

PORTFIELD SCHOOL & SATELLITE CENTRES



POLICY DOCUMENT FOR HEALTHCARE NEEDS



Tel: 01437 762701
Fax: 01437 771444

Email: admin.portfield@pembrokeshire.gov.uk



Contact Details:

Healthcare Needs Policy for	Portfield School
Date of Issue:	
Review Date:	
School Address and Postcode:	Portfield School Portfield Haverfordwest Pembrokeshire SA61 1BS
School Telephone Number:	01437 762701
School Email Address:	Admin.Portfield@pembrokeshire.gov.uk
Website Address for this policy	https://portfield-special-school.j2bloggy.com/
Name of person responsible for maintaining this policy	Mr Paul Hughes, Headteacher

Portfield School adopts the LEA guidance on

Administration of Medicines Policy

This policy will be reviewed annually.

Signed (Chair of Governors)

Signed (Headteacher)

Date

Reviewed

Reviewed

Reviewed

Portfield School Mission Statement

Working together Learning together Achieving together

At Portfield School we strive to

- Create a happy, safe, supportive and stimulating learning environment
- Value everyone
- Develop everyone's personal, social, emotional health and wellbeing
- Promote relevant academic and vocational skills
- Meet individual needs through an imaginative and flexible approach
- Enable all learners to achieve their full potential

UNCRC United Nations Convention on the Rights of the Child

- Portfield School places the values and principles of the UNCRC at the heart of all policies and practices
- Portfield School is a Rights Respecting School

Key Principles

In developing this policy, Portfield school has considered the following principles outlined in the Welsh Government statutory guidance 'Supporting learners with healthcare needs' (March 2017):

- Staff should understand and work within the principles of inclusivity.
- Lessons and activities will be designed in a way which allows those with healthcare needs to participate fully.
- Staff should understand their role in supporting learners with healthcare needs and appropriate training should be provided.
- Staff should feel confident they know what to do in a healthcare emergency.
- Staff should be aware of the needs of their learners through the appropriate and lawful sharing of the individual learner's healthcare needs.
- Whenever appropriate, learners should be encouraged and supported to take responsibility for the management of their own healthcare needs.

School's Legal Requirements

Governing bodies must have regard to the statutory guidance 'Supporting learners with healthcare needs' (March 2017) when carrying out their duties in promoting the welfare of children who are learners at the school, including meeting their healthcare needs. The guidance also applies to activities taking place off-site as part of normal educational activities.

Section 21(5) of the Education Act 2002 places a duty on governing bodies to promote the well-being of learners at the school so far as related to the matters 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 (Education Act 2002), consideration must also be given to whether the learner is defined as disabled under the Equality Act 2010. Governing bodies must comply with the duties of this Act, including those within

an education context. For example, reasonable adjustments for disabled learners must be made and disabled learners must not be discriminated against when making admission arrangements. In drafting the statutory guidance and advice, the Welsh Ministers have had regard to the United Nations Convention on the Rights of the Child (UNCRC).

Governing bodies must have regard for the Data Protection Act 1998. This regulates the processing of personal data, which includes the holding and disclosure of it. If learners are prescribed controlled drugs, the Misuse of Drugs Act 1971 will also be applicable.

Roles and Responsibilities

The **Governing Body** should oversee the development and implementation of arrangements for learners with healthcare needs. This includes:

- complying with applicable statutory duties, including those under the Equality Act 2010
- having a statutory duty to promote the well-being of learners, e.g. by providing learners access to information and material aimed at promoting spiritual and moral well-being and physical and mental health (Article 17 of the UNCRC)
- considering how they can support learners to develop the skills, knowledge and emotional resilience required to uphold their rights, and the rights of others
- ensuring the roles and responsibilities of all those involved in the arrangements to support the healthcare needs of learners are clear and understood by all those involved, including any appropriate delegation of responsibilities or tasks to a headteacher, member of staff or professional as appropriate
- working collaboratively with parents and other professionals to develop healthcare arrangements to meet the best interests of the learner
- developing and implementing effective arrangements to support learners with healthcare needs. This should include, where appropriate, Individual Healthcare Plans for particular learners
- ensuring arrangements are in place for the development, monitoring and review of the healthcare needs arrangements
- ensuring the arrangements are in line with other relevant policies and procedures, such as health and safety, first aid, risk assessments, the Data Protection Act 1998, safeguarding measures and emergency procedures
- ensuring robust systems are in place for dealing with healthcare emergencies and critical incidents, for both on- and off-site activities, including access to emergency medication such as inhalers or adrenaline pens
- ensuring staff with responsibility for supporting learners with healthcare needs are appropriately trained
- ensuring appropriate insurance cover is in place, any conditions are complied with and staff are clear on what this means for them when supporting learners
- having an infection prevention policy that fully reflects the procedures laid out in current guidance as detailed at www.wales.nhs.uk/sitesplus/888/home

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

- 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
- ensuring the arrangements in place to meet a learner's healthcare needs are fully understood by all parties involved and acted upon, and such actions maintained. The day-to-day management of a learner's healthcare needs may be delegated to another member of staff but the headteacher will directly supervise this arrangement
- ensuring the support put in place focuses on and meets the individual learner's needs
- extending awareness of healthcare needs across the education setting in line with the learner's right to privacy. This may include support, catering and supply staff, governors, parents and other learners
- when appropriate, appointing a named member of staff who will be responsible for learners with healthcare needs, liaising with parents, learners, the local authority and others involved in the learner's care
- ensuring a sufficient number of trained staff are available to implement the arrangements set out in all Individual Healthcare Plans, including contingency plans for emergency situations and staff absence
- having the overall responsibility for the development of Individual Healthcare Plans
- ensuring that learners have an appropriate and dignified environment to carry out their healthcare needs, e.g. private toilet areas for catheterisation
- 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
- ensuring all learners with healthcare needs are appropriately linked with the school nurse service
- ensuring when a learner participates in a work experience placement or similar, that appropriate healthcare support has been agreed and put in place
- providing annual reports to the governing body on the effectiveness of the arrangements in place to meet the healthcare needs of learners
- ensuring all learners with healthcare needs are not excluded from activities they would normally be entitled to take part in without a clear evidence-based reason
- notifying the local authority when a learner is likely to be away from the education setting for more than three weeks due to their healthcare needs
- being mindful of the Social Services and Well-being (Wales) Act 2014 by ensuring that assistance to learners is provided using a holistic approach

Any **staff member** may be asked to provide support to learners with healthcare needs, including assisting or supervising the administration of medicines. This includes:

- Teachers, support staff and other members of staff
- Designated members of staff who support learners with healthcare needs
- School first aiders

However, this role is entirely voluntary and staff members will receive sufficient and suitable training and achieve the necessary level of competence before they take on the responsibility. The administration and supervision of medication will form part of their contract, terms and conditions or a mutually agreed job plan. The school will ensure that the staff involved:

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

- keep parents informed of how the healthcare need is affecting the learner in school. This may include reporting any deterioration, concerns or changes to learner or staff routines.

Parents/carers should be actively involved in the planning of support and management of healthcare needs. They should:

- receive updates regarding healthcare issues/changes that occur within the school
- be involved in the creation, development and review of the Individual Healthcare Plan (if any). They should be fully involved in discussions about how the learner's healthcare needs will be met in the education setting, and contribute to the development of, and compliance with, their Individual Healthcare Plan
- 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 will be encouraged and enabled to manage their own healthcare needs
- inform the school of any changes such as type of medication, dosage or method of administration
- provide relevant in-date medicines, correctly labelled, with written dosage and administration instructions
- ensure a nominated adult is contactable at all times and all necessary forms are completed and signed
- inform the school if their child has/had an infectious disease or condition while in attendance.

As with parents/carers, **learners** should be actively involved in the planning of support and management of healthcare needs. In addition to the above, the learner will, where possible:

- inform their parent/carer or staff member if they feel unwell
- take care when carrying medicines to and from school, and not share them with others
- take part in discussions around sharing/confidentiality of personal information.

The school will work with the **local authority** to ensure that the legal duties and requirements are met in regard to learners with healthcare needs. This would include making reasonable adjustments for learners with disabilities, promoting co-operation between various bodies or professionals, ensuring learners with healthcare needs receive a suitable education, and ensuring that support specified within an Individual Healthcare Plan can be delivered effectively.

The school will work with **the NHS Wales school health nursing service** who may be able to offer advice relating to:

- the development of Individual Healthcare Plans

- the identification of the training required for the school to successfully implement Individual Healthcare Plans
- supporting staff to implement a learner's Individual Healthcare Plan through liaison with other healthcare, social care and third sector professionals.

Health advice and support will also be accessed through other specialist health professionals including GPs, paediatricians, speech and language therapists, occupational therapists, physiotherapists, dieticians and diabetes specialist nurses.

Creating an Accessible Environment

Physical access to school buildings – In compliance with the Equality Act 2010, the school will prepare and maintain an accessibility plan which will relate to a prescribed period, be consulted upon, available for inspection and kept under review.

Reasonable adjustments-auxiliary aids or services – In compliance with the Equality Act 2010, the school will make 'reasonable adjustments' for learners who are disabled as defined by the Act. Where appropriate, advice will be taken about the use of auxiliary aids or services. The school uses a multi-agency approach to provide a Person Centred approach, advice is obtained from OT, Physio and SALT.

Day trips and residential visits – The Governing Body will ensure the school actively supports all learners with healthcare needs to participate in trips and visits. They will ensure that the school makes reasonable adjustments to trips and residential visits ensuring full participation from all learners. Staff will be made 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. Consideration will be given to how to accommodate the sharing of personal information with third parties if necessary for off-site activities (in compliance with the Data Protection Act 1998 and in respecting the learner's right to privacy). This may include information about the healthcare needs of learners, what to do in an emergency and any additional support, medication or equipment needed.

- An Educational Visits Form must be completed on-line using Evolve prior to the commencement of any school visit outside of the County boundary for a period of more than 24 hours.
- A school consent form from the child's parent or guardian must be received prior to participation in any school trip. Any medical problems must be highlighted by the parent/guardian including any day or night medication requirements.
- Where insurance cover is obtained, medical conditions must be disclosed, otherwise insurance cover may be refused.
- Named persons must be identified to supervise the storage and administration of medication. This will be done on the online form.
- Wherever possible, children should carry their own inhalers for the treatment of asthma, but it is important that the named person is aware of this.
- Records of medicines administered to be taken on visit.

- Medication usually given at home needs to be clearly labelled with the child's name, route dosage, frequency, expiry date and the name of the medication, when it is sent in for use on overnight visits.

Social interactions – The Governing Body will ensure that the involvement of learners with healthcare needs is adequately considered in structured and unstructured social activities, such as breaktimes, breakfast club, school productions, after-hours clubs and residential visits. Staff will be made aware of the social barriers learners with healthcare needs may experience and how this can lead to bullying and social exclusion.

Exercise and physical activity – The school understands the importance of all learners taking part in physical activities and will make appropriate adjustments to sports and other activities to make them accessible to all learners, including after-hours clubs and team sports. If necessary, guidance will be sought when considering how participation in sporting or other activities may affect learners with healthcare needs. The school will endeavour to avoid having separate 'special provisions' for particular activities and there will be an emphasis on activities made accessible for all. Where this might not be possible, advice will be requested from healthcare or physical education professionals and the learner. Staff will also be made aware that it may be appropriate for some learners with healthcare needs to have medication or food with them during physical activity; such learners will be encouraged to take the medication or food when needed.

Food management – Consideration will be given to dietary needs of learners and menus will be given to parents and learners, with complete lists of ingredients and nutritional information. For learners where a high calorific intake is required, there will always be access to glucose-rich food and drinks provided by parents/guardians. Food provided for trips will reflect the dietary and treatment needs of the learners taking part. Learners needing to eat or drink as part of their condition will not be excluded from the classroom.

Undertaking risk assessments – Staff should be advised when a risk assessment is in place and when one may be required. The assessments will start from the premise of inclusion and have built into them a process of seeking adjustments or alternative activities rather than separate provision.

Sharing Information

The Governing Body will ensure healthcare needs arrangements, both wider school policies and Individual Healthcare Plans, are clearly communicated to staff, parents and other key stakeholders to ensure full implementation. All information will be kept up to date and all information-sharing techniques such as staff noticeboards and school intranet will be agreed by the learner as appropriate and parent in advance of being used, to protect confidentiality.

Information relating to learners with medical needs will be easily accessible for **teachers, supply teachers and support staff (this may include catering staff and relevant contractors)**. Following appropriate consent, dietary information will be displayed on a noticeboard in the dining area. A list of first aiders and emergency procedures eg choking are on display in the communal areas of the school eg office, staffroom and dining hall. Detailed healthcare plans will be held within the school's secure intranet area and staff meetings will be used to help ensure staff are aware of the healthcare needs of learners they have or may have contact with. Copies of healthcare plans are kept in a red file in each classroom along with relevant risk assessments. Copies of healthcare plans accompany pupils on activities and are carried in a first aid box.

Parents and learners will be active partners, and to achieve this the school will make parents fully aware of the care their children receive. Parents and learners will also be advised of their own rights and responsibilities. To help achieve this school will:

- make healthcare needs policies easily available and accessible, online and in hard copy
- provide the learner/parents with a copy of their information sharing policy, stating the type of bodies and individuals with whom the learner's medical information may be shared
- ask parents to sign a consent form which clearly details the bodies, individuals and methods through which their learner's medical information will be shared. The learner will be involved in any decision making as appropriate. The school will maintain a list of what information has been shared with whom and why. The learner/parent will be able to view this on request
- include school councils, 'healthy schools' and other learner groups in the development of the school's healthcare needs arrangements, where appropriate
- consider how friendship groups and peers may be able to assist learners, e.g. they could be taught the triggers or signs of issues for a learner, know what to do in an emergency and who to ask for help. If this is being considered, the school will discuss with the learner and parents first to decide if information can be shared

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

The following documentation should be collected and maintained for the learner, 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

Samples of these forms/templates are included in Appendix 1. New records will be completed when there are changes to medication or dosage. The school will clearly mark old documents as being no longer relevant and these will be stored in line with the Information Retention Policy and the Data Protection Act 1998.

*Document 5, *Record of medicines administered*, will also detail if the learner has refused to take their medication.

Storage, Access and the Administration of Medication and Devices

Supply of medication or devices – The school should not store surplus medication and parents will be asked to provide appropriate supplies. These should be in their original container, labelled with the name of the learner, medicine name, dosage and frequency, and expiry date. The school will 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).

Where non-prescribed medicine is held by the school, e.g. liquid paracetamol, it should:

- be in date
- have its contents correctly and clearly labelled
- be labelled with the learner's name
- be accompanied with written instructions for administration, dosage and storage – this can be from the parent
- be in its original container/packaging.

Storage, access and disposal – While all medicines should be stored safely, the type and use of the medication will determine how this takes place. The learner will be told where their medication is stored and how to access it if appropriate.

Refrigeration: For medicines that need to be refrigerated, the refrigerator temperature will need to be regularly monitored to ensure it is in line with storage requirements. Food may also be stored in the refrigerator but the medicines will be kept in an airtight container and clearly labelled. There is a fridge for medication storage in the nurse's room in Upper School.

Emergency medication: Emergency medication will 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) will be readily available to learners and not locked away. Particular consideration will be given to this when outside of the school premises, e.g. on trips. If the emergency medication is a controlled drug, it will be kept as securely as possible so as to minimise the risk of unauthorised access while also allowing quick access if this might be necessary in an emergency. For example, keys will not be held personally by a member of staff. At Portfield School keys to the medicine cabinet allotted to the class are held either by the teacher or lead LSA and remain with them and the pupils at all times during the school day.

A learner who has been prescribed a controlled drug may legally have it in their possession, if they are competent to do so following a full risk assessment evaluation, and they must not pass it to another learner or other unauthorised person. Monitoring may be necessary. Where staff administer emergency medication to a learner, this will be recorded.

Non-emergency medication: All non-emergency medication will be kept in a secure place with appropriate temperature or light controls. If it is a controlled drug, additional security measures and controls will be put into place.

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

Transportation of medication: Medication is passed between home and school in labelled zipped bags and are handed from adult to adult.

Administration of Medicines

- All pupils at Portfield School who require assistance or administration of prescribed or non-prescribed medicines require written parental consent, unless Gillick competence is recorded. The administration of all medication will be recorded.
- Where medication is prescribed to be taken in frequencies which allow the daily course of medicine to be administered at home, parents should seek to do so, e.g. before and after school and in the evening. There will be instances where this is not appropriate.
- Learners under 16 will never be given aspirin or its derivatives unless prescribed to them.
- Unless there is an agreed plan for the learner to self-medicate (16 years and above or Gillick competent), all medication will be administered by a member of staff. In other cases, it may need to be supervised in accordance with the Individual Healthcare Plan.
- Medication will only be administered by suitably trained staff. The movement and location of these trained staff will take into account the location of the learners they support.
- Staff will 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 will be considered when providing intimate care. There is no requirement in law for there to be more than one person assisting and this will be agreed and reflected in the Individual Healthcare Plan and risk assessment. Practice at Portfield School is to have 2 adults present when administering medication.
- The school will follow its Intimate Care Policy unless alternative arrangements have been agreed and recorded in the learner's Individual Healthcare Plan.
- If a learner refuses their medication, staff will record this and follow the defined procedures informing parents as soon as possible. If a learner misuses any medication, their parents will be informed as soon as possible. The school will ask parents to seek healthcare advice as appropriate. If parents cannot be contacted immediately, staff will consider seeking immediate healthcare advice.
- Staff involved in the administration of medication will be made 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, 2008).
- 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 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.

- At Portfield School, for off site visits, medication and healthcare plans are carried in a clearly labelled red bag by an adult.

Emergency Procedures

The Governing Body will ensure that a policy is in place for handling emergency situations. Staff will be advised who is responsible for the policy, nominated first aiders and how to deal with common healthcare needs. In situations requiring emergency assistance, 999 will be called immediately. Staff will be advised of the location of learners' healthcare records and emergency contact details.

Where a learner has an Individual Healthcare Plan, the plan will clearly define what constitutes an emergency and explain what to do in these circumstances. Staff will be made aware of emergency symptoms and procedures.

Other learners, where appropriate, in the school will also be advised, in general terms, what to do 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 will carry a copy of the healthcare plan and medication.

Training

The Governing Body will ensure that staff who volunteer or who are contracted to support those with healthcare needs are provided with appropriate training.

When assisting learners with their healthcare needs, the school recognises that for some interventions no specialist training is required and the role of staff is to facilitate the learner to meet their own healthcare needs.

Where the Individual Healthcare Plans reflects complex needs requiring staff to have specific information and training, school will ask these services and/or the local authority to provide advice suitable for the school as well as learners and families.

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 will therefore have a basic understanding of common conditions to ensure recognition of symptoms and understand where to seek appropriate assistance.

At Portfield School the complex needs of pupils means that identified class staff are trained for the specific needs of the pupils they support, in appropriate numbers to cover any resignations or absenteeism. There is a rolling programme of refresher training and training dates are recorded and sent to the Local Authority to update their records.

Qualifications and Assessments

At Portfield School a person centred approach is used for assessment and qualifications as appropriate to the abilities of pupils involved. Teacher assessment and ongoing assessment procedures evidence pupil achievement.

School Transport

The majority of Portfield School pupils are transported by the Local Authority. Arrangements for pupils medical needs are made on an individual basis involving a multi-agency approach.

Reviewing Policies, Arrangements and Procedures

The Governing Body will ensure all policies, arrangements and procedures are reviewed regularly by the school. Individual Healthcare Plans will be reviewed as necessary. Frequency will depend on factors such as the healthcare need, changes in the condition or in medication. These reviews will involve key stakeholders including, where appropriate, the learner, parents, education and health professionals and other relevant bodies.

Insurance Arrangements

The Governing Body 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 will appropriately reflect the level of risk. Additional cover may need to be arranged for some activities, e.g. off-site activities for learners with particular needs.

Individual Healthcare Plans (IHPs)

An Individual Healthcare Plan (IHP) sets out what support is required by a learner. They do not need to be long or complicated. The Headteacher 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 the following diagram outlines the process school will follow for identifying whether an IHP is needed.

Identify learners with healthcare needs

- Learner is identified from enrolment form or other route or the parent/learner informs school or healthcare need.
- For learners new to the school, 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 school will discuss this with the parent and learner.



Establish if an IHP should be made

- The school will organise a meeting with appropriate staff, the parents, the learner and appropriate Health staff to confirm if the learner's healthcare needs require an IHP. If agreement cannot be reached, the headteacher will take the final decision and, if necessary, this can be challenged through the school's complaints procedure.



If an IHP should be made

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

The IHP will explain how the learner's needs can be met. It will be easily accessible to all who need to refer to it, while maintaining the required levels of privacy. Each plan will 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 setting or school
- 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 additional learning needs coordinator (ALNCo).

The plan will be tailored to each individual learner but, in general, 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 address these effects
- actions required
- emergency procedures and contact details
- the role the school 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, 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. A lead person will be agreed, but responsibility for ensuring it is finalised and implemented rests with school.

The Governing Body will ensure the plans are reviewed at least annually or more frequently should there be new evidence that the needs of the learner have changed. The plan will 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 Additional Learning Needs the IHP will be linked or attached to any individual education/development plan or statement.

Unacceptable Practice

As detailed in Welsh Government Guidance, it is not acceptable practice to:

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

- ask a learner to leave the classroom or activity if they need to administer non-personal medication or consume food in line with their health needs
- prevent or create unnecessary barriers to a learner's participation in any aspect of their education, including trips, e.g. by requiring a parent to accompany the learner.

All staff are provided with a copy of Portfield School's Healthcare policy and are asked to sign they have read it. It is also accessible to staff and parents on the school website. New staff are made aware of the policy during their induction process.

TEMPLATES

Form 1	Contacting emergency services
Form 2	Parental agreement and Headteacher agreement for education setting to administer medicine
Form 3	Record of medicine stored for and administered to an individual learner
Form 4	Record of medicines administered to all learners – by date
Form 5	Request for learner to carry/administer their own medicine
Form 6	Staff training record – administration of medicines
Form 7	Medication/Healthcare Incident Report

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: <i>(Insert your address)</i>
3	State that the postcode is: <i>(Insert your postcode)</i>
4	Give the exact location in the education setting <i>(Insert a description)</i>
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 <i>(Name location)</i>
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.

PORTFIELD SCHOOL HEALTHCARE PLAN FOR A PUPIL WITH SPECIAL NEEDS AND MEDICAL NEEDS			
Full Name:			
Address:			
Date of Birth:			
Date Completed:		Date to be reviewed:	
Describe condition and give details of pupil's individual symptoms:			
Family Contact 1		Family Contact 2	
Name:		Name:	
Tel:		Tel:	
Relationship:		Relationship:	
School Doctor:		GP Contact:	
Tel No:		Tel No:	
Describe what constitutes an emergency for the pupil, the action to take if it occurs and follow up care:			
(in case of seizure) Call an ambulance and inform parents if breathing is shallow or abnormal.			
Care of child during seizure:			
<ul style="list-style-type: none"> • Make sure child is safe • Give reassurance • Open tight clothing • Support head and maintain airway • Note how long seizure lasts and what it looked like 		<ul style="list-style-type: none"> • Don't move the person unless in danger • Don't restrict movements • Don't put anything in their mouth • Don't leave alone to get help • Don't give anything to eat or drink until fully recovered 	
Seizure in wheelchair - support and ensure clear airways and adequate breathing. If <u>not</u> in wheelchair - when seizure has stopped, lay in recovery position, ensure clear airways and adequate breathing.			
Who is responsible in an emergency: (state if different on off-site activities)			
Headteacher or Class Teacher/Senior designated member of staff when off site.			

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

Mobility (wh/chair, physio etc.) -
 Feeding/drinking -
 Dressing/undressing -
 Toileting/nappies -
 Glasses if visually impaired -
 Behaviour -
 Speech & language -
 Awareness of danger -

Consents - I have given consent for:****Delete any which do not apply***

- Staff to assist with intimate care routines.
- Application of antiseptic wipes and plasters as a basic first aid measure.
- Application of Factor 30 sun cream for sensitive skin as necessary.
- Medical staff to examine my child if a medical problem arises at school.
- This information to be shared with Transport Department staff.

MEDICATION TAKEN AT HOME BUT NOT REQUIRED IN SCHOOL

MEDICATION TO BE GIVEN IN SCHOOL

The school will not give your child medicine unless you complete and sign this plan and the Headteacher has agreed that staff can administer the medication.

<p>All medication must be in its original container, clearly marked with prescribers instructions (i.e. dose, frequency and route) including child's name and name of medication.</p>	
<p>Special Precautions / Side Effects</p>	

**A record will be kept of all medicines administered in school.
 In all cases medication must be handed from escort to teacher and teacher to escort.**

**CONFIRMATION OF THE PARENT'S AGREEMENT FOR
SCHOOL TO ADMINISTER MEDICATION**

I agree that my child will receive medication as described in this plan.
Medication will be given by a member of staff who has received training in the administration of medication.
This arrangement will continue until I advise the school in writing.
I agree to provide medication and monitor expiry dates.

Parent /Guardian

Signature

Date

THIS PLAN HAS BEEN AGREED BY:-

Parents understand they must notify the school of any changes to this plan in writing.

School Doctor

Signature

Date

Parent /Guardian

Signature

Date

Headteacher MR PAUL HUGHES

Signature

Date

This form should be available for review at every medical review of the patient. Copies will be sent to: School Doctor, Parents, Pupil File, (School Transport / Holly House if appropriate).

**Please see relevant healthcare policies on the school website at:-
<https://portfield-special-school.j2bloggy.com>**

DESCRIPTION OF SEIZURES

Name of Pupil

D.O.B

How often do seizures occur?

What can trigger a seizure or are there any signs to watch for that may indicate a seizure might occur?

Please describe what the seizure is usually like.
(If there is more than one type of seizure, please describe each individually).

How long do seizures usually last?
(State how long each type of seizure lasts if there is more than one type).

What is the child like after the seizure? e.g. sleepy

Other Useful Information

Buccolam (Buccal Midazolam) / Rectal Diazepam Treatment Plan

Call an ambulance whenever Buccolam (Buccal Midazolam)/ Rectal Diazepam is administered. (This is a condition of insurance cover for the school and this procedure will be followed).
 Buccolam (Buccal Midazolam)/ Rectal Diazepam must be administered by a trained member of staff with a witness (another member of staff)

1. When should Buccolam (Buccal Midazolam)/ Rectal Diazepam be administered? (note here should include whether it is after a certain length of time or number of seizures)

2. Initial dosage: how much Buccolam (Buccal Midazolam)/ Rectal Diazepam is given initially? (note recommended number of milligrams for this person)

3. What is the usual reaction(s) to Buccolam (Buccal Midazolam)/ Rectal Diazepam?

4. If there are difficulties in the administration to Buccolam (Buccal Midazolam)/ Rectal Diazepam e.g. vomiting / constipation / diarrhoea, what action should be taken?

5. Can a second dose of Buccolam (Buccal Midazolam)/ Rectal Diazepam be given? How long after first dose can a second dose be given?

6. How much Buccolam (Buccal Midazolam)/ Rectal Diazepam is given as a second dose? (state the number of milligrams to be given and how many times this can be done)

7. Under what circumstances should Buccolam (Buccal Midazolam)/ Rectal Diazepam not be used e.g. oral diazepam already administered within the last minutes

Insurance Cover in Place?	YES Pembrokeshire County Council
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All occasions when Buccolam (Buccal Midazolam)/ Rectal Diazepam is administered :-

- Call an ambulance
- Inform Parents
- Record on Administration of Medicines form

PLAN FOR CHILD WITH SEVERE ASTHMA ATTACK

Guidelines to follow in an asthma attack, suitable for adults and children:

1. Take 1-2 puffs of reliever inhaler (usually blue) immediately.
 2. Sit child down and encourage slow and steady breaths.
 3. If child does not begin to feel better, take 2 puffs of reliever inhaler (1 puff at a time) every 2 minutes up to 10 puffs.
- Call 999 if no improvement after 10 minutes or child is too breathless to speak/becomes exhausted/looks blue or if you are worried at any time.
 - If ambulance does not arrive within 10 minutes and child is still feeling unwell, repeat step 3 above.
 - If symptoms improve and you do not need to call 999, the child still needs to see a doctor or asthma nurse within 24 hours.

PLAN FOR CHILD WITH SEVERE ALLERGY

Name of Pupil		D.O.B	
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This child is allergic to:

All foods must be checked carefully to ensure the absence of these foods. Even a tiny amount may cause a severe allergic reaction (ANAPHYLAXIS)

Symptoms of an allergic reaction include:

- Itchiness at contact points (lips, hands)
- Lumpy red rash
- Swelling of face, lips and tongue
- Distressed state
- Vomiting/tummy pain

- **This child:**

Symptoms of anaphylaxis include:

- Difficulty breathing
- Sudden weakness
- Collapse
- Loss of consciousness

EMERGENCY PROCEDURE FOR ALLERGIC REACTION

One member of staff:

- Report child's condition to Headteacher/Teacher in charge
- If any symptoms of anaphylaxis or severe allergic reaction CALL AN AMBULANCE
- Inform the operator that you have a case of ANAPHYLAXIS
- Inform parents

Another member of staff:

- Assess severity of reaction.
- If child has itchiness, lumpy red rash, swelling of face, lips and tongue, vomiting:
- Give antihistamine
Name of medicine:
Dose and method:
- If child has difficulty breathing, drowsiness, floppiness, is very pale, collapse, severe swelling, unconscious: Give EPIPEN injection as trained.
- If child has reliever inhaler for asthma, and has breathing difficulty:
- Give reliever inhaler
Name of inhaler:
Dose and method:
- If second does of EPIPEN is prescribed, and child's condition has not improved after 10 minutes: Give second dose of EPIPEN as trained.
- First aid procedures and await ambulance.

Instructions for giving Epipen Injection

- Follow the protocol for the child affected.
- Remove Grey Cap.
- Push the black end of the Epipen firmly into the child's thigh midway between knee and hip, at right angles to the leg, until you feel/hear a click (you can inject straight through clothing).
- Hold the Epipen in place for ten seconds.
- Remove the Epipen, and massage the leg for 30 seconds.
- Await ambulance. Give used Epipen to ambulance personnel.
- In cases of doubt it is better to give Epipen than to not give it. It will not do the child any harm provided an ambulance has been called for further treatment.

Protocol and medication to be kept in:

New members of staff to be informed by:

Emergency procedure and medication to be taken when child goes on trips, swimming etc.

PLAN FOR CHILD WITH SHUNT/VENTRICULOSTOMY

Signs of acute shunt malfunction or blockage:

- vomiting or nausea
- headache and dizziness
- abdominal pain
- photophobia (sensitivity to light) / other visual disturbances i.e. unequal pupils, droopy eyelids, eyes crossed
- drowsiness
- seizures (fits)
- high temperature
- decline in academic performance

NOTE: Shunt malfunction may present as a chronic condition (i.e. over some time - weeks or even months). If a child with hydrocephalus presents with: fatigue general malaise visuo-perceptual problems being just 'not right', PARENTS NEED TO BE INFORMED. Do not assume that someone else will tell them or that they will necessarily notice "vague" symptoms. It is especially important that children with hydrocephalus have access to clear fluids, particularly if the weather is hot, the classroom is overheated or after exercise. Clear fluids can include water or squash, but **not Coka Cola or any drink containing caffeine** as these may change the child's normal behaviour.

Action to take in case of shunt malfunction or blockage:

1. Inform parents
2. If parents are unavailable Call 999.
3. It may be necessary for referral to a neurosurgical unit. In our area, the practice is for the child to be assessed at a local hospital.
4. IF A CHILD DEVELOPS SYMPTOMS OF A SHUNT BLOCKAGE (OR MALFUNCTION OF 3RD VENTRICULOSTOMY), CONTACT THEIR SPECIALIST NEUROSURGICAL UNIT **WITHIN 4 HOURS OF ACUTE SYMPTOMS DEVELOPING**, FOR ADVICE.

**PORTFIELD SCHOOL HEALTHCARE PLAN
FOR A PUPIL WITH SPECIAL NEEDS**

Full Name:			
Address:			
Date of Birth:			
Date Completed:		Date to be reviewed:	
Describe condition and give details of symptoms:			
Family Contact 1		Family Contact 2	
Name:		Name:	
Tel:		Tel:	
Relationship:		Relationship:	
School Doctor:		GP Contact:	
Tel No:		Tel No:	
Describe what constitutes an emergency for the pupil, the action to take if it occurs and follow up care:			
None specific.			
Who is responsible in an emergency: (state if different on off-site activities)			
Headteacher or Class Teacher/Senior designated member of staff when off site.			
Daily care requirements: (e.g. before sports / at lunchtime)			
Mobility (wh/chair, physio etc.) - Feeding/drinking - Dressing/undressing - Toileting/nappies - Glasses if visually impaired - Behaviour - Speech & language - Awareness of danger -			

Consents - I have given consent for:	<i>*Delete any which do not apply</i>
<ul style="list-style-type: none"> • Staff to assist with intimate care routines. • Application of antiseptic wipes and plasters as a basic first aid measure. • Application of Factor 30 sun cream for sensitive skin as necessary. • Medical staff to examine my child if a medical problem arises at school. • This information to be shared with Transport Department staff. 	

THIS PLAN HAS BEEN AGREED BY:-
Parents understand they must notify the school of any changes to this plan in writing.

Parent /Guardian MR/MRS	Signature	Date
Headteacher MR PAUL HUGHES	Signature	Date

This form should be available for review at every medical review of the patient. Copies will be sent to: School Doctor, Parents, Pupil File, (Holly House if appropriate).

If your child takes any medication on a regular basis, please fill in a MEDICAL NEEDS PLAN.

**Please see relevant healthcare policies on the school website at:-
<https://portfield-special-school.j2bloggy.com>**

Request for learner to carry/administer their own medicine

This form must be completed by the parent/carer.

If staff have any concerns discuss this request with healthcare professionals.

Name of setting	
Learner's name	
Group/class/form	
Address	
Name of medicine	
Carry and administer	Yes / No
Administer from stored location	Yes / No
Procedures to be taken in an emergency	

Contact information

Name	
Daytime telephone number	
Relationship to learner	

I would like my child to administer and / or carry their medicine.

Signed parent / carer	
Date	

I agree to administer and / or carry my medicine. If I refuse to administer my medication as agreed, then this agreement will be reviewed.

Learner's signature	
Date	

Staff training record – administration of medicines
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Please ensure that the Education Workforce Council registration is updated accordingly.

Name of setting	
Name	
Type of training received	
Date of training completed	/ /
Training provided by	
Profession and title	

I confirm that [name of member of staff] has received the training detailed above and is competent to carry out any necessary treatment.

I recommend that the training is updated (*please state how often*)

Trainer's signature	
Date	

I confirm that I have received the training detailed above.

Staff signature	
Date	
Suggested review date	

Medication/healthcare incident report

Learner's name: _____

Home address: _____

Telephone number: _____

Date of incident: _____ Time of incident: _____

Correct medication and dosage	
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Medication normally administered by:

Learner	
Learner with staff supervision	
Nurse/school staff member	

Type of error:

Dose administered 30 minutes after scheduled time	
Omission	
Wrong dose	
Additional dose	
Wrong learner	
Dose given without permission on file	
Dietary	
Dose administered by unauthorised person	

Description of incident	
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Action taken:

Parent notified	<i>Name</i>	<i>Date</i>	<i>Time</i>
School nurse notified	<i>Name</i>	<i>Date</i>	<i>Time</i>
Physician notified	<i>Name</i>	<i>Date</i>	<i>Time</i>
Poison control notified			
Learner taken home			
Learner sent to hospital			
Other	<i>Please give details</i>		

Any further information to be noted	
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