

Porthcawl Comprehensive School

Healthcare Needs Policy

Please note this policy needs to be read in conjunction with the BCBC Healthcare Needs Policy Dec 2017.

Both policies are awaiting adoption by the School Governing Body at the next meeting in Summer 2018.

Porthcawl Comprehensive School

Healthcare Needs Policy

Introduction

This policy sets out procedures to support our pupils with their healthcare needs, both during the school day and with off-site activities. Our aim is to ensure minimal disruption to our pupils' education. As a school we have a duty to promote the welfare of our pupils, including meeting the healthcare needs of individuals. All learners with healthcare needs are entitled to a full education.

- Staff should understand and work within the principles of inclusivity.
- Lessons and activities should be designed, as far as possible, 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 as required to ensure staff 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. Staff should be aware that the sharing of pupil healthcare needs should be in line with the learner's rights to privacy.
- Whenever appropriate, learners should be encouraged and supported to take responsibility for the management of their own healthcare needs.

The legal background

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. In meeting the duties under section 175 of the Education Act 2002, local authorities and governing bodies **must** have regard to guidance issued by the Welsh Ministers under this section.

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. The non-statutory advice contained within this document is issued in exercise of the Welsh Ministers' duty to promote the education of the people of Wales² and their power in relation to the promotion or improvement of the economic, social and environmental well-being of Wales.

Consideration will 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.

The policy was written after consideration of WG guidance 'Supporting Learners with Health Care Needs' Document Number: 205/2017

As a school we are also mindful of the final 'New code of practice for ALN Wales'.

Roles and Responsibilities

The School

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

- complying with applicable statutory duties, including those under the Equality Act 2010
- having a statutory duty to promote the well-being of learners; promoting spiritual and moral well-being and physical and mental health
- 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 reviewing this policy and ensuring that where needed, contacts are made and meetings held to produce Individual Health Care Plans. The writing of a Health Care Plan is the responsibility of Health Care Professionals.
- 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 in line with BCBC policy

The headteacher and designated members of staff (including the SENCO and SLT) should ensure arrangements to meet the healthcare needs of their learners are sufficiently developed and effectively implemented.

This can include:

- 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
- via staff briefings and review meetings, to ensure the arrangements in place to meet a learner's healthcare needs are 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
- 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. At Porthcawl this is our SENCO.
- 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. Advice will be taken on 'sufficient numbers' from BCBC.
- 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 arrangements in place to meet the healthcare needs of learners at Porthcawl and to comment on the effectiveness of these arrangements
- 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.

Teachers and support 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 entirely voluntary. Staff members must receive sufficient and suitable training (as advised by BCBC) 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 should:

- fully understand the education setting's healthcare needs policies and arrangements
- be aware of which learners have more serious or chronic healthcare needs, and, where appropriate, are familiar with these learners' IHPs. The staff will be informed and reminded that information is held on SIMS.
- know what to do in an emergency e.g. know who the first aiders are in school and seek their assistance if a medical emergency takes place
- 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.

- 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; this may include reporting any deterioration, concerns or changes to learner or staff routines via the SENCO.

Learners and parents

Learners and parents are actively involved in the planning of support and management of healthcare needs. Learners should have access to appropriate information essential for their health and development and have opportunities to participate in decisions affecting their health.

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. 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

The school will work with and seek advice when necessary from the NHS Wales school health nursing service and other organisations and other specialist services.

Creating an accessible learning 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. The school has a Strategic Equality Plan and works with the authority to ensure regular updates to our Disability Access Plan. The school will work with BCBC with regards to this.
- 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) must be provided. The school will work with BCBC with regards to this.

- Day trips and residential visits. Governing bodies should ensure the education setting actively supports all learners with healthcare needs to participate in trips and visits. The school will make reasonable adjustments to trips and residential visits ensuring full participation from all learners. Staff should be aware of how a learner's healthcare needs may impact on participation, and seek to accommodate any reasonable adjustments which would increase the level of participation by the learner. 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, information from GDPR and in respecting the learner's right to privacy).
- Social interactions. Governing bodies should ensure the involvement of learners with healthcare needs is adequately considered in structured and unstructured social activities, such as during breaks, breakfast club, productions, after-hours clubs and residential visits.
- Exercise and physical activity. Staff should make appropriate adjustments to sports and other activities to make them accessible to all learners, including after-hours clubs and team sports. Where this might not be possible, advice from healthcare or physical education professionals and the learner should be sought. They should always seek guidance when considering how participation in sporting or other activities may affect learners with healthcare needs e.g. learners may need medication with them or need food with them during physical activity. Learners should be encouraged to take the medication or food when needed.

Food management

The school canteen will take into consideration the dietary needs of pupils e.g. those who have diabetes, coeliac disease, allergies and intolerances. Menus can be provided to parents/carers and learners, with lists of ingredients and nutritional information if required. Gluten and other intolerances or allergens are known and notices remind pupils to ask the canteen staff for further information if required. Snacks are available via the vending machines throughout the day in emergencies e.g. including sugary snacks if required. Learners needing to eat or drink as part of their condition should not be excluded from the classroom and adjustments will be made when they are timetabled in for example a science laboratory.

Risk assessments

Risk assessment systems are in place in school. They start from the premise of inclusion and have built into them a process of seeking adjustments or alternative activities rather than separate provision. The school disability access strategies and plans deal with matters related to increasing participation by disabled learners.

Sharing information

It is essential that all information is kept up to date. All information-sharing techniques such as announcements in briefing, emails and SIMS must be agreed by the learner and parent in advance of being used, to protect confidentiality.

Teachers, supply teachers and support staff should have access to the relevant information, particularly if there is a possibility of an emergency situation arising.

- provide the learner/parents with a copy of this policy via the school website.
- 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. Sharing medical information can be a sensitive issue and the learner should be involved in any decisions. Education settings should keep a record 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
- if the learner and parent agree then 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.

Record Keeping

The following documentation should be collected and maintained, where appropriate.

1. Contact details for emergency services
2. Parental agreement for educational setting to administer medicine
3. Head of educational setting agreement to administer medicine
4. Record of medicine stored for and administered to an individual learner
5. Record of medicines administered to all learners by date
6. Request for learner to administer own medicine
7. Staff training record – administration of medicines
8. Medication incident report

New records should be completed when there are changes to medication or dosage. This is the responsibility of the parent/carer to inform the school.

Storage, access and the administration of medication and devices

Please see 'Managing Medicines in Schools - Porthcawl Comprehensive School' (Adapted from BCBC Guidelines on Managing Medicines in Schools)

Emergency procedures

Staff should know who is responsible for the policy, nominated first aiders and how to deal with common healthcare needs. In situations requiring emergency assistance, 999 should be called immediately. The location on SIMS of learners' healthcare records and emergency contact details should be known to staff.

Where a learner has an IHP, this should clearly define what constitutes an emergency and explain what to do. Staff should be made aware of emergency symptoms and procedures.

If a learner needs to be taken to hospital, a staff member should stay with the learner until a parent arrives. This includes accompanying them in an ambulance to hospital. The member of staff should have details of any known healthcare needs and medication.

Training

Training is provided as and when the need is identified.

Qualification examinations and national curriculum assessments

Efficient and effective liaison is imperative when learners with healthcare needs are approaching assessments and examinations. The school examinations officer will contact awarding bodies such as the WJEC to seek to make special arrangements for learners with permanent or long-term disabilities and learning difficulties, or temporary disabilities and illnesses, who are taking public examinations such as GCSEs or A levels.

Adjustments, adaptations or additional time for learners will be considered by our SENCO e.g. those taking the National Reading and Numeracy Tests. Assessments will be carried out to evidence the need for Access Arrangements (where there is no evidence provided by the medical professionals). Recommendations for appropriate Access Arrangements will be recommended to the Examinations Officer. Teachers are expected to use their professional judgement to support learners.

Education other than at school (EOTAS)

A learner who is unable to attend their education setting because of their healthcare needs should have their educational needs identified, and receive educational support quickly so they continue to be provided with suitable education.

In the case of a short absence (likely to last for less than 15 school days) the school should provide work to be completed at home, if the learner's condition permits, and support the learner to catch up on their return. The local authority should be ready to make arrangements for learners in cases where it is clear that the learner is likely to be absent from school for a significant period, e.g. more than 15 school days, whether consecutive or cumulative over the course of an academic year. However, the local authority might still need to make arrangements if a shorter absence is anticipated, depending upon the circumstances.

Where absences are anticipated or known in advance, the school will liaise with the EOTAS service. The local authority should have a written policy regarding EOTAS for learners with healthcare needs.

School transport

The school will liaise with the local authority with regards to home-to-school transport for a learner with health needs.

Insurance arrangements

Additional cover may need to be arranged for some activities, e.g. off-site activities for learners with particular needs. The school will liaise with the LA.

Complaints procedure

In the unfortunate event that a parent/carer may feel it necessary to make a complaint about an aspect of the health care for their child, then the following procedure should be used. Each of the following represents a stage in the process; progress through the stages will depend upon whether the complainant is satisfied with the response obtained.

The various stages are as follows:

Stage 1

If you have a concern, you can often resolve it informally by talking to a teacher, Head of Year, Head of Department or the Headteacher. Raise your concern as soon as you can; normally we would expect you to raise your issue within 10 school days of any incident. We will then try to let you know what we have done or are doing about your concern normally within 10 school days.

Stage 2

If you feel that your initial concern has not been dealt with appropriately you should put your complaint in writing to the Headteacher. There is a form you may wish to use, attached to the school's complaints policy available on the website. We would expect you to do this within 5 school days of receiving an unacceptable response to your initial concern.

The Headteacher or a designated member of the Senior Management Team (SMT) will investigate your complaint. The Headteacher or SMT member will invite you to discuss your complaint at a meeting. We aim to hold this meeting within 10 school days of receiving your letter. Following the meeting, the investigation into your complaint will be completed and you will be notified of the outcome within 10 working days.

If your complaint is about the Headteacher, you should put your complaint in writing to the Chair of Governors, addressed to the school.

Stage 3.

It is rare that a complaint will progress any further, but the final stage is consideration by the Complaints Committee of the Governing Body.

You should write to the Chair of Governors, addressed to the school, setting out your reasons for asking the Governing Body to consider your complaint. The Complaints committee will normally meet with you within 15 school days of receiving your letter.

The Clerk to the Governors will formally invite you to the hearing.

Further details are available in the School Policy for Complaints (available on the website or from the school).

Individual healthcare plans (IHPs)

IHPs set out what support is required by a learner. IHPs are essential where healthcare needs are complex, fluctuating, long term or where there is a high risk that an emergency intervention will be needed. However, not all learners with healthcare needs require an IHP and there should be a process in place to decide what interventions are most appropriate.

The following diagram outlines the process for identifying whether an IHP is needed. The school's SENCO is responsible for organising the meetings to produce the IHPs.

Identify learners with healthcare needs

- Learner is identified from enrolment form or other route.
- Parent or learner informs education setting of healthcare need.
- Transition discussions are held in good time, e.g. eight weeks before either the end of term or moving to a new education setting.



Gather information

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



Establish if an IHP should be made

- The education setting should organise a meeting with appropriate staff, the parents, the learner and appropriate clinicians to determine if the learner's healthcare needs require an IHP, or whether this would be inappropriate or disproportionate. If consensus cannot be reached, the headteacher should take the final decision, which can be challenged through the complaints procedure.



If an IHP should be made

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

In most cases, especially concerning short-term illnesses such as those requiring a course of antibiotics, a detailed IHP may not be necessary. In such circumstances it may be sufficient to record the name of medication, dosage, time administered and any possible side effects. These procedures should be confirmed in writing between the learner (where appropriate), the parents and the education setting.

Roles and responsibilities in the creation and management of IHPs

An IHP should be easily accessible to all who need to refer to it, while maintaining the required levels of privacy. Each plan should capture key information and actions required to support the learner effectively. The development of detailed IHPs will include some or all of the following:

- the learner
- the parents
- input or information from previous education setting
- appropriate healthcare professionals
- social care professionals
- the headteacher and/or delegated responsible individual for healthcare needs

across the setting teachers and support staff, including catering staff any individuals with relevant roles such as a first aid coordinator, a well-being officer, and special educational needs coordinator (SENCo).

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

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

The sharing and storing of information must comply with the Data Protection Act 1998 and not breach the privacy rights of or duty of confidence owed to the individuals.

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 as quickly as possible)
- 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 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.

Annex 1: Outline of legal framework (as advised by Welsh Government Guidance)

Within the educational context, various duties are placed on both schools and local authorities that are relevant to the safeguarding and welfare of learners. The main provisions are outlined in the sections below. This outline is not an exhaustive list of the relevant legislation, and nor is each section an authoritative statement or description of the laws themselves.

Statutory duties on governing bodies of maintained schools

- In discharging their functions relating to the conduct of the school, governing bodies of maintained schools (including maintained nursery schools) must promote the well-being of learners at the school. (Section 21(5) of the Education Act 2002). This duty relates to all learners, including those with healthcare needs.
- Governing bodies of maintained schools (including maintained nursery schools) must make arrangements for ensuring that their functions relating to the conduct of the school are exercised with a view to safeguarding and promoting the welfare of children (i.e. those under 18) who are learners at the school (see section 175(2) of the Education Act 2002).
- Governing bodies are also subject to duties under the Equality Act 2010 – see below.

Statutory duties on local authorities

- Local authorities have general functions in relation to providing education for their area (see in particular sections 13 to 14, 15A, 15B of the Education Act 1996).
- A local authority must make arrangements for the provision of suitable education (at school or otherwise) for children of compulsory school age who may not otherwise receive it for any period due to illness, exclusion from school or otherwise (see section 19(1) of the Education Act 1996). For young persons (i.e. those who are over compulsory school age, but under the age of 18), local authorities have a power (rather than a duty) to make such arrangements in those circumstances (see section 19(4) of the Education Act 1996). In determining what arrangements to make under section 19(1) or (4) in the case of any child or young person, the local authority must have regard to any guidance given by the Welsh Ministers.
- 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 (i.e. those under 18 – see section 175(1) of the Education Act 2002).
- Local authorities in Wales have a duty under section 15 of the Social Services and Well-being (Wales) Act 2014 to provide services in their area with the purpose of preventing or delaying the development of people's needs for care and support and a range of related purposes.
- Local authorities must make arrangements to promote cooperation between various persons and bodies. This includes a health board and NHS trust within the local authority area. The arrangements are to be made with a view to:
 - improving the well-being of children within the area
 - improving the quality of care and support for children provided in the area

- protecting children who are experiencing or at risk of abuse, neglect and other harm (see section 25 of the Children Act 2004).
- The Education (School Premises) Regulations 1999 S.I. 1999/2 set out requirements (LA responsibility) regarding facilities at maintained schools. These include requirements regarding accommodation for medical examination, treatment of learners and the care of sick or injured learners (regulation 5).
- Local authorities also have duties under the Equality Act 2010 – see below.

The Equality Act 2010

Disability is a protected characteristic under the Equality Act 2010. Some learners with healthcare needs may be disabled for the purposes of that Act; others may not be. There are various duties under the Equality Act 2010 which are relevant in the context of learners with healthcare needs who are also disabled.

The responsible body of a school must not discriminate, harass or victimise disabled learners and in some cases, other particular persons. The responsible body is also subject to a duty to make reasonable adjustments (section 85 of the Equality Act 2010). Local authorities must prepare and implement an accessibility strategy in relation to schools for which they are the responsible body. This is a strategy for (over a particular period):

- increasing the extent to which disabled learners can participate in the schools' curriculums
- improving the physical environment of the schools for the purpose of increasing the extent to which disabled learners are able to take advantage of education and benefits, facilities or services provided or offered by the schools
- improving the delivery to disabled learners of information which is readily accessible to learners who are not disabled.

(See paragraph 1 of Schedule 10 to the Equality Act 2010.)

The responsible body of a school must prepare and implement an accessibility plan. Such a plan involves the same content as an accessibility strategy, except that it relates to the particular school (paragraph 3 of schedule 10 to the Equality Act 2010). In relation to a maintained school and maintained nursery, the responsible body is the local authority or the governing body. In relation to a PRU, it is the local authority.

Local authorities and the governing body of local authority-maintained educational establishments (e.g. maintained schools) are subject to the public sector equality duty. This requires them, in the exercise of their functions, to have due regard to particular matters related to equality (section 149). They are also under specific duties for the purpose of enabling better performance of the public sector equality duty (see the Equality Act 2010 (Statutory Duties) (Wales) Regulations 2011 S.I.2011/1064).

Social Services and Well-being (Wales) Act 2014

- The Social Services and Well-being (Wales) Act 2014 ('the 2014 Act') is a single act that brings together local authorities' duties and functions in relation to improving the well-being of people who need care and support, and carers who need support. The

Act provides the statutory framework to deliver the Welsh Government's commitment to integrated social services departments with a strong family orientation.

- From a Welsh policy and delivery perspective, the 2014 Act seeks to ensure that care and support provided to young people is delivered in accordance with the principles outlined in the UNCRC.
- Local authorities in Wales have a duty under section 15 of the 2014 Act to provide preventative services in their area. The purpose of these services would be to prevent or delay people developing a need for care and support.
- The 2014 Act was developed using the 'people model' which focuses on providing sustainable social services to people (being children, adults and carers) in line with their unique needs. This means that children are not treated in isolation but instead as part of families and communities. This has allowed the 2014 Act to provide a cohesive and more integrated care system.
- Well-being and the outcomes people wish to achieve are at the centre of the legislation; the definition of well-being in the Act, and the well-being statement, both recognise that securing rights and entitlements is key to ensuring that children can speak for themselves or have someone who can do it for them so that they are involved in the decisions that affect their life.

Common law

As part of the common law, those responsible for the care and supervision of children, including teachers and other school staff in charge of children, owe a duty of care to act as any reasonably prudent parent would when taking care of their own children. A person who is responsible for the care and supervision of children should do what is reasonable for the purpose of safeguarding or promoting the child's welfare. However, this is subject, for example, to a court order prohibiting certain steps being taken in relation to that child without the court's consent (section 3(5) of the Children Act 1989).

United Nations Convention on the Rights of the Child (UNCRC)

The Welsh Government is committed to the UNCRC as the underpinning basis for its policies concerning children and young people. The approach outlined in this document is based upon and consistent with UNCRC provisions, which include that:

- children have a right to an education (Article 28)
- adults should think about the best interests of children and young people when making choices that affect them (Article 3)
- children who have any kind of disability should have the care and support required so that they can lead full and decent lives (Article 23)
- every child has the right to say what they think in all matters affecting them, and to have their views taken seriously (Article 12).

Other relevant provisions

The Data Protection Act 1998 regulates the processing of personal data, which includes the holding and disclosure of it.

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

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

Annex 2: Form templates

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

- Form 1 – Contacting emergency services
- Form 2 – Parental agreement for education setting to administer medicine
- Form 3 – Headteacher/head of setting agreement to administer medicine
- Form 4 – Record of medicine stored for and administered to an individual learner
- Form 5 – Record of medicines administered to all learners – by date
- Form 6 – Request for learner to carry/administer their own medicine
- Form 7 – Staff training record – administration of medicines
- Form 8 – Medication/healthcare incident report

These forms are downloadable as Word documents from learning.gov.wales/resources/browse-all/supporting-learners-with-healthcare-needs/?lang=en to enable schools or settings to personalise them.

Form 1: Contacting emergency services

Request for an Ambulance

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

1. State your telephone number.
2. Give your location as follows [insert your address].
3. State that the postcode is [insert your address].
4. Give the exact location in the education setting [insert a brief description].
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 [name location].
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.

Form 2: Parental agreement for education setting to administer medicine

[Insert name of education setting] needs your permission to give your child medicine. Please complete and sign this form to allow this.

Name of education setting

Name of child

Date of birth

Group/class/form

Healthcare need

Medicine

Name/type of medicine

(as described on the container)

Date dispensed

Expiry date

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

Dosage and method

Timing

Special precautions

Are there any side effects that
the setting needs to
know about?

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

Procedures to take in an emergency

Contact details

Name

Daytime telephone no.

Relationship to child

Address

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

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

Date

Signature(s)

Form 3: Headteacher/head of setting agreement to administer medicine

Name of setting

It is agreed that [name of learner] will receive

[quantity or quantity range and name of medicine]

every day at [time medicine to be administered, e.g. lunchtime/afternoon break]

[Name of learner] will be given/supervised while

they take their medication by [name of member of staff]

This arrangement will continue until [either end date of course of medicine or until

instructed by parents/carers]

Date

Signed

[The headteacher/head of setting/named member of staff]

Form 4: Record of medicine stored for and administered to an individual learner

Name of setting

Name of learner

Date medicine provided by parent

Group/class/form

Quantity received

Name and strength of medicine

Expiry date

Quantity returned

Dose and frequency of medicine

Staff signature

Signature of parent/carer

Date

--	--	--

Time given

--	--	--

Dose given

--	--	--

Name of member of staff

--	--	--

Staff initials

--	--	--

Date

--	--	--

Time given

--	--	--

Dose given

--	--	--

Name of member of staff

--	--	--

Staff initials

--	--	--

Date

--	--	--

Time given

--	--	--

Dose given

--	--	--

--	--	--

Form 6: 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

Administer from stored location

Procedures to be taken
in an emergency

Contact information

Name

Daytime telephone no.

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

Form 7: Staff training record – administration of medicines

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

Form 8: Medication/healthcare incident report

Learner's name _____

Home address _____ Telephone no. _____

Date of incident _____ Time of incident _____

Correct medication and dosage:

Medication normally administered by:	Learner	<input type="checkbox"/>
	Learner with staff supervision	<input type="checkbox"/>
	Nurse/school staff member	<input type="checkbox"/>

Type of error:

Dose administered 30 minutes after scheduled time

Omission Wrong dose Additional dose

Wrong learner

Dose given without permissions on file Dietary

Dose administered by unauthorised person

Description of incident:

Action taken:

Parent notified: name, date and time _____

School nurse notified: name, date and time _____

Physician notified: name, date and time _____

Poison control notified Learner taken home Learner sent to hospital

□ Other:

Note:

Annex 3: Useful contacts¹

Asthma

1. Asthma UK Cymru
Helpline: 0300 222 5800
www.asthma.org.uk/
2. *Guidance on the use of emergency salbutamol inhalers in schools in Wales* (Welsh Government, 2014)
learning.gov.wales/resources/browse-all/use-of-emergency-salbutamol-inhalers-in-schools-in-wales/?lang=en

Anaphylactic shock

3. Allergy UK
Helpline: 01322 619898
www.allergyuk.org/
4. Anaphylaxis Campaign
Helpline: 01252 542029
www.anaphylaxis.org.uk/

Child support organisations

5. Action for Children
Tel: 0300 123 2112
www.actionforchildren.org.uk/
6. Action for Sick Children
Helpline: 0800 074 4519
www.actionforsickchildren.org.uk/
7. Barnardo's Cymru
Tel: 02920 493387
www.barnardos.org.uk/wales
8. Children in Wales
Tel: 02920 342434
www.childreninwales.org.uk/

Diabetes

9. Diabetes UK Cymru
Tel: 02920 668276
www.diabetes.org.uk/
 10. Diabetes IHP template
www.diabetes.org.uk/Guide-to-diabetes/Your-child-and-diabetes/Schools/IHP-a-childs-individual-healthcare-plan/
 11. Diabetes UK school and parent resource packs
-

www.diabetes.org.uk/Guide-to-diabetes/Your-child-and-diabetes/Schools/Diabetes-in-schools-resources

Epilepsy

12. Epilepsy Action Wales
Tel: 01633 253407
Helpline: 0808 800 5050 www.epilepsy.org.uk/involved/branches/cymru
13. Epilepsy Wales
Helpline: 0800 228 9016
www.epilepsy-wales.org.uk
14. Young Epilepsy
Helpline: 01342 831342
www.youngepilepsy.org.uk

Learning difficulties

15. Learning Disability Wales
Tel: 02920 681160
www.ldw.org.uk
16. MENCAP Cymru
Helpline: 0808 808 1111
www.mencap.org.uk
17. Special Needs Advisory Project (SNAP) Cymru
Helpline: 0845 120 3730
www.snapcymru.org/

Medical-based support organisation

18. The National Autistic Society Cymru
Helpline: 0808 800 4104
www.autism.org.uk/?nation=wales&sc_lang=en-GB
19. Bobath Children's Therapy Centre Wales
Tel: 029 2052 2600
www.bobathwales.org
20. Cerebra – for brain-injured children and young people
Tel: 01267 244200
w3.cerebra.org.uk
21. Crohn's in Childhood Research Association (CICRA) – for children with Crohn's and colitis
Tel: 0208 949 6209
www.cicra.org
22. CLIC Sargent – for children with cancer
Helpline: 0300 330 0803
www.clicsargent.org.uk
23. Coeliac UK
Helpline: 0333 332 2033
www.coeliac.org.uk/local-groups/?region=wales
24. Cystic Fibrosis Trust
Helpline: 0300 373 1000
www.cysticfibrosis.org.uk
25. Headway – the brain injury association
Helpline: 0808 800 2244
www.headway.org.uk/home.aspx
26. Migraine Action
Tel: 08456 011 033

- www.migraine.org.uk
27. Multiple Sclerosis Society
Helpline: 0808 800 8000
www.mssociety.org.uk
28. Muscular Dystrophy UK
Helpline: 0800 652 6352 www.muscular dystrophyuk.org
29. National Attention Deficit Disorder Information and Support Service (ADDiSS)
Tel: 0208 952 2800
www.addiss.co.uk
30. National Eczema Society
Helpline: 0800 089 1122
www.eczema.org
31. Prader-Willi Syndrome Association UK
Helpline: 01332 365676
www.pwsa.co.uk
32. Spina Bifida and Hydrocephalus Information (Shine)
Tel: 01733 555988
www.shinecharity.org.uk
33. Welsh Association of ME and CFS Support
Helpline: 029 2051 5061
www.wames.org.uk

Mental health

34. Child and Adolescent Mental Health Service (CAMHS)
www.mental-health-matters.org.uk/page7.html
35. Mind Cymru
Tel: 02920 395123
www.mind.org.uk/about-us/mind-cymru

Public bodies

36. Contact a Family – for families with disabled children
Helpline: 0808 808 3555
www.cafamily.org.uk
37. Children's Commissioner for Wales
Tel: 01792 765600
www.childcomwales.org.uk
38. Equality and Human Rights Commission
Helpline: 0808 800 0082
www.equalityhumanrights.com
39. Health and Safety Executive
Tel: 02920 263120
www.hse.gov.uk
40. National Children's Bureau Council for Disabled Children
Tel: 020 78436000
www.ncb.org.uk
41. National Health Service Direct Wales
Tel: 0845 46 47
www.nhsdirect.wales.nhs.uk/contactus/feelingunwell
42. Information Commissioner's Office Wales
Tel: 029 2067 8400
Helpline: 0303 123 1113
ico.org.uk/for-organisations/education

Children's rights

43. Children's Rights Wales

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

www.childrensrights.wales

Sensory impairment

44. Action on Hearing Loss

Helpline: 0808 808 0123

Textphone: 0808 808 9000

www.actiononhearingloss.org.uk/default.aspx

45. The National Deaf Children's Society (NDCS) Cymru

Tel: 0808 800 8880

www.ndcs.org.uk/family_support/support_in_your_area/wales

46. Royal National Institute of Blind People (RNIB)

Helpline: 0303 123 9999

www.rnib.org.uk/wales-cymru-1

47. Sense Cymru – services across Wales for deafblind people and their families

Tel: 0300 330 9280

Textphone: 0300 330 9282

www.sense.org.uk/content/sense-cymru-wales

Speech and language

48. Afasic Cymru – helping children who have difficulty speaking and understanding

Helpline: 0300 666 9410

www.afasiccymru.org.uk