Healthcare Needs Policy Ysgol Gyfun Gwyr

1. Key principles

The staff and governing body of Ysgol Gyfun Gwyr are committed to supporting learners with healthcare needs so that they have full access to education, including all offsite activities and physical education.

We work with parents / carers, learners and relevant professionals to ensure the needs of the learner with healthcare needs are properly understood and effectively supported. We do this through listening to the views and wishes of the learner and parent as well as the advice of education and health professionals.

Where possible we support the learner to build understanding and confidence so that they can increasingly self-manage their care needs depending on their ability to do so.

We make sure staff have access to appropriate training so that learners' healthcare needs are properly supported.

We understand that all learners with healthcare needs are entitled to a full education and have due regard to the United Nations Convention on the Rights of the Child (UNCRC) as a rights respecting school. When making arrangements to meet a learner's health care needs we consider the impact on their education, attainment and well-being. Any arrangements also consider wider safeguarding duties whilst seeking to ensure all learners have access and enjoy the same opportunities.

Under the Equality Act 2010 we make reasonable adjustments to comply with the duties of the act so as not to discriminate against disabled learners.

2. School's legal requirements

The governing body of the school must promote the well-being of all learners at the school under Section 21(5) of the Education Act 2002. They must also make arrangements to promote and safeguard the welfare of all children at the school in all aspects of the school's conduct (Section 175(2) Education Act 2002. In meeting the duties under section 175 of the Education Act 2002 Governing bodies **must** have regard to guidance by the Welsh Ministers under this section.

The governing body are also subject to the duties set out in the Equality Act 2010. Some learners with healthcare needs may be disabled for the purposes of the Act. The governing body of the school must make reasonable adjustments to ensure disabled learners can participate in the school's curriculum. They must also prepare and implement an accessibility plan which sets out what the school plans to do to increase the access disabled learners have to participate in the life of the school.

The governing body and head teacher also need to be mindful of the Social Services and Well-being (Wales) Act 2014 which seeks to ensure that care and support provided to children and young people is in accordance with the principles outlined in the UNCRC. Well-being and the outcomes people wish to achieve are at the centre of the legislation which uses a "people model" that focuses on arrangements that are unique to

the child or young person's needs. Arrangements should also by integrated and cohesive.

3. Roles and responsibilities

School

a. Governing body

The governing body is responsible for overseeing the development and implementation of the following arrangements:

i. Complying with applicable statutory duties, including those under the Equality Act 2010.
ii. Promoting the well-being of learners 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)
iii. Supporting learners to develop the skills, knowledge and emotional resilience required to uphold their rights, and the rights of others.
iv. 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.
v. Working collaboratively with parents / carers and other professionals to develop healthcare arrangements to meet the best interests of the learner.
vi. Developing, implementing and communicating effective arrangements to support learners with healthcare needs. This should include a policy on healthcare needs and where appropriate, individual health care plans (IHPs) for particular learners.
vii. Ensuring arrangements are in place for the development, monitoring and review of the healthcare needs arrangements.
viii. 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
ix. 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.
x. Ensuring staff with responsibility for supporting learners with healthcare needs are appropriately trained.
xi. 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.
xii. Having an infection prevention policy that fully reflects the procedures laid out in current guidance[1]. Further guidance can be found at website: All Wales Infection Prevention and Control Guidance for Education Settings

[1] www.wales.nhs.uk/sitesplus/888/home

b. Head teacher

The head teacher should ensure arrangements to meet the healthcare needs of their learners are sufficiently developed and effectively implemented. This includes:

i. 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.
ii. 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.
iii. Ensuring the support put in place focuses on and meets the individual learner's needs, also known as person-centred planning[2].
iv. 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 / carers and other learners.
v. Appointing a named member of staff who is responsible for learners with healthcare needs, liaising with parents / carers, learners, the home tuition service, the local authority, the key worker and others involved in the learner's care.
vi. 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.
vii. Having the overall responsibility for the development of IHPs.
viii. Ensuring that learners have an appropriate and dignified environment to carry out their healthcare needs, e.g. private toilet areas for catheterisation.
ix. Checking with the local authority 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.
x. Ensuring all learners with healthcare needs are appropriately linked with the school's health advice service.
xi. Ensuring when a learner participates in a work experience placement or similar, that appropriate healthcare support has been agreed and put in place.
xii. Providing annual reports to the governing body on the effectiveness of the arrangements in place to meet the healthcare needs of learners.
xiii. 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.
xiv. Notifying the local authority (LA) 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 setting can provide suitable education for the learner. Shorter periods of absence may be significant depending upon the circumstances.

[2] learning.gov.wales/docs/learningwales/publications/150909-reviews-toolkit-en.pdf

xv. Notifying the LA of changes in learners' healthcare needs or updates in the individual healthcare plan. Changes in IHPs should be sent to the Senior Specialist Teacher, Cockett House, Cockett Road. Changes in provision on a learners Statement of Special Educational Needs should be discussed as part of a review of the learners' statement and forwarded to the Database team, Civic Centre, Swansea SA1 3SN.
xvi. Being mindful of the Social Services and Well-being (Wales) Act 2014. Schools should be fully aware of this approach and ensure assistance to learners is provided using a holistic approach.

c. Teachers, support staff and other members of staff

Any staff member within the school may be asked to provide support to learners with healthcare needs, including assisting or supervising the administration of medicines. This role is entirely voluntary unless it is part of the staff member's contract, terms and conditions or mutually agreed job plan. Staff who volunteer or are contracted to support learners with healthcare needs will have sufficient and suitable training to achieve the necessary level of competence.

In addition, the school will ensure staff:

i. Fully understand the school's healthcare needs policies and arrangements.
ii. 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 / carers 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.
iii. Are aware of the signs, symptoms and triggers of common life-threatening 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.
iv. Fully understand the school's emergency procedures and be prepared to act in an emergency.
v. Ask and listen to the views of learners and their parents / carers, which should be taken into consideration when putting support in place.
vi. Ensure learners (or their friends) know who to tell if they feel ill, need support or changes to support.
vii. 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).
viii. 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.
ix. 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.
x. Are aware that healthcare needs can impact on a learner's ability to learn and provide extra help when needed.

xi. Support learners who have been absent and assist them with catching up on missed work – this may involve working with parents / carers and specialist services
xii. Keep parents / carers 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.

d. Parents / carers/learners

Learners and parents / carers are actively involved in the planning of support and management of healthcare needs and have opportunities to participate in decisions affecting a learner's health. Parents / carers and learners are provided with appropriate information essential for the learners' health and development.

Parents / carers/carers will:

i. Receive updates regarding healthcare issues/changes that occur within the school.
ii. Be integral to 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 school, and contribute to the development of, and compliance with, their IHP.
iii. 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. Where appropriate, learners should be encouraged and enabled to manage their own healthcare needs.
iv. Inform the school of any changes such as type of medication, dosage or method of administration
v. Provide relevant in-date medicines, correctly labelled, with written dosage and administration instructions
vi. Ensure a nominated adult is contactable at all times and all necessary forms are completed and signed
vii. Inform the school if their child has/had an infectious disease or condition while in attendance.

Learners should:

i. Inform parent/carer or staff member/s if feeling unwell.
ii. Participate in drafting and agreeing their individual healthcare plan (IHP), where appropriate.
iii. Take care when carrying medicines to and from school, and not share with others.
iv. Take part in discussions around sharing/confidentiality of personal information.

e. Local Authority

The local authority (LA) works with schools, the local health boards, parents / carers and carers and learners to ensure healthcare needs are identified and appropriate arrangements made to meet those needs.

The local authority will:

i. Work with schools to ensure learners with healthcare needs receive a suitable education.
ii. Make arrangements to provide suitable education where a learner of compulsory school age would not receive suitable education for any period because of their health.
iii. Make reasonable adjustments to ensure disabled children and young people are not substantially disadvantaged compared with their peers. This will include the development of an Accessibility Strategy.
iv. Promote co-operation between various bodies so as to improve the physical and mental well-being of learners including making arrangements to share information.
v. Make reasonable provision of counselling services for young people aged 11–18 and learners in primary schools.
vi. 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.
vii. Provide home to school transport in accordance with the Learner Travel (Wales) Measure 2008 and Swansea Council's Home to School Transport Policy.

f. Health and other professionals

Health advice and support can be provided by specialist health professionals - GPs, paediatricians, speech and language therapists, occupational therapists, physiotherapists, dieticians, and specialist nurses. The named school nurse for mainstream schools can advise and signpost to appropriate specialist health colleagues. 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. The type of support the service can offer may include:

i. offering advice on the development of IHPs
ii. assisting in the identification of the training required for the education setting to successfully implement IHPs
iii. supporting staff to implement a learner's IHP through advice and liaison with other healthcare, social care and third sector professionals.
iv. provide training and awareness-raising resources, including video links

4. Creating an accessible environment

The school and governing body are committed to creating an inclusive and accessible environment. Our plans for improving the accessibility of the school are laid out in the school's Accessibility Plan.

We also make reasonable adjustments to ensure disabled learners are able to access all aspects of school life by working with the LA to ensure they have appropriate auxiliary aids, services and trained staff.

a) All offsite activities

We actively support all learners with healthcare needs to participate in all offsite activities including trips and residential activities and make reasonable adjustments to trips and residential visits to ensure full participation from all learners.

Staff 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[3]. We share appropriate information with offsite providers as needed with the permission of parents and carers and seeking the learner's views as well.

b) Social interactions

We take a proactive approach to ensuring learners with healthcare needs are included in structured and unstructured social activities, such as during breaks, breakfast club, productions, after-hours clubs and residential visits. Staff are made aware of potential barriers to inclusion and make reasonable adjustments to ensure inclusion.

We have a strong ethos which promotes inclusion and the rights of the child and use restorative approaches to tackle the potential problems of bullying and social exclusion.

c) Exercise and physical activity

We understand the importance of all learners taking part in physical activities and staff make appropriate adjustments to sports and other activities to make them accessible to all learners, including after-hours clubs and team sports.

We ensure staff are aware of the healthcare needs of learners when planning physical activities and seek the views of the learner, their parents/carers and health professionals when planning. Where possible we make sure all physical activity is accessible to all learners.

d) Food management

We are careful to consider the dietary needs of learners with healthcare needs and our kitchen staff are able to provide lists of ingredients and display any potential allergens for the meals they supply. We understand that learners with healthcare needs may need to eat and drink in class and have snacks available.

The dietary and food intake requirements of individual learners will be set out in their individual healthcare plan and communicated to all staff.

e) Risk assessments

[3] The duty to make reasonable adjustments under the Equality Act may apply depending on the circumstances.

All activities in the school are appropriately risk assessed and formally recorded by appropriate staff members. Specific risk assessments will be undertaken with all pupils with specific healthcare needs in full consultation with the parent/carer and appropriate healthcare professional and include the views of the learner.

5. Sharing information

Our health care policy is available online and as a hard copy on request.

When sharing information with others we comply with the EU's General Data Protection Regulations 2018.

Parents / carers are asked to sign a consent form which clearly details the bodies, individuals and methods through which their learner's medical information will be shared. The learner will also be involved in decisions about sharing medical information. The school keeps a record of what information is being shared and with whom.

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

The school and governing body make sure the contact details of emergency services for individuals with healthcare needs are attached to their IHP. Records are kept of the following information:

1. Parental agreement for educational setting to administer medicine
2. Head teacher agreement to administer medicine
3. Record of medicine stored for and administered to an individual learner
4. Record of medicines administered to all learners by date
5. Request for learner to administer own medicine
6. Staff training record – administration of medicines
7. Medication incident report
8. Refusal to take medication
9. The IHP

New records will be completed when there are changes to medication or dosage and kept confidential.

The process of producing a IHP is set out in Appendix 2.

7. Storage, access and the administration of medication and devices

a) Supply of medication or devices

We do not store surplus medication. Parents will ask to provide appropriate supplies of medication. These should be in their original container, labelled with the name of the learner, medicine name, dosage and frequency, and expiry date. We will only accept prescribed medicines and devices that:

i. are in date
ii. have contents correctly and clearly labelled

iii. are labelled with the learner's name
iv. are accompanied with written instructions for administration, dosage and storage
v. 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).

We do not supply non-prescribed medicines such as liquid paracetamol, and we will not administer aspirin or its derivatives unless it is prescribed. Parents can request that a non-prescribed medicine other than aspirin is stored by the school but only if the medicine:

i. is in date
ii. has its contents correctly and clearly labelled
iii. is labelled with the learner's name
iv. is accompanied with written instructions for administration, dosage and storage – this can be from the parent
v. is in its original container/packaging.

b) Storage, access and disposal

All medicines are stored safely dependent on the type and use of the medication, which may include refrigeration. It is important for staff and learners to know where their medication is stored and how to access it.

i. Emergency medication

We make sure emergency medication such as inhalers and auto-injector pens is readily available and not locked away. If a learner is competent to do so they may have their medicine with them but must not pass it to an unauthorised person. A request for the learner to carry/administer their own medicine can be submitted by the parent/carer and will be discussed with relevant staff. If staff have concerns then the parent/carer should discuss these with healthcare professionals. Any request is subject to review if further concerns/risks are highlighted. The provision of emergency medication and its security are also part of the planning of offsite activities including trips and residential activities.

The school also holds an emergency salbutamol inhaler for situations where a learner is unable to locate their own inhaler. Guidance on the use of emergency salbutamol inhalers can be found at: Guidance on the use of emergency salbutamol inhalers in schools. Emergency inhalers are purchased from our local community pharmacy.

ii. Non-emergency medication

All non-emergency medication is kept in a secure place with appropriate temperature or light controls. If it is a controlled drug, additional security measures and controls will be applied as guided by specialist health staff.

iii. Disposal of medicines

When no longer required, medicines will be returned to parents to arrange safe disposal. Sharp boxes are used for the disposal of needles and other sharp instruments, and arrangements made to be disposed of appropriately.

j. Administration of medicines

i. Where the learner is under 16, assistance or administration of prescribed or non-prescribed medicines requires written parental consent. The administration of all medication will be recorded.
ii. 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, such as before and after school and in the evening. There will be instances where this is not appropriate though.
iii. Learners under 16 will never be given aspirin or its derivatives unless prescribed to them.
iv. Unless there is an agreed plan for the learner to self-medicate (16 years and above), all medication will be administered by a member of staff in accordance with the IHP.
v. Medication will only be administered by suitably trained staff. The movement and location of these trained staff will always be in conjunction with the learners they support.
vi. Staff should check the maximum dosage and the amount and time of any prior dosage administered.
vii. 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 will be considered when providing intimate care. There is no requirement in law for there to be more than one person assisting[4]. This should be agreed and reflected in the IHP and risk assessment.
viii. The school has an intimate care policy[5] which will be followed, unless alternative arrangements have been agreed, and recorded in the learner's IHP.
ix. 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 education setting should ask parents to seek healthcare advice as appropriate. If parents cannot be contacted immediately, staff need to consider seeking immediate healthcare advice.
x. All staff supporting off-site visits will be made aware of learners who have healthcare needs. They will receive the required information to ensure staff are able to facilitate as equal an experience for the learner as is practicable and reasonable. This information may include health and safety issues, what to do in

[4] gov.wales/docs/dcells/publications/150114-keeping-learners-safe.pdf
[5] 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.

an emergency and any other additional necessary support that the learner requires, including medication and equipment.

8. Emergency procedures

The school has procedures in place for handling emergency situations. Staff should know:

i. who is responsible for the policy and procedures,
ii. nominated first aiders and how to deal with common healthcare needs. In situations requiring emergency assistance, 999 should be called immediately.
iii. The location of learners' healthcare records and emergency contact details.

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 school 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 will 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.

9. Training

Staff who volunteer or who are contracted to support those with healthcare needs are provided with appropriate training. The governing body and head teacher are aware of their responsibility to ensure there is a sufficient number of staff identified to meet the healthcare needs of all children in the school.

When assisting learners with their healthcare needs, it is 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.

However, where IHPs reflect complex needs requiring staff to have specific information and training this will be provided by healthcare or other specialist staff. Appendix 1 provides a list of health staff who can be contacted to provide training in key areas such as diabetes, asthma, allergies and epilepsy. We ensure training is recorded and kept up to date and this information is available to the LA on request.

For children with a life limiting illness we work closely with the palliative care nurse and the paediatric advanced care plan is shared (with parental consent) with relevant staff in case of acute deterioration.

It is recognised that 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. We therefore have a programme of training to raise awareness and understanding of common conditions to ensure recognition of symptoms and understand where and when to seek appropriate assistance. The local authority also has a training plan developed with healthcare professionals for schools.

Our induction procedures make sure new and temporary staff are aware of what preventative and emergency measures are in place, so they 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 will set out alternative arrangements.

10. Qualifications and assessments

For learners with healthcare needs that are approaching assessments, including those undertaking examinations in hospital or at home the school liaise with the hospital teacher or home teacher especially where the learner is moving from school or home to the hospital on a regular basis.

The school will ensure:

i. Applications for special arrangements will be submitted to the awarding bodies as early as possible.
ii. Adjustments, adaptations or additional time for learners taking the National Reading and Numeracy Tests will be based on normal classroom practice for particular needs. Teachers are expected to use their professional judgement to support learners.

11. Education other than at school (EOTAS)

In the case of a short absence (likely to last for less than 15 school days) the 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. If the absence is likely to be longer than 15 school days the school will contact the LA so that they can arrange appropriate education otherwise than at school.

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

Close liaison between home/hospital teachers and mainstream teachers underpins the provision of an effective educational programme for the learners. However, parents / carers can also act as a valuable link.

Learners with complex healthcare needs may be discharged from hospital with a written care plan. Where this happens, the written care plan will integrated into any IHP. A review of the healthcare plan will take place prior to the learners return to school.

12. School transport

School transport will be provided in line with the authority's Home to School Transport Policy under the *Learner Travel: Statutory Provision and Operational Guidance* (2014) document.

13. Reviewing policies, arrangements and procedures

This policy and associated procedures will be reviewed by the governing body annually or more frequently as appropriate depending on LA and Welsh government guidance and circulars.

IHPs may require more frequent reviews depending on the healthcare needs of the pupil. Reviews of IHPs will be organised by the school but will also involve all key stakeholders including, where appropriate, the learner, parents / carers, education and health professionals and other relevant bodies.

14. Insurance arrangements

The Governing body is responsible for ensuring:

i. An appropriate level of insurance is in place to cover activities in supporting learners with healthcare needs.
ii. The level of insurance should appropriately reflect the level of risk.
iii. Additional cover may need to be arranged for some activities, e.g. off-site activities for learners with particular needs.

The local authority ensures an appropriate level of insurance is in place to reflect the level of general risk, but schools should check with the insurance team if an activity requires additional cover. This policy has also been submitted to the local authority's insurers to ensure there is sufficient cover of the policy contents.

15. Complaints procedure

If the learner or parent is not satisfied with health care arrangements at our school they are entitled to make a complaint as follows:

i. Discuss their concerns with the class teacher / form tutor in the first instance, with whom any issues should be addressed.
ii. If this does not resolve the problem, the problem should be brought to a member of the leadership team, who will, where necessary, bring concerns to the attention of the head teacher.
iii. In the unlikely event of this not resolving the issue, the parent can make a formal complaint using the school's complaints procedure.

16. Individual healthcare plans (IHPs)

IHPs set out what support is required by a learner, however, not all learners with healthcare needs require an IHP. 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. Appendix 2 outlines the process for identifying whether an IHP is needed.

The head teacher is responsible for ensuring appropriate individual healthcare plans and procedures for developing these are in place where these are needed.

A copy of all IHPs will be sent to Senior Specialist Teacher, Cockett House, Cockett Road, SA2 0FJ.

An exemplar IHP proforma is provided in Appendix 3.

17. Unacceptable practice

The school and governing body agree with the unacceptable practice as set out in the Welsh government guidance document (*Supporting learners with healthcare needs,* 215/2017*).* Unacceptable practice is set out in Appendix 4.

Staff will be made aware of unacceptable practice through information on noticeboards and team briefings and where necessary will be provided with appropriate training and/or supervision. All staff will have unacceptable practice circulated to them as a news briefing.

Appendix 1

Contact details for Health Care Plans and school staff training issues:

- **Asthma** - Respiratory nurse may be contacted via Paediatric Outpatients 01792 285248
- **Allergy/Anaphylaxis information (other than Epipen training) - at MDT meeting** - to arrange contact Singleton Hospital 01792 205666
- **Epipen training** via School nurse allocated to the school. For any further queries contact Swansea School Nurse Team manager - 01792 516588 / 07908371735
- **Community Child Health** 01792 517817
- **Diabetes** –Specialist nurses – 07814254485
  07980 864288
- **Endocrinology/Diabetes** – 07817 497696
- **Dietetics Department** – 01792 516565
- **Epilepsy** – Epilepsy Nurse - 07817 771743
- **Feeding and swallowing advice / dysphagia** – Speech and Language Therapist 01792 517863
- **Feeding Tubes** – Nutrition nurse 07800 963632
- **Palliative care** – Specialist nurse - 07773 281621
- **Oncology** – Specialist nurses – 02920746377
  02920716293

Appendix 2

Individual Health Care Plans (IHPs)

Identify learners with healthcare needs

- Learner is identified from enrolment form or other route.
- Parent or learner informs 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 education setting 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 headteacher 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 setting 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.

Roles and responsibilities in the creation and management of IHPs

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:

i. the learner
ii. the parents
iii. input or information from previous school setting
iv. appropriate healthcare professionals
v. social care professionals
vi. the headteacher and/or delegated responsible individual for healthcare needs across the setting
vii. teachers and support staff, including catering staff
viii. 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:

i. details of the healthcare need and a description of symptoms
ii. specific requirements such as dietary requirements, pre-activity precautions (e.g. before physical education classes)
iii. medication requirements, e.g. dosage, side effects, storage requirements, arrangements for administration
iv. 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
v. actions required
vi. emergency protocols and contact details
vii. the role the education setting can play, e.g. a list of things to be aware of
viii. review dates and review triggers
ix. roles of particular staff, e.g. a contact point for parents, staff responsible for administering/supervising medication, and arrangements for cover in their absence
x. consent/privacy/sensitive information-sharing issues
xi. staff training needs, such as with regard to healthcare administration, aids and adaptive technologies
xii. record keeping – how it will be done, and what information is communicated to others

xiii. 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 school. Many third sector organisations have produced condition-specific template IHPs that could be used.

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 school, with specialist services (if required), assess the risks to the learner's education, health and social well-being.

Where a learner has an ALN the IHP should be linked or attached to any individual education plan.

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 school. 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

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.

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.

Appendix 3

Proforma
Health Care Plan for a Pupil with Medical Needs

Name:

Address:

Date of Birth:

Name of School:

Class/Form:

Medical Condition:

Date plan drawn up:

Review date:

CONTACT INFORMATION

Family Contact 1

Name:

Phone No:

(work):

(home):

(mobile):

Relationship:

Family Contact 2

Name:

Phone No:

(work):

(home):

(mobile):

Relationship:

Family Contact 3

Name:

Phone No:

(work):

(home):

(mobile):

Relationship:

GP

Name:

Phone No:

<u>Clinic/Hospital Contact</u>

Name:

Phone No:

Describe medical condition and give details of pupil's individual symptoms:

Daily care requirements (e.g. before sport/at lunchtime):

Describe what constitutes an emergency for the pupil, and the action to be taken if this occurs:

Follow up care:

Who is responsible in an emergency (State if different on off-site activities)

Signed:

Health Care Professional…… Date…….

Parent/carer…… Date…….

Head teacher ……. Date……

ALNCO …….. Date……

I consent to the Healthcare Plan being copied to Senior Specialist Teacher – Cockett House, Ty Cwm, Cockett Road, Cockett, Swansea, SA2 OFJ and stored digitally.

Signed:

Parent / Carer…… Date…….

For children and young people with Diabetes the national Diabetes care plan should be appended to the IHP.

Contacting the Emergency Services

Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information

1. **Your telephone number** i.e. 01792 872403 or mobile number if a mobile is being used

2. **Your location** i.e. Ysgol Gyfun Gwyr, Talbot St, Gowerton, Swansea

3. **State the post code** i.e. SA4 3DB

4. **Give exact location in the school/setting-**e.g. I am on the Games field which is directly behind the main school buildings

5. **Give your name**

6. **Give name of child and a brief description of the child's symptoms**

7. **Inform Ambulance Control of the best entrance and state that the crew will be met and taken to……**

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.**

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

Appendix 4

Unacceptable Practice

It is not acceptable practice to:

i. Prevent learners from attending school due to their healthcare needs, unless their attending would be likely to cause harm to the learner or others.
ii. Prevent learners from easily accessing their inhalers or other medication and prevent them from taking their medication when and where necessary.
iii. Assume every learner with the same condition requires the same treatment.
iv. Ignore the views of the learner or their parents / carers or ignore healthcare evidence or opinion (although these views may be queried with additional opinions sought promptly).
v. 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.
vi. 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.
vii. 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.
viii. 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.
ix. Prevent learners from drinking, eating or taking toilet or other breaks whenever needed in order to manage their healthcare needs effectively.
x. Require parents / carers, 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.
xi. Expect or cause a parent to give up work or other commitments because the school is failing to support a learner's healthcare needs.
xii. 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 need.
xiii. 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.

(Reviewed: July 2025)