



'Individual Growth, Individual People'

Head Teacher: Mrs M A Tyers

Managing Complex Health Care Needs Policy

Reviewed April 2017

MANAGING COMPLEX HEALTH CARE NEEDS POLICY

1. INTRODUCTION

Children and Young People's Services is committed to the provision of care that is high quality and meets the individual needs of children and young people and embraces 'Every Child Matters' and the United Nations Convention on the Rights of the Child.

- 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
- 1.4 Procedures associated with the above could include the following examples
 - Invasive procedures including augmentative feeding (nasogastric tubes, gastrostomy, other 'ostomies' including tracheotomy, illeostomy, colostomy and urinary catheters).
 - Inhalers and nebulisers
 - Oxygen supplementation
 - Management of emergencies likely to require hospital admission such as diabetes mellitus' allergy asthma seizures. Anaphylaxia.

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 *Children and Families Act 2014*.

4. 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 DFES guidance *Managing Medicines in Schools and Early Years Settings* annex B.
- 4.2 Where a child or young person has complex health care needs the school should 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 should arrange to meet with the relevant individuals to complete one.
- 4.3 Health care plans should be agreed by the responsible health care professional, the head teacher/manager, parent/carer/legal guardian and/or the child or young person. 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 child's or young person's health care needs. Parents/carers/legal guardians 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.
- 4.5 Young people over the age of 16 who are living independently of their parents/carers must be encouraged to provide all services with up to date and current information about their health care needs, treatments and medicines as agreed in their health care plan. Appropriate support must be provided for those young people who have particular disabilities/conditions that require additional support to be able to do this.
- 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 Newark Orchard School will ensure that staff expected to undertake clinical/medical procedures have received training from a qualified health professional and assessed as competent on each procedure. Written assessment of competency must be recorded and a means of monitoring/support should be agreed including training update at least annually or as the need arises.
- 5.2 Newark Orchard School 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 so. (See Appendix 1).
- 5.3 Newark Orchard School should adhere to the procedures for clinical interventions detailed in the Joint Protocol between Nottinghamshire Children and Young People's Department and appropriate Primary Care Trusts (PCT's).

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.
- 6.2 Nottinghamshire Safeguarding Children Board Safeguarding Children Procedures and the Safeguarding Disabled Children and Young People Inter-agency Practice Guidance must be accessible to all staff and adhered to.
- 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* children and 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 Nottinghamshire County Council (NCC) 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 Newark Orchard Schools policy for managing complex health care needs is followed then Newark Orchard 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.

For further information contact Risk and Insurance Section, County Hall *0115 977 3738*.

- 7.3 The insurance provided jointly indemnifies with the County Council staff and Members provided they are acting in accordance with their NCC 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.

8. MONITOR AND REVIEW

Newark Orchard School will be responsible for promotion of this policy across the school. Any required changes to this policy due to changes in legislation will be made in partnership with the policy author. However it is the responsibility of individual schools to ensure that their staff are made aware of their specific guidance.

9. APPENDIX 1

MANAGING COMPLEX HEALTH CARE NEEDS OF CHILDREN AND YOUNG PEOPLE

Delegation of Clinical Procedures

- The following procedures may be safely taught and delegated to non-health qualified staff.
- Training must be carried out by a qualified health professional and assessed as competent.

Types of Intervention	Intervention
Airways	<ul style="list-style-type: none"> • Non Invasive Ventilator • Assisting a child with inhalers • <i>Chest physiotherapy</i> • Routine tracheostomy care • Caring for a child on oxygen • Oral suction • Tracheostomy suction • Changing of tracheostomy tube for unstable airway • <i>Nasal suction</i>
Allergy	<ul style="list-style-type: none"> • Emergency treatment of anaphylaxis
Care	<ul style="list-style-type: none"> • Administration of Enemas • Stoma care • Colostomy • Ileostomy
Catheterisation	<ul style="list-style-type: none"> • Care of Mitrofanoff • Intermittent catheterisation • Care of supra pubic catheter
Diabetes	<ul style="list-style-type: none"> • Diabetes tests in non independent children • Administration of insulin in non independent children
Epilepsy	Emergency procedure <ul style="list-style-type: none"> • Administration of Rectal Diazepam • Administration of Buccal Midazolam
Feeding	<ul style="list-style-type: none"> • Bolus feeds via a gastrostomy • Bolus nasogastric feeds • Pump feeds via a gastrostomy
Various procedures	<ul style="list-style-type: none"> • Dialysis - all types

Please read in conjunction with the Managing Medicines Policy.