



Policy: Healthcare Needs Policy

Date of issue: September 2017 Review date: annually

School's full address and post code: Ysgol Gymunedol Tal-y-bont

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Introduction

The Welsh Government Statutory Guidance, 'Supporting Learners with Healthcare Needs' is designed to assist local authorities, governing bodies, education settings, education and health professionals and other organisations to support learners with healthcare needs and ensure minimal disruption to their education.

Local authorities and governing bodies **must** have regard to this statutory guidance when carrying out their duties in promoting the welfare of children who are learners at the education setting, including meeting their healthcare needs. The guidance also applies to activities taking place off-site as part of normal educational activities.

This policy has been developed by Ceredigion Learning Services in accordance with the Welsh Government Guidance and sets out how education establishments maintained by Ceredigion will support learners with healthcare needs. It also serves as a model policy which should be adopted by schools, PRUs and Specialist Resource Centres in Ceredigion.

This policy should be read with the overarching statutory guidance which can be found at the following address: http://learning.gov.wales/resources/browse-all/supporting-learners-with-healthcare-needs/?skip=1&lang=en

Key principles

Learners with healthcare needs should be properly supported so that they have full access to education, including trips and physical education.

Governing bodies must ensure that arrangements are in place to support learners with healthcare needs.

Governing bodies should ensure that education setting staff consult the relevant professionals, learners and parents to ensure the needs of learners with healthcare needs are properly understood and that they are effectively supported.

Legal requirements

Ceredigion recognises its duty to make arrangements for the provision of suitable education at school or otherwise for children of compulsory school age who may or may not otherwise receive it for any period due to illness, exclusion from school or otherwise.

A local authority must make arrangements for ensuring that their education functions are exercised with a view to safeguarding and promoting the welfare of children.

The governing body recognises its duty to promote the well-being of learners in school, including those learners with healthcare needs.

This policy is issued in accordance with the legal framework outlined in the Welsh Government Guidance Document, Supporting Learners with Healthcare Needs (pages 3-5, 27-30).

The governing body is committed to promoting the well-being of learners and will oversee the development and implementation of arrangements to achieve this aim.

The governing body and the school have considered the points outlined on pages 6-11 of the statutory guidance when developing arrangements and procedures for promoting the well-being of learners

In accordance with the Welsh Government statutory guidance the local authority and the governing body have considered the following points in developing this policy and its procedures:

- 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 pupils 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 pupils through the appropriate and lawful sharing of the individual pupil's healthcare needs.
- Whenever appropriate, pupils should be encouraged and supported to take responsibility for the management of their own healthcare needs.

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 entirely voluntary. Staff members must receive sufficient and suitable training and achieve the necessary level of competence before they take on the responsibility. No staff member can be required to administer or supervise medication unless it forms part of their contract, terms and conditions or a mutually agreed job plan.

All staff and governors will be aware of the unacceptable practice guidance as outlined on page 27 of the Statutory Guidance and inserted in this policy at appendix 7.

Creating an accessible environment

Physical access to school building/s

In accordance with its duty under the Equality Act 2010, the school's accessibility plan will outline the arrangements for increasing the extent to which disabled learners are able to take advantage of education and benefits, facilities or services provided or offered by the schools.

Reasonable adjustments - auxiliary aids or services

The school will make reasonable adjustments to ensure that learners with healthcare needs and/or disabilities have access to auxiliary aids, equipment or services. The school, with support from the Ceredigion Local Authority, will ensure that equipment is serviced regularly.

Day trips and residential visits

The governing body and the school will ensure that pupils with healthcare needs and/or disabilities receive equal opportunities with regard to day trips and residential visits. The school may contact the Ceredigion Health and Safety Service for any additional advice and support in this regard. For off-site activities, in compliance with the Data Protection Act 1998, the school may share information with relevant third parties where necessary. 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 e.g. clubs and social activities

The school will consider the needs of learners with healthcare needs during structured and unstructured social activities, such as during breaks, breakfast clubs, productions, after-hours clubs and residential activities. In accordance with its Anti-bullying Policy the school will seek to remove barriers to social inclusion which may be present for children with healthcare needs.

Exercise and physical activity

The school will make appropriate adjustments to ensure that sports and other activities are made accessible to all learners. The school may seek guidance from Ceredigion Actif when considering how participation in sporting and other activities may affect learners with healthcare needs. Staff will consider the healthcare needs of individuals who may require medication or food with them during physical activity.

Food management

Consideration will be given to the dietary needs of learners, e.g. those who have diabetes, coeliac disease, allergies and intolerances.

We encourage a whole school community approach to food and fitness. The head teacher, staff and governing body will ensure that food provided in the school and advice given to pupils promotes a healthy and active lifestyle. Additionally, School uses non-food rewards such as praise, stickers, games and star charts rather than confectionery. Please see our food and fitness policy for more details.

Undertaking any necessary risk assessments

Staff will be made aware of risk assessments in place and when a risk assessment may be required. Where relevant the school will consult with the Ceredigion Health and Safety Service for further advice and support.

Arrangements for qualifications, examinations and assessments

The school will ensure that necessary adjustments, adaptations or additional time for learners with healthcare needs are made in good time for assessments and examinations. This will follow the guidance in the WG National Assessments administration handbook and the JCQ's Access Arrangements and Reasonable Adjustments regulations. The school will liaise with the home or hospital tutor and with Ceredigion Learning Services to minimise the loss of learning when a learner is unable to attend school, especially where the learner is moving from an education setting or home to the hospital on a regular basis.

Applications for special arrangements for learners for qualification examinations and national curriculum assessments will be submitted to the awarding bodies as early as possible. It is unacceptable practice to request adjustments or additional time at a late stage unless the pupil is new to the school and clearly meets the criteria.

Education other than at school (EOTAS)

Where a learner is absent from school for a period of 15 days or less, 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.

In cases where the pupil has a medical condition which does not allow them to attend school, tuition will be provided for a specified period of time. The local authority will have received information from a consultant / paediatrician which should confirm that the pupil is unable to access mainstream and give an indication of time scales and appropriate educational provision. Any plan will be reviewed on a regular basis to ascertain whether there has been any change in the pupil's circumstances and to consider when or whether the pupil is able to return to school.

Tuition will be provided either in the home or at an alternative venue, depending on the medical condition that has been identified. Pupils with emotional or mental health needs might attend an educational centre as part of a strategy to gradually reintegrate back to school.

The schools will adopt a flexible approach which may involve part—time attendance or flexible hours. A tutor may deliver sessions in school as part of a reintegration process.

Sharing information

The school will ensure that information relating to healthcare needs are kept up-to-date through clear communication with staff, parents and other key stakeholders detailed in the learner's Individual Health Care Plan (IHP).

Information sharing techniques used by the school will be agreed with the learner and the parent in advance to protect confidentiality.

The governing body has ensured that clear communication arrangements are in place in relation to the healthcare needs of pupils.

The school's Managing Healthcare Needs Policy will be made available to parents/carers via the school website. The healthcare needs policy and any related policies will be made readily available in an accessible format.

The school will discuss with the learner and their parent/carer how information about their healthcare needs can be shared. Information will be shared with and made accessible to Teachers, supply teachers, support staff (Teaching Assistants), catering staff.

Parents/carers will be required to sign a consent form which will clearly detail the bodies, individuals and methods through which their learner's medical information will be shared.

Wherever possible, the school will discuss with the learner and the parent/carer how we can share information about the healthcare needs. A record of the parents/carers consent will be kept on file and will be updated to record when medical information has been shared.

The school will ensure that learners know who to inform if they feel ill or require support. If and when a pupil is placed with another service or another setting for some time (e.g. PRU), the school will ensure that the appropriate healthcare needs information is shared in accordance with the consent of the learner and their parent/carer (see Policy for Administrating Medicine).

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

Parents at this school are asked if their child has any medical conditions on the enrolment form.

This school uses an IHP to record the support an individual pupil needs around their medical condition. IHPs are regularly reviewed, at least every year or whenever the pupil's needs change. School staff are made aware of and have access to the IHP for the pupils in their care. This school makes sure that the pupil's confidentiality is protected. This school seeks permission from parents before sharing any

medical information with any other party. This school keeps a record of all medication administered. This school makes sure that all staff providing support to a pupil and other relevant teams have received suitable training and ongoing support, to make sure that they have confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHP. This should be provided by the specialist nurse/school nurse/other suitably qualified healthcare professional and/or the parent. The specialist nurse/ school nurse/other suitably qualified healthcare professional will confirm their competence, and this school keeps an up-to-date record of all training undertaken and by whom. New paperwork will be completed whenever there are changes to an IHP, medication or dosage.

The administration of <u>all</u> medication will be formally recorded using the form in appendix 5

Storage, access and the administration of medication and devices

Surplus medication will <u>not</u> be stored at the school. Any exception, where this is in the best interests of the learner, must be detailed in a Learner's IHP.

The school will only accept prescribed medicines and devices that:

- are in date (it is the parents responsibility to ensure that they 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).

The school will not accept medicines that have been taken out of the original packet/container.

Storage

The person with ultimate responsibility for ensuring that medicines are stored safely in the school is Hefin Jones, Headteacher.

The designated person will ensure that medication is stored securely and appropriately in accordance with the table below.

Table 1 – storage of medication (including controlled drugs)

Note: we will never store medication under any circumstances in a first aid box.

Medication type	Location						
Non-emergency	All non-emergency medication will be kept in a secure place with						
medication	appropriate temperature or light controls.						
	If it is a controlled drug , additional security measures and controls						
	are advisable.						
	In a locked cupboard in the office.						
Refrigerated	Some medicines need to be refrigerated. The refrigerator						
	temperature will need to be regularly monitored to ensure it is in						
	line with storage requirements.						
	Medicines can be kept in a refrigerator containing food, but						
	should be in an airtight container and clearly labelled.						
	A lockable medical refrigerator should be considered if there is a						
	need to store large quantities of medicine.						
	In the After School Club.						
Emergency	Emergency medication must be readily available to pupils who						
medication	require it at all times during the day or at off-site activities.						

All staff will be made aware of the location of emergency medication.
Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline auto-injectors (pens) should be readily available to pupils and not locked away. This is particularly important to consider when outside of the education setting's
 premises, e.g. on trips. If the emergency medication is a controlled drug it should be kept as securely as possible so as to minimise the risk of unauthorised access while also allowing quick access if this might be necessary in an emergency. For example, keys should not be held personally by a member of staff.
Where staff administer emergency medication to a pupil, this will be recorded. In a locked cupboard in the office.
Asthma inhalers will be stored in a clean dust free container

Access

The school will ensure that a learner is told and know where their medication is stored and know how to access it.

All staff will be informed where a learner's medication is stored and how they can access it in accordance with the Data Protection Act 1998.

Disposal

When no longer required, medication will be returned to the parents/carers to arrange for their safe disposal.

Sharp boxes will always be used for the disposal of needles and other sharps.

Administration

The administration of all medication will be recorded using the form in appendix 5.

Where a pupil is under 16, assistance or administration of prescribed or non-prescribed medicines requires written parent/carer consent, unless Gillick competence is recorded.

Parents/carers must complete a medical form before the school will administer ANY medication to their child, including when it forms part of an IHP.

One consent form must be completed for each medication. A new form must be completed when dosage changes are made.

It is necessary for the delegated person to formally agree to the request to administer medication and the completed and signed paperwork must in place before it can be administered.

In the delegated person's absence Sioned Morris, Llio Rhys or Sara Hughes will take on this responsibility.

In line with WG guidance only suitably trained staff will administer medication in accordance with the pupil's current IHP and/or the completed administration of medication consent form.

If the trained or approved members of staff who are usually responsible for administering medication to a pupil are not available, the pupil's IHP will set out how alternative arrangements to provide support will take place.

Lead person to approve medication	Hefin Jones
administration requests:	

In headteacher/delegated persons
absence named person to approve
medication administration requests

Sioned Morris, Llio Rhys or Sara Hughes

The normal process of administering medication should not raise child protection concerns, and there are no regulations that indicate that a second member of staff must be available to supervise the process of administering medication. It would be good practice if possible to have two members of staff present but it is acknowledged that few schools will have the staffing resources to provide two members of staff for administering medication. All staff members should have appropriate DBS checks carried out to ensure the safety of the children. If there is known risk of false allegation by a child then a single practitioner should not undertake the administering of medication alone. If concerns or allegations of abuse are raised school must follow their child protection policy.

When medication administration procedures require an adult of the same gender as the pupil and a second signature we will endeavour to address this, and it will be noted in the IHP and/or medication consent form.

If the treatment is invasive or intimate we will follow our intimate care guidance unless alternative arrangements are agreed, and this will be recorded in or attached to the pupils IHP.

When administering the medication to a pupil, the staff will re-check the following each time:

- a. Check consent form first.
- b. Medication must be in its original container/packet* with the label attached;
- c. If prescribed, it must have been dispensed by a pharmacist;
- d. Must have the expiry date and be in date;
- e. Must have the name of the child;
- f. Must have the name of the medicine;
- g. Must have the dosage size and frequency;
- h. The medication has been stored according to the storage instructions;
- i. How much medication is left
- i. Check the maximum dosage
- k. Check the amount and time of any prior dosage administered.

If there is a problem, contact headteacher/delegated person and then parent/carer.

*Some medicines, such as insulin, may not be within the original packaging but in a pen or a pump.

The member of staff administering medication will monitor that the drug has been taken.

Some schools may choose to hold some non-prescribed medication (e.g. paracetamol).

By exception there might be occasions when this medication is required unexpectedly during the school day. In this eventuality as long as written consent is received this can be given e.g. consent via email and appendix 2 must be completed and returned to school as soon as possible.

The process for non-prescribed medication is the same as all other medication; but will be dealt with on an individual case by case.

Pupils are not permitted to carry non-prescribed medication in school unless prior consent has been obtained (appendix 2).

Self-medication

Unless there is an agreed plan for the pupil to self-medicate (16 years and above or Gillick competent), all medication will be administered by a member of staff. The formal request for a pupil to self-medicate (included in appendix 2) from the parents / carers must be made before such practice is allowed. In other cases, it will be supervised in accordance with the IHP.

In line with good practice, pupils will be asked to only carry enough medication for that day.

Without exception, pupils must not share their medication for any reason with another pupil. This will be made clear to all pupils. This will be treated as misuse in line with our substance misuse policy.

Emergency procedures

The school will ensure that the location of a learner's healthcare records and emergency details are known to staff.

- A learner's IHP will clearly define what constitutes an emergency and will explain what to do. Staff will be made aware of the emergency symptoms and procedures.
- In situations requiring emergency assistance, 999 will be called immediately.
- Where a learner needs to be taken to hospital, a staff member will remain with the learner until a parent arrives. This includes accompanying them in an ambulance to hospital.
- The staff member will take the appropriate healthcare records with them.
- Other pupils in the school will be told what to do in an emergency, i.e. inform a member of staff immediately.

Refer to Appendix 1 Contacting emergency services for the procedure to follow when contacting emergency services.

Training

Training may involve an input from the pupil and their parent/carers, but they will not be used as the sole provider of training.

If a pupil has a healthcare need, the school will seek input and advice from the school nurse / specialist nurse / other healthcare professionals and the local authority in relation to training and support for staff.

Training will be rigorous to ensure that a sufficient number of staff are competent to support a pupil's healthcare needs e.g. should the usual member of staff be absent.

The training provider will sign to confirm that training has been provided and that the staff member(s) are competent to provide for the healthcare needs of the pupil.

All staff will be made aware of the school's Managing Healthcare Needs Policy, common conditions and staff roles in carrying out healthcare arrangements.

New and temporary staff will be made aware of the preventative and emergency measures that are in place so that they can recognise the need for intervention and act quickly. This will be done during staff induction.

The school will ensure that staff sign the policy to say that they have read, understood and comply with it.

The school's training records, will be stored and maintained (Appendix 4).

The school's training records, will be stored and maintained in the office (Appendix 4).

School transport

The decision to provide and arrange home to school transport will be made in accordance with Ceredigion's Home to School/College Transport Policy.

The school will liaise with the Ceredigion SEN Department, Learning Services when making arrangements for home to school transport.

The parent/carer will need to complete a travel needs assessment form which can be obtained at the following address:

http://www.ceredigion.gov.uk/English/Resident/Schools-Education/School-College-Transport/Pages/default.aspx

Reviewing policies, arrangements and procedures

All policies will be reviewed by the Governing Body on an annual basis.

Insurance arrangements

This school, by adopting this county model policy/national guidance is therefore covered by the local authority's insurance arrangements in respect of managing pupils' healthcare needs.

Complaints procedure

A learner or a parent/carer who is not satisfied with the School's health care arrangements is entitled to make a complaint.

The governing body's complaints procedure describes how complaints can be escalated from teacher to headteacher, then to the governing body and then to the local authority. The complaints procedure can be obtained from our website.

Individual healthcare plans (IHPs)

An IHP sets out what support is required by a learner. Not every learner with healthcare will require an IHP. In most cases, especially concerning short-term illnesses such as those requiring a course of antibiotics, an IHP may not be necessary. In such circumstances it may be sufficient to follow the procedure outlined in Section 7 and to use the form in (append 5).

An IHP will be required when healthcare needs are complex, fluctuating, long term or where there is a high risk that an emergency intervention will be needed. This means that IHP may be needed even if a medical condition is normally well controlled.

For pre-school children and for learners transferring between settings, an IHP will be created or amended using the advice and support of agencies, such as health, the local authority, the disabled children's team, staff at the previous setting in addition to the learner and parent/carer. This early preparation will help ensure that an IHP is in place at the start of the new term.

IHPs will be easily accessible to all who need to refer to it while maintaining the required levels of privacy. In our school, the member of staff with overall responsibility for healthcare needs in the school is Hefin Jones Headteacher. They have responsibility for the development of the IHP in conjunction with the relevant health specialists.

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

When devising the IHP, the school will need to involve some or all of the following:

- the pupil
- the parents/carers
- input or information from previous education setting
- appropriate healthcare professionals
- social care professionals
- the headteacher and/or delegated responsible person 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 ALNCo.

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

Identify learners with healthcare needs

- Learner is identified from the admission form or other route.
- Parent/Carer, learner or healthcare professional informs education setting of healthcare need (or any changes in healthcare needs).
- Discussions during the transition process



• If there is potential need for an IHP, the education setting should discuss this with the parent/Carer and the learner. It may be necessary to consult with relevant healthcare professionals. This will support the decision making process about whether an IHP is needed.

Establish if an IHP should be made

• The headteacher or delegated person 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 it is decided that an IHP should be made...

- The headteacher or delegated person, under the guidance of the appropriate healthcare professionals, parents/carers and the pupil should develop the IHP in partnership. This includes instigating, coordinating, facilitating meetings, documentation and overall communication in the school.
- The headteacher or delegated person to facilitate necessary risk assessments and interventions are done to ensure the child's safety.
- The headteacher or the delegated person will identify appropriate staff to support the pupil including identifying any training needs and the source of training.
- The headteacher or the delegated person will make arrangements for training by relevant and appropriately qualified specialists.
- The headteacher or delegated person will circulate the IHP and any subsequent updates to: parent/carer, headteacher, class teacher/SENCo (as appropriate), and the relevant healthcare professional. NB consent from parent/carer and pupil must be obtained to do this.
- The headteacher or delegated person will set an appropriate review date and define any other triggers for review, section 5.

If the relevant health professional has provided an IHP and this covers all aspects contained in the example IHP in appendix 3, then a separate IHP is not required. The IHP can refer to other documents and does not need to be repeated.

However, if it is determined that an IHP is required and one has not yet been developed, we will complete the IHP in appendix 3 together with the pupil, parent/carer and relevant health professional. It may not be necessary to complete all sections of this template.

Where a pupil has an additional learning need (ALN) the IHP will be linked or attached to any Statement of ALN/SAPRA, one page profile or learning and skills plan (post 16). A personal evacuation plan and risk assessment may also be attached.

The IHP will explain how information is shared and who will do this. This individual can be a first point of contact for parents/carers and staff and will liaise with external agencies as and when necessary.

Pupils who are competent* to do so will be encouraged to take responsibility for managing their own healthcare needs, which includes medicines and procedures. This should be reflected within the pupil's IHP.

*Gillick – where possible, the learner should be supported to build understanding and confidence to increasingly self-manage healthcare needs, depending on their ability to do so. This is sometimes referred to as 'Gillick competence'.

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

If a pupil refuses to follow their IHP or 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/carers will be informed as soon as possible so that an alternative arrangement can be considered and health advice will be sought where appropriate.

The governing body will ensure that all IHPs are reviewed at least annually or more frequently should the IHP state otherwise or should there be new evidence that the needs of the pupil have changed.

In this review we will involve all key stakeholders where appropriate including – the pupil, parent/carer, education and health professionals and other relevant bodies.

Appendix

Appendix 1

Contacting Emergency Services

Appendix 2

Parent/Carer Consent Form – For the administration of medication to a pupil

Appendix 3

Model Individual Healthcare Plan (IHP)

Appendix 4

Staff Training record – administration of medication/treatment

Appendix 5

Record of medication administered to a pupil

Appendix 6

Medication/healthcare incident report

Appendix 7

Unacceptable practice

Appendix 1

Contacting Emergency Services

Request for an Ambulance

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

- 1. State your telephone number 01970 832276
- 2. Give your location as follows Ysgol Gymunedol Tal-y-bont, Tal-y-bont, Ceredigion.
- 3. State that the postcode is **SY24 5HE**...
- 4. Give the exact location in the education setting [insert a brief description].
- 5. Give your name.
- 6. Give the name of the pupil and a brief description of symptoms.
- 7. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to the school.
- 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.

Appendix 2 Parent/Carer Consent Form – For the administration of medication to a pupil

- The school will not give your child medication unless you complete and sign this form.
- A separate form should be completed for each medication to be administered.
- A new form must be completed when dosage changes are made.
- Parents/carers will be informed as stated in the school policy when a child refuses their medication or when emergency medication is administered.
- Parents/carers can request sight of records.
- Without exception pupils must not share their medication for any reason with another pupil.

Name of child		Date of birth		
Class		Healthcare nee	ed	
	Med	icine		
Name, type and strength on the container)	of medicine (as described			
Date dispensed		Expiry Date		
Dosage		Timing		
Method of administration			1	
Duration of treatment				
Special precautions				
Special requirements for administering medication e.g. two staff present, same gender as pupil.				
Storage requirements				
Are there any side effects know about?	that the school needs to			
Any other instructions				
Pupil to self-administer medication under supervision from a stored location		Yes /No (Deleter of the second		•
Pupil to carry and self-administer medication		Yes / No (Dele If yes, pupil mu		
Procedures to take in an emergency				
Agreed review date (To be completed with the school)				
Name of member of staff responsible for the review				
(To be completed with the school) Contact details		Contact 2		
Contact details	Contact 1		Contact 2	

Name								
Daytime telephone nu	ımber							
Relationship to the ch	ild							
Address								
Post Code								
 I have read and agree to the school giving medication in accordance with the school policy. I understand my parental/carer obligations under the Welsh Government guidelines (http://learning.gov.wales/resources/browse-all/supporting-learners-with-healthcare-needs/?skip=1⟨=en). The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff to administer the medicine in accordance with the information given above and the school policy. I will inform school of any new information from health professionals in regard to my child, e.g. if there are any changes in dosage or frequency or if it is stopped. I will ensure that this is in writing from the health professional. I understand that it is my responsibility to replenish the medication supply in the school and collect expired or unused medication. Where correct medication is not readily available on a given day and places the child at risk, the headteacher has the right to refuse to admit my child into the school until said medication is provided. I accept responsibility to provide in-date medication which is correctly labelled. I consent for the information in the form to be shared with health professionals/emergency care. If my child has received any emergency medication prior to school, I will inform the headteacher/delegated 								
member of the schol Parent/carer signature		501010 0011001 0141			Date			
I would like my child to	o admir	nister and/or carry	their medication	on				
Parent/carer signature	e:				Date			
Pupils signature					Date			
HEADTEAC	HER/DE	ELEGATED PERS	SONS AGREE	MENT TO	ADMIN	NISTER	MEDICATION	
It is agreed that (ins	ert nan	ne of pupil)						
Will receive (insert r	name a	and quantity of m	nedication)					
at (insert time medic	cine is	to be administer	ed)					
The staff member to give / supervise while the learner takes their medication will be (insert name of member of staff)								
This arrangement w medication or until in		` •		if course	e of			
Signed:						Date		
Name (headteacher/d	elegate	ed person)				ı	1	

☐ Individual Healthcare	e Plan in place; OR 🗆	Individual Healthcare Plan not required
Appendix 3		
M	odel Individual Healthca	re Plan (IHP)
(Adapted	d from <u>www.medicalcondit</u>	ionsatschool.org.uk)
Links to IHP templates for sp	pecific medical conditions:	http://medicalconditionsatschool.org.uk/
Please note: this is a very comneeds to use the sections that		ections will be applicable. The school only the care of the pupil.
		ealth care plan, the school might not need ssional covers all the information that the
Section 4 of the	e policy will be followed	when developing this IHP.
1. PUPIL INFORMATION		
1.1 Pupil details		
Pupil's name:		
Date of birth:		
Year group:		
Nursery/School/College:		
Address:		
Town:		
Postcode:		
Medical condition(s):		
Give a brief description of the medical condition(s) including description of signs, symptom triggers, behaviours.		
Allergies:		
Date:		
Document to be updated/review	ewed:	
Review triggers:		
1.2 Family contact information	on	
Name:		
Relationship:		
Home phone number:		

	Т				T
Mobile phone number:					
Work phone number:					
Email:					
1.3 Essential information c	oncerning th	is pupils'	health needs		
			Name	(Contact details
Specialist nurse (if applicate	ole): 				
Key worker:					
Consultant paediatrician (if	applicable):				
GP:					
Headteacher:					
Link person in education:					
Class teacher:					
Health visitor/ school nurse	:				
SENCo:					
Other relevant teaching sta	ff:				
Other relevant non-teaching	g staff:				
Person with overall responsimplementing plan:	sibility for				
Person responsible for administering/supervising n	nedication:				
Arrangements for cover in t peoples absence:	hese two				
Any provider of alternate pr	ovision:				
This pupil has the following condition(s) requiring the fortreatment.					
Medication administration			ister medication	_	reement for school opendix 2) and
		Form 1 =	:		
		Form 2 =	:		

1.4 Sharing information and record keeping

In the best interests of the pupil the	Yes / No (please circle)
school might need to share information	·
with school staff and other	
professionals about your child's	
healthcare needs e.g. nursing staff.	
Do you consent to this information	
being shared?	
being shared:	
What records will be kept about the	
pupil's healthcare needs, and how it will	
be communicated with others?	
	 \
2. ROUTINE MONITORING (IF APPLICA	
	itoring to help manage the pupil's condition.
What monitoring is required?	
When does it need to be done?	
When does it head to be done.	
Does it need any equipment?	
How is it done?	
Is there a target? If so what is the	
target?	
3. EMERGENCY SITUATIONS	
• •	a pupil needs urgent treatment to deal with their
condition.	
What is considered an emergency	
situation?	
What are the symptoms?	
What are the triggers?	
What action must be taken?	
A 11 (11 (1)	
Are there any follow up actions (e.g.	
tests or rest) that are required?	
4. IMPACT OF MEDICAL CONDITION A	ND MEDICATION ON PUPIL'S LEARNING
	d by health professional and a teacher)
How does the pupil's medical	
condition or treatment affect learning?	
i.e. memory, processing speed,	
coordination etc.	
Actions to mitigate these effects	

Does the pupil require any further assessment of their learning?			
5. IMPACT ON PUPIL'S LEARNING an	d CAR	E AT MEAL TIMES	
		Time	Note
Arrive at school			
Morning break			
Lunch			
Afternoon break			
School finish			
After school club (if applicable)			
Other			
 □ Please refer to home-school com □ Please refer to school planner 6. CARE AT MEAL TIMES 	nmunica	ition diary	
What care is needed?			
When should this care be provided?			
How's it given?			
If it's medication, how much is needed?	>		
Any other special care required?			
7. PHYSICAL ACTIVITY			
Are there any physical restrictions cause by the medical condition(s)?	sed		
Is any extra care needed for physical activity?			
Actions before exercise			
Actions during exercise			
Actions after exercise			
8. TRIPS AND ACTIVITIES AWAY FRO	M SCH	looL	
What care needs to take place?			
When does it need to take place?			
If needed, is there somewhere for care t place?	o take		
Who will look after medication and equip	ment?		

Who outside of the school needs to be informed?	
Who will take overall responsibility for the pupil on the trip?	
9. SCHOOL ENVIRONMENT	
Can the school environment affect the pupil's medical condition?	
How does the school environment affect the pupil's medical condition?	
What changes can the school make to deal wit these issues?	h
Location of school medical room	
Pupils with medical conditions may have to attempt these appointments may require a full day's attendance record. Is the pupil likely to need time off because of their condition? What is the process for catching up on missed work caused by absences?	end clinic appointments to review their condition.
Does this pupil require extra time for keeping up with work?	
Does this pupil require any additional support in lessons? If so what?	
Is there a situation where the pupil will need to leave the classroom?	
Does this pupil require rest periods?	
Does this pupil require any emotional support?	
Does this pupil have a 'buddy' e.g. help carrying bags to and from lessons?	
	ure staff have received appropriate training to look ration, aids and adaptive technologies. School staff ining sessions it is agreed they need.

What training is required?

Who needs to be trained?

Has the training been comple	ted?		
Headteacher/delegated person	signature		
13. TRANSPORT TO SCHOO	L		
What arrangements have been place?	en put in		
Who will meet the pupil in sch	nool?		
14. PERSONAL CARE			
For pupils requiring intimate capolicy.	are as part of their IHP,	please refer to the schools <mark>intimat</mark>	<mark>e care</mark>
What arrangements have been in relation to any personal call across the school day?			
15. PLEASE USE THIS SECT	ION FOR ANY ADDITI	ONAL INFORMATION FOR THE	PUPIL.
We suggest the following are	e stored together:		
 ☐ IHP from health ☐ Medication consent for ☐ Statement of SEN / ind ☐ One page profile ☐ Risk assessment ☐ Personal evacuation pl 	ividual education plan /	learning and skills plan	
16. SIGNATURES			
	Name	Signature	Date
Headteacher/delegated person			

Young person					
Parents/ carer					
Health professional					
School representative					
School nurse					
Appendix 4			1		1
STAFF TRAINING RE	CORD – AI	DMINISTRATI	ON OF MEDIC	ATION / TREATM	ENT
Name (s)					
Type of training received					
Date training received					
Date training completed					
Training provided by					
Profession and title					
		1			
I confirm that the above staff	` '		•		3
competent to carry out any ne					
I recommend that the training	is updated	(please state	how often):		
-					
Date:					
I confirm that I have received	the training	detailed abov	e.		
Staff signature:					

Date:

Suggested review date:	

APPENDIX 5 - RECORD OF MEDICATION ADMINISTERED TO A PUPIL

CHECKS: a) Check consent form first; b) Medication must be in its original container with the label attached; c) If prescribed, it must have been dispensed by a pharmacist; d) Must have the expiry date and be in date; e) Must have the name of the child; f) Must have the name of the drug; g) Must have the dosage size and frequency; h) The medication has been stored according to the storage instructions; i) How much medication is left; j) Check the maximum dosage; k) Check the amount and time of any prior dosage administered. If there is a problem, contact headteacher/delegated person and then parent/carer.

Name		Class	
Date medicine pro	vided by parent		
Amount of controlled drugs received from parent			
Date received			
Name and strength	n of medication		
Expiry date			
Amount of controlle	ed drugs returned to parent/carer		
Date returned			
Staff signature			
Parent signature			

Date	Time	Dose	Any reactions	Staff 1 Signature	Staff 2 signature

ATTACH IHP / CONSENT FORM TO THIS FORM

Appendix 6 Medication/healthcare incident report

Pupil's name:				
Home address:				
Telephone number:				
Date of incident:	Time of incident			
Correct medication and dosage:				
Medication normally administered by:				
Pupil				
Pupil with staff supervision				
Nurse / school staff member				
Noise / scribbi sidii membel				
Type of away				
Type of error:	de al line e			
Dose administered later than schedu	ned time			
Omission				
Wrong dose				
Additional dose				
Wring pupil				
Dose given without permission on file				
Dietary				
Dose administered by unauthorised person				
Other				
Description of incident:				
,				
Action taken:				
Parent /carer notified: date and time	2 -			
School nurse notified: date and time				
Physician notified: date and time -				
	Poison control notified: date and time -			
Pupil taken home				
	Pupil taken to hospital			
Other: details:				
Notes/further comments:				
Name:	Role:			
Signature:	Date:			

Appendix 7 - Unacceptable practice

It is not acceptable practice to:

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