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Llywodraeth Cymru
Welsh Government

Welsh Government
Consultation Document

School Nursing Framework Part 2 – Nursing in Special Schools

Date of issue: 13 March 2018

Action required: Responses by 06 June 2018

Mae'r ddogfen yma hefyd ar gael yn Gymraeg.
This document is also available in Welsh.

Overview

In May 2017 the School Nursing Framework was launched following a consultation process. The revised school nursing framework was launched in May 2017 the aim is to enhance the access that children have to the school nursing service. It ensures that every mainstream secondary school and its cluster of partner primary schools will have an identified school nursing service based on level of local need, and a team with relevant skill mix. The development of part 2 of the framework, nursing in special schools is designed to extend this standardised approach to children who are educated in special schools and to children with high levels of special needs in mainstream schools.

How to respond

There is an online version of the questionnaire.

<https://beta.gov.wales/draft-framework-nursing-special-schools>

Further information and related documents

Large print, Braille and alternative language versions of this document are available on request.

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Data protection

How the views and information you give us will be used

Any response you send us will be seen in full by Welsh Government staff dealing with the issues which this consultation is about. It may also be seen by other Welsh Government staff to help them plan future consultations.

The Welsh Government intends to publish a summary of the responses to this document. We may also publish responses in full. Normally, the name and address (or part of the address) of the person or organisation who sent the response are published with the response. This helps to show that the consultation was carried out properly. If you do not want your name or address published, please tell us this in writing when you send your response. We will then blank them out.

Names or addresses we blank out might still get published later, though we do not think this would happen very often. The Freedom of Information Act 2000 and the Environmental Information Regulations 2004 allow the public to ask to see information held by many public bodies, including the Welsh Government. This includes information which has not been published. However, the law also allows us to withhold information in some circumstances. If anyone asks to see information we have withheld, we will have to decide whether to release it or not. If someone has asked for their name and address not to be published, that is an important fact we would take into account. However, there might sometimes be important reasons why we would have to reveal someone's name and address, even though they have asked for them not to be published. We would get in touch with the person and ask their views before we finally decided to reveal the information.

Overview

This consultation seeks your views on the draft new framework for nursing in special schools at **Annex A**. The special schools nursing framework is part 2 of the overall revised schools nursing framework which was launched in May 2017. The special schools framework is designed to provide consistency in practice across Wales and to ensure that children have access to a wider team to support their needs.

Main issues

The model proposed within the framework sets out the role

Current position

Currently all special schools have access to a special schools nurse however unlike school nursing there is no framework to guide practice. One of the issues that the pilot highlighted was that having access to a team using the special schools nurse as a single point of contact was a major benefit to children and families

Rationale for the development of the school nursing framework part 2 nursing in special schools

There has been a school nursing framework in Wales since 2008, with a revision to this in 2017; there is no similar framework for special schools nursing. Evaluation of the school nursing framework demonstrates positive outcomes in terms of the consistency of service that pupils experience from their school nurse. Extending the framework to special schools will enable similar consistency.

- The introduction of the framework for nursing in special schools is a new policy development so is designed to support good practice
- The proposals are based on a successful pilot that was undertaken in three special schools in south Wales which looked at both the core role for special school nurses and also the importance of a model where there is a “team around the child”
- The draft framework lays down a set of proposals that sets out a core role for all nurses in special schools
- It also describes the role of the special school nurse as a coordinator of access to other services
- Within the framework there is also a description of the concept of a “team around the child”

Consultation Questions

Special Schools Nursing Framework:

Question 1

Part one of the framework is the school nursing framework for nursing in all schools includes a universal offer for all children. Part 2 builds upon that offer for children in special schools

Is it clear how part 1 will be applied to special schools as described in part 2?

YES

PARTLY

NO

If you have answered partly or no, can you please tell us what area is unclear?

Question 2

The document outlines the vision for special schools nursing in Wales do you agree with this vision?

YES

PARTLY

NO

If you have answered partly or no can you tell us what you recommend we change/ add?

Question 3

The proposed key areas of the framework are:

1. Ensuring that the standards in part A, the universal offers are met.
2. Ensuring that the requirements of the ALN and Education Tribunal (Wales) Act are met
3. Co-ordinating care and care and treatment/ care planning, to include
 - Enhanced focus on mental health and wellbeing
 - Intensive working with therapeutic approaches
 - Meeting physical health needs through enhanced and intensive interventions
4. Supporting families and carers

Do you agree with the 4 areas listed

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| YES | PARTLY | NO |
| If you have answered partly or no could you please tell us what additional key areas or changes you would wish to see? | | |
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Question 4

Do you feel there is sufficient description of the evidence base to support the 4 key areas described in question 2

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| YES | PARTLY | NO |
| If you have answered partly or no can you give us details of what you would recommend to be added? | | |
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Question 5

The appendix of the framework forms details of the standards in the aspects of the role outlined in the key areas in question 2. Are these sufficiently well developed

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| YES | PARTLY | NO |
| If you have answered partly or no can you tell us what feel is missing and what you recommend we add? | | |
| Ensuring that the standards in part A, the | | |

| | |
|---|--|
| universal offers are met | |
| Ensuring that the requirements of the ALN and Education Tribunal (Wales) Act are met | |
| Co-ordinating care and care and treatment/ care planning, to include: <ul style="list-style-type: none"> - <i>Enhanced focus on mental health and wellbeing</i> - <i>Intensive working with therapeutic approaches</i> - <i>Meeting physical health needs through enhanced and intensive interventions</i> | |
| Any additional areas identified in question 2 that you wish to see included | |

| | | |
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| The framework talks about the concept of a team around the child do you think it sufficiently explains what this is and how it works? | | |
| YES | PARTLY | NO |
| if you have answered partly or no could you please tell us what additional information is needed? | | |
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| <p>Question 6</p> <p>Do you think that this framework will have a positive impact on people based on the following protected characteristics</p> <ul style="list-style-type: none"> • Disability • Race |
|--|

- Gender and gender reassignment
- Age
- Religion
- Sexual orientation
- Human rights
- Children and young people

YES

PARTLY

NO

If you have answered partly please explain

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**Consultation
Response Form**

Your name:

Organisation (if applicable):

email / telephone number:

Your address:

Question: We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them:

Please enter here:

Responses to consultations are likely to be made public, on the internet or in a report. If you would prefer your response to remain anonymous, please tick here:

School Nursing Framework part 2 - Nursing in Special Schools

Introduction

The supporting learners with healthcare needs guidance ¹ provides a statutory framework for the delivery of healthcare needs including the development of individual health plans. It also, for example, provides information to support practice through guidance on issues such as information sharing and medicines storage. It is within this context that this special schools nursing framework should be considered.

A review of school nursing provision for pupils within Special Schools was commissioned by the Chief Nursing Officer (CNO) in 2015 to ascertain the level of input required to optimise the health and well being of children and young people who receive their education in these schools. The rationale for the project was that the existing framework for the school nursing service for Wales does not include the provision for special schools.

The review highlighted a wide range of health related issues and concerns relating to a lack of a standard approach in meeting the needs of the pupils who need special school education.

Following receipt of the report from the review, Welsh Government then supported Abertawe Bro Morgannwg University Health Board with funding to appoint a Project Nurse for one year to pilot a model of nursing and other health care provision to meet pupils' needs.

The model used an approach that creates a 'team around the child' and it was considered essential to maintain current models of good practice regarding pre-school multidisciplinary team (MDT) working for children with complex health needs. A core team of professionals was developed for the purpose of the pilot, and named the Children's Integrated Team.

It was agreed that where the school had a nurse on site, they would act as the clinic coordinator; where there was no nurse on site the co-ordinator from the Child Disability Health Team would fulfil this role. Along with this core team, all professionals from education, health and social care, involved in the care of the pupil would be invited to attend to ensure all areas of care and support were addressed and all relevant information was shared.

Evaluation shows that in the pilot sites the model has benefitted pupils, families and the professionals involved and reinforced the necessity of partnership working with a shared approach to ensure the needs are met.

The following part of the School Nursing Framework outlines the standards for nursing in special school settings, and is referred to as the 'Special Schools Nursing Framework'. The 'Special Schools Nursing Framework' applies to all pupils in special schools, but it also applies to pupils with high levels of special needs in mainstream schools. The document also sets out a specification and

¹ <http://learning.gov.wales/resources/browse-all/supporting-learners-with-healthcare-needs/?lang=en>

Annex A

expectation of the wider multi-disciplinary team that supports these children and young people.

Drivers

The special schools nursing framework is being developed at the same time as other key policy drivers are rolled out.

Part A of the School nursing framework outlines the programmes that are being implemented. The drivers in this section consider the implications of these same programmes but from a special school nursing perspective.

The Additional Learning Needs and Education Tribunal (Wales) Act 2018² received Royal Assent on 24 January 2018. It creates the legislative framework to improve the planning and delivery of additional learning provision, through a person-centred approach to identifying needs early, putting in place effective support and monitoring, and adapting interventions to ensure they deliver desired outcomes. The role of the nurse in special school settings will be pivotal to supporting the implementation of the new assessment and delivery process and ensuring that the requirements of the Act are supported is one of the key standards within this framework.

*Together for Children and Young People (T4CYP)*³, another key policy was launched in 2015 by the Health and Social Services Minister. Led by the NHS, this multi-agency programme is working to reshape and refocus emotional and mental health services for children and young people in Wales, in line with the principles of [prudent health and care](#)⁴. Within this, special educational needs for both the CAMH's and Neurodevelopmental pathways are considered and there is a clear role in implementing T4CYP for nurses in special schools.

The Healthy Child Wales Programme⁵ and the further rollout of emotional literacy and support mechanisms (ELSA)⁶ are other key school based policies that are relevant to the role of the nurse in special schools.

In line with Prosperity for All⁷, with its focus on mental health and well-being, the special schools nursing framework offers a basis for addressing some of the key challenges in delivering for the mental health and wellbeing of children and young people with special educational needs in Wales.

The framework is being implemented at a time when the key curriculum review within the Donaldson Report⁸ is being implemented this means that the

² Additional Learning Needs and Tribunal (Wales) Act 2018 (access: <http://gov.wales/topics/educationandskills/schoolshome/additional-learning-special-educational-needs/transformation-programme/legislation-and-statutory-guidance/?lang=en>)

³ T4CYP- Together for Children and Young People Welsh Government (2015)

⁴ Prudent health care principles Welsh Government (2015)

⁵ Healthy Child Wales – Public Health Wales (2016)

⁶ ELSA- Emotional Literacy and Support Welsh Government (2016)

⁷ Prosperity for All Welsh Government (2017)

⁸ Donaldson report and curriculum reform 2016

Annex A

curriculum has an emphasis on health and wellbeing as well as traditional subjects. The school nurse is ideally placed to support the development of this policy

The special schools nursing framework is based on a human rights approach. It is committed to embedding the [7 Core Aims](#) for children and young people under the United Nations Convention on the Rights of the Child (UNCRC)⁹.

Vision for nursing in special schools in Wales

Nurses working in special schools will:

- ensure that everyone working with children understands what reasonable adjustments are needed by that child and family to enable equal and comparable access to education, health and social care
- deliver care, support and advice to all children using evidence based and published guidance
- work in partnership with the child, school, parents and other health professionals to achieve positive outcomes and to ensure children reach their full potential to grow into happy healthy adults.
- support children's health and well-being through a public health approach to prevention, protection and promotion of good health
- use their knowledge and experience to anticipate the needs of children and their carers through knowledge and experience
- support the reduction in the impact of health inequalities and achieve better health outcomes for the children and young people
- provide a single point of contact and consistency in access to support

What children and young people tell us

This section will contain the outcomes of the proposed consultation events with children and families as part of the overall consultation period - it will also demonstrate how this process has influenced the development of the framework

The model

Part A of the framework, the school nursing framework (Page 8), uses a model that has “**Universal; Enhanced and Intensive**” interventions. The Universal offer is for all school age children, and children in special schools are subject to that offer. It will be one of the standards that the school nursing service; special school nurses and others work in partnership to make the reasonable adjustments needed to ensure that all children special educational needs can access the universal offer.

Given the nature of the service provided by nurses in the special school settings the standards align to the **Enhanced** and **Intensive** levels of the model, as outlined on page 9 of the overall school nursing document .

⁹ UNRC- United Nations Declaration of the Rights of The Child 2008

Annex A

Key areas of the framework

The following are the key areas that form the standards contained in the appendix:

1. Ensuring that the standards in part A, the universal offers are met.
2. Ensuring that the requirements of the ALN and Education Tribunal (Wales) Act are met
3. Co-ordinating care and care and treatment/ care planning, to include
 - Enhanced focus on mental health and wellbeing
 - Intensive working with therapeutic approaches
 - Meeting physical health needs through enhanced and intensive interventions
4. Supporting families and carers

1. Ensuring that the standards in part A - the universal offer is met.

Details of the standards of the universal offer can be found in the appendix in part A of this document page starting on page 17. The universal offer covers the following areas:

- Safeguarding
- Promotion of emotional wellbeing and supporting the mental health needs of school age children
- Immunisation standards for school age children in Wales
- Standards for the implementing the child measurement programme for Wales

The aim for nurses working in special schools is to work with the school nursing service and other child health professionals to ensure that all children in special schools access these universal standards.

The concept of reasonable adjustments is a recurring theme throughout this framework and it is worth taking a few minutes to consider what this means in the context of delivering the universal offer for special school pupils. For this aspect of the framework, reasonable adjustments are used to describe the intervention that needs to be made in order for a health care need to be met by health care professionals.

There are a number of resources to support practitioners (some examples being found in appendix 2) in making reasonable adjustments with consideration of some critical issues, for example:

- Accessible information – providing access to information in a format that the child can understand
- Support in terms of consent and capacity, making best interest decisions

Annex A

- Communication – understanding how the child communicates, how they express emotions and preferences developing and using communication profiles and traffic light system (App 2).
- Understanding fears and aversions and minimising exposure to these
- Understanding any social/ sensory processing issues
- Working with families and carers
- Adopting professional approaches to de-sensitisation using a planned, agreed and ethically approved care plan
- Adoption of positive behavioural support
- Going the extra mile – some of the best practice examples of making reasonable adjustments involve flexibility and creativity

2. Ensuring that the requirements of the ALN and Education Tribunal (Wales) Act are met

At this stage the role of the nurse in the special schools setting will be to support the implementation and monitoring of the requirements of the Act related to assessment and the health component of individual health plans. As the ALN and Education Tribunal (Wales) Act processes become established there may be additional roles and activities that involve the special school nurse. School nurses are well placed to support the implementation, monitoring and evaluation of health plans that support the reasonable adjustments needed to ensure comparable and fair access to educational opportunities.

3. Co-ordinating care and care and treatment / care planning

Where the child is eligible under the Mental Health Measure (Wales) 2010¹⁰, the special school nurse may, depending on their professional profile, be named as the care coordinator in terms of the legal requirements of the measure.

The special schools nursing pilot also recommended that in terms of the general health and wellbeing of the child, the special school nurse is well placed to be the clinical coordinator for care and be responsible for the overall care planning process for clinical aspects of the child's care whilst in school.

Part of the care coordinator role will be to support the implementation of wider additional elements such as the implementation of the Children's Health Equalities Framework¹¹ (cHEF) as this rolls out and also the annual health check process as relevant and supporting the development of health passports which all support access to wider health care provision.

However one of the key messages from colleagues and families in developing this framework is that children and families should have a **single point of contact** to enable access to a range of health care services that support them whilst they are eligible for school age services. The coordination role could

¹⁰ Mental Health Measure (Wales) 2010

¹¹ The Health Equalities Framework HEF (NDTI 2013)

Annex A

therefore extend to other community based services that may support the child and their families outside of the school environment.

The special schools nurse should become the overall clinical care coordinator when the child is in education.

This role should focus on some priority areas as highlighted by the special school nursing reference group these are:

- **An enhanced focus on mental health and wellbeing**

The universal offer in part A has a focus on mental health and wellbeing. Within the enhanced focus on mental health and wellbeing, for special school nursing, this should be built upon an understanding of the impact of special educational needs on mental health and wellbeing. It is essential this is recognised and strategies are developed that support children, young people and families forms part of the standards found in appendix 1.

“Children with learning disabilities [in England] are at increased risk of exposure to all of the major categories of social determinants of poorer physical and mental health”¹². Whilst this is an English report, it gives clear indication on the impacts of inequalities for children with learning disabilities and one of the key public health roles for the special schools nursing service is to employ strategies to reduce the effect of those impacts.

- **Intensive working with therapeutic approaches**

The framework takes the structure and recommendations from T4CYP to describe the therapeutic approaches advocated by T4CYP, in the three areas of **Early Intervention; Neurodevelopmental and Learning Disabilities and Child and Adolescent Mental Health (CAMHs)**. The rationale for this is that in terms of therapeutic interventions that support the mental health and wellbeing of the child and provides the best support to families and carers the actions associated with the designated pathways of the T4CYP programme are evidence based and by using this framework we can begin to adopt consistency in models of interventions across Wales.

Early intervention is included as this is an essential part of the health promotion and prevention role that the special schools nurse has; whether there is a change in behaviour that begins to present problems or an identified deterioration in the child’s mental health condition, having early intervention strategies can prevent unnecessary admissions to hospitals and mental health settings or a deterioration in challenging behaviour resulting in placement in out of area CAMHs provision.

¹² The determinants of health inequities experienced by children with learning Disabilities- Public Health England (2013)pg 5

Annex A

Similarly supporting skilled therapeutic interventions within their role and capability can be part of the special schools nursing role and in terms of care delivery, this is an important element of supporting the child and family.

Each of the therapeutic areas are underpinned by some common themes, which can be seen within the section on care coordination in the standards section, appendix 1; it is worth remembering the importance of understanding how a child communicates and how this sets the tone for any therapeutic intervention. Developing a therapeutic conversation and a supportive positive relationship is a primary skilled intervention for the nurse within the special schools setting.

- **Meeting physical health need through enhanced and intensive interventions**

The relationship between children with high levels of special educational needs and additional physical health needs is well documented and understood. Health need varies from child to child and it is important that the special school nurse understands the common associated conditions that can present in children in special schools.

4. Supporting families and carers

Families involved in the pilot all commented on how pivotal the role of the special schools nurse is in supporting their ability to look after their children and it is important that this contribution is recognised and seen as an essential part of the special school nursing framework.

Many parents find supporting children who have challenging behaviours one of the hardest elements of their parenting and caring role and support in this area is crucial. It might well be that if the special schools nurse is competent in positive behavioural support, such as a Registered Nurse (Learning Disability), they can give direct input to the family. If not it is likely that they support the process by being the coordinator and point of access to a wider team that can support the child in terms of such challenges.

Similarly in terms of supporting those with additional physical disabilities and children with profound learning and physical disabilities the role of the special schools nurse is two-fold, by supporting the families and carers directly and also ensuring the team around the child is accessed to provide the level of support needed.

Annex A

The role of the nurse in special schools nursing- questions and answers:

Q - Who are school nurses in special schools and what do they bring?

A - Nurses in special schools are usually employed by the local health board. They function as part of the wider school team but also have an essential role in liaising and coordinating the multidisciplinary team who provide a team around the child and their families. They can come from any of the fields of nursing and may be adult nurses with additional training; registered children's nurse; registered learning disability nurse and some may be registered mental health nurses. Each of the fields of nursing bring a core set of skills and are expected to deliver the standards outlined in this document. However some nurses are trained in specific areas and may need to draw on expertise, for example CAMH services or behavioural support from nurses working in the wider community health teams.

Q - How do nurses in special schools access support and supervision?

A - This is an area to strengthen as the framework is rolled out, it is important that all nurses have access to some form of professional supervision and it is the joint responsibility of the health board and nurse managers with the individual practitioner to make this happen. In line with the Universal Offer and with the nature of the special schools nursing role, special schools nurses can find themselves in some delicate sensitive situations for example safeguarding. It is essential that supervision is formalised and support from managers is accessible and available as needed.

Q - How do they access continuing professional development and revalidation?

A - There is joint responsibility by the nurse and their employer to ensure the individual is kept up to date in their practice and health boards should consider this question as part of developing the service. As part of the continuous review of revalidation, arrangements for school nurses should be given further consideration.

Q - How can nurses in school settings be supported to access IT systems and make better use of technology?

A – This should be considered as part of the national rollout of new IT systems, specifically how these systems work for nurses working in special schools. Advice gathered from the national school nursing forum is one means of identifying their needs.

Q - What kinds of interventions are expected from special schools nurses?

A - Special schools nurses are expected to look at the child, their families and those who care and support them in a holistic way. They will be using enhanced and specialist interventions to support the children. Some of these interventions will be agreed through a planning process with other professionals such as speech and language therapists or psychologists. Others may be instigated by the nurses themselves in agreement with the multidisciplinary team. All interventions should be evidence based and follow recognised guidance. Appendix 2 contains some

Annex A

resources and the aim is to add to these as a living document. For example, the new standards for children and adults with profound and multiple learning disabilities.

Q- What is the role of special school nurses in medicine management and storage

A- Special schools nurses follow the guidance in “ supporting learners with health care needs” which describes the expectation in terms of storage and administration of medicines. The special schools nurses also have a role in overall monitoring and management of medicines in partnership with those who do prescribing and pharmacists

Networks and structures

Part A describes the relationship between the school nurse and the Welsh Network for Healthy Schools. There is a proposal that nurses in special schools similarly become part of that process.

The roll-out of the school nursing framework described in part A was supported by a national implementation board. Implementation of the special schools nursing framework will be included in the work of this board.

There is a forum and community of practice for schools nursing. Similarly this will be made open to nurses working in special schools. Strengthening the Commitment is an all Wales learning disability nursing group. During 2018 there will be a review of its function and membership. Representatives from special schools nursing will be sought to join the refreshed group in future.

There are 2 communities of practice groups, supported by 1000 lives: one for people with profound and multiple learning disabilities and one for challenging behaviour. These may prove useful fora for special school nurses to participate in.

Workforce

Each special school should have access to at least one dedicated health board employed special school nurse who will be a registered nurse. They may come from a variety of backgrounds but should be able to demonstrate competencies that enable delivery of the standards. A special school nurses may come from one of the following backgrounds; learning disability nurse, children’s nurse or occasionally CAMH’s trained mental health nurse; some may hold registration as specialist school nursing qualification Specialist Community Public Health Nurses SCPHN (SN).

It is recommended that the qualification, experience and competence are matched to the needs of the school. for instance a school where children have high levels of physical health care need and perhaps they are technology supported, might need a children’s nurse whereas those with high level of children who challenge may consider a learning disability nurse. It is recommended that the health boards should consider the skill mix of the nurses supporting the special schools within its footprint.

Annex A

Summary

From a workforce perspective, the following are key priorities:

- That all special schools have a dedicated nurse with the appropriate skills to meet the school need and to deliver these standards
- That role descriptors and job descriptions reflect the standards within this framework in a consistent manner
- That special school nurses have access to CPD to enable them to meet the standards
- That a community of practice for special school nurses is established as part of the wider school nursing network
- That special school nurses have access to peer supervision
- That leadership and the coordination/ single point of access is specifically addressed and supported through education and training and the creation of structures to enable delivery of this part of the role.

Working with community teams

Children's community teams exist in all health board areas, there is variation in operation. The pilot recommended that the team is not prescribed and that the team may be a 'virtual team' meaning that there is a range of other professionals to be called upon. All children in special schools should have as a core minimum access to a consultant level practitioner (who may be a non medical consultant, dependent upon need), therapists, community nursing team and primary care services.

Services such as screening, vision, hearing, dental and any specialist input from primary services should also be coordinated through the special schools nurse.

The relationship between the special school nurse as coordinator and providing single point of access to the wider team should be strengthened. This might mean the development of new ways of working and infrastructures to support.

Medication management and review is an essential element and should have particular emphasis through the wider team.

Appendix1 –All Wales standards for nursing in special schools

| Standard | Actions |
|---|--|
| Ensuring that the standards in part A - the universal offer is met. | <u>Please refer to Appendix 1 in part A if the framework</u> |
| Ensuring that the requirements of the Additional Learning Needs and Education Tribunal (Wales) Act 2018 are met | <ul style="list-style-type: none"> • Understands the arrangements for the implementation of the ALN Act within their own school setting in line with the Health Board requirements • Is clear about the role they are expected to undertake • Constantly evaluates and reviews effectiveness of their role • Makes maximum use of supervision, team working and review to ensure positive outcomes for the individual child through the ALN arrangements • Practices within the framework of the statutory guidance “ supporting learners with health care needs” |
| Co-ordinating care and care and treatment / care planning | <ul style="list-style-type: none"> • Is clear about what services and supports are available and ensures others are as well • Helps people who could benefit from services to be able to access information about them as easily as possible. This includes having information about what is available, when and where • Supports people accessing information about services and system of support are provided with accessible and consistent points of contact, ideally with named individuals • Develops and delivers person centred evidence based care and treatment plans • Supports the annual health check process where relevant • Has input into the development of health passports • Act, where appropriate, as the named care coordinator • Work within professional code(s) of practice |
| Enhanced focus on mental health and wellbeing | <ul style="list-style-type: none"> • Use a range of relevant evidence based assessment tools • Deploy mental health legislation and guidance effectively • Be sensitive to the impact of adverse childhood experiences (ACE's) and deploy strategies to |

Annex A

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| | <p>support reduction in impact</p> <ul style="list-style-type: none">• Provide a consultation service to others• Use evidence based risk management assessments and tools• Understand of NICE guidance in terms of best practice in promoting mental health in C&YP• Understand how the “family” as a system and environmental factors are considered in order to identify the most appropriate evidence based interventions/ treatment options for each individual and their families.• Use a working knowledge of approaches/models such as: Positive Behaviour Support, Applied Behavioural Analysis, Trauma Recovery Model• Develop and refine effective working links across professions and agencies to enhance a multi agency intervention approach with local provision and support networks around the children and young people, their families and carers• Use an in depth knowledge of pharmacological interventions used to manage symptoms of mental health conditions. Understand the rationale for use, monitoring and reviewing effectiveness, side effects etc.• Have the skills and ability to provide training, support, guidance and advice to families as a whole.• Use professional judgement to work appropriately with the family, carers and young person to ensure a co-production approach to assessment, formulation and development of care plans• Is competent in evaluation and uses the multidisciplinary team to ensure that this is outcome focussed and an ongoing process• Understand that every communication and interaction is an opportunity to employ therapeutic skills.• Ensure that all communication has a purpose and knows ‘where to take a conversation’• Understand the importance of professional boundaries in therapeutic relationships demonstrating insight into the vulnerabilities of individuals• Be competent to employ appropriate evidence |
|--|--|

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|---|--|
| | <p>based therapies in line with care plan, professional competence and own training</p> |
| <p>Working with therapeutic approaches</p> | <p>EARLY INTERVENTION</p> <ul style="list-style-type: none"> • Understands the importance and aims of an early intervention service • Can recognise emerging crisis • Uses professional judgment in terms of escalation • Can use short interventions when necessary • Delivers effective therapeutic interventions known to work in early intervention • Implements family based risk reduction strategies • Uses the appropriate competencies from the neuro-developmental and CAMHS ‘skilled framework’ <p>NEURO-DEVELOPMENTAL AND LEARNING DISABILITIES</p> <ul style="list-style-type: none"> • Has understanding and knowledge of neurodevelopmental conditions including children and young people with learning disabilities (LD) • An awareness of the prevalence rates • A good working knowledge of the differences in presentation of neurodevelopmental conditions with the LD population • Awareness of the importance of a preventative focussed approach • Understanding of the specific neurodevelopmental pathway • Uses effective evidence based positive approaches with individuals with neurodevelopmental conditions and or behaviours that challenge • Ability to effectively communicate using a range of methods including non verbal and augmented to meet individual communication needs. • Understands the concept from positive behavioural approaches that all behaviour is a form of communication. • Uses functional analysis of behaviour, as well as a range of diagnostic assessment tools • Promotes the importance of using least restrictive options to support inclusion and improve quality of life. |

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| | <p>CHILD AND ADOLESCENT MENTAL HEALTH (CAMHS)</p> <ul style="list-style-type: none"> • Has a high level of knowledge of the mental health conditions that can effect children and young people and uses research to keep up to date with these • Understands and is competent in the Choice and Partnership approach (CAPA) • Is able to assess the functioning of the child in various relevant situations and circumstances • Takes account of a range of relevant factors including physical health needs, risky behaviours, co occurring conditions, levels of vulnerability and social circumstance • Uses the Mental Health Measure (Wales) 2010 as a basis for the formulation and development of a young person centred care plan • Understands the importance of compliance with the Mental Health Act (1983) where relevant to the young person • Is competent in the use of appropriate behavioural techniques and ensures that any restrictive practices are operated within a strict protocol taking account of the MHA code of practice Wales 2016 and the Mental Capacity Act as well as local policies • Is competent in the management of medication, has knowledge of the medications in use and is aware of any issues potential problems and side effects; employs appropriate observations to support the therapeutic use of medicines and avoids over medication • Makes maximum use of supervision, team working and review to ensure positive outcomes for the individual |
| <p>Meeting physical healthcare need</p> | <ul style="list-style-type: none"> • Understands the health promotion, prevention and protection role of the special schools nurse and how supporting physical health care need relates to this • Has an in-depth knowledge of the common physical health care issues associated with special educational needs and can respond to these, including: epilepsy and responding to status; gastroenterology issues including constipation; respiratory issues; muscular skeletal issues; continence problems and tissue viability • Understands the importance of nutrition, diet , feeding and hydration; can support enteral feeding when necessary • Understands the importance of good postural management and tissue viability • Is competent in the management of medication, has |

Annex A

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| | <p>knowledge of the medications in use and is aware of any issues potential problems and side effects; employs appropriate observations to support the therapeutic use of medicines and avoids over medication</p> <ul style="list-style-type: none">• Is competent to manage any assistive technology and any aids and equipment• Sensitive supports any care associated with end of life and palliative care |
| Supporting parents and carers | <ul style="list-style-type: none">• Understands how the role of the nurse in special schools supports parents as part of the wider school team and through access to the team around the child from community service• Exercises professional judgement in assessing the appropriate and most sensitive approach in terms of supporting each individual family• Maintains professional boundaries when supporting families and carers• Respects confidentiality• Uses therapeutic communication effectively• Provides education, information and advice and recognises the limits of their own professional role and competence• Understand when and where to refer for further support• Provides direct interventions that enable the family/ carers to learning by experience• Knows when and how to withdraw support in a gentle and sensitive way once appropriate• Understands the importance of professional record keeping |

Annex A

Appendix 2 resources and links

| Area | Resource |
|-----------------------------------|---|
| Reasonable adjustments | https://www.cnwl.nhs.uk/wp-content/uploads/2012/04/Reasonable-adjustments.pdf |
| Reasonable adjustments | https://www.gov.uk/government/publications/reasonable-adjustments-for-people-with-learning-disabilities |
| Meeting physical health care need | https://www.learningdisabilitytoday.co.uk/looking-for-an-ordinary-life |
| Postural care | https://www.youtube.com/watch?v=BO_DwjqrEVI PMLD standards |
| | |

Also:

Supporting Learners with Healthcare Needs Guidance:

<http://learning.gov.wales/resources/browse-all/supporting-learners-with-healthcare-needs/?lang=en>

SEN Code of Practice for Wales:

<http://learning.gov.wales/resources/browse-all/special-education-needs-code-of-practice/?lang=en>