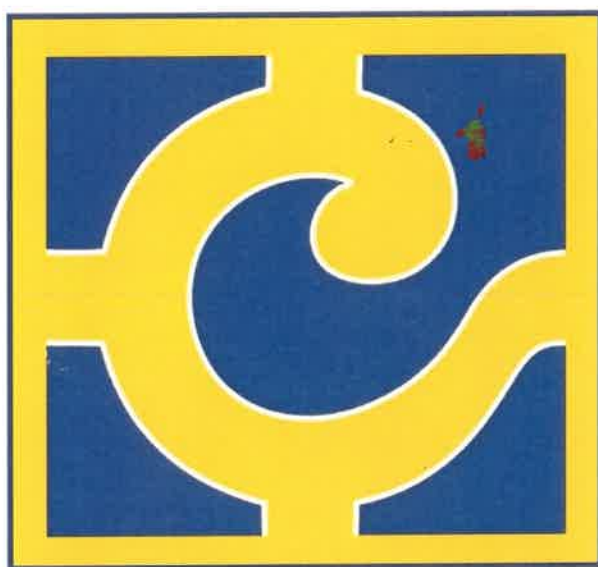


THE COURT SCHOOL

Healthcare Needs Policy

Academic Year 2024/25



THE COURT SCHOOL

Approved by Governing Body – 13/05/25

Review – Summer term 2027

Healthcare Needs Policy for the Court School

Date of issue: January 2023 (review May 2025)

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Name of person/s responsible for maintaining this policy:

Jamyn Beesley (Headteacher) and Caroline Joy (Deputy Headteacher)

Key Principles:

The staff and governors of the Court School are wholly committed to pursuing a policy of inclusive education that welcomes and supports learners with healthcare needs. This policy is designed to ensure that all learners are able to access their education in a supportive environment, which is sensitive to any healthcare needs. It supports the management of medication and healthcare needs in school, and to support individual with specific healthcare needs.

At the Court School we understand that healthcare needs should not be a barrier to learning, so we ensure that all staff fully understand their duty of care to children and young people in the event of an emergency and feel confident in knowing what to do in an emergency.

Effective communication and cooperation between home and school enable the roles and responsibilities of school, parents and learners to be clearly identified.

Our policy has been written in consultation with a wide range of local key stakeholders within school and complies with the Welsh Government Guidance 'Supporting Learners with Healthcare Needs' which was published on 30th March 2017. We also acknowledge and can refer to Cardiff Local Authority toolkit entitled 'A Medical, Physical and Intimate Care Toolkit for Early Years Settings and Schools' (April 2019) for further information, in particular, the management of specific medical conditions.

Each child including learners with healthcare needs are individuals developing in their own unique way; therefore, it is our aim to encourage all children to see for themselves as individuals with their own talents. We endeavour to foster self-confidence & self-esteem, and to develop a sense of person adequacy, so that each child can cope with the environment, at a level that is appropriate to them.

At the Court school our aim is to ensure that all our pupils feel safe, happy, valued and are able to develop positive attitudes to learning, so that they are able to find enjoyment in all aspects of schoolwork, and gain satisfaction from their own achievements.

- We recognise that healthcare issues affect each learner individually and support from the education setting may have an impact on their quality of life and future chances. Lessons and activities are designed to ensure that all pupils are able to participate fully.
- The governing body and head teacher ensure that arrangements which focus on meeting the needs with specific healthcare needs are in place. The impact on their education and well-being is monitored and reviewed regularly in line with all appropriate policies and procedures.
- We aim to work collaboratively and in partnership with pupils, parents /carers and other health care /educational professionals to ensure that provision is suitable and effective.

General Guidance

- Parents/ Legal Guardians are a child's main carers. They are responsible for making sure that the child is well enough to attend school, therefore parents/guardians should keep children home from school if they are unwell. Information on when to keep your child away from school is available from 'Guidance on infection control in Schools and other childcare settings' document accessible at www.gov.uk or our school website.

- Parents/Guardians have prime responsibility for their child's health and should provide the school with information about any medical condition and/or needs they may have and give details as appropriate. GP, Educational Welfare Office, Involved Health Professional and specialist voluntary bodies may also be able to provide additional background information for school staff with parental/legal guardian consent.
- Any changes in the pupil's medical condition, medication, or their specific needs should be reported to the school immediately by the parent/legal guardian. It is the parents'/legal guardian's responsibility to provide this information. This is also true for changes in details such as a new address or telephone number, for all relevant adults, and the pupil's emergency contacts.

School's legal requirements

- 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 learners 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 wellbeing of learning 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 wellbeing, education, training and recreation, and social well being
- The non-statutory advice contained within the document is issued in exercise of the Welsh Ministers' duty to promote the education of the people of Wales and their power in relation to the promotion or improvement of the economic, social and environmental wellbeing in Wales
- Being mindful of the Social Services and Wellbeing (Wales) Act 2014. Education settings should be fully aware of this approach and ensure assistance to learners is provided using a holistic approach.

Roles and responsibilities

Governing Body

The School Governing Body oversees the development and implementation of arrangements, which include:

- Complying with applicable statutory duties, including those under the Equality Act 2010 (e.g. the duty to make reasonable adjustments in respect of learners with healthcare needs if they are disabled)
- Having a statutory duty to promote the well-being of learners. Schools should give consideration to how they can meet these needs, including providing learners access to information and material aimed at promoting spiritual and moral wellbeing and physical and mental health (Article 17 of the UNCRC)

- Considering how they can support learners to develop the skills, knowledge and emotional resilience required to uphold their rights, and the rights of others
- Ensuring the roles and responsibilities of all those involved in the arrangements to support the healthcare needs of learners are clear and understood by all those involved, including any appropriate delegation of responsibilities or tasks to a head teacher, member of staff or professional as appropriate
- Working collaboratively with parents and other professionals to develop healthcare arrangements to meet the best interests of the learner
- Developing and implementing effective arrangements to support learners with healthcare needs. This should include a policy on healthcare needs and where appropriate, IHPs for particular learners
- Ensuring arrangements are in place for the development, monitoring and review of the healthcare needs arrangements
- Ensuring the arrangements are in line with other relevant policies and procedures, such as health and safety, first aid, risk assessments, the Data Protection Act 1998, safeguarding measures and emergency procedures
- Ensuring robust systems are in place for dealing with healthcare emergencies and critical incidents, for both on and off-site activities, including access to emergency medication such as inhalers or adrenaline pens
- Ensuring staff with responsibility for supporting learners with healthcare needs are appropriately trained
- Ensuring appropriate insurance cover is in place, any conditions are complied with and staff are clear on what this means for them when supporting learners
- Having an infection prevention policy that fully reflects the procedures laid out in current guidance

Head teacher

It is the responsibility of the head teacher to ensure arrangements to meet the healthcare needs of all learners are sufficiently developed and effectively implemented. This includes:

- Working with the governing body to ensure compliance with applicable statutory duties when supporting learners with healthcare needs, including duties under the Equality Act 2010
- Ensuring the arrangements in place to meet a learner's healthcare needs are fully understood by all parties involved and acted upon and such actions are maintained by a member of staff.
- Ensuring the support put in place focuses on and meets the individual learner's needs.
- Extending awareness of healthcare needs across the school in line with the learner's right to privacy. This may include support, catering and supply staff, governors, parents and other learners

- Appointing a named member of staff who is responsible for learners with healthcare needs, liaising with parents, learners, the home tuition service, the local authority, the key worker and others involved in the learner's care
- Ensuring a sufficient number of trained staff are available to implement the arrangements set out in all IHPs, including contingency plans for emergency situations and staff absence
- Having the overall responsibility for the development of IHPs
- Ensuring that learners have an appropriate and dignified environment to carry out their healthcare needs e.g. private toilet areas for catheterisation
- Checking with the local authority whether particular activities for supporting learners with healthcare needs are appropriately covered by insurance, and many staff are 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
- Providing annual reports to the governing body on the effectiveness of the arrangements in place to meet the healthcare needs of learners
- Ensuring all learners with healthcare needs are not excluded from activities they would normally be entitled to take part in without a clear evidence-based reason
- Notifying the local authority when a learner is likely to be away from the education setting for a significant period, e.g. three weeks due to their healthcare needs. Ultimately, what qualifies a period of absence as 'significant' in this context depends upon the circumstances and whether the setting can provide suitable education for the learner. Shorter periods of absence may be significant depending upon the circumstances
- Being mindful of the Social Services and Wellbeing (Wales) Act 2014. Education settings should be fully aware of this approach and ensure assistance to learners is provided using a holistic approach.

Teachers, support staff and all members of staff (e.g. catering staff and reception staff)

Any member of staff at the Court School may be asked to provide support to learners with healthcare needs, including assisting or supervising the administering of medicines. This role is voluntary. All staff members receive sufficient and suitable training and achieve the necessary level of competence before they take on this responsibility.

In addition to the training provided to staff that have volunteered or are contracted to support learners with healthcare needs, all members of staff:

- Fully understand the education setting's healthcare needs policy and arrangements
- Are aware of which learners have more serious or chronic healthcare needs, and, where appropriate, are familiar with these learners' IHPs. This includes knowing how to communicate with parents/legal guardians and what the triggers for contacting them are,

such as when the learner is unwell, refuses to take medication or refuses certain activities because of their healthcare needs.

- Are aware of the signs, symptoms and triggers of common life-threatening medical conditions and know what to do in an emergency. This includes knowing who the first aiders are and seeking their assistance if a medical emergency takes place.
- Fully understand The Court School emergency procedures and are prepared to act in an emergency
- Ask and listen to the views of learners and their parents, which should be taken into consideration when putting support in place.
- Ensure learners (or their friends) know who to tell if they feel ill, need support or changes to support
- Listen to concerns of learners if they feel ill at any point and consider the need for medical assistance (especially in the case of reported breathing difficulties)
- Make sure learners with healthcare needs are not excluded from activities they to take part in without a clear evidence-based reason. *This includes ensuring learners have access to their medication and that an appropriately trained member of staff is present to assist where required
- Are aware of bullying issues and emotional wellbeing regarding learners with healthcare needs, and are prepared to intervene in line with the education setting's policy
- Are aware that healthcare needs can impact on a learner's ability to learn and provide extra help when needed
- Support learners who have been absent and assist them with catching up on missed work – this may involve working with parents and specialist services.
- Keep parents/legal guardians informed of how the healthcare needs are affecting the learner at school. This may include reporting any deterioration, concerns or changes to learner or staff routines.

Parents/Carers /Learners

It is vital that learners and parents are actively involved in the planning of support and management of their healthcare needs. Meeting the individual's needs should be at the centre of decision-making processes. The UNCRC states learners should have access to appropriate information essential for their health and development and have opportunities to participate in decisions affecting their health.

- Receive updates regarding any healthcare issues/changes that occur.
- Are involved in the creation, development and review of an IHP (if required). The parent and learner may be best placed to provide information about how their healthcare needs affect them. They will be fully involved in discussions about how the learner's healthcare needs will be met in the school, and contribute to the development and compliance with their IHP.

- Parents /carers should provide 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 are encouraged and enabled to manage their own healthcare needs.
- Parents/carers should inform the school of any changes such as type of medication, dosage and administration instructions.
- Parents/carers should ensure a nominated adult is contactable at all times and all necessary forms are completed and signed.
- Parents/carers should inform the school if their child has/had an infectious disease or condition while in attendance.

The learner's role in managing their own healthcare needs

- Learners who are competent to do so will be encouraged to take responsibility for managing their own medicines and procedures. This will be reflected in the learner's IHP, where appropriate.
- Where possible, learners will be allowed to carry their own medication and relevant devices or be able to quickly access their medication. Some learners may require supervision.
- If a learner refuses to take their medication or carry out a necessary procedure, staff will not force him/her to do so, but parents/legal guardians will be informed as soon as possible, and health advice will be sought where appropriate.

Short term medical needs

- Wherever possible, parents/legal guardians should ensure that short-term medication (e.g., antibiotics) is prescribed in dose frequencies that enable it to be taken outside school hours. Parents/legal guardians should inform the prescribing doctor or dentist about this. If this is unavoidable, and short-term medication has to be taken in school hours, then an adequate supply must be left in nominated, secure areas of the school and written consent must be given.
- If a learner suffers regularly from acute pain (e.g. migraine), the parent/legal guardian should authorise in writing, and supply, appropriate painkillers for their child's use. The appropriate form should be completed requesting that the school administer the medication, and should give details such as the dose, the times the medication should be administered, and any possible side-effects. Medication is usually administered by the school first aider but can be given by any member of staff.

Long term medical needs

Parents must inform the school of any long-term medical needs before a young person joins The Court School, or as soon as a pupil develops a long-term medical condition. In these circumstances

the school, along with the parents and any relevant health professionals, will draw up a written health care plan to include:

- Details of the learner's condition.
- Special requirements. (e.g., dietary needs, specific adjustments)
- Medication (if medication is required during school hours, then a 'Request for School to Administer Medication' form will also need to be completed.)
- What to do/ who to contact in an emergency.
- Daily care requirements.

The purpose of the health care plan is to ensure all relevant members of school staff can meet the health needs of the learner and so ensure their safety during the school day. The medication and completed health care plan will be kept in a designated area. All medication administered will be recorded. The health care plan will be updated annually, at a minimum, unless changes occur. It is the parent's responsibility to contact the school when there are changes to the young person's health.

Local Authority

Local Authorities should ensure education provision is available to learners and:

- Must make reasonable adjustments to ensure disabled children and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory. In practical terms, this means adjustments must be planned and implemented in advance to prevent any disadvantage. Discussions around responsibility for provision should not impact on the delivery of service, as delays could be detrimental to the education and wellbeing of the learner.
- Must make arrangements to promote cooperation between various bodies or persons, with a view to improving, among other things, the well-being of children in relation to their physical and mental health, their education, training and recreation. When making these arrangements, local authorities should ensure appropriate agreements are in place for data sharing. This could be through working within the Wales Accord on Sharing Personal Information (WASPI) Information Sharing Protocols or Data Disclosure Agreements.
- Should work with education settings to ensure that learners with healthcare needs receive a suitable education. Where a learner of compulsory school age would not receive a suitable education for any period because of their health, the local authority has a duty to make arrangements to provide suitable education.
- Should provide support, advice and guidance, including how to meet the training needs of education setting staff, so that governing bodies can ensure the support specified within the individual healthcare plan (IHP) can be delivered effectively.

NHS Wales school health nursing service, health and other professionals, third sector organisations and other specialist services

At the Court School we access healthcare advice and practical support from a number of organisations and specialist health professionals. Our school paediatrician, school nurse, specialist consultants, Neuro developmental Team, Speech and Language therapist and where appropriate Occupational therapist are able to offer the following when required:

- Advise on the development of IHPs
- Assist in the identification of the training required to successfully implement IHPs
- Support staff to implement a learner's IHP through advice and liaison with other healthcare, social care and third sector professionals

Creating an accessible environment:

Local authorities and governing bodies must ensure their education settings are inclusive and accessible making reasonable adjustments for learners with healthcare needs. This includes the following:

Physical access to education setting buildings

A duty is placed on local authorities to produce a written accessibility strategy for all schools they are responsible under the Equality Act 2010. Any such strategy is expected to address:

'improving the physical environment of 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 schools' (schedule 10, Equality Act 2010)

In compliance with the above legislation we have undertaken the necessary accessibility planning and have an accessibility plan in place – 2017 - 2020

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 governing body actively supports and ensures that all learners with healthcare needs are able to participate in trips and visits. The governing body is aware of legal requirements to make reasonable adjustments to trips and residential visits ensuring full participation from all learners. (See 'Annexe 1 ' Outline of Legal Framework)
- All members of staff are made aware of how a learner's healthcare needs may impact on participation, and seek to accommodate any reasonable adjustments, which would increase the level of participation by the learner. All Staff carefully consider how to accommodate the sharing of personal information with third parties if necessary for off-site activities (in compliance with the Data Protection Act 1998 and in respecting the learner's rights to privacy). This may include information about the healthcare needs of learners, what to do in an emergency and any additional support, medication or equipment needed.
- Additional safety measures to those already in place may be necessary to support learners with health care needs during visits or activities outside of the normal school timetable .e.g.

arrangements for taking medication and ensuring sufficient supplies for residential visits may be required for individual pupils.

- All staff supervising visits are made aware of learner's healthcare needs and are able to administer medication (if required). In the case of a medical emergency the Trip Leader or Deputy leader would take the lead responsibility.

Parents are asked to supply the following:

- Details of medical conditions
- Emergency contact numbers
- The learner's GP's name, address and phone number
- Information on whether the learners has spent a night away from home before and their ability to cope effectively
- Written details of any medication required (including instructions on dosage/times)
- Parental permission if the young people needs to administer their own medication or agreement for a volunteer staff member to administer
- Information on any allergies/phobias
- Information on any special dietary requirements
- Information on any toileting difficulties, special equipment or aids to daily living
- 'Fit to travel' certificate written by the GP/consultant if the child has a significant medical need (without this the insurance maybe invalid)

Exercise and physical activity

We fully understand the importance of all pupils taking part in physical activities and staff make appropriate adjustments to sports and other activities to make them accessible to all learners.

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

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

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

Food Management

Food is provided by our school cook on site and therefore when required consideration is given to the dietary needs of learners.

Where a need occurs, menus can be provided to parents and learners, with lists of ingredients and nutritional information.

When providing food for trips, consideration is given to the dietary and treatment needs of the pupils taking part. Food provided for snacks in the school also takes the dietary and treatment needs of these pupils into account.

Risk assessments

All staff are fully aware of the schools' risk assessment systems and when a risk assessment is required. Inclusion is of paramount importance and every effort is made to develop adjustments or alternatives activities rather than separate provision.

In addition, there are duties under the Equality Act 2010 to prepare and implement accessibility strategies and plans. These strategies and plans deal with matters related to increasing participation of disabled learners. (See 'Annexe 1 – Outline of Legal Framework')

Sharing Information

We work collaboratively and sensitively with all stakeholders to ensure that all information pertaining to individual pupils' health needs is kept up to date and shared appropriately, taking into consideration issues of confidentiality. Information is held confidentially in pupil files (main office) & pupil profiles (classrooms), unless learner and parental consent has been given in advance for sharing more publically e.g. on the staff notice board.

Teachers, supply teachers and support staff (this may include catering staff and relevant contractors)

All Staff have access to the relevant information, particularly if there is a possibility of an emergency situation arising.

Where suitable, and following appropriate consent, our staff room notice board is used to display information on high-risk health needs, first aiders and certificates, emergency procedures etc. Information may also be shared as part of our daily staff briefings and/or during weekly staff meetings.

* However it must be noted, that at all times the learner's right to privacy must be taken into account.

Parents and learners

We recognise that parents and learners should be active partners, and to achieve this we ensure that parents are fully aware of the care their child receives as well as their own rights and responsibilities.

To help achieve this we:

- Make healthcare policies easily accessible, online and in hard copy
- Ask parents to sign a consent form, which clearly details the bodies, individuals and methods through information will be shared.

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

- On admission to the Court School all information appertaining to learners' individual health care needs is collected in consultation with parents and where appropriate specialist health professionals. Parents of all those pupils who are prescribed regular daily medication e.g. those pupils on medication for ADHD complete the following documentation.
- Contact details for emergency services
- Parental agreement for school to administer medicine
- Head teacher agreement to administer medicine

The following documentation is also collected and maintained, where appropriate.

- Medical Log - Record of medicine stored for and administered to an individual learner
- Medical Log - Record of medicines administered to all learners by date
- Request for learner to administer own medicine
- Staff training record – administration of medicines
- Medication incident form

New records are completed when there are changes to medication or dosage. We ensure that the old forms are clearly marked as being no longer relevant and stored in line with their information retention policy. All administration of medication is recorded on the appropriate forms. If a learner refuses their medication, staff record this and parents are informed of this non-compliance as soon as possible.

Storage, access and the administration of medication and devices .

Learners may require medication many reasons and this should only be administered with prior agreement and consent given by the parent/legal guardian. Medicines are only be given if prescribed by the GP. No child under 16 should be given medicines containing Aspirin.

Arrangements to give medication in setting

- A parental request form is completed each time there is a request for medication to be administered by staff, or for a learner to self-administer their own medication. This arrangement must be agreed, documented and dated by the Head teacher. A copy is kept on file.
- In the case where medication a long-term arrangement, a letter must accompany the request from the learner's GP or consultant explaining this?
- Amendments to the medication will only be accepted in writing from a health professional and this should again be kept on file. **Verbal messages cannot be accepted.**

Receiving medication in setting

Medication cannot be accepted unless it is in its original container, clearly labelled with the following :

- Learner's name
- Name and strength of medication
- Dosage, frequency and time the medication should be given
- Expiry date
- Advice about storage

Storage of medication

- All medication is stored in a locked cupboard away from other children and young people. The key(s) are kept in an accessible place known to the designated members of staff in each classroom. Medications that require refrigeration are stored in sealed containers that are clearly labelled. Further advice can be obtained from the **COSHH guidelines, Control of Substances Hazardous to Health, 2002**.
- In most cases learners should be allowed to carry asthma inhalers with them to ensure easy access. This would be reflected in the learners' IHP.

Administering medication

- Any members of staff willing to administer medication receive appropriate training and guidance, and are aware of any possible side effects of the medication. Advice will also be sought from health professionals – school nurse and school paediatrician
- Parents are advised not to provide any medication in pre-drawn doses/syringes (unless this is how it is dispensed by the pharmacist) or in drinks. It must come in the original packaging with a pharmacy label intact. *There must be a syringe provided to help in the measurement of the correct dose.
- Medicines will only be given according to the prescription given by the GP. Parents should ensure a copy of this is available.
- Medicines will not be given if they are out of date. Parents will be advised of the need to replace the medicines immediately. It is the parent's responsibility to dispose of any unwanted medicines.
- When medication is administered there should always be two members of staff to check the medication and the details checked:
- A learner may self-administer some medications e.g. asthma inhalers. If self-administering medication, whether supervision is required is clearly identified on all forms relating to medication. This is also logged and a record kept.

- A medical log form is completed to show the learner's name and DOB, the date, time and medication name and dose and two members staff should sign this.
- Staff should not give any medication if a medical judgement is required to determine the need unless an emergency but this should be in accordance with the agreed IHP.
- If a learner refuses their medication, staff will record this, and parents will be informed as soon as possible. If a learner misuses any medication, their parents will be informed as soon as possible. The school will ask parents to seek healthcare advice as appropriate. If parents cannot be contacted immediately, staff will consider seeking immediate healthcare advice.
- Staff involved in the administration of medication will be familiar with how learners' consent to treatment. Further information on this from Welsh Government can be found in the Patient Consent to Examination and Treatment – Revised Guidance (NHS 2008)

Hygiene and Infection Control

- All staff are familiar with normal procedures for avoiding infection and follow basic hygiene procedures. Staff have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressing or equipment.

Disposal of medications

- Any unused medication will always be returned to the parent to be disposed of. If this is not possible, it will be returned to a local pharmacy
- Advice will be sought from the school nurse and or local pharmacy for the disposal of medications (i.e. for diabetes) that are pre-assembled and contain a needle as sharps boxes are essential for the disposal of needles.

Emergency Medications

Emergency medications (i.e. epi pen, buccal midazolam).

- All pupils requiring emergency medication have an IHP detailing how to administer the appropriate medication and what to do in the event of an emergency.
- The location of emergency medications is known and easily accessible to all staff but not accessible to other children and young people
- Under no circumstances will emergency medications be used for another learner displaying the same symptoms. If there are concerns an ambulance will be called immediately.
- All appropriate staff members receive training in how to administer any emergency medications. If a pupil forgets their emergency medications the parent/carer will be contacted and advised either to bring it in immediately or they will be required to take their child home.
- If emergency medications are given the parents or carers and GP will be informed and record retained of this kept on file

Emergency Procedures

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

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

If a pupil needs to be taken to hospital, a member of staff will remain with the pupil until a parent arrives. If necessary this also includes accompanying them in an ambulance to hospital. The member of staff should have details of any known healthcare needs and medication.

Pupils will only be taken to hospital in staff cars if there are extreme reasons. If this is necessary, another adult will also be required to accompany. Staff MUST have public liability insurance.

Training

Training provided should be sufficient to ensure staff are competent, have confidence in their ability to support learners and fulfil IHP requirements.

If a learner has a complex needs, input may be needed from healthcare services and the local authority who will be able to advise and signpost to further training and support.

All staff, irrespective of whether they have volunteered to assist or support learners with healthcare needs, may come into contact with learners who have healthcare needs. Therefore all staff undertake general first aid training and have a basic understanding of common conditions to ensure recognition of symptoms and understand where to seek appropriate assistance.

*New and temporary staff should be made aware of what preventative and emergency measures are in place so staff can recognise the need for intervention and react quickly.

Education other than at school (EOTAS)

If any learner is unable to attend school because of their healthcare needs and this is known in advance we ensure that the LA are informed so EOTAS service is provided from the start of the absence.

If a learner is discharged from hospital we liaise closely with Health professionals to ensure any care plan is integrated into an IHP.

Complaints Procedure

We always endeavour to handle any concerns or complaint by listening and working collaboratively with parents and carers to resolve the situation. However if this is not possible we would follow the staged procedure as outlined in our Complaints Policy.

Individual Healthcare Plans (IHP)

An IHP identifies the necessary safety measures to support any learner with a healthcare need and ensures that they and others are not put at risk.

They will be essential, in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed.

* There are a number of pupils at the Court School who are on medication for ADHD which is regularly administered in school. These will require a simple IHP outlining necessary information etc .

Roles and Responsibilities in the creation and management of IHPs

IHPs will outline how a learner's needs can be met and should be easily accessible to all who need to refer to it, while maintained the required levels of privacy. Each plan should capture key information and actions required to support the learner effectively.

A health professional must take a lead role in writing a Health Care Plan; this could be the school nurse, specialist nurse, special needs health visitor or consultant. Their knowledge of the condition, medication, emergency procedures and the learner is paramount. This should be completed involving the:

- The learner (where possible)
- Parent/carer
- Input or information from a previous education setting
- Appropriate healthcare professionals
- Social care professions
- Head teacher and/or delegated responsible individual for healthcare needs across the setting
- Teacher and support staff, including catering staff if necessary
- Setting staff who have agreed to administer medication or be trained in emergency procedures

An Individual Healthcare Plan (IHP) may include:

- The medical condition: its triggers, signs, symptoms and treatments and how it is managed on a day-to-day basis, in particular during setting hours
- The learner's needs: including medication (dose, side effects and storage) and other treatments; time; facilities; equipment; testing; access to food and drink where this is used to manage their condition; dietary requirements; and environmental issues e.g. crowded corridors, travel time between lessons
- The level of support needed (some learners will be able to take responsibility for their own healthcare needs) including in an emergency
- Who will provide this support, their training needs and expectations of their role
- Who in the setting needs to be aware of the learner's healthcare needs and the support they require
- Written permission from parents and the Head Teacher for the administration of medicines by staff or self-administration by the learner during setting hours
- Separate arrangements or procedures required for setting trips or other setting activities outside of the normal setting timetable that will ensure the learner can participate e.g. risk assessments

- Where confidentiality issues are raised by the parent/child/young person, the designated individuals to be entrusted with information about the child's condition
- Home to school transport – this is the responsibility of the local authority
- Emergency Procedures including whom to contact, and contingency arrangements.
- Review date

If the plan needs revising the education setting and health professional should meet with the parents and a new plan written and signed by all parties.

*The plan should also be made available to all staff coming into contact with the learner

In most cases, especially concerning short term illnesses such as those requiring a course of antibiotics, a detailed IHP will not be necessary. In such circumstances the name of medication, dosage, and time administered and any possible side effects will be recorded. These procedures will be conformed in writing with the learner (where appropriate), the parents and the education setting.

Confidentiality

It is important that relevant staff (including temporary staff) are aware of the healthcare needs of their learners, including changes to IHPs. IHP will likely contain sensitive or confidential information. The sharing, and storing of information must comply with the Data Protection Act 1998 and not breach the privacy rights of or duty of confidence owed to the individuals.

Unacceptable Practice

It is not acceptable practice at the Court School to:

- Prevent learners from attending education or reduce hours due to their healthcare needs, unless this would be likely to cause harm to the learner or others.
- Prevent learners from easily accessing their inhalers, medication and administering of 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
- Send learners with healthcare needs home frequently for reasons associated with their medical condition.
- Prevent learners from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition 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
- Prevent, or create unnecessary barriers for learners from participating in any aspect of education setting life, including setting trips e.g. by requiring parents to accompany the child

- 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.

Please refer to the 'Unacceptable Practice' section in the Welsh Government's 'Supporting Learners with Healthcare Needs' statutory guidance.

Outline of legal framework

There are various duties on schools and local authorities which are relevant to safeguarding the welfare of children and young people with healthcare needs in the educational context. The main provisions are outlined below.

This is not an exhaustive list of the law relevant to this subject. Nor is it an authoritative statement or description of the law, which only courts can give. The descriptions below are summaries of the main relevant provisions. For any particular duty, there will be further statutory provisions and there may be case law (and possibly such developments after the issue of this guidance), affecting the meaning of the provisions (e.g. defining terms), or how a function is to be exercised (e.g. matters to which the person exercising the function must have regard). It should not be relied upon as a substitute for seeking legal advice or reading the actual provisions. Legislation can be found at www.legislation.gov.uk though it is not all in revised and up to date form.

General

As part of the common law, those responsible for the care and supervision of children and young people, including teachers, and other staff in charge of children, owe a duty of care to act as any reasonably prudent parent would in relation to their own children.

A person without parental responsibility for a child or young person, but with the care of that child, may do what is reasonable in all the circumstances of the case for the purpose of safeguarding or promoting the child's welfare. This is subject, for example, to a court order prohibiting certain steps being taken in relation to that child or young person without the Court's consent (**Section 3(5) of the Children Act, 1989**).

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 pupils at the school (**Section 21(5) of the Education Act, 2002**).
- 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 and young people (i.e. those under 18) who are pupils at the school (**Section 175(2) of the Education Act, 2002**). In considering what arrangements are required, the governing body is to have regard to any guidance by the Welsh

ministers (**Section 175(4) of the Education Act, 2002**). Governing bodies are also subject to duties under the **Equality Act, 2010** – see the section below for more details.

Statutory duties on local authorities

- Local authorities have general functions in relation to providing education for their area (*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 now otherwise receive it for any period due to illness, exclusion from school or otherwise (**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 (**Section (4) of the Education Act, 1996**). In determining what arrangements to make under **Section 19(1) or 19(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 and young people (i.e. under 18 years old), (**Section 175(1) of the Education Act, 2002**).

In considering what arrangements are required, the local authority is to have regard to any guidance given by the Welsh Ministers (see footnote 3 on previous page), (**Section 175 (4) of the Education Act, 2002**). Some of this guidance is issued under **Section 175(4)** – it is marked in bold font.

- Local authorities have general duty to safeguard and promote the welfare of children and young people in need within their area (and so far as consistent with that, to promote the upbringing of those children by their families) by providing a range and level of services appropriate to those children's needs (**Section 17 of the Children Act 1989**).
- Local authorities must make arrangements to promote cooperation between various persons and bodies, including a local health board for an area within the local authority's area and an NHS Trust providing services in the area. The arrangements are to be made with a view to:
 - Improving the well-being of children and young people within the area;
 - Improving the quality of care and support for children and young people provided in the area (when amendments made by the **Social Services and Well-Being (Wales) Act, 2014** come into force).
 - Protecting children and young people who are experiencing or at risk of, abuse and other harm (when those amendments come into force), (**Section 25 of the Children Act, 2004**).
- **The Education (School Premises) Regulations, 1999, S.I. 1999/2** set out requirements (for which local authorities are responsible) regarding facilities at maintained schools. These include requirements regarding accommodation for medical examination and treatment of pupils and the care of sick or injured pupils (**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 disabled.

The responsible body of a school must not discriminate, harass nor victimise disabled pupils 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 pupils can participate in the schools' curriculums;
- Improving the physical environment of the schools for the purpose of increasing the extent to which disabled pupils are able to take advantage of education and benefits, facilities or services provided or offered by the schools;
- Improving the delivery to disabled pupils of information which is readily accessible to pupils who are not disabled (*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 pupil referral unit, 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 (**Equality Act, 2010, (Statutory Duties) (Wales) Regulations, 2011 S.I. 2011/1064**).

Other relevant provisions

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

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

The **Misuse of Drugs Act, 1971** and regulations made, deal with restrictions (for example, concerned with supply and possession), on drugs which are controlled. Learners may be prescribed controlled drugs.

Appendix 3:2

Useful relevant legislation for England and Wales

The legislation listed below can be referred to clarify the main provisions relevant to children and young people with healthcare needs.

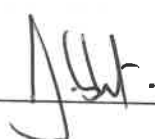
- **Children and Families Act, 2014 (Section 100)** - places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.
- **Section 21 of the Education Act, 2002** – provides that governing bodies of maintained schools must, in discharging their functions in relation to the conduct of the school, promote the wellbeing of pupils at the school.
- **Section 175 of the Education Act, 2002** – provides that governing bodies of maintained 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 who are pupils at the school. Paragraph 7 of Schedule 1 to the Independent School Standards (England) Regulations 2010 set this out in relation to academy schools and alternative provision academies.
- **Section 3 of the Children Act, 1989** – provides a duty on a person with the care of a child (who does not have parental responsibility for the child) to do all that is reasonable in all the circumstances for the purposes of safeguarding or promoting the welfare of the child.
- **Section 17 of the Children Act, 1989** – gives local authorities a general duty to safeguard and promote the welfare of children in need in their area.
- **Section 10 of the Children Act, 2004** – provides that the local authority must make arrangements to promote cooperation between the authority and relevant partners (including the governing body of a maintained school, the proprietor of an academy, clinical commissioning groups and the NHS Commissioning Board, with a view to improving the wellbeing of children, including their physical and mental health, protection from harm and neglect, and education. Relevant partners are under a duty to cooperate in the making of these arrangements.
- **Equality Act, 2010** – the key elements are as follows:
 - They **must not** discriminate against, harass or victimise disabled children and young people

- They **must** make reasonable adjustments to ensure that disabled children and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory: adjustments must be planned and put in place in advance, to prevent that disadvantage
- **Education Act, 1996, Chapter 1 (Special Educational Needs)**
- **Care Standard Act, 2000**
- **Health and Safety at Work Act, 1974, Section 2** - and the associated regulations, provides that it is the duty of the employer (local authority, governing body or academy trust) to take reasonable steps to ensure that staff and pupils are not exposed to risks to their health and safety.
- **Misuse of Drugs Act, 1971** – and associated regulations the supply, administration; possession and storage of certain drugs are controlled. Schools may have a child who has been prescribed a controlled drug.
- **Medicines Act, 1968** – specifies the way that medicines are prescribed, supplied and administered within UK and places restrictions on dealings with medicinal products, including their administration.

Other relevant legislation

- **Every Child Matters, 2003**
- **UN Convention on the Rights of the Child, 1989**
- **Management of Health and Safety at Work Regulations, 1999**
- **Control of Substances Hazardous to Health Regulations, 2002**
- **The Regulatory Reform (fire safety) Order, 2005**
- **Chronically Sick and Disabled Persons Act, 1970**

Signature of chair of governing body:

A handwritten signature in dark ink, appearing to be 'J. H.', is written over a horizontal line.

Date: 24/06/25

Policy to be reviewed/updated every two years or sooner if required.