



Policy: Healthcare Needs Policy for *Abernant Primary School*

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UNCRC States:

All children with disabilities have the right to the best possible life (article 23, UNCRC).

All children have the right to food, clothing, and a safe place to live (article 27, UNCRC).

Children have the right to the best health care possible, clean water to drink, healthy food and a clean and safe environment to live in. All adults and children should have information about how to stay safe and healthy. (article 24, UNCRC)

1. Key principles (page 2 & 6) –

In Abernant Primary School we believe

- Staff should understand and work within the principles of inclusivity.
- Lessons and activities should 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.

2. School's legal requirements (pages 2-3 & 28-31) -

Section 175 of the Education Act 2002 places a duty on local authorities and governing bodies to make arrangements to ensure their functions are exercised with a view to safeguarding and promoting the welfare of children in school or another place of learning. This includes supporting children with healthcare needs.

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.

3. Roles and responsibilities - outline the roles and responsibilities of the following:

3a). School

- governing body/management committee;

a. Governing bodies

Governing bodies oversee the development and implementation of arrangements, which should include:

- complying with applicable statutory duties, including those under the Equality Act 2010 (e.g. the duty to make reasonable adjustments in respect of learners with healthcare needs if they are disabled, as outlined above)
- having a statutory duty to promote the well-being of learners. Schools should give consideration to how they can meet these needs, including providing learners access to information and material aimed at promoting spiritual and moral well-being and physical and mental health (Article 17 of the UNCRC)
- considering how they can support learners to develop the skills, knowledge and emotional resilience required to uphold their rights, and the rights of others
- ensuring the roles and responsibilities of all those involved in the arrangements to support the healthcare needs of learners are clear and understood by all those involved, including any appropriate delegation of responsibilities or tasks to a 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 a policy on healthcare needs and where appropriate, IHPs for particular learners
- ensuring arrangements are in place for the development, monitoring and review of the healthcare needs arrangements
- ensuring the arrangements are in line with other relevant policies and procedures, such as health and safety, first aid, risk assessments, the Data Protection Act 1998, safeguarding measures and emergency procedures
- ensuring robust systems are in place for dealing with healthcare emergencies and critical incidents, for both on- and off-site activities, including access to emergency medication such as inhalers or adrenaline pens
- ensuring staff with responsibility for supporting learners with healthcare needs are appropriately trained
- ensuring appropriate insurance cover is in place, any conditions are complied with and staff are clear on what this means for them when supporting learners
- having an infection prevention policy that fully reflects the procedures laid out in current guidance¹.

b headteacher/teacher in charge:

The headteacher ensures arrangements to meet the healthcare needs of their learners are sufficiently developed and effectively implemented. This include:

¹ www.wales.nhs.uk/sitesplus/888/home

- 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.
- ensuring the support put in place focuses on and meets the individual learner's needs, also known as person-centred planning²
- 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
- appointing a named member of staff who is responsible for learners with healthcare needs, liaising with parents, learners, the home tuition service, the local authority, the key worker and others involved in the learner's care
- ensuring a sufficient number of trained staff are available to implement the arrangements set out in all IHPs, including contingency plans for emergency situations and staff absence
- having the overall responsibility for the development of IHPs
- ensuring that learners have an appropriate and dignified environment to carry out their healthcare needs, e.g. private toilet areas for catheterisation
- 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 education setting's health advice service
- ensuring when a learner participates in a work experience placement or similar, that appropriate healthcare support has been agreed and put in place
- providing annual reports to the governing body on the effectiveness of the arrangements in place to meet the healthcare needs of learners
- ensuring all learners with healthcare needs are not excluded from activities they 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 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
- being mindful of the Social Services and Well-being (Wales) Act 2014. Education settings 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 (e.g. catering staff or reception staff):
Any staff member within the education setting may be asked to provide support to learners with healthcare needs, including assisting or supervising the administration of medicines. This role is voluntary. Staff members must receive sufficient and suitable training and achieve the necessary level of competence before they take on the responsibility. No staff

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

member can be required to administer or supervise medication unless it forms part of their contract, terms and conditions or a mutually agreed job plan.

In addition to the training provided to staff that have volunteered or are contracted to support learners with healthcare needs, the education setting should ensure staff:

- fully understand the education setting'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' IHPs. This includes knowing how to communicate with parents and what the triggers for contacting them are, such as when the learner is unwell, refuses to take medication or refuses certain activities because of their healthcare needs
- 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 education setting'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 education setting's policy
- are aware that healthcare needs can impact on a learner's ability to learn and provide extra help when needed
- support learners who have been absent and assist them with catching up on missed work – this may involve working with parents and specialist services
- keep parents informed of how the healthcare need is affecting the learner in the education setting. This may include reporting any deterioration, concerns or changes to learner or staff routines.

3b). Parents/carers (page 10)

Parents and learners should:

- receive updates regarding healthcare issues/changes that occur within the education setting
- be involved in the creation, development and review of an IHP (if any). The parent and learner may be best placed to provide information about how their healthcare needs affect them. They should be fully involved in discussions about how the learner's

healthcare needs will be met in the education setting, and contribute to the development of, and compliance with, their IHP

- provide the education setting 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
- inform the education setting 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 education setting if their child has/had an infectious disease or condition while in attendance.

3c). Learner

- The learner needs to
 - inform parent/carer or staff member/s if feeling unwell;
 - inform relevant staff member/s of any medication or healthcare needs, or changes;
 - participation in drafting and agreeing individual healthcare plan (IHP), where appropriate;
 - take part in discussions around sharing/confidentiality of personal information.

3d). Local authority

Local authorities should ensure education provision is available to learners, and:

- must make reasonable adjustments to ensure disabled children and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory. For example, learners should not be disadvantaged when leaving primary school and beginning secondary school. In practical terms this means adjustments must be planned and implemented in advance to prevent any disadvantage. Discussions around the responsibility for provision should not impact on the delivery of service, as delays could be detrimental to the education and well-being of the learner
- must make arrangements to promote cooperation between various bodies or persons, with a view to improving, among other things, the well-being of children in relation to their physical and mental health, their education, training and recreation³. When making these arrangements, local authorities should ensure appropriate agreements are in place for data sharing. This could be through working within the Wales Accord on Sharing Personal Information (WASPI) Information Sharing Protocols or Data Disclosure Agreements. Local authorities and health boards have WASPI coordinators who can support service providers to develop appropriate agreements
- must make reasonable provision of counselling services for young people aged 11–18 and learners in Year 6 of primary school⁴. Within schools, this provision should complement the different approaches already in place to support the health, emotional and social needs of learners

³ Section 25 of the Children Act 2004 www.legislation.gov.uk/ukpga/2004/31/section/25

⁴ gov.wales/topics/educationandskills/schoolshome/wellbeing/schoolcounselling/statutory-guidance-independent-counselling-services/?lang=en

- should work with education settings to ensure learners with healthcare needs receive a suitable education. Where a learner of compulsory school age would not receive a suitable education for any period because of their health, the local authority has a duty to make arrangements to provide suitable education⁵.
- should provide support, advice and guidance, including how to meet the training needs of education setting staff, so that governing bodies can ensure the support specified within the individual healthcare plan (IHP) (see 'Section 3: Individual healthcare plans (IHPs)' on page 23) can be delivered effectively.

3e). NHS Wales school health nursing service, health and other professionals, third sector organisations and other specialist services

The school engages with specialist services e.g. occupational therapists, speech and language therapists as required acting on their advice and drawing on their expertise including

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

Health advice and support can also be provided by specialist health professionals such as GPs, paediatricians, speech and language therapists, occupational therapists, physiotherapists, dieticians and diabetes specialist nurses. In addition, third sector voluntary bodies can provide advice and practical support. Proactively engaging with specialist services can provide practical help when writing and implementing IHPs. They can also provide training and awareness-raising resources, including video links.

4. Creating an accessible environment

Local authorities and governing bodies should ensure their education settings are inclusive and accessible in the fullest sense to learners with healthcare needs. This includes the following.

- **Physical access to education setting buildings**
Abernant Primary School is all on 1 level. There is an accessibility plan in place.
- **Reasonable adjustments – auxiliary aids or services**
The Equality Act 2010 places a duty on learning establishments to make 'reasonable adjustments' for learners who are disabled as defined by the Act. In regard to these learners, auxiliary aids or services (with the appropriate number of trained staff) are provided.
- **Day trips and residential visits**

⁵ Section 19 of the Education Act 1996 at www.legislation.gov.uk/ukpga/1996/56/section/19

Governing bodies should ensure the education setting actively supports all learners with healthcare needs to participate in trips and visits. Governing bodies must be aware of their legal requirements (see 'Annex 1: Outline of legal framework' on page 28) to make reasonable adjustments to trips and residential visits ensuring full participation from all learners.

Staff should be aware of how a learner's healthcare needs may impact on participation, and seek to accommodate any reasonable adjustments which would increase the level of participation by the learner⁶. Staff should consider how to accommodate the sharing of personal information with third parties if necessary for off-site activities (in compliance with the Data Protection Act 1998 and in respecting the learner's right to privacy). This may include information about the healthcare needs of learners, what to do in an emergency and any additional support, medication or equipment needed.

- **Social interactions**

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

- **Exercise and physical activity**

Abernant Primary school understands 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.

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

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

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

- **Food management**

⁶ The duty to make reasonable adjustments under the Equality Act may apply depending on the circumstances.

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

Where a need occurs, the school and catering direct will, in advance, provide menus to parents and learners, with complete lists of ingredients and nutritional information. Gluten and other intolerances or allergens must be clearly marked. Providing information will help facilitate parent and catering teams' collaborative working. This is especially important when carbohydrate counting is required.

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

- **Risk assessments**

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

5. Sharing information (pages 13-14) - outline how your school will communicate information effectively and confidentially, including with:

Governing bodies should ensure healthcare needs arrangements, both wider education settings' policies and IHPs, are supported by clear communication with staff, parents and other key stakeholders to ensure full implementation. It is essential that all information is kept up to date.

Teachers, supply teachers and support staff (this may include catering staff and relevant contractors) should have access to the relevant information, particularly if there is a possibility of an emergency situation arising. The school keeps a book of high-risk health needs in the staff room.

Parents and learners should be active partners, and to achieve this the education setting makes parents fully aware of the care their children receive. Parents and learners should also be made aware of their own rights and responsibilities. To help achieve the school:

- makes healthcare needs policies easily available and accessible, stored in pupils files
- asks parents to sign a consent form which clearly details the bodies, individuals and methods through which their learner's medical information will be shared. Sharing medical information can be a sensitive issue and the learner should be involved in any decisions. Education settings should keep a list of what information has been shared with whom and why, for the learner/parent to view on request
- include student councils, 'healthy schools' and other learner groups in the development of the setting's healthcare needs arrangements, where appropriate

- considers how friendship groups and peers may be able to assist learners, e.g. they could be taught the triggers or signs of issues for a learner, know what to do in an emergency and who to ask for help. The education setting should discuss with the learner and parents first and decide if information can be shared.

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

–When a pupil is identified the school's develops a IHP in conjunction with parents / the child (if appropriate) and any health care workers. This involves the headteacher, classteacher and if appropriate the support staff working with the child.

These records are kept in individual pupil files.

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

The school will administer long term medication for pupils health needs. Parents have to hand the medication to the headteacher, class teacher or secretary. Signed consent is required and these records are kept in the secretary's office.

When medicines are administered staff keep a record in the individual pupils' paper work.

All medicines are kept on top of a high cupboard in the office. Support assistants in the child's class or the secretary administer the medication.

Emergency contacts are kept in the normal procedure in the secretaries office and digitally.

New records are completed when there are changes to medication or dosage.

8. Emergency procedures (page 17) -

- in an emergency situation the member of staff will ask for support from a first aider;
- any member of staff can make the decision to call an ambulance if necessary but this is best made with 2 staff members; If available the secretary will make the call. Parents will also be called.
- the nominated first aider/s are Mrs S. Jones and Mrs G. Smith
- all healthcare needs records and emergency contact details (e.g. parents/carers) are kept in the files in the secretaries office;
- where the learner has an individual healthcare plan (IHP), it clearly define what an emergency looks like and what to do;
- staff are made aware of emergency symptoms and procedures; and
- learners are made aware of what to do in general terms if there is an emergency, e.g. inform staff immediately.

9. Training

For pupils with health care needs some aspects of the job are contracted and for some volunteers are ask for.

- relevant training which ensures staff are competent and confident to support learners is

provided as appropriate;

- training is kept up-to-date;
- staff working with the child make new and temporary staff aware of healthcare needs; and all staff are involved in passing information on to the next teacher each year.
- all staff have a basic awareness of common medical conditions to recognise symptoms and understand how to seek appropriate assistance.

10. Qualifications and assessments

Teachers are expected to use their professional judgement to support learners with healthcare needs.

11. Education other than at school (EOTAS)

If pupils are EOTAS the school will liaise with parents and the hospital to provide work and support.

12. School transport -

- the LA provides school transport;
- learners with healthcare needs are supported on school transport by the escorts;
- school staff inform those involved in transportation of learners about pupils healthcare needs.

13. Reviewing policies, arrangements and procedures

Policies, arrangements and procedures are appropriately reviewed.

14. Insurance arrangements

The LA provides insurance. The school checks that any invasive procedures are covered.

15. Complaints procedure

See complaints policy

16. Individual healthcare plans (IHPs)

- the purpose of an IHP is to outline specific healthcare needs of pupils;
- the IHP will cover the medical needs of the pupil

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

The development of detailed IHPs may involve:

- the learner
- the parents
- input or information from previous education setting
- appropriate healthcare professionals
- social care professionals
- the headteacher and/or delegated responsible individual for healthcare needs across the setting
- teachers and support staff, including catering staff

- any individuals with relevant roles such as a first aid coordinator, a well-being officer, and special educational needs coordinator (SENCo).

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

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

The aim of the plan is to capture the steps which need to be taken to help a learner manage their condition and overcome any potential barriers to participating fully in education. Those devising the plan should agree who will take the lead, but responsibility for ensuring it is finalised and implemented rests with the education setting. Many third sector organisations have produced condition-specific template IHPs that could be used.

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

To note, many third sector organisations have online condition-specific IHPs that could be useful to tailor for your learners' needs.

17. Unacceptable practice

It is not acceptable practice to:

- prevent learners from attending an education setting due to their healthcare needs, unless their attending the setting would be likely to cause harm to the learner or others

- prevent learners from easily accessing their inhalers or other medication, and prevent them from taking their medication when and where necessary
- assume every learner with the same condition requires the same treatment
- ignore the views of the learner or their parents, or ignore healthcare evidence or opinion (although these views may be queried with additional opinions sought promptly)
- send learners with healthcare needs home frequently or prevent them from staying for normal activities, including lunch, unless this is suitably specified in their IHP
- send a learner who becomes ill or needs assistance to a medical room or main office unaccompanied or with someone unable to properly monitor them
- penalise a learner for their attendance record if the absence is related to their healthcare needs. 'Authorised absences' including healthcare appointments, time to travel to hospital or appointment, and recovery time from treatment or illness should not be used to penalise a learner in any way. This includes, but is not limited to, participation in activities, trips or awards which are incentivised around attendance records
- 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.

Please see the 'Unacceptable Practice' section in the Welsh Government's 'Supporting Learners with Healthcare Needs' statutory guidance:

<http://learning.gov.wales/resources/browse-all/supporting-learners-with-healthcare-needs/?lang=en>