



Warrington Borough Council

**Supporting and managing the health
needs of children and young people in
Warrington schools**

March 2021

Introduction

Warrington Borough Council is committed to providing a good education to all pupils regardless of their circumstances or settings. Where a pupil is unable to attend school for health reasons the Council will work alongside schools, parents, health and other professionals to put in place alternative arrangements to meet a pupil's individual needs so that they are able to thrive and prosper.

Wherever possible schools will be able to make reasonable adjustments to ensure that children can continue to access education provision remotely. However, it is recognised that in some circumstances that may not be possible and that these cases may require additional advice and/or support from the Council and Warrington Clinical Commissioning Group (CCG) or the healthcare provider.

As part of this interface all professionals should maintain awareness of potential safeguarding/child protection concerns and refer to the relevant service if appropriate.

Definitions

In [Supporting Pupils with Medical Conditions in Schools](#), the Department for Education defines medical needs as both physical and/or mental health needs:

- Short-term conditions – these may affect a child/young person participating in school activities because they are on a course of medication or recovering from an illness, for example an infection, broken limb, etc.
- Long-term conditions - require extra care and support and may include conditions such as asthma, diabetes or epilepsy or other more complex conditions.

The Statutory Framework

- **Section 19 of the [Education Act 1996](#)** – The Council is required to make arrangements for the provision of suitable education at school or otherwise.
- **Section 20 of the [Equality Act 2010](#)** - All organisations, including schools, are required to make reasonable adjustments to enable disabled people to access education provision.
- **Section 100 of the [Children and Families Act 2014](#)** - Requires governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.

- [Special educational needs and disability code of practice 2014](#) – Requires local authorities, health bodies, schools and colleges to provide for those with special educational needs under part 3 of the Children and Families Act 2014.
- [Education for children with health needs who cannot attend school 2013](#) - statutory guidance for local authorities so that children with ongoing health needs receive a suitable education.
- [Supporting pupils at school with medical conditions](#) - statutory guidance for governing bodies of maintained schools and proprietors of academies_ and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions.
- [National Framework for children and young people's continuing care](#) - guidance for clinical commissioning groups (CCGs) when assessing the needs of children and young people whose complex needs cannot be met by universal or specialist health services.

Notifying the school

Parents are required to notify the child's school of any short or long term healthcare needs which will require additional support when they are in school.

Where a GP, paediatrician or other specialist healthcare professional identifies that child has a new health condition that will require support at school they are required to inform the School Nursing Team.

The School Nurse is required to notify the school about:

- Any child who has an existing health condition prior to them starting school
- Any child has been identified as having new a health condition.

Roles and responsibilities of early years settings and schools

Reasonable adjustments

In line with the Equalities Act the school is required to take positive and reasonable steps so that disabled pupils can fully participate and enjoy the benefits, facilities and services that the school provides for all its pupils. It is unlawful for a setting/school to charge a pupil for making a reasonable adjustment in any circumstances, whatever the financial cost to the school and however the school is funded. In line with [Reasonable adjustments for disabled pupils – Guidance for schools in England](#), the factors that need to be taken into account when considering what adjustments it is reasonable for a school to have to make:

- The extent to which special educational provision will be provided to the disabled child/young person under Part 3 of the Children and Families Act 2014
- The school's resources and the availability of financial or other assistance to make the adjustment
- The financial and other costs of making the adjustment
- The effectiveness of the adjustment in overcoming the substantial disadvantage suffered by a disabled child/young person
- The practicability of the adjustment
- The effect of the disability on the individual
- The health and safety requirements and the need to maintain these standards to protect both pupils and staff in school
- The need to maintain academic, musical, sporting and other standards
- The interests of other pupils and prospective pupils.

Individual Healthcare Plans

Individual Healthcare Plans (IHCPs) are designed to keep children with medical conditions/health needs safe and well at school. They should also support children to fully engage in school life and fulfil their potential.

IHCPs should be drawn up in partnership with the school, parents, the relevant healthcare professional and any other person who can best advise on the particular needs of the child (including the child themselves where they have capacity). Where the child has a special educational need and/or an EHC plan, the Individual Healthcare Plan should be linked to the SEN Support Plan or EHC Plan.

A good care plan should include:

- The child's personal details: name, date of birth, class, and ideally a photo to help staff identify them.
- A description to the child's health needs.
- Contact details for both parents or other family members, the GP and the child's clinic, consultant and/or specialist nursing team.

- A description of the symptoms that affect the child - the triggers, signs and symptoms.
- Information about the child's daily care requirements, for instance medication (including dose, storage requirements and side effects), dietary requirements, special facilities needed in school (such as access to a disabled toilet), and social and environmental needs (such as extra time between lessons).
- What sort of support the child needs with their daily care, and who at school will administer it.
- What constitutes a medical emergency and what action they should take if it occurs?
- The date of preparation of the plan, and the date when it should be reviewed.

It is important that the child's teachers - including any supply or temporary staff - are made aware of the plan, and especially of what to do in cases of emergency.

Administering Medication at School

Every school is required to put in place a policy for the safe storage and administration of medication. Only prescribed medicines should be administered at school. It is the responsibility of the school to make sure that:

- Medicines are brought in their original containers, clearly labelled with the name of the child, the name and dose of the drug, the frequency of administration, any likely side effects, and the expiry date.
- Only the smallest possible dose should be brought to the school.
- Doses of liquid medicines should not be transferred from the original bottle.
- Medicines are stored strictly in accordance with product instructions, taking particular account of the correct storage temperature.
- Medicines are stored in a secure place such as a locked cupboard or a labelled airtight box in a refrigerator with restricted access.
- Asthma inhalers and EpiPens are made readily available to pupils and must not be locked away.
- Wherever possible children should be allowed to carry their own medicines and devices, following consultation between parents and the headteacher.
- Where medicines can self-administered this should be under the supervision of an adult.
- A spare salbutamol inhaler should be on site for emergency use, provided that parental consent has been given for its use in an emergency, should the child's own inhaler not be available.
- A written record of the date and time that medicines are administered.
- They do not store surplus or out-of-date medicines. Parents should be asked to collect the containers for delivery back to the chemist.

- If parents do not collect all medicines, they should be taken to a local pharmacy for safe disposal.
- Children under 16 are not given aspirin or medicines containing ibuprofen unless prescribed by a doctor.

Hygiene and infection control

All staff should wash their hands before and after administering any medications and be familiar with [basic hygiene procedures](#) and normal precautions for avoiding infection.

In particular, staff should have access to protective disposable gloves and should take special care when dealing with spillages of blood or other body fluids, or the disposal of dressings or equipment.

Sharps boxes (obtained by parents on prescription) should always be used for the disposal of needles.

Preparation for Adulthood

Pupils with health needs will often be best placed to explain how their condition affects them and should be fully involved (where they have capacity) in discussions about their support needs.

In agreement with parents it is good practice to support and encourage young people to take responsibility for administering their own medications (where appropriate).

Children develop at different rates and so the ability to take responsibility for their own medicines varies. If pupils can take their medicines themselves, staff may only need to supervise.

There is still the need to ensure the medicine is kept safe and is not accessible to other pupils.

Unacceptable practice in schools

Schools should not:

- Prevent children from easily accessing their medication and administering it when and where necessary.
- Assume that every child with the same condition requires the same treatment.
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities.

- Send an unwell child to the school office or medical room unaccompanied or with someone unsuitable (such as another child).
- Penalise children for their attendance record if their absences are related to their medical condition (such as hospital appointments).
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition.
- Require parents to attend school to administer medication, provide medical support, or toilet their child.
- Prevent children, or create unnecessary barriers, to children participating in any aspect of school life, including school trips.

Delegable Health Tasks

The Royal College of Nursing recommends that some specific health tasks can be delegated to non-healthcare professionals including education support staff. Prior to the delegation of any procedures, the Nursing Team or relevant health professional is required to:

- Obtain consent from the person with parental responsibility for the task to be delegated to the worker in the educational setting.
- Undertake an assessment of the associated risks of delegating a specific healthcare procedure.
- Where the risk can be mitigated through appropriate training the task may be delegated in agreement from the school leader. **Please note that healthcare tasks cannot be automatically delegated without any consultation with the school leader. The school leader must fully agree to take responsibility for carrying out the task.**
- The provider's Risk Assessment must be shared with the school leader and/or Council prior to the task being delegated.
- Work with the school to identify an appropriate person to carry out the task – the person must volunteer to undertake the task if not contained within the job description of the employee. **Existing employees cannot be forced to undertake any additional healthcare tasks where they have been employed with the purpose of supporting a child's learning needs.**
- Provide relevant advice and guidance to the school staff as a whole.

- Provide appropriate training and ongoing supervision/support to the worker.
- Work with the schools to identify a suitable environment to carry out task.
- Have in place an appropriate indemnity arrangements which provide appropriate cover relevant to the scope of practice.

The school or employer must make sure that the delegation of these responsibilities are included within the employee's job description or within a mutually agreed job role before any training is provided or expectation that care will be undertaken. The school should also have in place adequate insurance cover for the duties they are undertaking.

[Providing support for children and young people with health needs in schools](#)

School Nursing Team

The School Nursing Team works across schools in Warrington to improve the health and wellbeing of school aged children and young people (5-19 years), with a focus on early help and support. Each primary and secondary school has a named School Nurse who will promote health and emotional wellbeing in schools by:

- Being available to address, in confidence, any concerns about a child or young person's health.
- Providing health advice to help children and young people to make positive health choices.
- Assessing children starting primary school after their care is transferred from the Health Visitor.
- Assessing the health of year 7 pupils before they transfer to high school.
- Offering young people an opportunity to discuss health issues confidentially at school based or community based drop-in sessions.
- Supporting young people who have particular medical needs and providing training for education staff to help manage these needs.
- Developing care plans to support pupils with medical needs including allergies.
- Delivering classroom-based health education.
- Working with and referring to other professionals.
- Working with other agencies to safeguard and protect young people.
- Delivering the National Child Measurement programme (NCMP).

Roles and responsibilities of Warrington Borough Council

Provision of suitable education at school or otherwise

The Council is responsible for promoting cooperation between Multi Academy Trusts, schools, NHS Warrington CCG and healthcare providers so children and young people receive the help and support they need to attend school and engage in the full range of activities put in place by the school.

This includes ensuring that:

- Appropriate full-time education is provided as soon as it is clear that the child will be away from school for 15 days or more, whether consecutive or cumulative. They should liaise with appropriate medical and education professionals to ensure minimal delay in arranging appropriate provision for the child.
- The education children receive is of good quality, as defined in the statutory guidance *Alternative Provision* (2013), allows them to take appropriate qualifications, prevents them from slipping behind their peers in school and allows them to reintegrate successfully back into school as soon as possible.
- Children with health needs should have provision which is equivalent to the education they would receive in school. If they receive one-to-one tuition, for example, the hours of face-to-face provision could be fewer as the provision is more concentrated.
- Where full-time education would not be in the best interests of a particular child because of reasons relating to their physical or mental health, the Council will ensure that part-time education is on a basis they consider to be in the child's best interests. Full and part-time education should still aim to achieve good academic attainment particularly in English, Maths and Science.
- The provision is reviewed regularly to ensure that it continues to be appropriate for the child and that it is providing suitable education.

Support for children with health needs

The Council is available to provide support, advice and guidance to school staff to ensure that they can access the help and support they need to deliver the provision specified within a child's Individual Healthcare Plans. This may include brokering conversations with the relevant healthcare professionals, Warrington's Designated Clinical officer and the CCG where barriers to learning and attending school are identified.

Roles and responsibilities of Warrington CCG

Warrington CCG commissions a range of healthcare services including:

- Audiology
- Community paediatricians
- Speech and language therapy
- Physiotherapy
- Occupational therapy
- Mental health support teams in schools
- CAMHs.

They are responsible for ensuring that:

- Services are responsive to children's needs and make arrangements to provide the services specified in any child's EHC Plan.
- Health providers (commissioned by the CCG) cooperate with schools supporting children with medical conditions.
- That there are good links between health services and schools, and consider how to encourage health services in providing support and advice (and can help with any potential issues or obstacles in relation to this).
- Children in schools who have long-term conditions and disabilities have access to clinical support. Children in special schools in particular may need care which falls outside the remit of the Council's commissioned school nurses. This will include support for conditions such as gastrostomy and tracheostomy care, or postural support. CCGs should ensure their commissioning arrangements are adequate to provide the ongoing support essential to the safety of these vulnerable children whilst in school.

Children missing education as a result of their medical condition / health needs

Schools should have made reasonable adjustments to allow the pupil to access a suitable full time education (or as much as the child's health condition can manage) in line with statutory guidance 'Supporting pupils at school with medical conditions'. This may include arrangements for school work being sent home for short periods of absence, a part-time time table or remote learning.

Where a pupil is, or likely to be, absent for a period of 15 days or more due to a medical condition schools should notify the Pupil Support Coordinator where they are unable to make the reasonable adjustments described above. The Coordinator will work alongside schools to ensure that the pupil has appropriate access to education where the child's consultant has

advised that they are not well enough to attend school on a regular basis. The Pupil Support Coordinator may need to escalate the case to the education, health or social care professionals where barriers to learning are identified. Schools should work alongside the Attendance Team where this is appropriate.

Contacts

For more information about this policy contact:

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Appendix 1 - Pathway for supporting pupils at school with medical conditions

