



# Peacehaven Community

## School

# Managing Complex Health Needs Policy

<b>Approved by:</b>	<b>Governing Body</b>
<b>Date approved:</b>	<b>January 2021</b>
<b>Review date:</b>	
<b>Responsibility:</b>	<b>SENDCo</b>

# Managing Complex Health Needs Policy

## 1. INTRODUCTION

Peacehaven Community School is committed to the provision of care that is high quality and meets the individual needs of children and young people.

1.1 This policy concerns procedures for managing complex health care needs of children and young people. This policy should be read in conjunction with the policy for Managing Medicines and Personal and Intimate Care and the DFES guidance on Managing Medicines in Schools and Early Years Settings (March 2005). (Department for Education 2010)

1.2 This policy must be used when developing guidance and procedures for managing the roles and responsibilities of all staff that are carrying out clinical/medical procedures with children and young people. In the context of this policy staff will include approved volunteers.

1.3 The term 'complex health care needs' includes all children and young people:

- Whose clinical well-being changes significantly from day to day
- Who need many hours of care each day
- For whom there is a daily risk of a life threatening event
- With life-limiting conditions

Complex health needs may include the following but are not limited by

- Restricted mobility
- Difficulties in breathing
- Problems with eating
- Continence problems
- Medical conditions e.g. diabetes, epilepsy
- Susceptibility to infection.

Procedures associated with the above could include the following examples

- Invasive procedures including augmentative feeding (nasogastric tubes, gastrostomy, other 'ostomies' including tracheotomy, ileostomy, colostomy and urinary catheters).
- Inhalers and nebulisers
- Oxygen supplementation
- Management of emergencies likely to require hospital admission such as diabetes mellitus' allergy asthma seizures. Anaphylaxis.

However, children and young people's individual procedures will be included in their health care plan.

## 2. DEVELOPING GUIDANCE

Each service area is responsible for developing guidance for managing complex health care needs of children and young people in line with this policy.

### **3. EQUALITY AND DIVERSITY**

Children and young people with complex health care needs have the same rights of access to services as other children and young people and are protected from discrimination under the Disability Discrimination Act (DDA) 1995.

### **HEALTH CARE PLANS**

- 4.1 An individual health care plan must be completed and maintained for every individual child and young person with health care needs. An example health care plan proforma can be found in the appendix.
- 4.2 All parents/ carers will be asked about any health care needs as part of the admission process.
- 4.2 Where a child or young person has complex health care needs the school will contact partner services to find out if a health care plan is in place. If a health care plan is in place, this should be utilized or amended as appropriate. If a health care plan is not in place then the school will arrange to meet with the relevant individuals to complete one.
- 4.3 Health care plans should be agreed by the Assistant Head (Learning Support and Development), key school staff, parents/ carers and young person and key health care professionals.  
  
This must be agreed prior to the admission to the school or whenever a change is made to an existing plan. Health care plans must be signed to indicate acceptance by all parties.
- 4.4 Health care plans must be reviewed at least 12 monthly and whenever there is a change in the young person's health care needs. Parents/carers have the prime responsibility for their child's health and must provide all services with up-to-date and current information about their child's health care needs, treatments and medicines as agreed in the health care plan.
- 4.6 Within the principals of safeguarding children and young people, where a health care plan exists this must be shared with all relevant individuals and services.

### **5. TRAINING**

- 5.1 PCS will ensure that staff expected to undertake clinical/medical procedures have received training from a qualified health professional annually or as the need arises.
- 5.2 PCS should refer to the delegation of clinical procedures document, which states procedures that can be undertaken by trained non-health qualified staff. It is essential that the staff carrying out the clinical/medical procedures only undertake the tasks as they have been trained and assessed to do.

### **6. PROTECTION OF CHILDREN AND YOUNG PEOPLE AND STAFF**

- 6.1 All staff working with children and young people must have been subject to an appropriate safer recruitment process.
- 6.3 There is no legal or contractual duty that requires staff to carry out clinical/medical procedures. However, this may already be included in an individual's job description or staff may formally elect to support children and young people in this way.

- 6.4 Relevant staff will have access to their school's guidance and procedures and must have ongoing training that supports the good working practice which complies with health and safety legislation. Staff must have access to a set of clinical/medical procedures, including how to manage young people who refuse to comply with previously agreed Interventions.
- 6.5 All service areas must have a system to ensure that children and young people with complex health care needs receive the support they need. This must include training, recording, storage of equipment, access to up-to-date information and information review process.
- 6.6 Each child and young person's right to privacy must be respected at all times. Careful consideration must be given to each child and young person's situation to determine how many carers might need to be present and which carers may be involved when carrying out procedures. Where appropriate each procedure will be carried out by one adult unless there is a reason for having more than one adult present. If this is the case, the reason must be clearly documented.

## **7. INSURANCE**

- 7.1 Before carrying out clinical/medical procedures staff must be trained and assessed as competent in the relevant procedures. There needs to be written evidence via a risk assessment and/or appropriate training and/or written competency assessment.
- 7.2 On the basis that PCS's policy for managing complex health care needs is followed then the school is protected by its Public Liability insurance (subject to its terms, conditions and exclusions) for accidental death, injury, damaged caused by such procedures to a third party.
- 7.3 The insurance provided jointly indemnifies with the County Council staff and Members provided they are acting in accordance with their duties.
- 7.4 All other partner organisations must have, at least, the minimum public liability insurance and indemnity insurance. Each service will have a procedure for checking this insurance is in place.

Types of Intervention

### **Airways**

- **Non Invasive Ventilator**
- **Assisting a child with inhalers**
- **Routine tracheostomy care**
- **Caring for a child on oxygen**
- **Oral suction**
- **Tracheostomy suction**
- **Changing of tracheostomy tube for unstable airway**

### **Allergy**

- **Emergency treatment of anaphylaxis Care**
- **Administration of Enemas**
- **Stoma care**
- **Colostomy**
- **Ileostomy**

### **Catheterisation**

- **Care of Mitrofanoff**
- **Intermittent catheterisation**
- **Care of supra pubic catheter**

### **Diabetes**

- **Diabetes tests in non-independent children**
- **Administration of insulin in non-independent children**

### **Epilepsy Emergency procedure**

- **Administration of Rectal Diazepam**
- **Administration of Buccal Midazolam**

### **Feeding**

- **Bolus feeds via a gastrostomy**
- **Bolus nasogastric feeds**
- **Pump feeds via a gastrostomy**

### **Various procedures**

- **all type**

**Appendix: Example health care plan proforma**

## individual healthcare plan

Name of school/setting

Peacehaven Community School

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

### Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Name

Phone no. (work)

(home)

(mobile)

Relationship to child

### Clinic/Hospital Contact

Name

Phone no.

### G.P.

Name

Phone no.

Who is responsible for providing support in school

Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

Name of medication, dose, method of administration, when to be taken, side effects, contra-  
indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Managing complex health

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to

Parent/Carer Signature