Cyngor Sir CEREDIGION County Council

Ysgol Penrhyn-coch and
Ysgol Penllwyn

Gyda'n gilydd gallwn lwyddo

HEALTHCARE NEEDS POLICY

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Introduction

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

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

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

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

To this end, each section heading includes page numbers in brackets which correspond to the relevant sections of the statutory guidance.

Key principles

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

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

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

Legal requirements

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

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

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

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

The governing body is committed to promoting the well-being of learners and will oversee the development and implementation of arrangements to achieve this aim.
The governing body and the school have considered the points outlined on pages 6-11 of the statutory guidance when developing arrangements and procedures for promoting the well-being of learners
In accordance with the Welsh Government statutory guidance the local authority and the governing body have considered the following points in developing this policy and its procedures:

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

Pages 6–11 of the statutory guidance refer to the minimum standards of expected practice for the following. These must be followed in accordance with the Welsh Government statutory guidance.

- Local authorities;
- Governing bodies;
- Headteachers;
- Teachers and support staff;
- Pupils and parents/carers;
- NHS Wales school health nursing services, third sector organisations and other specialist services.

Any staff member within the education setting may be asked to provide support to learners with healthcare needs, including assisting or supervising the administration of medicines. This role is entirely voluntary. Staff members must receive sufficient and suitable training and achieve the necessary level of competence before they take on the responsibility. No staff member can be required to administer or supervise medication unless it forms part of their contract, terms and conditions or a mutually agreed job plan.

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

Creating an accessible environment (pages 11-13)

Physical access to school building/s

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

Reasonable adjustments - auxiliary aids or services

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

Day trips and residential visits

The governing body and the school will ensure that pupils with healthcare needs and/or disabilities receive equal opportunities with regard to day trips and residential visits. The school may contact the Ceredigion Health and Safety Service for any additional advice and support in this regard. For off-site activities, in compliance with the Data Protection Act 1998, the school may share information with relevant third parties where necessary. This may include information about the healthcare needs of learners, what to do in an emergency and any additional support, medication or equipment needed.

Social interactions e.g. clubs and social activities

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

Exercise and physical activity

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

Food management

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

The school receives its catering provision through a Service Level Agreement (SLA) with the local authority catering service. Updated school menus will be shared with parents and learners whenever changes are made. At the beginning of each academic year, the school will collect and maintain up-to-date information regarding pupils' allergies, intolerances and dietary requirements to ensure appropriate arrangements can be made. Nutritional information and allergen

details provided by the catering service will be made available to parents on request. This procedure should be read in conjunction with the school's Allergies Policy and relevant health and wellbeing policies.

Undertaking any necessary risk assessments

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

Arrangements for qualifications, examinations and assessments

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

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

Education other than at school (EOTAS)

Where a learner is absent from school for a period of 15 days or less, the school will provide work to be completed at home, if the learner's condition permits, and support the learner to catch up on their return.

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

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

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

Sharing information (pages 13-14)

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

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

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

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

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

Information will be shared in line with page 13 of the statutory guidance.

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

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

The school will ensure that learners know who to inform if they feel ill or require support.

If and when a pupil is placed with another service or another setting for some time (e.g. PRU), the school will ensure that the appropriate healthcare needs information is shared in accordance with **Data Protection Policy** (UK GDPR and Data Protection Act 2018)
- **Supporting Pupils with Healthcare Needs Policy**
- **Additional Learning Needs (ALN) Policy** (where relevant)
- **Safeguarding and Child Protection Policy**

and with the consent of the learner and their parent/carer.

Note here how you will communicate with parents/carers about their child's medication. There should be mechanism in place to communicate with parents/carers about their child's medication on a daily basis. This should be on the same day and in writing (e.g. in text or email) so that the school has a written record. Note exceptions to this rule e.g. where emergency medication has been administered.

Procedures and record keeping for the management of learners' healthcare needs (pages 14 & 26)

The school maintains accurate and up-to-date records of pupils' healthcare needs, including Individual Healthcare Plans (IHPs), medical conditions, allergies and medication requirements. Healthcare information is reviewed regularly and updated in partnership with parents/carers and relevant healthcare professionals as required. New documentation will be completed whenever there is a change to an IHP, medication, dosage or medical need. Superseded records will be clearly marked as no longer current and retained in accordance with the school's Information Retention, Data Protection and Confidentiality Policies. Relevant healthcare information will be shared with staff on a need-to-know basis to ensure the safety and wellbeing of learners. The administration of medication will be recorded using the school's prescribed medication administration forms (Appendix 5) and managed in accordance with the school's Medication Administration Procedures.

Storage, access and the administration of medication and devices (pages 14-17)

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

The school will only accept prescribed medicines and devices that:

- are in date (it is the parents responsibility to ensure that they are in date)
- have contents correctly and clearly labelled
- are labelled with the learner's name
- are accompanied with written instructions for administration, dosage and storage
- are in their original container/packaging as dispensed by the pharmacist (with the exception of insulin which is generally available via an insulin pen or a pump).

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

Storage

The person with ultimate responsibility for ensuring that medicines are stored safely in the school is the headteacher.

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

Table 1 – storage of medication (including controlled drugs)

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

Medication type	Location
Non-emergency medication	• All non-emergency medication will be kept in a secure place with appropriate temperature or light controls. • If it is a **controlled drug**, additional security measures and controls are advisable.

	Location(s) = above the cupboard in the staff room
Refrigerated	• Some medicines need to be refrigerated. The refrigerator temperature will need to be regularly monitored to ensure it is in line with storage requirements. • Medicines can be kept in a refrigerator containing food, but should be in an airtight container and clearly labelled. • A lockable medical refrigerator should be considered if there is a need to store large quantities of medicine.
	Location(s) = Refrigerator in the staff room
Emergency medication	• Emergency medication must be readily available to pupils who require it at all times during the day or at off-site activities. • All staff will be made aware of the location of emergency medication. • Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline auto-injectors (pens) should be readily available to pupils and not locked away. This is particularly important to consider when outside of the education setting's premises, e.g. on trips. • If the emergency medication is a **controlled drug** it should be kept as securely as possible so as to minimise the risk of unauthorised access while also allowing quick access if this might be necessary in an emergency. For example, keys should not be held personally by a member of staff. • Where staff administer emergency medication to a pupil, this will be recorded.
	Location(s) = within the classrooms of pupils with medical conditions
	Asthma inhalers will be stored in a clean dust free container

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

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

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

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

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

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

Parents/carers must complete the form in appendix 2 before the school will administer ANY medication to their child, including when it forms part of an IHP.

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

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

In the delegated person's absence class teacher's will take on this responsibility.

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

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

Lead person to approve medication administration requests:	Headteacher/delegated person
In headteacher/delegated persons absence named person to approve medication administration requests:	Insert name Deputy headteacher and class teacher

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

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

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

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

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

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

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

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

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

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

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

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

Self-medication

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

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

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

Emergency procedures (page 17)

The school will follow its Supporting Learners with Healthcare Needs Policy, First Aid Policy, Safeguarding Policy, and Medication Administration Procedures to ensure an effective response to medical emergencies.

The school will ensure that the location of learners' healthcare records, Individual Healthcare Plans (IHPs), emergency contact details and medication are known to all relevant staff. Where a learner has an identified healthcare need, their IHP will clearly define what constitutes an emergency, outline the signs and symptoms to be observed, and detail the actions staff should take in response. Relevant staff will receive appropriate information and training to ensure they are aware of emergency procedures and their responsibilities.

In any situation requiring emergency medical assistance, staff will call 999 immediately and follow the guidance provided by the emergency services operator. Parents/carers will be contacted as soon as practicable following the emergency call.

Where a learner needs to be transported to hospital, a member of staff will accompany the learner and remain with them until a parent, carer or other responsible adult arrives. The accompanying staff member will take any relevant healthcare records, Individual Healthcare Plans, medication and emergency contact details to support the learner's care.

All pupils will be encouraged and taught, in an age-appropriate manner, to alert a member of staff immediately if they become aware of a medical emergency involving themselves or another learner.

Staff must refer to Appendix 1: Contacting Emergency Services for the procedure to be followed when emergency services are required.

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Training (pages 17-18)

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

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

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

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

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

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

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

School transport (page 21)

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

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

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

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

Reviewing policies, arrangements and procedures

The policy will be reviewed as required.

Insurance arrangements (page 22)

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

Complaints procedure (page 22)

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

The governing body's complaints procedure describes how complaints can be escalated from teacher to headteacher, then to the governing body and then to the local authority. The complaints procedure is outlined in (state where) and can be obtained from (insert location e.g. website address/details of how to obtain a copy).

Individual healthcare plans (IHPs) (pages 23-26)

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

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

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

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

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

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

- the pupil
- the parents/carers
- input or information from previous education setting
- appropriate healthcare professionals
- social care professionals
- the headteacher and/or delegated responsible person for healthcare needs across the setting
- teachers and support staff, including catering staff
- any individuals with relevant roles such as a first aid coordinator, a well-being officer, and SENCo.

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

Identify learners with healthcare needs

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

Gather information

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

Establish if an IHP should be made

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

If it is decided that an IHP should be made…

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

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

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

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

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

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

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

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

If a pupil refuses to follow their IHP or take their medicine or carry out a necessary procedure, staff should not force them to do so, but follow the setting's defined arrangements, agreed in the IHP. Parents/carers will be informed as soon as possible so that an alternative arrangement can be considered and health advice will be sought where appropriate.

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

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

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Appendix 1

Contacting Emergency Services

Request for an Ambulance

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

1. State your telephone number 01970828566/880277.
2. Give your location as follows Ysgol Penrhyn-coch, SY23 3EH or Ysgol Penllwyn Sy23 3LP.
3. State that the postcode is [insert your address]..
4. Give your name.
5. Give the name of the pupil and a brief description of symptoms.
6. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to …….
7. Don't hang up until the information has been repeated back.

Speak clearly and slowly and be ready to repeat information if asked to.

Put a completed copy of this form by all the telephones in the education setting.

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

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

Name of child		Date of birth	
Class		Healthcare need	

Medicine			
Name, type and strength of medicine *(as described on the container)*			
Date dispensed		Expiry Date	
Dosage		Timing	
Method of administration			
Duration of treatment			
Special precautions			
Special requirements for administering medication e.g. two staff present, same gender as pupil.			
Storage requirements			
Are there any side effects that the school needs to know about?			
Any other instructions			
Pupil to self-administer medication under supervision from a stored location		Yes /No (Delete as appropriate) *If yes, pupil must also sign declaration**	
Pupil to carry and self-administer medication		Yes / No (Delete as appropriate) *If yes, pupil must also sign declaration**	
Procedures to take in an emergency			
Agreed review date (*To be completed with the school)*			
Name of member of staff responsible for the review (*To be completed with the school)*			

Contact details	**Contact 1**	**Contact 2**
Name		

Daytime telephone number		
Relationship to the child		
Address		
Post Code		

- I have read and agree to the school giving medication in accordance with the school policy. I understand my parental/carer obligations under the Welsh Government guidelines (http://learning.gov.wales/resources/browse-all/supporting-learners-with-healthcare-needs/?skip=1&lang=en).
- The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff to administer the medicine in accordance with the information given above and the school policy.
- I will inform school of any new information from health professionals in regard to my child, e.g. if there are any changes in dosage or frequency or if it is stopped. I will ensure that this is in writing from the health professional.
- I understand that it is my responsibility to replenish the medication supply in the school and collect expired or unused medication.
- Where correct medication is not readily available on a given day and places the child at risk, the headteacher has the right to refuse to admit my child into the school until said medication is provided.
- I accept responsibility to provide in-date medication which is correctly labelled.
- I consent for the information in the form to be shared with health professionals/emergency care.
- If my child has received any emergency medication prior to school, I will inform the headteacher/delegated member of the school staff before school starts.

Parent/carer signature:		Date	
I would like my child to administer and/or carry their medication			
Parent/carer signature:		Date	
Pupils signature		Date	

HEADTEACHER/DELEGATED PERSONS AGREEMENT TO ADMINISTER MEDICATION

It is agreed that (insert name of pupil)			
Will receive (*insert name and quantity of medication*)			
at (*insert time medicine is to be administered*)			
The staff member to give / supervise while the learner takes their medication will be (*insert name of member of staff)*			
This arrangement will continue until (*e.g. either end date if course of medication or until instructed by parents/carers)*			
Signed:		Date	
Name (headteacher/delegated person)			
☐ Individual Healthcare Plan in place; OR ☐ Individual Healthcare Plan not required			

Appendix 3

Model Individual Healthcare Plan (IHP)

(Adapted from www.medicalconditionsatschool.org.uk)

Links to IHP templates for specific medical conditions: http://medicalconditionsatschool.org.uk/

Please note: this is a very comprehensive IHP. Not all sections will be applicable. The school only needs to use the sections that are relevant and helpful to the care of the pupil.

If health professionals have already provided their own health care plan, the school might not need to create an IHP as long as the one from the health professional covers all the information that the school needs.

Section 4 of the policy will be followed when developing this IHP.

1. PUPIL INFORMATION

1.1 Pupil details

Pupil's name:	
Date of birth:	
Year group:	
Nursery/School/College:	
Address:	
Town:	
Postcode:	
Medical condition(s): *Give a brief description of the medical condition(s) including description of signs, symptoms, triggers, behaviours.*	
Allergies:	
Date:	
Document to be updated/reviewed:	
Review triggers:	

1.2 Family contact information

Name:			
Relationship:			
Home phone number:			
Mobile phone number:			
Work phone number:			

Email:			

1.3 Essential information concerning this pupils' health needs

	Name	Contact details
Specialist nurse (if applicable):		
Key worker:		
Consultant paediatrician (if applicable):		
GP:		
Headteacher:		
Link person in education:		
Class teacher:		
Health visitor/ school nurse:		
SENCo:		
Other relevant teaching staff:		
Other relevant non-teaching staff:		
Person with overall responsibility for implementing plan:		
Person responsible for administering/supervising medication:		
Arrangements for cover in these two peoples absence:		
Any provider of alternate provision:		

This pupil has the following medical condition(s) requiring the following treatment.	
Medication administration	Please complete parent/carer agreement for school to administer medication form (appendix 2) and attach to this IHP. Form 1 = Form 2 =

1.4 Sharing information and record keeping

In the best interests of the pupil the school might need to share information with school staff and other	Yes / No (please circle)

professionals about your child's healthcare needs e.g. nursing staff. Do you consent to this information being shared?	
What records will be kept about the pupil's healthcare needs, and how it will be communicated with others?	

2. ROUTINE MONITORING (IF APPLICABLE)

Some medical conditions will require monitoring to help manage the pupil's condition.

What monitoring is required?	
When does it need to be done?	
Does it need any equipment?	
How is it done?	
Is there a target? If so what is the target?	

3. EMERGENCY SITUATIONS

An emergency situation occurs whenever a pupil needs urgent treatment to deal with their condition.

What is considered an emergency situation?	
What are the symptoms?	
What are the triggers?	
What action must be taken?	
Are there any follow up actions (e.g. tests or rest) that are required?	

4. IMPACT OF MEDICAL CONDITION AND MEDICATION ON PUPIL'S LEARNING

(Impact statement to be jointly produced by health professional and a teacher)

How does the pupil's medical condition or treatment affect learning? *i.e. memory, processing speed, coordination etc.*	
Actions to mitigate these effects	
Does the pupil require any further assessment of their learning?	

5. IMPACT ON PUPIL'S LEARNING and CARE AT MEAL TIMES

	Time	Note
Arrive at school		
Morning break		
Lunch		
Afternoon break		
School finish		
After school club (if applicable)		
Other		

☐ Please refer to home-school communication diary
☐ Please refer to school planner

6. CARE AT MEAL TIMES

What care is needed?	
When should this care be provided?	
How's it given?	
If it's medication, how much is needed?	
Any other special care required?	

7. PHYSICAL ACTIVITY

Are there any physical restrictions caused by the medical condition(s)?	
Is any extra care needed for physical activity?	
Actions before exercise	
Actions during exercise	
Actions after exercise	

8. TRIPS AND ACTIVITIES AWAY FROM SCHOOL

What care needs to take place?	
When does it need to take place?	
If needed, is there somewhere for care to take place?	
Who will look after medication and equipment?	
Who outside of the school needs to be informed?	
Who will take overall responsibility for the pupil on the trip?	

9. SCHOOL ENVIRONMENT

Can the school environment affect the pupil's medical condition?	
How does the school environment affect the pupil's medical condition?	
What changes can the school make to deal with these issues?	
Location of school medical room	

10. EDUCATIONAL, SOCIAL & EMOTIONAL NEEDS

Pupils with medical conditions may have to attend clinic appointments to review their condition. These appointments may require a full day's absence and should not count towards a pupil's attendance record.

Is the pupil likely to need time off because of their condition?	
What is the process for catching up on missed work caused by absences?	
Does this pupil require extra time for keeping up with work?	
Does this pupil require any additional support in lessons? If so what?	
Is there a situation where the pupil will need to leave the classroom?	
Does this pupil require rest periods?	
Does this pupil require any emotional support?	
Does this pupil have a 'buddy' e.g. help carrying bags to and from lessons?	

11. STAFF TRAINING

Governing bodies are responsible for making sure staff have received appropriate training to look after a pupil with regard to healthcare administration, aids and adaptive technologies. School staff should be released to attend any necessary training sessions it is agreed they need.

What training is required?	
Who needs to be trained?	
Has the training been completed?	
Headteacher/delegated person signature	

13. TRANSPORT TO SCHOOL

What arrangements have been put in place?	
Who will meet the pupil in school?	

14. PERSONAL CARE

For pupils requiring intimate care as part of their IHP, please refer to the schools intimate care policy.

What arrangements have been put in place in relation to any personal care needs across the school day?	

15. PLEASE USE THIS SECTION FOR ANY ADDITIONAL INFORMATION FOR THE PUPIL.

We suggest the following are stored together:

☐ IHP from health
☐ Medication consent form (if applicable)
☐ Statement of SEN / individual education plan / learning and skills plan
☐ One page profile
☐ Risk assessment
☐ Personal evacuation plan

16. SIGNATURES

	Name	**Signature**	**Date**
Headteacher/delegated person			
Young person			
Parents/ carer			
Health professional			
School representative			
School nurse			

Appendix 4

STAFF TRAINING RECORD – ADMINISTRATION OF MEDICATION / TREATMENT

Name (s)	
Type of training received	
Date training received	
Date training completed	
Training provided by	
Profession and title	

I confirm that the above staff member(s) have received the training detailed above and is competent to carry out any necessary treatment / administration of medication.

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: .....

APPENDIX 5 - RECORD OF MEDICATION ADMINISTERED TO A PUPIL

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

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

Date	Time	Dose	Any reactions	Staff 1 Signature	Staff 2 signature

ATTACH IHP / CONSENT FORM TO THIS FORM

Appendix 6 **Medication/healthcare incident report**

Pupil's name:			
Home address:			
Telephone number:			
Date of incident:		Time of incident	

Correct medication and dosage:	
Medication normally administered by:	
	Pupil
	Pupil with staff supervision
	Nurse / school staff member

Type of error:	
	Dose administered later than scheduled time
	Omission
	Wrong dose
	Additional dose
	Wring pupil
	Dose given without permission on file
	Dietary
	Dose administered by unauthorised person
	Other

Description of incident:

Action taken:		
	Parent /carer notified: date and time -	
	School nurse notified: date and time -	
	Physician notified: date and time -	
	Poison control notified: date and time -	
	Pupil taken home	
	Pupil taken to hospital	
	Other: details:	

Notes/further comments:

Name:		Role:	
Signature:		Date:	

Appendix 7 - **Unacceptable practice**

It is not acceptable practice to:

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

- prevent learners from easily accessing their inhalers or other medication, and prevent them from taking their medication when and where necessary

- assume every learner with the same condition requires the same treatment

- ignore the views of the learner or their parents, or ignore healthcare evidence or opinion (although these views may be queried with additional opinions sought promptly)

- send learners with healthcare needs home frequently or prevent them from staying for normal activities, including lunch, unless this is suitably specified in their IHP

- send a learner who becomes ill or needs assistance to a medical room or main office unaccompanied or with someone unable to properly monitor them

- penalise a learner for their attendance record if the absence is related to their healthcare needs. 'Authorised absences' including healthcare appointments, time to travel to hospital or appointment, and recovery time from treatment or illness should not be used to penalise a learner in any way. This includes, but is not limited to, participation in activities, trips or awards which are incentivised around attendance records

- request adjustments or additional time for a learner at a late stage. They should be applied for in good time. Consideration should also be given to adjustments or additional time needed in mock examinations or other tests

- prevent learners from drinking, eating or taking toilet or other breaks whenever needed in order to manage their healthcare needs effectively

- require parents, or otherwise make them feel obliged, to attend the education setting, trip or other off-site activity to administer medication or provide healthcare support to the learner, including for toileting issues

- expect or cause a parent to give up work or other commitments because the education setting is failing to support a learner's healthcare needs

- ask a learner to leave the classroom or activity if they need to administer 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.