

Healthcare Needs Policy



King Henry VIII 3-19 School Ysgol 3-19 Brenin Harri'r VIII

We believe in the limitless capacity for everyone to achieve great things.

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Aims

King Henry VIII 3-19 School is committed to ensuring that all our pupils, including those with healthcare needs, are fully supported in accordance with our legal responsibilities and statutory duties. A cooperative and proactive approach to providing effective and individual support is therefore promoted.

King Henry VIII 3-19 School has arrangements in place that clearly focus upon meeting the needs of pupils with healthcare needs, considering how those needs impact upon their education, attainment and well-being. The school is committed to ensuring all arrangements properly support pupils and minimise disruption to their learning. Arrangements also consider wider safeguarding duties, while seeking to ensure all pupils can access and enjoy the same opportunities. Wherever possible, the school is committed to supporting the pupil in building their understanding and confidence so that they can increasingly self-manage their healthcare needs, dependent upon their ability to do so.

This policy links directly to Local Authority and Welsh Government healthcare guidance and King Henry VIII 3-19 School First Aid Protocol for Staff (Appendix 1).

Roles and responsibilities

Pupil Healthcare Leader

- Ensure the implementation and maintenance of the Welsh Government *Supporting Students with Healthcare Needs* policy.
- Provide day-to-day first aid support and administer prescribed medicines.
- Record the administration of medicines using the Administration of Medication Spreadsheet.
- Check medicines are stored appropriately, expiry dates recorded and regularly checked.
- Update pupil medical information and notes upon the whole school data management system (SIMS).
- Ensure Individual Healthcare Plans are in place for pupils who require them, and that they are regularly reviewed and updated.
- Track, monitor and share Individual Healthcare Plans and associated documentation, alongside completion of accident forms as required.
- Provide staff, including catering staff, with relevant healthcare information and updates related to allergies.
- Liaise with parents, carers and external professionals to develop and review Individual Healthcare Plans, health-based risk assessments and allergy plans.
- Liaise with and be the school link for external vaccination programmes/teams, setting up schedules for vaccination days and supporting their running.
- Organise healthcare training and keep a record of staff who attend, ensuring that the school is able to meet the identified healthcare needs of pupils.
- Support the SRB Lead in organising any specialist training that is required for SRB staff who support pupils with more complex medical needs.
- Provide support to meet the personal care needs of individuals with disabilities in-line with the Equality Act 2010.

- Liaise with the Site and Safety Manager (or their Line Manager if absent) when completing risk assessments, accessibility and evacuation plans linked to pupil's healthcare needs.
- Ensure all First Aid kits for use on trips and within the school are fully resourced.
- Ensure all Accident forms are viewed and signed by the Deputy Headteacher, a hard copy provided to the Site and Safety Manager and sent to the Local Authority.
- Record all accidents using the School Accident Spreadsheet.
- Support pupils with healthcare needs in overcoming the barriers presented to attendance, engagement and progress in learning.

The Headteacher and Governing Body

- Comply with statutory duties by having strategic oversight of the development and implementation of medical arrangements within the school.
- Ensure that The Healthcare Policy and associated protocols are supported by clear communication with staff, parents/carers and other key stakeholders to ensure full implementation.
- Ensure that the School Healthcare Policy is reviewed at least annually.
- Ensure clear understanding of healthcare roles and responsibilities.
- Promote the wellbeing of pupils and staff and support them by upholding their rights.
- Ensure Individual Healthcare Plans are developed, monitored and reviewed in accordance with guidance set out within the School Healthcare Policy (Appendix 4).
- Ensure the School Healthcare Policy includes information relating to emergency situations (Appendix 2).
- Ensure appropriate staff training is available and undertaken to meet all identified healthcare needs.
- Ensure appropriate school insurance is in place.

The Senior ALNCo

- Oversee the role of The Healthcare Lead.
- Ensure Local Authority and Welsh Government healthcare guidance is followed.
- Work alongside professionals, e.g. Occupational Therapists, LA ALN Officers and the SRB Lead where specialist medical supervision and care is required for pupils who have complex medical needs.
- Advise and support the Healthcare Lead where specialist medical supervision and care is required for pupils who have complex medical needs.
- Ensure effective processes are in place for monitoring and recording healthcare needs and the administration of first aid and medicines.
- Ensure effective methods of communication are in place for the sharing of pupil healthcare needs with staff.
- Conduct environmental audits, linked to pupil accessibility and health, where this is requested by external agencies.
- Regularly review and update the School Healthcare Policy and Protocol, providing feedback to the Headteacher and Governing Body as requested.

Teaching and non-Teaching Staff

- Undertake relevant training as required to meet pupil's healthcare needs.
- Have good knowledge of the School Healthcare Policy and Healthcare Protocol for Staff.
- Have good knowledge of Individual Healthcare Plans and how best to support a pupil's medical needs, including during an emergency.
- Have good up-to-date knowledge of pupil medical needs (including allergies) by regularly accessing the Confidential Pupil Update and Pupil Healthcare file via Teams.
- Have good knowledge of healthcare procedures to be followed when organising an off-site activity, or school trip (Appendix 1).
- Ensure equality and equity with regards participation in school activities and events, regardless of a pupil's healthcare needs.
- Make reasonable adjustments for pupils with healthcare needs as appropriate to support their learning, wellbeing and mental health.
- Inform the Healthcare Lead, Wellbeing Lead or Phase Leader if there are any concerns in relation to a pupil's health, or wellbeing.
- Notify the Healthcare Lead immediately where pupils have forgotten asthma pumps, or they are found to be out of date.
- Notify the Healthcare Lead immediately where pupils have forgotten epi-pens, or they are found to be out of date.

Parents/Carers

- Provide the school with appropriate information and, wherever possible, medical evidence where a pupil has been absent through illness.
- Inform the school where a pupil has had an infectious disease or condition while in attendance.
- Provide emergency contact details and notify the school immediately if they change.
- Contribute to the creation and review of Individual Healthcare Plans (IHPs).
- Provide the Healthcare Lead with any relevant healthcare reports, including records of treatment, healthcare plans produced by medical professionals, medical consultations, or a medical diagnosis.
- Notify the Healthcare Lead immediately of changes that will affect a pupil's medical needs when in school, e.g. a growing number of seizures; a change in seizure type; changed medicines, dosage or method of administration; allergies.
- Complete a *Consent for Prescribed Medication* form when requesting that medication be administered during the school day. Where medicines are to be administered during the school day, these must be prescribed by a medical professional, in-date and clearly labelled with instructions for use.
- Ensure the correct number of asthma pumps and epi-pens are in school where these have been prescribed, and that they are in-date.

Accessibility

King Henry VIII 3-19 School will ensure that all pupils with healthcare needs are fully supported so that they can participate in trips and visits, structured and unstructured social activities where risk assessments indicate that it is safe to do so. This includes during breaks, breakfast club, School Productions and after-hours clubs.

Dietary requirements of pupils with healthcare needs will be considered carefully as part of any risk assessment and dietary plans, accessibility and evacuation plans, will be put in place for pupils as appropriate.

Information Sharing

King Henry VIII 3-19 School will ensure that all information is kept up to date and that there is a clear information sharing protocol in place that is agreed/signed by parents/carers and the pupil. Teachers, supply teachers and support staff (this may include catering staff and relevant contractors) should have access to the relevant information, particularly if there is a possibility of an emergency situation arising.

- We share information with staff about the healthcare needs of pupils using the Confidential Pupil Update and Healthcare Needs file via Teams.
- Further information on high-risk health needs is located within Individual Healthcare Plans, or upon the school information management system (SIMS), including emergency procedures and contact numbers.
- A register of First Aid trained staff is managed by the Healthcare Lead, along with a separate register indicating the date of qualification and renewal requirement date.
- The school uses staff meetings as appropriate to inform staff of pupil healthcare needs.
- If a pupil says they feel ill, all appropriate staff are made aware; e.g. if a pupil had an asthma attack in morning, all other staff the pupil would see later that day are made aware to look out for signs of deterioration/further illness.

This would include non-teaching staff, such as Wellbeing Learning Support Officers, Teaching Assistants, lunchtime supervisors and administration staff.

- We ensure the Healthcare Needs Policy is easily accessible by posting it upon the school website.
- We ask parents/carers to sign a consent form which clearly details the bodies, individuals and methods through which their child's medical information will be shared. Sharing medical information can be a sensitive issue and we recognise that the pupil must be involved in any decisions being made about them.
- We include Pupil Leadership Groups, and other pupil groups in the development of healthcare needs arrangements, wherever it is appropriate to do so.
- We consider how peers may be able to assist pupils, e.g. they could be taught the triggers or signs of issues for a pupil, know what to do in an emergency and who to ask for help. (This would be discussed with the pupil and parents first to decide if and which information can be shared.) It is important in all of these cases that peer support is not used as a means to take responsibility for a pupil with a healthcare need.
- We ensure that our pupils (or their friends) know who to tell if they feel ill and where to go if they require medical assistance.

- We listen to concerns of pupils' (or their friends) if they feel ill at **any** point and consider the need for medical assistance (especially in the case of reported head injuries, or breathing difficulties).

Through regular review, the school ensures that it is compliant with the Data Protection Act 1998 and the WASPI Information Sharing Policy (www.waspi.org).

Record keeping

King Henry VIII 3-19 School collects and maintains the following:

- Emergency contact numbers provided by parents/carers
- Contact details for medical professionals and emergency services
- Parental agreements for the administration of prescribed medicine/s (Appendix 3)
- Records of stored medicines to be administered to pupils (Appendix 8)
- Written requests for pupils to administer their own medicine
- A record of staff training linked to healthcare

All information-sharing techniques, such as school intranets, must be agreed by the pupil and parent in advance of being used, to protect confidentiality.

Storage, access and administration

All medicines are stored securely and safely and a Storage of Medication Checklist completed by the Healthcare Lead. King Henry VIII 3-19 School does not store surplus medication. Medicines are kept in their original dispensed container, labelled with the name of the pupil, medicine name, dosage and frequency and expiry date. The school only accepts prescribed medicines and devices.

It is essential that medication is presented in its original container (bottle, packaging) with the original visible and intact label; any medication which does not present as being in the original prescribed form cannot be administered by designated staff. On these occasions, parents will be contacted to collect the medication and determine whether they personally administer it. Over the counter medication will not be administered or stored by school staff. Administration of medication for any pupils under the age of 16 requires parental consent.

Emergency arrangements

All staff, including temporary staff, are made aware of medical conditions and understand their duty in an emergency.

Where a pupil has an IHP, this will clearly describe what constitutes an emergency and explain the procedures that must be followed. Where there is no IHP, or where there is no formal diagnosis, regular first aid procedures will be followed (see Appendix 1).

All staff receive healthcare updates through staff briefings where necessary and via the Confidential Pupil Update and Healthcare file via TEAMS. If a pupil needs to attend hospital a member of staff will stay with them until the parent / carer arrives or accompany a child taken to hospital in an ambulance. Staff will not take pupils to hospital in their own car; parents / emergency contacts will be contacted, alongside the emergency services.

Training

Training is provided as required to ensure staff are competent and have confidence in their ability to support pupils with healthcare needs, as outlined within Individual Healthcare Plans. The Healthcare Lead will organise healthcare training and keep a record of staff who attend, ensuring that the school is able to meet the identified healthcare needs of pupils. This will include frequent first aid training for a cross-section of staff to ensure first aiders are available throughout the school and can accompany school trips.

The SRB Lead will organise any specialist training that is required for SRB staff who support pupils with more complex medical needs.

Qualifications and assessments

- Teachers are expected to use their professional judgement to support pupils with healthcare needs.
- We recognise that effective liaison is imperative when pupils with healthcare needs are approaching assessments, including those undertaking examinations in hospital or at home. The NEA components may help pupils to keep up with their peers. ***(EOTAS teaching staff may be able to arrange for concentration on this element to minimise the loss of learning while absent from school)***. Liaison between the school and EOTAS provision is important, especially where the pupil is moving from education setting, or home, to the hospital on a regular basis.
- We will ensure that applications for special arrangements will be submitted by school to the awarding bodies as early as possible. These will be made through the Examination Officer.
(Awarding bodies may make special arrangements for pupils with permanent or long-term disabilities and learning difficulties, or temporary disabilities and illnesses, who are taking public examinations such as National Tests, GCSEs or A levels).
- The school will take advice from the Local Authority if required.
- We recognise it is unacceptable practice to request adjustments or additional time at a late stage, unless there is a sudden illness or significant change in a pupil's healthcare needs. Adjustments are therefore applied for in good time. Consideration must also be given to mock examinations or other tests.

Full guidance on the range of special arrangements available and the procedures for making applications is given in the Joint Council for Qualifications' circulars *Adjustments for candidates with disabilities and learning difficulties* (2016) and *A guide to the special consideration process* (2016), which are both accessible from the Joint Council for Qualifications' website.)

(Adjustments, adaptations or additional time for pupils taking the National Reading and Numeracy Tests should be based on normal classroom practice for particular needs).

Teachers are expected to use their professional judgement to support pupils.

Guidance is provided in the current National Reading and Numeracy Tests – Test administration handbook.

EOTAS

- In the eventuality that a pupil is absent from school and supported by EOTAS the Local Authority will work with the school to ensure the needs of the pupil are met. Liaison between the school and EOTAS provision in these cases will be very important, especially where the pupil is moving from education setting, or home, to the hospital on a regular basis.
- When pupils with healthcare needs are completing NEA components in hospital or at home, EOTAS teaching staff may be able to arrange for concentration on this element to minimise the loss of learning while absent from school.

Integration

At King Henry VIII 3-19 School we recognise that we have a key role to play in the successful integration after diagnosis or reintegration of pupils with healthcare needs. We will be proactive and work with health professionals and the Local Authority as appropriate, as well as other pupils in supporting the transition. We will train staff in a timely manner to assist the pupils return. The support will be considered by key parties including the pupil and parent/carer, and will be reflected in the pupil's IHP.

When a pupil is discharged from hospital, appropriate information should be provided to parent/carers which should be shared with the school. The Healthcare Lead and appropriate Wellbeing Lead will work with the parent/carer and the hospital to manage the pupil's return.

Monitoring and review

The Healthcare Policy and Protocol are regularly reviewed and updated where necessary and are presented to the Governing Body each year for approval. Individual Healthcare Plans are reviewed according to the changing healthcare needs of the pupil and guidance from medical professionals.

Complaints

Complaints can be made in line with the school's Complaints Policy. Details can be found on the school website.

Unacceptable practice

Please see the 'Unacceptable Practice' section in the Welsh Government's 'Supporting Pupils with Healthcare Needs' statutory guidance: <http://learning.gov.wales/resources/browse-all/supporting-pupils-with-healthcare-needs/?lang=en>

APPENDIX 1



King Henry VIII 3-19 School First Aid Protocol

- Within the Lower Phase building all classrooms have a list of first aiders displayed, together with contact phone numbers for the learning spaces that they are assigned to should they need to be contacted.
- Within the Middle and Upper Phase Building staff can contact Reception who will put out a radio call for first aiders nearest to the location to provide support.
- When an accident occurs, a first aider will decide whether first aid can be administered by them, or whether the injury requires input from the Healthcare Lead.
- The first aider will ask the Healthcare Lead (or Reception Staff if they are not available) to check the pupil's medical history/notes to help inform any decision that is made.
- If first aid is provided a decision is made as to whether the First Aid Book or Accident Form has to be completed.

First Aid Book – This is for general day-to-day general illness, headaches, stomach aches, small cuts, bumps and grazes.

Accident Form – This is for more serious, reportable injuries e.g. suspected broken bones, pulled/torn ligaments, trauma to the body, large/deep cuts, head injuries.

Examples to support the logging of incidents can be located in the First Aid Book.

- The First Aid book or Accident Form can be located in both Reception areas.
- Basic first aid equipment can be found within either medical room (e.g. anti-septic wipes, plasters, sterile dressings). In addition, basic first aid kits are also located within each classroom within the Lower Phase Building. Within the Middle and Upper Phase Building, basic first aid kits are located within the Year 5 and 6 classrooms and Rooms 128, 235 and 324.

First Aid Book

- Record the pupil's illness and/or treatment in the First Aid Book.
- Any first aid treatment administered to pupils in Year 6 or below must have a First Aid Slip filled in and placed in their school bag, to inform parents and carers
- All head injuries, no matter how small they seem, must have a phone call home. Staff to inform the Pupil Healthcare Lead to complete this.
- The Pupil Healthcare Lead can be contacted on Channel 2 or by phoning Reception
- If pupils are too unwell to stay in class, staff to contact Main Reception or the Pupil Healthcare Lead on Channel 2, who will take the pupil to the main medical room.

Accident Form

- Record the pupil's injury and treatment on an Accident Form, as soon as First Aid is given
- Parents to be notified of the injury and treatment
- Parent to visit the school (most likely pupil has to be taken with parent)
- First Aid can be given in the classroom or either Reception. If support is required please radio the Pupil Healthcare Lead on Channel 2.

- Once the Accident Form is completed it is to be given to The Healthcare Lead who will then:
 - Complete the online Accident Spreadsheet.
 - Ensure the Accident Form is viewed and signed by the Deputy Headteacher.
 - Provide a hard copy of the Accident Form to the Site and Safety Manager
 - File the Accident Form and send to the Local Authority.
- The same procedures must be followed for any staff injuries, including the completion of an Accident Form.

Medication

- Medication can be used by pupils where parents/carers have completed a medical consent form. These are issued by the Healthcare Lead. This states when, where and who administers the medication. This will be in the pupils Healthcare Plan where one is in place. This information will be shared with staff who work with the identified pupil.
- The Healthcare Lead regularly checks medicine expiry dates and logs these checks
- The Healthcare Lead liaises with parents/carers to ensure medication is up-to-date and in school
- Medication for the Lower Phase pupils is located in the Lower Phase Medical Room.
- Medication for pupils located in the Middle and Upper Phase Medical Room is located in the Medical Room (next to Reception)
- Any medication that is administered must be recorded on the Administration of Medication Spreadsheet (managed by the Healthcare Lead).

Asthma Pumps

- Pupils must have asthma pumps available to them at all times. It is the responsibility of parents/carers to provide these and to check they are in date. In cases where asthma pumps have been forgotten, or are found to be out of date, the Healthcare Lead should be notified so that parents/carers can be contacted to provide one.
- Asthma pumps are stored securely within teaching rooms for pupils in the Lower and Lower Middle Phase (Years 5 and 6). These are placed in a clear plastic bag that is labelled with the pupil's name. The pumps are regularly checked by the teacher and Healthcare Lead who updates the Storage of Medication Check List.
- Pupils within the Upper Phase will be reminded regularly that they need to carry their asthma pumps with them at all times. Spare asthma pumps are located within the Medical Room and can be accessed in an emergency.
- Pupils cannot be in school if asthma pumps are not present and in date.
- Where steroid inhalers have been prescribed alongside a standard asthma pump and only one is available, the Healthcare Lead will check that the pupil has it with them in school each day. The pupil will not be permitted to be in school where a pump is not available, or it is out of date, and where healthcare professionals have made clear that the steroid inhaler is essential to ensure their safety.

Asthma Pumps during unstructured times

- At breaktime, teachers of Lower Phase and Lower Middle Phase pupils will ensure that asthma pumps are with the member of teaching staff on duty. At Lunchtime the Lunchtime Supervisor will collect all asthma pumps for pupils in the Lower Phase and ensure they are available to these pupils should they need them. When lunch break ends, the Lunchtime Supervisor will return the pumps to relevant classrooms. The Lunchtime Supervisor who is allocated to the Lower Middle Phase pupils will follow the same procedure.
- Pupils within the Upper Phase must carry their asthma pumps with them during break and lunch. Spare pumps are accessible from the Medical Room should they be required.

Epi-pens

- Lower and Lower Middle Phase pupils will have pens stored securely within their classroom. These will be clearly labelled with the pupil's name.
- Additional pens will be stored within the Lower Phase Medical Room and be clearly labelled for each pupil. Pens for pupils in Years 5 and 6 will be stored within the Middle/Upper Phase Medical Room and be clearly labelled for each pupil.
- Pupil Healthcare Lead regularly checks and logs that these spare additional pens are in date (using the School Storage of Medication Check List). Pupils cannot be in school if this spare/additional medication is not present and in date
- Secondary Phase pupils must carry their pen with them at all times within their bags, or blazer. Additional pens will be stored within the Main Medical Room and be clearly labelled for each pupil. Pupils cannot be in school if this spare/additional medication is not present and in date
- All staff must be aware of Individual Healthcare Plans and what to do in the event of a seizure, or allergic reaction
- Where a pupil is having a seizure and their Healthcare Plan indicates that Buccolam (Bucco) may be required, staff who are trained in administering Bucco will be directed to the pupil by First Aiders, Reception Staff or The Healthcare Leader. Only staff who have undergone appropriate training are permitted to administer this medicine.

Epi-pens during unstructured times

- At breaktime, teachers of Lower Phase and Lower Middle Phase pupils will ensure that Epi-pens are with the member of teaching staff on duty. At Lunchtime the Lunchtime Supervisor will collect all Epi-pens for pupils in the Lower Phase and ensure they are available to these pupils should they need them. When lunch break ends, the Lunchtime Supervisor will return the pens to relevant classrooms. The Lunchtime Supervisor who is allocated to the Lower Middle Phase pupils will follow the same procedure.
- Pupils within the Upper Phase must carry their Epi-pens with them during break and lunch. Spare pumps are accessible from the Medical Room should they be required.

Diabetes (Type 1)

- Pupil's will be supported by trained staff (see list of staff at the end of the protocol), who will help them to monitor their blood glucose levels and administer insulin as necessary during the school day. The nature of support will be set out in their individual Healthcare Plans.
- When Insulin pump alarms sound continuously, blood glucose must be entered by trained staff into the pump if the "BG required" alarm is displayed.
- Where staff recognize signs of hypoglycaemia (low blood sugar) and hyperglycaemia (high blood sugar), they should contact the Healthcare Lead immediately, and/or trained staff where they are not already in attendance in the classroom (see list of staff at the end of the protocol).

Symptoms of **hypoglycaemia** include: headache, shakiness ("wobbly" legs), hunger, weakness, shaking, feeling sick, glazed expression, irritability, tingling around the mouth, visual disturbance, becoming emotional, pale face, headache, sweating, dizziness, clamminess, lethargy, behaviour change, slipping in and out of consciousness.

Symptoms of **hyperglycaemia** include: excessive thirst, increased need to pass urine, behaviour change, feeling weak, feeling sick and tired, blurred vision, fluctuations in mood, headaches and dizziness, sweating, smell of acetone on the breath

- Where symptoms of hypoglycaemia are noted staff will provide immediate access to snacks and glucose treatments. Examples of snacks and drinks: 100ml Orange Juice, 110 ml of Lucozade, 220 ml original ready to drink Ribena, 100ml Coke, 3 Starbursts, 8 Jelly Tots, 1 mini bag of Haribo Star mix (16g). These will be kept within relevant classrooms in the Lower Phase Building and Year 5 and 6 classrooms, and with the Healthcare Lead in the Middle and Upper Phase building.
- Pupils who show symptoms of hypoglycaemia should be supervised at all times until their blood glucose levels have risen and they feel well again.
- Where symptoms of hyperglycaemia are noted staff should allow pupils to go to the toilet (accompanied) and provide access to drinking water. Insulin will also be administered as per the pupil's Healthcare Plan.
- Parents will be contacted by the Healthcare Lead where symptoms of hypoglycaemia and hyperglycaemia are noted, as well as when treatment is given.
- Pupils with low blood glucose (hypoglycaemia) do not need to be collected from school early unless their treatment is unsuccessful or they continue to feel unwell.
- Pupils with high blood glucose levels (hyperglycaemia) do not need to be collected from school early unless they are vomiting or unwell, or have a problem with their insulin pump.

First Aid Procedures for School Trips

- At least one qualified First Aider trained in Paediatric First Aid (PFA) or Emergency First Aid at Work (EFAW) must accompany any school trip. The number of First Aiders will be determined following a risk assessment completed by the Trip Organiser with the Healthcare Lead that considers the number of pupils and their individual healthcare needs. The type of trip, associated activities whilst on the trip and duration of the trip should also be considered.
- Where pupils are being transported using a coach, or mini bus, one first aider must be present upon each vehicle.
- For pupils with epilepsy that have been prescribed Buccolam (Bucco), a trained member of staff must attend the trip alongside other first aiders. Those staff trained in administering

Bucco are *in addition* to the designated first aider and should not replace a designated first aider on the trip. For a full list of staff who are trained to administer Bucco see the appendix.

- If a child with diabetes attends a trip, someone who has completed the appropriate diabetes training must also attend the trip alongside other designated first aiders. For a list of staff who are trained to support pupils with Type 1 diabetes see the appendix.
- A fully stocked first aid kit, compliant with Health and Safety Executive (HSE) guidelines, will be taken on all trips. The contents of the first aid kit will be checked by the Healthcare Lead and replenished if necessary before departure.
- Staff will be provided by copies of any relevant Individual Healthcare Plans by the Healthcare Lead, and must become familiar with any specific medical needs, allergies, or medications required by pupils.
- Named staff will be responsible for storing and administering medication, as authorised by parental consent forms and following guidance found within the School ALN and Healthcare Policies.
- A named member of staff must carry up-to-date emergency contact details for all pupils and know the procedure for contacting a named contact within the school and emergency services in the UK or abroad if relevant.
- Parents/carers must be informed of any injury or incident requiring medical attention as soon as practical.
- All accidents must be recorded on the school's official accident form, and significant injuries must be reported to the designated safeguarding lead and parents as soon as possible.
- Staff must be aware of the nearest medical facilities at the trip destination and during transit, and know how to access NHS 111 or 999 services if needed.
- At least one member of staff must carry a charged mobile phone with reliable reception for emergencies and coordination.
- A risk assessment will be produced by the trip organiser that identifies potential first aid needs, including risks from activities, the environment and individual pupil health issues.
- Plans must be in place for emergency transport, including access to a vehicle or knowledge of local ambulance access points.
- If a pupil needs to be taken for emergency treatment, the rest of the group must remain supervised by other qualified staff.

APPENDIX 2

Contacting Emergency Services



King Henry VIII 3-19 School

Contacting Emergency Services

Request for an Ambulance

The ambulance request must come from the location of the injured / unwell person and the first aider supporting. Dial **999**, ask for an ambulance, and be ready with the following information where possible.

1. State your telephone number:
 - Mobile number
 - Primary Site Reception: 01873 735010
 - Secondary Site Reception: 01873 735373
2. Give your location as follows:

King Henry VIII 3-19 School
Old Hereford Road,
Abergavenny,
NP7 6EP
3. Give the exact location in the education setting:
 - Which building (Lower Phase, of Middle/Upper Phase)
 - Which Floor
 - Room Number
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 at that entrance by a member of the school staff.
7. Don't hang up until the information has been repeated back to you.

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

Ensure Reception are aware that an ambulance has been called and the location of the injured person.



APPENDIX 3 Consent for Prescribed Medication

King Henry VIII 3-19 School

Parent/Carer consent for the school to administer prescribed medication to a pupil

- Our school **will not give** your child medication unless you complete and sign this form. If your child requires medication and this form is not completed, your child could be refused attendance at school in-line with Health and Safety.
- If more than one medication is to be given, a separate form should be completed for each one.
- A new form must be completed when dosage changes are made.
- Where medication is prescribed to be taken in frequencies which allow the daily course of medicine to be administered at home, parents should seek to do so, e.g. before and after school and in the evening. (However, we understand there will be instances where this is not appropriate.)
- Parents/carers will be informed 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 / form	
Healthcare need	
Routine or emergency medication	
Medicine	
Note: medication must be in the original container if dispensed by the pharmacy.	
Name, type and strength of medicine (<i>as described on the container</i>)	
Date dispensed	
Expiry date	
Dose and frequency of medication	
Method of administration	

Timing of medication	
Duration of treatment	
Special precautions	
Special requirements for administering medication e.g. two staff present, same gender as pupil.	
Storage requirements	
Who will deliver the medication to school and how frequently?	
Who will receive the medication?	
Does treatment of the medical condition affect behaviour or concentration?	
Are there any side effects that the school needs to know about?	
Is there any medication that is being administered outside of school day that we need to know about? Are there any side effects that we should be aware of?	
Any other instructions	
Pupil to self-administer medication under supervision from a stored location	Yes / No (please circle) <i>If yes, pupil must also sign declaration*</i>
Pupil to carry and self-administer medication	Yes / No (please circle) <i>If yes, pupil must also sign declaration*</i>
Procedures to take in an emergency	
If the school has an emergency inhaler- If your child is prescribed an inhaler have you given consent for your child to use a school emergency inhaler on a separate consent form?	Yes / No (please circle)
Agreed review date	<i>To be completed with the school</i>

Name of member of staff responsible for the review	<i>To be completed with the school</i>	
INDIVIDUAL HEALTHCARE PLANS (IHP)		
Healthcare Plan from health professional attached if appropriate	Yes / No (please circle)	
IHP created by school attached if appropriate (appendix 3)	Yes / No (please circle)	
Guidelines provided by health attached if appropriate e.g. patient information sheet	Yes / No (please circle)	
Review date of the above		
Contact details	Contact 1	Contact 2
Name		
Daytime telephone number		
Relationship to the child		
Address		
Post Code		
In the best interests of the pupil the school might need to share information with school staff and other professionals about your child's healthcare needs e.g. nursing staff. Do you consent to this information being shared?	Yes / No (please circle)	
<ul style="list-style-type: none"> 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-pupils-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 head teacher has the right to refuse to admit my child into the school until said medication is provided.
- It is my 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 head teacher/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:	

*If yes to these questions: I agree to administer and/or carry my medicine. If I refuse to administer my medication as agreed, then this agreement will be reviewed.

Pupil signature:	
Date:	

HEALTHCARE LEAD FOR THE SCHOOL - AGREEMENT TO ADMINISTER MEDICATION

It is agreed that <insert child's name>..... will receive <insert name and quantity of medication> at <insert time medicine is to be administered>

(Name of pupil).....will be given their medication / supervised while they take their medication by <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).....

School Healthcare Lead:

Signed:.....Date:

- Individual Healthcare Plan in place; OR
- Individual Healthcare Plan not required



APPENDIX 4

Individual Healthcare Plans (IHPs)

Purpose of an IHP

- IHPs set out what support is required by a pupil. They do not need to be long or complicated.
- Our school will ensure our healthcare needs policy includes information on those people who have responsibility for the development of the IHPs.
- IHPs are essential where healthcare needs are complex, fluctuating, long term or where there is a high risk that an emergency intervention will be needed.
- Not all pupils with healthcare needs require an IHP and there should be a process in place to decide what interventions are most appropriate.

When an IHP is appropriate

In most cases, especially concerning short-term illnesses such as those requiring a course of antibiotics, a detailed IHP may not be necessary. In such circumstances it may be sufficient to only complete a Consent for Prescribed Medication form (Appendix 3).

In such circumstances it may be sufficient to record the name of medication, dosage, time administered and any possible side effects. These procedures should be confirmed in writing between the pupil (where appropriate), the parents and the education setting.

However, when a pupil has continual or episodic healthcare needs, then an IHP may be required. If these needs are complex and the pupil is changing settings, then preparation should start early to help ensure the IHP is in place at the start of the new term. A Personal Evacuation Plan and Risk Assessment may also be attached.

Individual Healthcare Plan (IHP) Requirement

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

Identify pupils with healthcare needs

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



Gather information

If there is a potential need for an IHP; the school should discuss this with the parent/carer and the pupil themselves. This must be done where appropriate in conjunction with the relevant healthcare professional. This will support the decision making process about whether an IHP is needed.



Establish if an IHP should be made

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



If an IHP should be made

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



King Henry VIII 3-19 School Individual Healthcare Plan (IHP)

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.

1. PUPIL INFORMATION

1.1 Pupil details

Pupil's name:	
Date of birth:	
Year group:	
Nursery/School/College:	
Address:	
Town:	
Postcode:	
Medical condition(s): <i>Give a brief description of the medical condition(s) including description of signs, symptoms, triggers, behaviours.</i>	
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:		
Head teacher:		
Link person in education:		
Class teacher:		
Health visitor/ school nurse:		
ALNco:		
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.

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 professionals about your child's healthcare needs e.g. nursing staff. Do you consent to this information being shared?	Yes / No (please circle)
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>i.e. memory, processing speed, coordination etc.</i>	
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

The Governing Body 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?	
Head teacher/delegated person signature	

12. TRANSPORT TO SCHOOL

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

13. 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?	
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14. PLEASE USE THIS SECTION FOR ANY ADDITIONAL INFORMATION FOR THE PUPIL.

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We suggest the following are stored together:

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

15. SIGNATURES

	Name	Signature	Date
Head teacher/delegated person			
Young person			
Parents/ carer			
Health professional			
School representative			
School nurse			



APPENDIX 5 Staff Training Record

King Henry VIII 3-19 School

STAFF TRAINING RECORD – ADMINISTRATION OF MEDICATION / TREATMENT

Please ensure that the Education Workforce Council registration is updated accordingly (if appropriate).

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 6 Record of Administration of Medication

King Henry VIII 3-19 School - This information is stored on our secure staff-share area

Record of medication administered to a pupil

Name: _____ Form Class: _____

Date	Time	Name of medication	All checks above undertaken	Dose Given	Controlled drugs only: amount remaining	Any reactions	Medication refused/not administered	Reason	Parent/carer informed & how	Staff 1 signature	Staff 2 signature

