Other information | |
| Describe what cons | itutes an emergency, and the action to take if this occurs |
| | |
| Who is responsible | n an emergency (state if different for off-site activities) |
| Plan developed wit | 1 |
| Staff training neede | d/undertaken – who, what, when |
| Form copied to | |
| | |

Appendix 10

Model Letter inviting Parents to contribute to Individual Healthcare Plan (IHP) Development

Dear Parent /Carer

RE: DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the school's policy for supporting pupils with medical conditions for your information.

A central requirement of the policy is for an Individual Healthcare Plan (IHP) to be prepared, setting out what support the each pupil needs and how this will be provided. Individual Healthcare Plans are developed in partnership between the school, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although Individual Healthcare Plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's Individual Healthcare Plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached Individual Healthcare Plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours sincerely

| Version | From | То |
|---------|------------|----|
| 1 | April 2024 | |
| | | |
| | | |