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A School Nursing Framework for Wales - part 2 Nursing in Special Schools

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School Nursing Framework part 2 - Nursing in Special Schools

Introduction

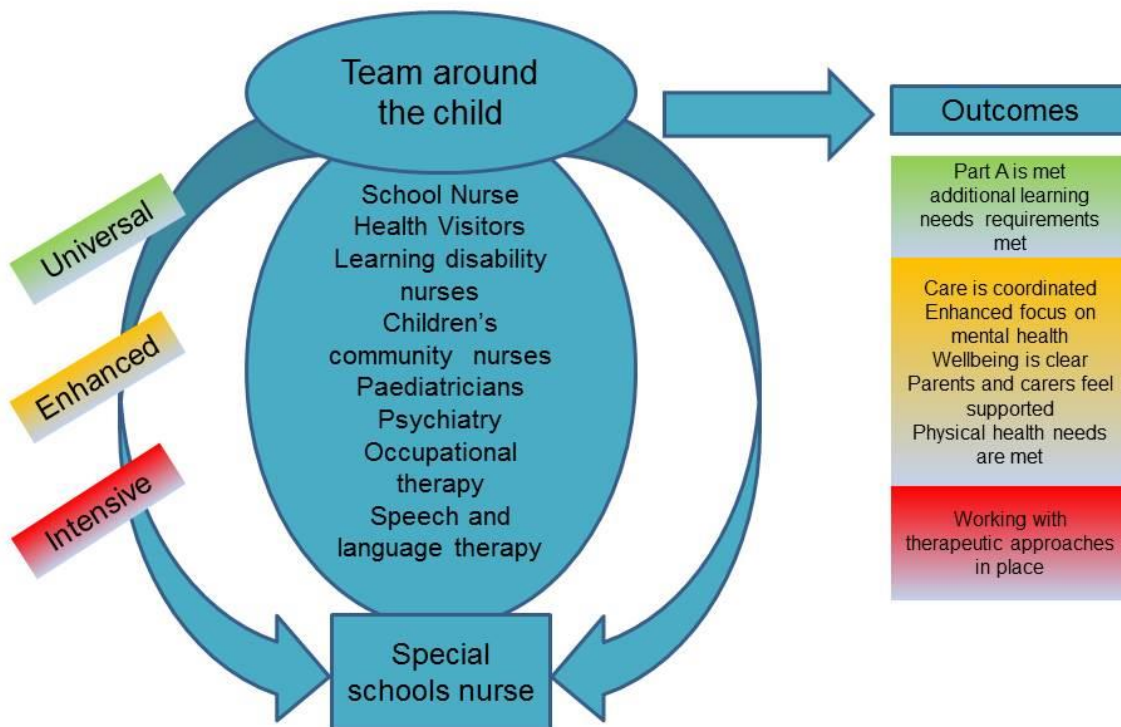
This document lays out the standards for nursing in special schools; these build on part A – School Nursing Framework and describe how the role of the special schools nurse supports children within special schools and also how children with significant additional needs who require health care input within other schools are supported.

It is anticipated that there will be a 24 Month rollout period for implementation during which time issues of workforce and the development of both the role and team around the child concept be undertaken.

The framework is designed to support the role of the special schools nurse and to provide consistency of approach. It recognises and acknowledges the excellent work that special school nurses do and is designed to bring together the key elements of this role, to describe this in the form of standards.

Adopting the framework should be seen in the context of current best practice and not as a whole new way of working although it should provide an opportunity for clarification on workforce issues, roles and identification of continuing professional development needs.

The model



Key elements of the Special Schools Nursing Model

This section provides an overview and explanation of the framework and seeks to clarify some of the key concepts

The team around the child/ team around the family

“The Team Around the Child approach is easily understood by families and paid workers. Key people, who already provide practical support to the child and family, are trusted by the parents and feel comfortable in their relationship, agree to join together regularly *to communicate and share*” this quote is taken from Peter Limbrick’s¹ seminal work on the concept of how teamwork moves the focus of the children and families care from the professional sphere to being focussed on the needs of the child and family.

Within this document this team is referred to as the team around the family.

The model as outlined above describes who may be considered as part of this multi-disciplinary/ multi-agency team. The pilot of this model published 2016² recommended specified key roles within the team, one of which is that of a clinical coordinator. Rolling the model out nationally requires some flexibility as there will always be individual need and local resource. The teams may be ‘real teams’ as in children’s community health teams or they may be a virtual team who have come together to meet the specific needs of a particular child and family.

Care coordination

The coordination role that the special schools nurse adopts in the context of school time and school related access to the team is an essential component of this framework.

This does not mean that the special schools nurse takes on a role over and above this , for example becoming the child’s overall care coordinator, unless this is appropriate for instance under the Mental Health Measure (Wales) legislation.

The ‘care coordinating’ standard in this document is a formalising of the role that special school nurses have in terms of the following:

- Responsible for the care plan whilst the child is in school
- Knows what members of the wider team are involved in the child’s
- Coordinates care review meetings
- Ensures key milestones are met
- Acts as a single point of contact for members of the team in terms of the child’s care
- May organise relevant clinics for wider team members
- Ensures that the child and family are central to the care process

¹ Peter Limbrick Multiagency Service Coordination for Children with Complex Needs (2001)

² Report of the \special Schools Nursing Project (OCNO 2016)

The Universal Offer

Part 1 of the framework, the school nursing framework (Page 8), uses a model that has “**Universal; Enhanced and Intensive**” interventions, this appears in this document as appendix 1.

The Universal offer for all school age children and it is a standard within this framework that the special schools nurse to work with school nurses and other health professionals to make sure that children receive the universal offer.

This does not mean that the special schools nurse is expected to deliver the universal offer them selves.

However if appropriate and within their scope of practice and competence, there may be occasions where the special schools nurse delivers some elements of part A the universal framework.

The key to this standard is the provision of reasonable adjustments; these apply to the delivery of healthcare interventions with children and also support the education and development of the child.

The other standards within this framework reflect the unique contribution that special schools nurses make for children, young people and their families.

Given the nature of the service provided by nurses in the special school settings the standards align to the **Enhanced** and **Intensive** levels of that model, .

Transitions

Each of the key elements is underpinned by an understanding that in terms of transition i.e. from primary to secondary and secondary to adulthood; the special school nurse has a pivotal role in supporting the children and young people through transitions. The role as coordinator is an essential part of this.

The standards in the framework

The following are the key areas that form the standards contained in appendix 2:

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. Care Coordination
 4. Enhanced focus on mental health and wellbeing
 5. Intensive working with therapeutic approaches
 6. Meeting physical health needs through enhanced interventions
7. Supporting families and carers
8. Transitions

Background

The supporting learners with healthcare needs guidance ³ 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 .this is part of the coordination role as described earlier in the framework and means that where clinics are held in school the special schools nurse will coordinate these.

Along with this core team, all relevant professionals from education, health and social care, involved in the care of the pupil would be invited to attend any review meetings 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.

³ <http://learning.gov.wales/resources/browse-all/supporting-learners-with-healthcare-needs/?lang=en>

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 2018⁴ 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)*⁵, 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 care⁶. 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 Programme⁷ and the further rollout of emotional literacy and support mechanisms (ELSA)⁸ are other key school based policies that are relevant to the role of the nurse in special schools.

In line with Prosperity for All⁹, 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 Report¹⁰ is being implemented this means that the 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

⁴ 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>)

⁵ T4CYP- Together for Children and Young People Welsh Government (2015)

⁶ Prudent health care principles Welsh Government (2015)

⁷ Healthy Child Wales – Public Health Wales (2016)

⁸ ELSA- Emotional Literacy and Support Welsh Government (2016)

⁹ Prosperity for All Welsh Government (2017)

¹⁰ Donaldson report and curriculum reform 2016

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)¹¹. In the framework the Human Rights elements will be drawn out as they provide the legislative and ethical framework for delivery

The relationship to the Social Services and Wellbeing Act (Wales) 2014¹² is an essential piece of legislation that forms a guide for the special school nursing standards. The relationship of this to the development of plans for transitions is essential.

The Improving Lives learning disability programme (Welsh Government 2018) was published post consultation on the framework, and provides key recommendations relevant for both early years and health. These particularly relate to a reduction in restrictive practices and development of positive behavioural support approaches, a recognition of the importance of adverse childhood experiences (ACE's) Both of these support the need to consider the development of the "team around the child"¹³

Vision for nursing in special schools in Wales

Nurses working in special schools will:

- support an approach to health for children which ensures 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 (UNRC 2008)..
- A key principle here is the recognition that reasonable adjustments are a legal right and NOT an option
- 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 support children to 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
- coordinate care and provide a single point of contact and consistency in access to support
- Support children and young people through transition

¹¹ UNRC- United Nations Declaration of the Rights of The Child 2008

¹² Social Service and Wellbeing Act (Wales) 2014

¹³ Improving Lives- the learning disability programme Welsh Government 2018

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

Details of the standards of the universal offer can be found in the appendix in part A of this document, 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. As previously stated these are not being delivered by the special schools nurse, unless appropriate, but they are an essential part of the coordination and facilitation of these 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.

Reasonable adjustments form an essential part of the legislative framework for children with disabilities and relate to the central themes of the UNCRC standards, they are not an option in terms of legislation.

There are a number of resources to support practitioners (some examples being found in appendix 3) 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
- Communication – understanding how the child communicates, how they express emotions and preferences developing and using communication profiles and traffic light system
- 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. Coordinating care

Where the child is eligible under the Mental Health Measure (Wales) 2010¹⁴, 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. This has been described earlier in this document but too reiterate that coordinating role of the special schools nurse is ideally place to be the coordinator of services for children in school, to ensure that the health and care outcomes support the child in terms of educational opportunities and also in accessing appropriate health care interventions.

Health passports contain essential information on the child's health needs and should be developed in partnership with the child and their carer's wider multi-disciplinary team. It allows other professionals to quickly see information about health care needs.

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.

This coordination role is important at time of transition and the continuity of health care information flow between services is essential. Planning for transitions is again a multi-disciplinary process, however the essential information held by the special schools nurse is an important resource in this planning process

Specific role of the special schools nurse

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

¹⁴ Mental Health Measure (Wales) 2010

4. 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 reflect 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 family's 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”¹⁵. 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

5. 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.

In practice this standard again relates to both the direct interventions from the special schools nurse, for example the use of positive behavioural support (PBS) to support behavioural issues, where the special schools nurse has those skills themselves and is acting in the boundaries of their professional role. It could also mean that the special schools nurse acts a coordinator between the school and the learning disability nurses form the “team around he child” to ensure that the child accesses PBS services where the special school nurse does not have the skills to directly deliver.

Early intervention is included as this is an essential part of the health promotion and prevention role that the special schools nurse has identifying and supporting the child's mental health and behavioural support is an essential part of early intervention and the special schools nurse has a role in ensuring this clinical intervention is supported

¹⁵ The determinants of health inequities experienced by children with learning Disabilities- Public Health England (2013)pg. 5

6. 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.

In a similar way to the previous standard the special schools nurse may, where competent deliver specific physical interventions and yet again if they are not able to then it will be their role to ensure the need is met by the wider team.

Part of this standard will be to support the implementation of wider additional elements aimed at addressing some of the health inequalities issues faced by children with additional needs:

- the Children's Health Equalities Framework¹⁶ (cHEF)- this is an outcome framework that assesses, using a simple process, the impact of determinants of health inequalities and is being rolled out for adults
- the review of the DES for annual health checks (AHC) is likely to recommend that AHC be extended to young people aged 14
- supporting the development of health passports which all support access to wider health care provision

7. 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 they need. This section of the framework acknowledges that there will be times where it is not appropriate for families to be involved and it is part of the special schools nurses' role to support such decisions through their own professional judgment and in collaboration with the

¹⁶ The Health Equalities Framework HEF (NDTI 2013)

school and the wider team... Also there are times where children may be looked after and particular attention in terms of the relationships with carers may be necessary.

8. Transitions

The special schools nurse is in a unique position to support the child, their families and carers through the process of transition. In terms of sharing information with services that may be involved with the child/ young person in the future, their clear understanding of the reasonable adjustments that the individual needs, the consistency of the health passports and also their coordinating role with the wider team can all be deployed to support any transitions process

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

Q - Who are school nurses in special schools and what skills 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 brings a core set of skills and is 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 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. This will be initially as a subgroup of the main board with joint events and meetings built into the programme. There is a forum and community of practice for schools nursing. Similarly this will be made open to nurses working in special schools.

There is an All Wales Learning Disability Nursing group.. Representatives from special schools nursing will be sought to join the 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).

The introduction of this framework is expected to take approximately 2 years from the launch. A workforce impact assessment has been undertaken in terms of both the numbers of special schools nurses and the team around the child, whilst generally positive; there are some gaps in provision.

The Improving Lives learning disability programme has specific recommendations, now ministerial priorities, on the future development of learning disability NHS services and increasing capacity in community care, in partnership with social services. In both the health and early years sections, are some key recommendations that require the strengthening of community capacity to meet specialist need. Implementation these include the development of pathways for early intervention and supporting children and families.

The development of the “team around the child” form part of these developments and the rollout of this framework significantly supports Improving Lives in these ambitions.

The development of career pathways for special schools nurses is an important part of the framework implementation. Building networks and capacity for support as outlined above is part of this. However there has been discussion with Health education and Improvement Wales (HEIW) on careers in learning disabilities and further development of training and educational opportunities for special schools nurses are an essential part of these discussions.

Another key aspect that emerged in the consultation process was a need to develop bespoke continuing professional development (CPD) opportunities for special schools nurses. The main topics that emerged were meeting both the physical and mental health needs of children and young people, working with transitions and working with challenging behaviour.

As part of the implementation process there will be a series of development opportunities in these areas and, through the oversight board subgroup a plan for CPD will be developed

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.

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.
- The development of “ the team around the child” is undertaken in the 2 year rollout period
- 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, and community nursing team and primary care services.
- 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.

Appendix 1

Working with community teams

In line with the Healthy Child Wales Programme (2016) this framework is underpinned by the concept of progressive universalism with the core components offered via a 'team around the child' approach at 3 levels:

- **Universal – the core minimum intervention offered to all school aged children in primary and secondary school settings, regardless of need.**
An identified SCPHN (SN) is available to all school aged children, young people, their families and within the school they attend, to provide support to address the public health components of the national curriculum. Service delivery will be based on the premise of early identification and assessment of need including delivery of the national screening, surveillance and immunisation programmes in the school setting.
- **Enhanced – additional interventions based on the ongoing assessment and analysis of resilience and identification of additional need.**
When additional needs for a child or young person are identified an additional assessment may be offered at an appropriate venue. Further support and/or signposting to local or specialist services may be offered. When specific local public health needs at school population level are identified the school nurse will work in partnership to address the needs to promote the health of children & young people.
- **Intensive – further interventions, built upon ongoing assessment and analysis of greater need.**
The school nurse, when involved with the health needs of a child or young person, will work in partnership with other agencies and contribute appropriately to deliver the agreed plan.

Appendix2

All Wales standards for nursing in special schools

Standard	Actions
<p>Ensuring that the standards in part A - the universal offer are met.</p>	<p><i>Please refer to Appendix 1 in part A if the framework</i> NB – to reiterate – the special schools nurse is not expected to deliver these standards but may do where appropriate; it is the role of the special schools nurse to coordinate access to services that do deliver and to ensure reasonable adjustments are in place</p>
<p>Ensuring that the requirements of the Additional Learning Needs and Education Tribunal (Wales) Act 2018 are met</p>	<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”
<p>Care coordination</p>	<ul style="list-style-type: none"> • Responsible for the care plan whilst the child is in school • Knows what members of the wider team are involved in the child’s • Coordinates care review meetings • Acts as a single point of contact for members of the team in terms of the child’s care • May organise relevant clinics for wider team members • Ensures that the child and family are central to the care process • Act, where appropriate, as the named care coordinator • Work within professional code(s) of practice
<p>Enhanced focus on mental health and wellbeing</p>	<ul style="list-style-type: none"> • Use a range of relevant evidence based approaches • Deploys mental health legislation and guidance effectively • Be sensitive to the impact of adverse childhood experiences (ACE’s) and deploy strategies to support reduction in impact • Use evidence based risk management assessments

	<p>and tools</p> <ul style="list-style-type: none"> • Use a working knowledge of approaches/models such as: Positive Behaviour Support, Applied Behavioural Analysis, Trauma Recovery Model • 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. • . • 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 the importance of professional boundaries in therapeutic relationships demonstrating insight into the vulnerabilities of individuals • Be competent, if appropriate, to employ appropriate evidence based therapies in line with care plan, professional competence and own training
<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 Has understanding and knowledge of neurodevelopmental conditions including children and young people with learning disabilities (LD)</p> <ul style="list-style-type: none"> • An awareness of the prevalence rates • A good working knowledge of the differences in presentation of neurodevelopmental conditions with the LD population • 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

	<ul style="list-style-type: none"> • meet individual communication needs. • Promotes the importance of using least restrictive options to support inclusion and improve quality of life. • CHILD AND ADOLESCENT MENTAL HEALTH (CAMHS) 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 • 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 •
<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 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 • Is competent to manage any assistive technology and any aids and equipment • Sensitively supports any care associated with end of life and palliative care

<p>Supporting parents and carers</p>	<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
<p>Transitions</p>	<ul style="list-style-type: none"> • • Appropriately supports transitions depending upon the individual child's/ young persons needs

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>