Ysgol Gymraeg Bro Ogwr

Polisi Anghenion Meddygol & Gofal Iechyd

Medical & Healthcare Needs Policy

Contents

1. Key Principles

All children and young people should have access to an appropriate education that affords them the opportunity to achieve their personal potential.

Bridgend County Borough Council (BCBC) is committed to supporting learners with healthcare needs and the provision of high quality care within maintained nursery, primary, secondary and special schools and pupil referral units (PRUs). In Bridgend, various settings are successful with the appropriate guidance and support at including learners with needs of increasing complexity. It is highly likely at some time that a setting could have a learner on roll with a significant healthcare need.

Bridgend is also committed to protecting learners who are experiencing or at risk of abuse, neglect and other harm (section 25 of the Childrens Act 2004). Local authorities (LA's) in Wales have a duty under Section 15 of the Social Services and Well-being (Wales) Act 2014, to provide services within Bridgend with the purpose of preventing or delaying the development of people's needs for care and support and a range or related purposes.

A child or young person with medical conditions may be considered as disabled under the definition set out in the Equality Act (2010) and/or have an Individual Development Plan (IDP) or statement of special educational needs (SEN).

A child or young person with a long-term, complex medical condition may require on-going support, medicines or care with interventions. It is also the case that a child or young person's healthcare needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences.

It is therefore important that parents feel confident that settings will provide effective support for their child or young person's medical condition and that they feel safe and happy.

Healthcare issues can affect every learner either short-term or long-term and support from the education setting may have an impact on their quality of life and future chances. Therefore, governing bodies and headteachers should ensure arrangements focus on meeting the needs specific to the learner and consider how this impacts on their education, attainment and well-being. Arrangements should give learners and parent's confidence that provision is suitable and effective.

As a local authority (LA) in partnership with governing bodies, we will ensure arrangements properly support learners and minimise disruption or barriers to their education. These arrangements will also consider any wider safeguarding duties while seeking to ensure all learners can access and enjoy the same opportunities.

Bridgend LA recommends that the arrangements and procedures the education setting put into place should be placed within a single healthcare needs policy for that setting. This will provide an accessible guide to assist staff when responding to the healthcare needs of learners. The healthcare needs policy needs to be made available online and should not contain any personal or confidential information.

The following key points should be considered:

- Learners with healthcare needs should be properly supported so that they have full access to education, including trips and physical education.
- Governing bodies must ensure that arrangements are in place to support learners with healthcare needs, ensuring staff consult relevant professionals such as LA officers, health board, learners and parents to understand the learners healthcare needs effectively.
- Staff should understand and work within the principles of inclusivity. Being aware of the needs of their learners through the appropriate and lawful sharing of the individual learner's healthcare needs.
- Staff should understand their role in supporting learners with healthcare needs and appropriate training should be provided including feeling confident in what to do in a healthcare emergency.
- Whenever appropriate, learners should be encouraged and supported to take responsibility for the management of their own healthcare needs.
- A flexible approach to delivering the curriculum may be needed in order to help learners reintegrate with the education setting during periods of absence

2. Local Authority's legal requirements

As a LA, BCBC must make arrangements for the provision of suitable education (at school or otherwise) for learners of compulsory school age who may not otherwise receive it for any period due to illness, exclusion from school or otherwise (see section 19(1) of the Education Act 2002. For learners namely those who are over compulsory school age, but under the age of 18, LA's have a power (rather than a duty) to make such arrangements in those circumstances (see section 19(4) of the Education Act 2002. In determining what arrangements to make under section 19(1) or (4) in the case of any learner, the LA must have regard to any guidance given by the Welsh Ministers.

Bridgend LA promote and safeguard the welfare of learners in schools and other places of learning, including supporting learners with healthcare needs by ensuring that education function and arrangements are in line with Section 175 of the Education Act 2002 and have regard to the non-statutory advice contained in Supporting Learners with Healthcare needs which was issued by the Welsh Ministers.

The LA is aware of the need for governing bodies to promote the well-being of learners at the school in line with Section 21(5) of the Education Act 2002 and as mentioned in section 25(2) of the Children Act 2004, which includes physical and mental health and emotional well-being, education, training and recreation, and social well-being.

All learners with healthcare needs are entitled to a full education. In addition to the duties set out above, consideration must also be given to whether the learner is defined as disabled under the Equality Act 2010 and the principles of the United Nations Convention on the Rights of the Child (UNCRC).

LA's in Wales have a duty under section 15 of the 2014 Social Care and Wellbeing Act to provide preventative services in their area. The purpose of these services would be to prevent or delay people developing a need for care and support.

The Social Services and Well-being (Wales) Act 2014 ('the 2014 Act') is a single act that brings together LAs' duties and functions in relation to improving the well-being of people who need care and support, and carers who need support. The Act provides the statutory framework to deliver the Welsh Government's commitment to integrated social services departments with a strong family orientation.

Bridgend LA has a duty under section15 of the Social Services and Well-being (Wales) Act 2014 to provide services in their area with the purpose of preventing or delaying the development of people's needs for care and support and a range of related purposes. The LA will endeavour to work together to assess need and put in place packages continuing care in partnership with local organisations, including health boards and local authority social services in line with The Welsh Government's Children and Young People's Continuing Care Guidance (2012).

The Education (School Premises) Regulations 1999 S.I. 1999/2 set out requirements (LA responsibility) regarding facilities at maintained schools. These include requirements regarding accommodation for medical examination, treatment of

learners and the care of sick or injured learners (regulation 5).

As corporate parents, in common law, those responsible for the care and supervision of children, including teachers and other school staff in charge of children, owe a duty of care to act as any reasonably prudent parent would when taking care of their own children.

Other relevant provisions

The Data Protection Act 2018 regulates the processing of personal data, which includes the holding and disclosure of it.

The Learner Travel (Wales) Measure 2008 places duties on local authorities and governing bodies in relation to home–school transport.

The Misuse of Drugs Act 1971 (Amendment) Order 2008 and regulations deals with restrictions (e.g. concerning supply and possession) on drugs which are controlled. Learners may be prescribed controlled drugs.

3. Roles and responsibilities

Local Authority

BCBC recognises it is required to:

- Make reasonable adjustments to ensure disabled children and young persons are not at a substantial disadvantage compared to their peers, ensuring needs are met.
- Make arrangements to promote co-operation between various bodies or persons, with a view to improving, among other things wellbeing in relation to physical and mental health, education, training and recreational activities.
- Work with other agencies including other local health boards, health professionals, education professionals, and other relevant professionals.
- Create an accessible environment to ensure inclusivity and accessibility.
- Make reasonable provision of counselling services.
- Work with education settings to ensure learners with healthcare needs receive suitable education.
- Provide support, guidance and advice including how to meet the training needs of education setting staff, so that governing bodies can ensure that the support specified within the Individual Healthcare plan (IHP) can be delivered effectively. (Annex 3)

Inclusion Support Officers

To monitor and ensure that schools meet the outlined duties and make reasonable adjustments under the Equality Act 2010 which are relevant in the context of learners with healthcare needs who are also disabled and make reasonable adjustments (See guidance).

To work with the LA to prepare and implement an accessibility strategy in relation to schools for which they are the responsible body. This is a strategy for (over a particular period):

- Increasing the extent to which disabled learners can participate in the schools' curriculum.
- Improving the physical environment of the 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.
- Improving the delivery to disabled learners of information which is readily accessible to learners who are not disabled.
- Ensure that schools must prepare and implement an accessibility plan. Such a plan involves the same content as an accessibility strategy, except that it relates to the particular school.

LAs and the governing body of LA maintained educational establishments, eg maintained schools) are subject to the public sector equality duty. This requires them,

in the exercise of their functions, to have due regard to particular matters related to equality (section 149). They are also under specific duties for the purpose of enabling better performance of the public sector equality duty (see the Equality Act 2010 (Statutory Duties) (Wales) Regulations 2011 S.I.2011/1064).

Education Welfare Officers

Working with governing bodies and schools to ensure that learners with healthcare needs are able to attend school/ other settings as their needs dictate and to coordinate and work with other services as appropriate to ensure maximum learning that healthcare needs allow.

Safeguarding Support Officers

Working within the above legal framework, (see local authority's legal requirements) to ensure that children are safe, in the appropriate educational provision and their wellbeing and healthcare needs are addressed and supported.

Headteachers, Teachers-in-charge (PRUs), teachers and other staff members

The headteacher should ensure arrangements to meet the healthcare needs of their learners are sufficiently developed and effectively implemented, by:

- Working with the governing body to ensure compliance with applicable statutory duties when supporting learners with healthcare needs, (see legal requirements).
- Ensuring the arrangements are in place to meet the learners healthcare needs are fully understood by all parties involved by working collaboratively with parents, governing bodies, school staff, other local authority departments and agencies (outside of the LA) to develop the most appropriate arrangements, and delegation of responsibilities or tasks to a headteacher, member of staff of professional as appropriate.
- Having overall responsibility for the development of Individual Healthcare Plans (IHPs) and Risk Assessments for pupils, using person centred planning. The headteacher may delegate the day-to-day management of the learners healthcare needs to another member of staff.
- Ensuring that there is awareness of healthcare needs across the education setting in line with the learner's rights to privacy and that all staff have adequate information, supervision and training to provide the necessary support to the individual learners and implement the arrangements set out in all IHPs and in emergency situations/ staff absence.
- 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 healthcare.
- Ensuring that learners have an appropriate and dignified environment to carry out their healthcare needs.
- Providing regular reports to the governing body (via the link governor for ALN) and LA on the status of learners with healthcare needs within their school care and notify the LA when a supported learner is likely to be away from the education setting for a significant period due to their healthcare needs.

- Ensuring all learners with healthcare needs are not excluded from activities they would normally be entitled to take part in without a clear evidence based reason and that appropriate healthcare support has been agreed and put in place.

Teachers and other staff members

Any staff member who has been suitably trained, within the education setting may be asked to provide support to learners with healthcare needs, including assisting or supervising the administration of medicines. This role is entirely voluntary and no staff member can be required to administer or supervise medication unless it forms part of their contract, terms and conditions or a mutually agreed job plan.

In addition to the training provided to staff, the education setting should also ensure staff:

- Fully understand the education setting's healthcare needs policies and arrangements, emergency procedures and arrangements and know who the first aiders are and the signs, symptoms and triggers of common life-threatening medical conditions.
- Be aware of which learners have more serious or chronic healthcare needs and where appropriate are familiar with the learners IHPs and Individual Risk Assessments and what to do in an emergency.
- Staff should understand and work within the principles of inclusivity, ensuring lessons and activities are designed in a way which allows those with healthcare needs to participate fully.
- Whenever appropriate, learners should be encouraged and supported to take responsibility for the management of their own healthcare needs.
- Staff should ask and listen to the views of learners and their parents, which should be taken into consideration when putting support in place, ensuring learners know who to tell if they feel ill, need support.
- Keep parents informed of how the healthcare need is affecting the learner in the education setting. This may include reporting any deterioration, concerns or changes to learner or staff routines.

Designated members of staff who support learners with healthcare needs

- Ensure compliance with applicable statutory duties when supporting learners with healthcare needs, (see legal requirements) in conjunction with the head teacher and governing body.
- Should fulfil all the above roles and responsibilities of staff.
- Have responsibility (working with the headteacher) for the development and monitoring of IHPs and Risk Assessments for learners, using person centred planning.
- Ensure staff awareness and training is current and liaise with parents, learners, the home tuition service, the LA, the key worker and others involved in the learner's healthcare ensuring healthcare needs are met.
- Monitor access to the curriculum, changes in healthcare needs.

Designated First Aiders

- Should be aware of all learners with healthcare needs, their IHPs and emergency procedures, and access training to support healthcare needs.
- Assist the designated member of staff to update training and staff awareness.

Governing Bodies

- Should oversee the development and implementation of arrangements to ensure the school complies with applicable statutory duties, including those under the Equalities Act (2010). Section 21(5) of the Education Act 2002 and section 25(2) of the Children Act 2004.
- Work collaboratively with parents, school staff, other LA departments and agencies (outside of the LA) to develop the most appropriate arrangements, and delegation of responsibilities or tasks to a headteacher, member of staff or professional as appropriate
- Ensure arrangements are in place for the development, monitoring and review of the health needs arrangements as well as relevant policies and procedures such as health and safety, first aid, risk assessments, the Data Protection Act 2018, safeguarding measures and emergency procedures. This may include working with other external agencies and internal departments to develop IHP, supported by up to date information and ensuring confidentiality.
- Ensuring robust systems are in place, including appropriate insurance, for dealing with healthcare emergencies on- and off-site activities, including access to emergency medication such as inhalers or adrenaline pens and that staff with responsibility for supporting learners with healthcare needs are appropriately trained

Working with others

LA officers will:

- Make arrangements to promote cooperation between various bodies or persons, with a view to improving, among other things, well-being in relation to physical and mental health, education, training and recreation (Section 25 of the Children's Act 2004).

Governing Bodies will:

- Ensure 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 headteacher, member of staff or professional as appropriate.
- Work collaboratively with parents and other professionals to develop healthcare arrangements to meet the best interests of the learner.

Headteachers will:

- Extend awareness of healthcare needs across the education setting in line with the learner's right to privacy.

- Appoint a named member of staff who is responsible for learners with healthcare needs, liaising with parents, learners, the home tuition service, the LA, the key worker and others involved in the learner's care.

Parents and learners should:

- Receive and give updates regarding healthcare issues/changes that occur within the education setting, including infectious diseases/ conditions.
- Be involved in the creation, development and review of an IHP (if any). Informing how their healthcare needs can be met in the education setting.
- Provide the education setting with sufficient and up-to-date information about healthcare needs, and any changes, including any guidance regarding the administration of medicines and/or treatment from healthcare professionals. Where appropriate, learners should be encouraged and enabled to manage their own healthcare needs.
- Provide relevant in-date medicines, that are prescribed by a medical professional, correctly labelled (dispensed label), with written dosage and administration instructions.
- Ensure a nominated adult is contactable at all times and all necessary forms are completed and signed.

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

Healthcare and practical support can be found from a number of organisations and specialist health professionals such as general practitioners, paediatricians, speech and language therapists, occupational therapists, physiotherapists, dieticians and diabetes specialist nurses and voluntary bodies. Education settings have access to a health advice service. 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.

4. Creating an accessible environment

All learners with healthcare needs are entitled to a full education. In addition to the duties set out in the Education Act 2002, consideration must also be given to whether the learner is defined as disabled under the Equality Act 2010. Schools and governing bodies must comply with the duties of this Act, including those within an education context.

The LA will promote learners and parents being actively involved in the planning of support and management of healthcare needs. Through person centred practices individual's needs should be at the centre of decision making and processes. The UNCRC states learners should have access to appropriate information essential for their health and development and have opportunities to participate in decisions affecting their health.

The LA with governing bodies will need to ensure their education settings are inclusive and accessible in the fullest sense to learners with healthcare needs. This includes the following:

- **Physical access to education setting buildings**

  BCBC has written an accessibility strategy for all schools they are responsible for under the Equality Act 2010. This strategy addresses:

  '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).

- **Reasonable adjustments – auxiliary aids or services**

  The Equality Act 2010 places a duty on education settings 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.

- **Day trips and residential visits**

  Governing bodies should ensure the education setting actively supports all learners with healthcare needs to participate in trips and visits. Governing bodies must be aware of their legal requirements (Annex 3) to make reasonable adjustments to trips and residential visits ensuring full participation from all learners.

  Staff should be 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 including sharing personal information with third parties for off-site activities, such as healthcare needs and emergency procedures (in compliance with the Data Protection Act 2018 and in respecting the learner's right to privacy).

- **Social interactions**

  Governing bodies should 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.

  The education setting should 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.

- **Exercise and physical activity**

  The education setting should 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 challenges to ensure they respond appropriately to the learners. Seeking guidance when considering how participation in sporting or other activities may affect learners with healthcare needs is key.

  Separating 'special provisions' for particular activities should be avoided, (though advice from healthcare or physical education professionals and the learner can be sought) with an emphasis instead on activities made accessible for all.

  Staff should also understand that it may be appropriate for some learners with healthcare needs to have medication or food with them during physical activity.

- **Food management**

  Where food and snacks are provided by or through the education setting, in school or on trips, consideration must be given to dietary needs of learners, eg those who have diabetes, coeliac disease, allergies and intolerances, providing menus in advance or alternatives, with complete lists of ingredients and nutritional information to encourage collaborative working. Gluten and other intolerances or allergens must be clearly marked.

  While healthy school and 'no sweets' policies are recognised as important, learners with healthcare needs may need to be exempted from these policies, and not excluded from the classroom or put in isolation.

- **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. This is in line with Equality Act 2010 to prepare and implement accessibility strategies and plans (See guidance)

5. Sharing information

Multi-agency professionals

BCBC's Education and Family Support Directorate will actively work with individual schools and multi-agencies including NHS Wales School health nursing service, third sector organisations and other specialist services to develop Healthcare plans where necessary. This information will be used to develop school and pupil specific risk assessments and IHPs where necessary.

Internal departments within BCBC and individual schools may, where appropriate and with permission share information internally in order to develop support plans and risk assessments. This may include the Inclusion Service, Safeguarding, Health & Safety and Catering departments. This list is not exhaustive and contact with both external and internal agencies will be taken on an individual case basis.

Governing bodies

Governing bodies ensure healthcare needs arrangements are in place, which are supported by clear communication with staff, parents and other key stakeholders to ensure full implementation. All information is kept up to date by designated staff. All information-sharing techniques such as staff noticeboards and school intranets are agreed by the learner and parent in advance of being used, to protect confidentiality.

All school staff (this may include catering staff and relevant contractors)

Staff must have access to the relevant information, particularly if there is a possibility of an emergency situation arising. This may include, a display of relevant information, allowing for learners privacy, training, good communication and use of the school's information management system.

Parents and learners

Parents and learners should be active partners in schools and should be made fully aware of the care being received and their own rights and responsibilities. This may be through a variety of different methods, which could include, easily accessible healthcare policies, copies of IHPs, and becoming familiar with the information sharing policy. School councils could be involved, working with peers and friendship groups to provide support.

6. Procedures and record keeping for the management of learners' healthcare needs

In order to maintain the confidentiality of the learners, electronic records of IHP's and Risk Assessments will be shared with and kept with a designated officer or employee within the school and internal departments and will not be shared without the permission of the learner, parents, school or other internal and external agencies. All information sharing will be in line with the Data Protection Act 2018. The learner's IHP and risk assessments will be reviewed periodically with other relevant agencies, parent and learner (or as a result of any significant changes) by the individual school.

The education setting should create procedures which state the roles/responsibilities of all parties involved in the identification, management and administration of healthcare needs.

The following documentation should 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 education setting should ensure that the old forms are clearly marked as being no longer relevant and stored in line with their information retention policy. These forms/templates can be found in the guidance document. (Annex 2)

7. Storage, access and administration of medication and devices

The arrangements for storage, access and administration of medicines and devices should be identified by individual schools.

Governing bodies should ensure the education setting's policy is clear regarding the procedures to follow for managing medicines and devices. Storage, access and administration procedures will always be contextual to the education setting and the requirements of the learner. Where necessary a further individual pupil risk assessment may be required which the school is responsible for developing and implementing. However, the following general principles should be reflected.

Supply of medication or devices

Education settings should not store surplus medication. Parents should be asked to provide appropriate supplies of medication. These should be in their original container, prescribed by a medical professional, labelled (dispensed label) with the name of the learner, medicine name, dosage and frequency, and expiry date. Education settings should only accept prescribed medicines and devices that:

- are in date
- have contents correctly and clearly labelled
- are labelled with the learner's name
- are accompanied with written instructions for administration, dosage and storage
- are in their original container/packaging as dispensed by the pharmacist (with the exception of insulin which is generally available via an insulin pen or a pump)

Storage, access and disposal

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.

- 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.

- **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 not locked away.

They will be kept in classrooms in closed containers in the teacher's cupboard. The medication is to be taken when the child attends trips etc outside of the school setting. Where staff administer emergency medication to a learner, this should be recorded.

- **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.

- **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.

Administration of medicines

- Assistance or administration of 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, eg 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.
- All medication should be administered by a suitably trained member of staff, who is available to the learner with healthcare needs. In other cases, it may need to be supervised in accordance with the IHP.
- 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.
- If a learner refuses their medication, staff should record this and follow their defined procedures informing parents as soon as possible.
- Staff involved in the administration of medication should be familiar with how learners consent to treatment. Further information on this from the Welsh Government can be found in the *Patient Consent to Examination and Treatment – Revised Guidance* (NHS, 2017).
- 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.

- Only medicines or alternatives prescribed by a GP, pharmacist or health professional in the hospital will be administered/provided in school. Unfortunately, to safeguard, the school is unable to administer any alternatives, eg moisturiser, personal care equipment.

8. Emergency Procedures

Governing bodies should ensure that the school has developed and implemented a procedure for handling emergency situations, both generic, in the form of emergency evacuation procedures as well as arrangements specific to the individual learner.

Where a learner has an IHP or risk assessment this should clearly define what constitutes an emergency and explain what to do. Staff should be made aware of emergency symptoms and procedures relating to specific learners.

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.

Guidance is available on storage, handling, training and administration of medications from the Corporate Health & Safety Department.

It is the schools responsibility (though LA officers will liaise with schools) to develop and manage learners risk assessments ensuring, that they include the instructions on the use, handling and storage of the medication as identified in the learners IHP's as well as in the guidance available.

The findings of the risk assessment will be shared and reviewed with all relevant parties both within the school to include teachers and staff as well as LA officers to ensure that all stakeholders are aware of the healthcare needs of the learner and they are monitored.

9 Training

The Governing body must ensure staff who volunteer or who are contracted to support those with healthcare needs are provided with appropriate training which is kept up to date, to ensure competency and confidence in supporting health needs. School policies should clearly set out how a sufficient number of these staff will be identified and supported. Appropriate training records should be kept. The IHP will set out alternative arrangements for staff absence in administrating medicines.

If a learner has complex needs on their IHP, input is needed from healthcare services and the LA who will be able to advice and signpost to further training and support, but where no specialist training is required the role of the staff is to facilitate the learner to meet their own healthcare needs.

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. All staff should have a basic understanding of common conditions to ensure recognition of symptoms and understand where to seek appropriate assistance.

Our policy includes a procedure on how to raise awareness of common conditions, a healthcare needs policy and staff roles in carrying out arrangements. New and temporary staff are made aware of what preventative and emergency measures are in place so staff can recognise the need for intervention and react quickly.

10. Reviewing policies, arrangements and procedures

Governing bodies should ensure all policies; arrangements and procedures are reviewed regularly by the education setting. IHPs and risk assessments 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, subject to strict confidentiality and will only be shared with the knowledge and permission of all of the stakeholders.

11. Insurance Arrangements

BCBC has public Liability Insurance which covers all schools. Governing bodies of maintained education settings should 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, eg off-site activities for learners with particular needs.

12. Complaints procedure

If the learner or parent is not satisfied with the education setting's health care arrangements they are entitled to make a complaint. The process to be followed can be found in the school's complaints policy & procedure. A copy can be obtained through the school office or website.

If the complaint is Equality Act 2010/disability related, then consideration of a challenge to the Special Education Needs Tribunal for Wales (SENTW) can be made.

13. Individual healthcare plans (IHPs)

BCBC acknowledges that IHP's are essential where healthcare needs are complex, fluctuating, long-term or where there is a high risk that an emergency intervention is needed. IHPs set out what support is required by the learner. Governing bodies should

ensure their healthcare needs policy includes information on who has overall responsibility for the development of IHPs.

IHPs do not need to be complex but they should be tailored to each individual and explain how the learner's needs can be met. An IHP should be easily accessible to all who need to refer to it, while maintaining the required levels of privacy. Each plan should capture key information and actions required to support the learner effectively. Details can be found in Annex 3.

The aim of the plan is to capture the steps which need to be taken to help a learner manage their condition and overcome any potential barriers to participating fully in education.

Governing bodies should ensure the plans are reviewed at least annually or more frequently should there be new evidence that the needs of the learner have changed. They should be developed with the best interests of the learner in mind and ensure the education setting, with specialist services (if required), assess the risks to the learner's education, health and social well-being.

Where a learner has an additional learning needs (ALN) the IHP should be linked or attached to any Individual Development Plan or Statutory Statement of Special Educational Needs.

14. Unacceptable Practice

BCBC recognises that it must not act in a manner where individual learner's needs are not considered to the fullest. Unacceptable practice in this respect would include:

- Preventing 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.
- Preventing learners from easily accessing their medication when and where necessary, or eating, drinking, resting or using the toilet if needed.
- Require parents/carers to attend education setting, trip, off site activity to administer medication or provide healthcare support to the learner, including toileting.
- Assume every learner with the same condition requires the same treatment and support.
- Ignore the view of the learner, parent or guardian. Ignore the views of healthcare professionals and other stakeholders.
- Penalise learners for their attendance record if the absence is related to their healthcare needs.
- Not requesting adjustments or extra time for tests or assessment where needed.
- Prevent or create unnecessary barriers to a learner's participation in any aspect of their education, including particular lessons, lunch time or trips, eg by requiring a parent to accompany the learner.

Short-term and long-term absences should be monitored and managed carefully to ensure progress and attainment. Any reintegration should be appropriately supported to ensure that the child with healthcare needs engages fully with learning.

For further information please see the ‘Unacceptable Practice’ section in the Welsh Government ‘Supporting Learners with Healthcare Needs’ statutory guidance.

Annex 1: Useful Contacts

Asthma

Asthma UK Cymru
Helpline: 0300 2225800
www.asthma.org.uk

Anaphylactic shock

Allergy UK
Helpline: 01322 619898
www.allergyuk.org

Anaphylaxis Campaign
Helpline: 01252 542029
www.anaphylaxis.org.uk

Child support organisations

Action for Children
Tel: 0300 123 2112
www.actionforchildren.org.uk

Action for Sick Children
Helpline: 0800 074 4519
www.actionforchildren.org.uk

Barnardo's Cymru
Tel: 029 2049 3387
www.barnardos.org.uk/wales

Children in Wales
Tel: 029 2034 2434
www.childreninwales.org.uk

Diabetes

Diabetes UK Cymru
Tel: 029 2066 8276
www.diabetes.org.uk/

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

Diabetes UK school and parent resource packs
www.diabetes.org.uk/Guide-to-diabetes/Your-child-and-diabetes/Schools/Diabetes-in-school-resources

Epilepsy

Epilepsy Action Wales
Tel: 01633 253407
Helpline: 0808 800 5050
www.epilepsy.org.uk/incvolved/branches/cymru

Epilepsy Wales
Helpline: 0800 2289016
www.epilipsy-wales.org.uk

Young Epilepsy
Helpline: 01342 831342
www.youngepilepsy.org.uk

Learning Difficulties

Learning Disability Wales
Tel: 029 2068 1160
www.ldw.org.uk

MENCAP Cymru
Helpline 0808 808 1111
www.mencap.org.uk

Special Needs Advisory Project (SNAP) Cymru
Helpline 0845 120 3730
www.snapcymru.org

Medical-based support organisation

The National Autistic Society Cymru
Helpline: 0808 800 4104
www.autism.org.uk/

Bobath Children's Therapy Centre Wales
Tel: 029 2052 2600
www.bobathwales.org

Cerebra-for brain-injured children and young people
Tel: 01267 244200
www.cerebra.org.uk

Crohn's in Childhood Research Association (CICRA) - for children with Crohn's and colitis
Tel: 0208 949 6209
www.cicra.org

CLIC Sargent - for children with cancer

Helpline: 0300 330 0803 www.clicsargent.org.uk

Coeliac UK
Helpline: 0333 332 2033
www.coeliac.org.uk/local-groups/?region=wales

Cystic Fibrosis Trust
Helpline: 0300 373 1000
www.cysticfibrosis.org.uk

Headway - the brain injury association
Helpline: 0808 800 2244
www.headway.org.uk/home.aspx

Migraine Action
Tel: 08456 011 033
www.migraine.org.uk

Multiple Sclerosis Society
Helpline: 0808 800 8000
www.mssociety.org.uk

Muscular Dystrophy UK
Helpline: 0800 652 6352
www.musculardystrophyuk.org

National Attention Deficit Disorder Information and Support Service (ADDiSS)
Tel: 0208 952 2800
www.addiss.co.uk

National Eczema Society
Helpline: 0800 089 1122
www.eczema.org

Prader-Willi Syndrome Association UK
Helpline: 01332 365676
www.pwsa.co.uk

Spina Bifida and Hydrocephalus Information (Shine)
Tel: 01733 555988
www.shinecharity.org.uk

Welsh Association of ME and CFS Support
Helpline: 029 2051 5061
www.wames.org.uk

Mental Health

Child and Adolescent Mental Health Service (CAMHS)
www.mental-health-matters.org.uk/page7.html

Mind Cymru
Tel: 02920 395123
www.mind.org.uk/about-us/mind-cymru

Public Bodies

Contact a Family - for families with disabled children
Helpline: 0808 808 3555
www.cafamily.org.uk

Children's Commissioner for Wales
Tel: 01792 765600
www.childcomwales.org.uk

Equality and Human Rights Commission
Helpline: 0808 800 0082
www.equalityhumanrights.com

Health and Safety Executive
Tel: 02920 263120
www.hse.gov.uk

National Children's Bureau Council for Disabled Children
Tel: 020 78436000
www.ncb.org.uk

National Health Service Direct Wales
Tel: 0845 4647
www.nhsdirect.wales.nhs.uk/contactus/feelingunwell

Information Commissioner's Office Wales
Tel: 029 2067 8400
Helpline: 0303 123 1113
ico.org.uk/for-organisations/education

Children's Rights

Children's Rights Wales

The United Nations Convention on the Rights of the Child (UNCRC) is a list of rights for all children and young people, no matter who they are or where they live. These rights are the things that they need to be safe, healthy and happy.
www.childrensrights.wales

Sensory Impairment

Action on Hearing Loss
Helpline: 0808 808 0123
Textphone: 0808 808 9000

www.actiononhearingloss.org.uk/default.aspx

The National Deaf Children's Society (NDCS) Cymru
Tel: 0808 800 8880
www.ndcs.org.uk/family_support/support_in_your_area/wales

Royal National Institute of Blind People (RNIB)
Helpline: 0303 123 9999
www.rnib.org.uk/wales-cymru-1

Sense Cymru - services across Wales for deafblind people and their families
Tel: 0300 330 9280
Textphone: 0300 330 9282
www.sense.org.uk/content/sense-cymru-wales

Speech and Language

Afasic Cymru - helping children who have difficulty speaking and understanding
Helpline: 0300 666 9410
www.afasiccymru.org.uk

Annex 2: Form Templates

Education settings may wish to use or adapt the forms listed below according to their particular policies on supporting learners with healthcare needs.

- Form 1 – Contacting emergency services
- Form 2 – Parental agreement for education setting to administer medicine
- Form 3 – Individual Healthcare Plan proforma

Form 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

Ysgol Gymraeg Bro Ogwr
Princess Way
Brackla
Bridgend

3. State that the postcode is CF31 2LN

4. Give the exact location within the education setting.

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 exact location.

At Bro Ogwr this will be through either the main gate or field gate and then via individual classroom doors or main Reception entrance.

8. Don't hang up until the information has been repeated back.

Speak clearly and slowly and be ready to repeat information if asked to.

Put a completed copy of this form by all the telephones in the education setting.

Administration of Medication at Ysgol Gymraeg Bro Ogwr
Important Information for Parents/Carers

We all want your child(ren) to be well and in school as much as possible. However, there are times when children require short term medication such as antibiotics or certain hay-fever medication, and sometimes longer term medication such as inhalers for asthma.

Children with longer term or more significant medical needs will require an 'Individual Health Care Plan', in these cases, please make an appointment to speak with our Deputy Headteacher whose strategic role is to lead on inclusion.

Parents/Carers should, wherever possible, administer or supervise the self-administration od medication to their own child(ren). There is no legal requirement for school staff to administer or to supervise children taking medication. Medication, remains at all times, the responsibility of the parent/carer.

Medications that needs to be taken only two or three times a day should be managed by parent/carer outside of school hours.

Only medication, which has been prescribed by a doctor or some other authorised person, eg a pharmacist can be administered at school and ONLY where it would be detrimental to the child's health if it were not administered during the school day. This medication will require the dispensing label on it, with the dosage and child's details.

In these cases, parents/carers are required to complete the attached request form. No medication will be administered without a fully completed request form in place.

Administration of medicines by any member of school staff is undertaken purely on a voluntary basis and individual decisions will be respected.

No child under the age of 16 will be given medication without their parent/carer's written consent. Any and all administration or supervising of medication at the school will be fully recorded in line with the school policy.

Whilst every effort will be made to adhere to the doses and times (during lunchtime) the school will not be held responsible should any error occur and that in any case, where doubts or queries arise.

Should you still wish to request the administration of medication to your child at school, please fully complete the attached form.

Form 2: Parental agreement for education setting to administer medicine

The school needs your permission to give your child medicine. Please complete and sign this form to allow this.

Name of education setting	
Name of child	
Date of birth	/ /
Group/class/form	
Healthcare need	

Medicine

Name/type of medicine (as described on the container)	

Date dispensed / / Expiry date / /

Agreed review date to be initiated by [name of member of staff]

Dosage and method	
Timing	
Special precautions	
Are there any side effects that the setting needs to know about?	

Self-administration (delete as appropriate) **Yes/No**

Procedures to take in an emergency	

Contact details

Name	
Daytime telephone no.	
Relationship to child	
Address	

I understand that I must deliver the medicine personally to [*agreed member of staff*]

I understand that I must notify the setting of any changes in writing.

Date / / Signature(s) …….....

Form 9 Individual Healthcare Plan

HEALTHCARE PLAN FOR A PUPIL WITH SPECIAL MEDICAL NEEDS

Name: **DOB:**

Address:

Telephone Number:

Name of School:

Review Date:

Contact Information:

Family Contact 1	**Family Contact 2**
Name:	**Name:**
Telephone number Home:	**Telephone number Home:**
Work	**Work**

Clinic/Hosptal Contact: **Specialist Nurse:** **Therapist:**	**GP** **Name:** **Telephone Number:**

Condition:

Description of Condition and details of pupil's individual symptoms:

Daily care requirements at school (eg. at lunchtime, before sports etc)

Special adaptations/ arrangements:

Daily care requirements off site:

Describe what constitutes and emergency for the pupil and the action to be taken should it occur:

Follow up care:

Who is responsible in an emergency? State if different for off-site activities:

Name:	**Position:**
Name:	**Position:**
Name:	**Position**

Staff who have received training:

Name:	**Position:**
Name:	**Position:**
Name:	**Position:**
Name:	**Position:**

Signed	**Headteacher**	**Date:**
Signed	**Doctor/Specialist Nurse**	**Date:**
Signed	**Parent/Carer**	**Date:**

Annex 3: Individual Healthcare Plan Guidance (taken from the Supporting Learners with Healthcare Needs Guidance, Welsh Government 2017)

1. *Individual healthcare plans (IHPs)*

1.1 Introduction

IHPs set out what support is required by a learner. They do not need to be long or complicated. Governing bodies should ensure their healthcare needs policy includes information on who has overall responsibility for the development of the IHPs. IHPs 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 education setting 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 education setting.

Gather information

- If there is potential need for an IHP, the education setting should discuss this with the parent and learner.

Establish if an IHP should be made

- The education setting 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 headteacher should take the final decision, which can be challenged through the complaints procedure.

If an IHP should be made

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

any possible side effects. These procedures should be confirmed in writing between the learner (where appropriate), the parents and the education setting.

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.

1.2 Roles and responsibilities in the creation and management of IHPs

IHPs do not need to be complex but they should explain how the learner's needs can be met. An IHP should be easily accessible to all who need to refer to it, while maintaining the required levels of privacy. Each plan should capture key information and actions required to support the learner effectively. The development of detailed IHPs may involve:

- *the learner*
- *the parents*
- *input or information from previous education setting*
- *appropriate healthcare professionals*
- *social care professionals*
- *the headteacher 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 (SENCo).*

While the plan should be tailored to each individual learner, it may include:

- *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 education setting can 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*
- *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 aim of the plan is to capture the steps which need to be taken 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 education setting. Many third sector organisations have produced condition-specific template IHPs that could be used.

Governing bodies should ensure the plans are reviewed at least annually or more frequently should there be new evidence that the needs of the learner have changed. They should be developed with the best interests of the learner in mind and ensure the education setting, with specialist services (if required), assess the risks to the learner's education, health and social well-being.

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.

1.3 Coordinating information with healthcare professionals, the learner and parents

The way in which a learner's healthcare needs are shared with social and healthcare professionals depends on their requirements and the type of education setting. The IHP should explain how information is shared and who will do this. This individual can be a first point of contact for parents and staff and would liaise with external agencies.

1.4 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.

1.5 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 setting'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.

1.6 Record keeping

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.