

SUPPORTING LEARNERS WITH HEALTHCARE NEEDS POLICY

LAST APPROVED BY GOVERNORS: 2nd JULY 2024 DATE FOR REVIEW: JULY 2025

BRYN CELYNNOG COMPREHENSIVE SCHOOL

SUPPORTING LEARNERS WITH HEALTHCARE NEEDS POLICY

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Name of person responsible for maintaining this policy: Headteacher

1. KEY PRINCIPLES

At Bryn Celynnog Comprehensive School, we believe that learners with healthcare needs should be properly supported so that they have full access to education, including trips and physical education.

We believe that:

- 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 learners 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 learners through the appropriate and lawful sharing of the individual learner's healthcare needs;
- whenever appropriate, learners should be encouraged and supported to take responsibility for the management of their own healthcare needs.

2. SCHOOL'S LEGAL REQUIREMENTS

At Bryn Celynnog Comprehensive School, we are aware of our legal requirements in regard to supporting learners with healthcare needs, as outlined below:

<u>Section 175 of the Education Act 2002</u> places a duty on local authorities and governing bodies to make arrangements to ensure their functions are exercised with a view to safeguarding and promoting the welfare of children in school or another place of learning. This includes supporting children with healthcare needs.

<u>Section 21(5) of the Education Act 2002</u> places a duty on governing bodies to promote the well-being of learners at the school so far as related to the matters mentioned in section 25(2) of the Children Act 2004, which includes physical and mental health and emotional well-being, education, training and recreation, and social well-being.

All learners with healthcare needs are entitled to a full education. In addition to the duties set out above (Education Act 2002), consideration must also be given to whether the learner is defined as disabled under the <u>Equality Act 2010</u>. Governing bodies must comply with the duties of this Act, including those within an education context. For example, reasonable adjustments for disabled learners must be made and disabled learners must not be discriminated against when making admission arrangements. Learners' rights are underpinned by the guidance contained in the <u>UNCRC</u>.

Statutory duties on governing bodies of maintained schools

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

The Equality Act 2010

Disability is a protected characteristic under the Equality Act 2010.

Schools must not discriminate, harass or victimise disabled learners. Furthermore, schools are subject to a duty to make reasonable adjustments (section 85 of the Equality Act 2010).

Common law

As part of the common law, school staff owe a duty of care to act as any reasonably prudent parent would when taking care of their own children. A person who is responsible for the care and supervision of children should do what is reasonable for the purpose of safeguarding or promoting the child's welfare.

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

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

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

Other relevant provisions

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

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

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

3. ROLES AND RESPONSIBILITIES

<u>3a). School</u>

Governing body

The governing body will oversee the development and implementation of arrangements, which include:

- complying with applicable statutory duties, including those under the Equality Act 2010 (e.g. the duty to make reasonable adjustments in respect of learners with healthcare needs if they are disabled, as outlined above);
- having a statutory duty to promote the well-being of learners. Schools should give consideration to how they can meet these needs, including providing learners access to information and material aimed at promoting spiritual and moral wellbeing and physical and mental health (Article 17 of the UNCRC);
- considering how they can support learners to develop the skills, knowledge and emotional resilience required to uphold their rights, and the rights of others;
- ensuring the roles and responsibilities of all those involved in the arrangements to support the healthcare needs of learners are clear and understood by all those involved, including any appropriate delegation of responsibilities or tasks to a headteacher, member of staff or professional as appropriate;
- working collaboratively with parents and other professionals to develop healthcare arrangements to meet the best interests of the learner
- developing and implementing effective arrangements to support learners with healthcare needs. This should include a policy on healthcare needs and where appropriate, IHPs for particular learners;
- ensuring arrangements are in place for the development, monitoring and review of the healthcare needs arrangements;
- ensuring the arrangements are in line with other relevant policies and procedures, such as health and safety, first aid, risk assessments, the Data Protection Act 1998, safeguarding measures and emergency procedures;

- ensuring robust systems are in place for dealing with healthcare emergencies and critical incidents, for both on- and off-site activities, including access to emergency medication such as inhalers or adrenaline pens;
- ensuring staff with responsibility for supporting learners with healthcare needs are appropriately trained (see '2.8 Training' on page 17);
- ensuring appropriate insurance cover is in place, any conditions are complied with and staff are clear on what this means for them when supporting learners;
- having an infection prevention policy that fully reflects the procedures laid out in current guidance.

Headteacher

The Headteacher will ensure arrangements to meet the healthcare needs of their learners are sufficiently developed and effectively implemented. These arrangements include:

- working with the governing body to ensure compliance with applicable statutory duties when supporting learners with healthcare needs, including duties under the Equality Act 2010;
- ensuring the arrangements in place to meet a learner's healthcare needs are fully understood by all parties involved and acted upon, and such actions maintained.
- ensuring the support put in place focuses on and meets the individual learner's needs;
- extending awareness of healthcare needs across the school in line with the learner's right to privacy;
- appointing a named member of staff who is responsible for learners with healthcare needs, liaising with parents, learners, the home tuition service, the local authority and others involved in the learner's care;
- ensuring a sufficient number of trained staff are available to implement the arrangements set out in all IHPs, including contingency plans for emergency situations and staff absence;
- having the overall responsibility for the development of IHPs;
- ensuring that learners have an appropriate and dignified environment to carry out their healthcare needs, e.g. private toilet areas for catheterisation;
- checking with the local authority whether particular activities for supporting learners with healthcare needs are appropriately covered by insurance and making staff aware of any limits to the activities that are covered;
- ensuring all learners with healthcare needs are appropriately linked with the education setting's health advice service;
- ensuring when a learner participates in a work experience placement or similar, that appropriate healthcare support has been agreed and put in place;
- providing annual reports to the governing body on the effectiveness of the arrangements in place to meet the healthcare needs of learners;
- ensuring all learners with healthcare needs are not excluded from activities they would normally be entitled to take part in without a clear evidence-based reason;

- notifying the local authority when a learner is likely to be away from the school for a significant period, e.g. three weeks (whether in one go or over the course of the academic year) due to their healthcare needs.
- being mindful of the Social Services and Well-being (Wales) Act 2014 and ensure that assistance to learners is provided using a holistic approach.

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

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

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

- fully understand the school's healthcare needs policies and arrangements;
- are aware of which learners have more serious or chronic healthcare needs, and, where appropriate, are familiar with these learners' IHPs. This includes knowing how to communicate with parents and what the triggers for contacting them are, such as when the learner is unwell, refuses to take medication or refuses certain activities because of their healthcare needs;
- are aware of the signs, symptoms and triggers of common life-threatening medical conditions and know what to do in an emergency. This includes knowing who the first aiders are and seeking their assistance if a medical emergency takes place;
- fully understand the school's emergency procedures and be prepared to act in an emergency;
- ask and listen to the views of learners and their parents, which should be taken into consideration when putting support in place;
- ensure learners (or their friends) know who to tell if they feel ill, need support or changes to support;
- listen to concerns of learners if they feel ill at any point and consider the need for medical assistance (especially in the case of reported breathing difficulties);
- make sure learners with healthcare needs are not excluded from activities they wish to take part in without a clear evidence-based reason, including any external

trips/visits. This includes ensuring learners have access to their medication and that an appropriately trained member of staff is present to assist where required;

- are aware of bullying issues and emotional well-being regarding learners with healthcare needs, and are prepared to intervene in line with the school's policy;
- are aware that healthcare needs can impact on a learner's ability to learn and provide extra help when needed;
- support learners who have been absent and assist them with catching up on missed work this may involve working with parents and specialist services;
- keep parents informed of how the healthcare need is affecting the learner in the education setting. This may include reporting any deterioration, concerns or changes to learner or staff routines.

First Aiders at School

The school will ensure that the trained first aiders are aware of the specific healthcare needs of each learner.

Other professionals who support learners with healthcare needs

The school will work proactively with other professionals who support learners with healthcare needs in order to secure the best possible provision and outcomes.

3b). Parents/carers

It is vital that learners and parents are actively involved in the planning of support and management of healthcare needs. Meeting the individual's needs should be at the centre of decision making and processes.

Parents and carers will, as far as possible:

- be involved in the creation, development and review of an IHP (if any). The parent and learner may be best placed to provide information about how their healthcare needs affect them. They should be fully involved in discussions about how the learner's healthcare needs will be met in the school, and contribute to the development of, and compliance with, their IHP
- provide the school with sufficient and up-to-date information about healthcare needs, including any guidance regarding the administration of medicines and/or treatment from healthcare professionals;
- inform the school of any changes such as type of medication, dosage or method of administration;

- provide relevant in-date medicines, correctly labelled, with written dosage and administration instructions;
- ensure a nominated adult is contactable at all times and all necessary forms are completed and signed;
- inform the school if their child has/had an infectious disease or condition while in attendance;
- receive updates regarding healthcare issues/changes that occur within the school.

3c). Learner (page 10)

It is vital that learners are actively involved in the planning of support and management of healthcare needs. Where appropriate, learners should be encouraged and enabled to manage their own healthcare needs. This includes:

- informing a parent/carer or a staff member if they feel unwell;
- informing relevant staff members of any medication or healthcare needs, or changes;
- participation in drafting and agreeing individual healthcare plan (IHP), where appropriate;
- taking part in discussions around sharing/confidentiality of personal information;
- learning to take care when carrying medicines to and from school, and not sharing with others.

3d). Local authority

The school will work closely with the local authority in order to:

- make reasonable adjustments to ensure that disabled children and young people are not at a substantial disadvantage compared with their peers, e.g. by planning well in advance for the child's transfer from primary to secondary school;
- ensure the sharing of relevant data;
- promote cooperation between external agencies to ensure the learner's wellbeing and to support the learner's health, emotional and social needs;
- ensure that the learner receives an appropriate education if they are unable to attend school for a period of time due to health issues.

3e). NHS Wales school health nursing service, health and other professionals, third sector organisations and other specialist services

The school will work with the health service in order to access support and advice. This may include:

- seeking advice on the development of IHPs;
- requesting help in the identification of the training required for the school staff to successfully implement IHPs;
- requesting support to implement a learner's IHP through advice and liaison with other healthcare, social care and third sector professionals;
- seeking health advice and support from specialist health professionals such as GPs, paediatricians, speech and language therapists, occupational therapists, physiotherapists, dieticians and diabetes specialist nurses.

4. Creating an accessible environment

The Headteacher and governing body will ensure that the school is inclusive and accessible in the fullest sense to learners with healthcare needs. This includes the following, in line with the requirements of the equality Act 2010:

Physical access to school buildings.

• We will carry out accessibility planning and prepare an accessibility plan to ensure full access to school buildings.

Reasonable adjustments

• We will make 'reasonable adjustments' for learners who are disabled, e.g. by providing auxiliary aids or services (with the appropriate number of trained staff).

Day trips and residential visits

We will ensure that we actively support all learners with healthcare needs to
participate in trips and visits by making reasonable adjustments, thereby ensuring full
participation from all learners. We will consider how to accommodate the sharing of
personal information with third parties if necessary for off-site activities (in
compliance with the Data Protection Act 1998 and in respecting the learner's right to
privacy). This may include information about the healthcare needs of learners, what
to do in an emergency and any additional support, medication or equipment needed.

Social interactions e.g. clubs and social activities

We will ensure the involvement of learners with healthcare needs is adequately considered in structured and unstructured social activities, such as during breaks, productions, afterhours clubs and residential visits. We will make all staff aware of the social barriers learners with healthcare needs may experience and how this can lead to bullying and social exclusion.

Exercise and physical activity

The school will encourage all learners to take part in physical activities. Staff will make appropriate adjustments to sports and other activities to make them accessible to all learners, including after-hours clubs and team sports.

Staff will be made fully aware of learners' healthcare needs and potential triggers. They will be given training in how to respond appropriately and promptly if made aware that a learner feels unwell.

We will always aim to put the emphasis on activities made accessible for all. Where this might not be possible, we will seek advice from healthcare or physical education professionals.

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

Food management

Where food is provided by or through the school, consideration will be given to dietary needs of learners, e.g. those who have diabetes, coeliac disease, allergies and intolerances.

Where a need occurs, schools will in advance provide menus to parents and learners, with complete lists of ingredients and nutritional information. Gluten and other intolerances or allergens will be clearly marked. Providing information will help facilitate parent and catering teams' collaborative working. This is especially important when carbohydrate counting is required.

Consideration will be given to availability of snacks. Sugar and gluten-free alternatives will be made available as far as possible. As some conditions require high calorific intake, we will aim to provide access to glucose-rich food and drinks.

We will aim to ensure that food provided for trips reflect the dietary and treatment needs of the learners taking part.

While healthy school and 'no sweets' policies are recognised as important, we recognise that learners with healthcare needs may need to be exempted from these policies. Learners needing to eat or drink as part of their condition will not be excluded from the classroom or put in isolation.

Undertaking any necessary risk assessments.

We will ensure that staff are clear about when a risk assessment is required. Staff will start from the premise of inclusion and will go through a process of seeking adjustments or alternative activities rather than separate provision.

The school will make staff aware of the duties under the Equality Act 2010 to prepare and implement accessibility strategies and plans, e.g. in relation to increasing participation by disabled learners.

5. Sharing information

Teachers, supply teachers and support staff

We will aim to communicate healthcare needs arrangements with staff, parents and other key stakeholders to ensure full implementation, particularly if there is a possibility of an emergency situation arising.

We will aim to ensure that all information is kept up to date.

We will ensure that learners and parents/carers agree in advance all information-sharing techniques such as staff noticeboards and school intranets, to protect confidentiality.

Parents/carers and learners

We will aim to make parents/carers fully aware of the care their children receive in school. To encourage parents and learners to be aware of their own rights and responsibilities, we will:

- make healthcare needs policies easily available and accessible, online and in hard copy;
- provide the learner/parents with a copy of our information sharing policy, stating the type of bodies and individuals with whom the learner's medical information may be shared;
- ask parents to sign a consent form which clearly details the bodies, individuals and methods through which the learner's medical information will be shared.
- consider how friendship groups and peers may be able to assist learners, e.g. they could be taught the triggers or signs of issues for a learner, know what to do in an emergency and who to ask for help.

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

We will work with primary schools, parents, learners and specialist services to identify learners' healthcare needs.

The management and administration of learners' healthcare needs will be the duty of the school's trained first-aiders, overseen by the senior first-aider.

Details will be recorded using the proformas in the appendices, as summarised below:

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

We will complete new records when there are changes to medication or dosage. We will ensure that the old forms are clearly marked as being no longer relevant and stored in line with their information retention policy.

(The forms used can be found via the following link: <u>http://learning.gov.wales/resources/browse-all/supporting-learners-with-healthcare-needs/?lang=en)</u>

7. Storage, access and the administration of medication and devices

Supply of medication or devices

Parents will be asked to provide appropriate supplies of medication. These should be in their original container, labelled with the name of the learner, medicine name, dosage and frequency, and expiry date. We will only accept prescribed medicines and devices that:

- 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).

Where we hold non-prescribed medicine, e.g. liquid paracetamol, it should:

- be in date;
- have its contents correctly and clearly labelled;
- be labelled with the learner's name;
- be accompanied with written instructions for administration, dosage and storage from the parent;
- be in its original container/packaging.

Storage, access and disposal

Refrigeration

In instances where medication needs to be refrigerated, the refrigerator temperature will be regularly monitored to ensure it is in line with storage requirements. Refrigerated medicines will be stored in an airtight container and clearly labelled.

Emergency medication

We will ensure that emergency medication is readily available to learners who require it at all times during the day or at off-site activities. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline auto-injectors (pens) will be readily available to learners and not locked away.

If the emergency medication is a controlled drug it will 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 will be held centrally, not personally by a member of staff. A learner who has been prescribed a controlled drug may legally have it in their possession, if they are competent to do so, and they must not pass it to another learner or other unauthorised person. Where staff administer emergency medication to a learner, this will be recorded.

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.

Disposal of medicines

When no longer required, medicines will be returned to parents to arrange safe disposal. Sharp boxes will always be used for the disposal of needles and other sharp instruments, and disposed of appropriately.

Administration of medicines

We will ensure that the following procedures are adhered to:

- Where the learner is under 16, assistance or administration of prescribed or nonprescribed medicines requires written parental consent, unless Gillick competence is recorded. The administration of all medication will be recorded.
- 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. There will be instances where this is not appropriate.
- Learners under 16 will never be given aspirin or its derivatives unless prescribed to them.
- Unless there is an agreed plan for the learner to self-medicate (16 years and above or Gillick competent), all medication will be administered by a member of staff. In other cases, it may need to be supervised in accordance with the IHP.
- Medication will only be administered by suitably trained staff. The movement and location of these trained staff should always be in conjuncture with the learners they support.
- Staff will check the maximum dosage and the amount and time of any prior dosage administered.
- Certain medical procedures may require administration by an adult of the same gender as the learner, and may need to be witnessed by a second adult. The learner's thoughts and feelings regarding the number and gender of those assisting must be considered when providing intimate care. There is no requirement in law for there to be more than one person assisting. This should be agreed and reflected in the IHP and risk assessment.
- The school has an intimate care policy. It will be followed, unless alternative arrangements have been agreed, and recorded in the learner's IHP.
- If a learner refuses their medication, staff will record this and follow their defined procedures informing parents as soon as possible. If a learner misuses any medication, their parents will be informed as soon as possible. We will ask parents to seek healthcare advice as appropriate. If parents cannot be contacted immediately, staff will consider seeking immediate healthcare advice.

 All staff supporting off-site visits will be made aware of learners who have healthcare needs. They will receive the required information to ensure they are able to facilitate an equal experience for the learner. This information may include health and safety issues, what to do in an emergency and any other additional necessary support that the learner requires, including medication and equipment.

8. Emergency procedures

The school's trained first-aiders deal with most emergency situations. Staff know who are the nominated first aiders and how to deal with common healthcare needs. In situations requiring emergency assistance, 999 will be called immediately. The trained first-aiders know the location of learners' healthcare records and emergency contact details. Where a learner has an IHP, this will clearly define what constitutes an emergency and explain what to do.

We will ensure that other learners in the school know what to do in general terms in an emergency, such as to inform a member of staff immediately.

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

9. Training

We will ensure that staff who volunteer or who are contracted to support those with healthcare needs are provided with appropriate training. This will be provided in the form of externally provided training and on-line training.

There is one member of staff who is trained to administer First Aid at Work and twelve staff who are paediatric first-aid trained.

The senior first-aider will oversee the training needs of the staff.

If a learner has complex needs, input will be provided by healthcare services and the local authority specialist services.

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

The school nurse will provide annual training for staff in the recognition of symptoms of common conditions.

10. Qualifications and assessments

When learners with healthcare needs are approaching assessments, including those undertaking examinations in hospital or at home, we will liaise with parents/carers and the relevant medical professionals.

We will ensure that awarding bodies are well-informed so that they may make special arrangements for learners with permanent or long-term disabilities and learning difficulties, or temporary disabilities and illnesses, who are taking public examinations such as GCSEs or A levels. We will make full use of the guidance contained in the Joint Council for Qualifications' circulars *Adjustments for candidates with disabilities and learning difficulties* and *A guide to the special consideration process*.

We will ensure that adjustments, adaptations or additional time for learners taking the National Reading and Numeracy Tests are based on normal classroom practice for particular needs. (Guidance is provided in the current National Reading and Numeracy Tests – Test administration handbook.)

11. Education other than at school (EOTAS)

Where absences are anticipated or known in advance, we will liaise closely with the local authority in order to enable the EOTAS service to be provided from the start of absence

12. School transport

Where appropriate, we will work with the local authority to arrange home-to-school transport for a learner, or provide appropriately trained escorts for such journeys to facilitate the attendance of a learner.

13. Reviewing policies, arrangements and procedures

We will ensure that all policies, arrangements and procedures are reviewed regularly by the governing body.

We are aware that IHPs may require frequent reviews depending on the healthcare need – this will involve all key stakeholders including, where appropriate, the learner, parents, education and health professionals and other relevant bodies.

14. Insurance arrangements

The governing body will ensure an appropriate level of insurance is in place to cover the setting's activities in supporting learners with healthcare needs. The level of insurance will appropriately reflect the level of risk. Additional cover may need to be arranged for some activities, e.g. off-site activities for learners with particular needs.

15. Complaints procedure

If the learner or parent is not satisfied with the school's health care arrangements they are entitled to make a complaint. The governing body publicises their formal complaints procedure on the school website including how complaints can be escalated from teacher to headteacher, then to the governing body, and then to the local authority. A summary is included below:

School Complaints Procedure: Summary

In line with Section 409 of the 1996 Education Act, if you have a complaint about the curriculum being offered to your child, or any related matter, we suggest that you follow the procedure outlined below:

Contact the school in writing, outlining the complaint. Most complaints can be resolved locally, in discussion with the Headteacher or other appropriate members of staff.

If you are not satisfied with the response, write to the Chair of the Governing Body, c/o Bryn Celynnog Comprehensive School.

If still not satisfied with the response, contact the Director of Education in writing. The appropriate body will investigate your complaint and notify you in writing of the outcome.

If the complaint is Equality Act 2010-/disability-related, then consideration of a challenge to the Special Education Needs Tribunal for Wales (SENTW) can be made

16. Individual healthcare plans (IHPs)

We will identify learners that require an IHP from enrolment forms, transition or other sources.

We are aware that, whilst not all learners with healthcare needs will require an IHP, 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.

The development of detailed IHPs may involve:

- the learner
- the parents
- input or information from previous school
- appropriate healthcare professionals
- social care professionals
- the headteacher and/or delegated responsible individual for healthcare needs across the setting
- teachers and support staff, including catering staff
- any individuals with relevant roles such as a first aid coordinator, a well-being officer, and additional learning needs coordinator (ALNCo).

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

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

The governing body will ensure that the plans are reviewed at least annually or more frequently should there be new evidence that the needs of the learner have changed.

Where a learner has an SEN the IHP should be linked or attached to any individual education plan or Statement of SEN.

17. Unacceptable practice

We are aware that it is not acceptable practice to:

- prevent learners from attending school 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;
- send learners with healthcare needs home frequently or prevent them from staying for normal activities, including lunch, unless this is suitably specified in their IHP;
- send a learner who becomes ill or needs assistance to a medical room or main office unaccompanied or with someone unable to properly monitor them;
- penalise a learner for their attendance record if the absence is related to their healthcare needs. 'Authorised absences' including healthcare appointments, time to

travel to hospital or appointment, and recovery time from treatment or illness should not be used to penalise a learner in any way. This includes, but is not limited to, participation in activities, trips or awards which are incentivised around attendance records;

- request adjustments or additional time for a learner at a late stage. They should be applied for in good time. Consideration should also be given to adjustments or additional time needed in mock examinations or other tests;
- prevent learners from drinking, eating or taking toilet or other breaks whenever needed in order to manage their healthcare needs effectively;
- require parents, or otherwise make them feel obliged, to attend the education setting, trip or other off-site activity to administer medication or provide healthcare support to the learner, including for toileting issues;
- expect or cause a parent to give up work or other commitments because the education setting is failing to support a learner's healthcare needs;
- ask a learner to leave the classroom or activity if they need to administer nonpersonal medication or consume food in line with their health needs;
- prevent or create unnecessary barriers to a learner's participation in any aspect of their education, including trips, e.g. by requiring a parent to accompany the learner.