

Physical & Mental & Social Care Assessments

INCLUSIVITY IN SCHOOL 'NURSE ROLE' IN THE 'CARE PLUS' PROGRAM

Schools Inclusivity 'Care Plus' Program

ABSTRACT

The Concept is to establish a Nurse as part of the 'Care Plus' Needs Assessment Team within each 'School Cluster', to address the Physical, the Mental and the Social Challenges Children encounter that might restrict their education experience and learning and participation ability, potentially excluding them from equal opportunities to an education and activity inclusion.

pcSchool Nurse 'Care-Plus' Program v8

Draft Strategy in progress

School Nurse Concept Roles and Responsibilities

A *DRAFT Concept* Document for the Role of Nurses in the Schools suggested title 'Care Plus' program.

Priorities for the Health & Welfare 'Care Plus' enhancements in schools, WEaRE is proposing a 5year phased approach:

1. Standardised content for basic **First Aid kits BOX** in every school per child. Ie: 1 box per 100+/- tbc children
2. Standardised **1st Aid Awareness Course** training for ALL staff in each school
3. Standard **1st AIDER Staff Member** to be trained and established in every school or for each 500 children in a school
4. For schools over say 500 (+/- dependent on budgets appraisals)
   A full time nurse/ enhanced health care specialist.
5. At Minimum Each Model School Hub will have **one Roving 'Care Plus' Nurse** for the surrounding 'smaller' schools Cluster. [see slide below]
6. Extending the Roles and Responsibilities of the School Nurse
7. Comprehensive 'Inclusivity' Appraisal and Validation of implementation methodologies

Concept Opportunities for Nurse Coverage

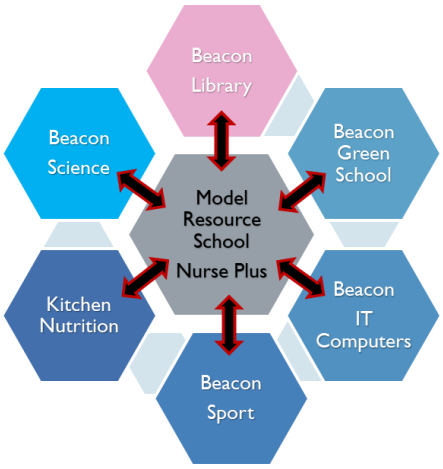
I. Solitary School Reliant upon state Nurse
II. Cluster School Reliant upon Roving Nurse
III. Beacon School Roving or Inhouse Nurse
IV. Model School Inhouse and Roving Nurse

Centrifugal Outreach Strategy

- Model Schools as nucleus of a Cluster of Schools upon reaching minimal criteria [criteria tbc]
- Appointment of Nurse
- Model School to be demonstrator of best Practice
- Model School to be Welfare and Inclusivity Innovation and facilities hub
  - Roving Nurse within Cluster Schools Share and Learn
- Cluster Schools develop specialist Nurse Welfare skill sets of "Care Plus' credentials
  - Emerge as a Beacon School upon reaching basic component criteria
  - Embrace and support their own cluster

Centrifugal System

A permanent Nurse Position based in the central Model Resource School with an additional Roving nurse to service the surrounding Cluster of schools. During individual school crisis the nurses focus on the needs. During District Crisis, the nurses can act as coordinators and facilitate SAR support and provide local knowledge, and ensure individual pupils dispensary. Nurses will be part of the H&S monitoring system with each school, identifying causation of reoccurring accidents, working closely with the H&S school appointed staff officer, who might duplicate as a Fire Warden.



School Nurse Concept Roles and Responsibilities

Concept Components

Daily Duties

- Cuts, bruises, medical treatment and dispensary duties
- Medical facilities Management
- Teacher consultations
- Parent consultations
- Specialist Agency Liaison
- Awareness training of Teachers
- Reports and liaison with H&S staff

Personal Development Training T4

- Medical - pediatrics
- Psychology
- Social welfare
- H&S

Interventions

- **Physical identifications**
  - Injuries short term
  - Injuries permanent
  - Medical Recognitions
  - Corrective options
  - Disfigurement at birth
  - Disfigurement degenerative
  - Accident disfigurement

- M**ental Identifications**
  - Stigmas
  - SLD Deficits 'Special Learning Disabilities' [listed separately]
  - Post Traumatic Stress

- **Social Identifications**
  - Bullying
  - Hate
  - Abuse
  - Neglect
    - Hygiene
    - Nutrition
    - Exclusion
    - Poverty
  - Trafficking/ forced labour

School Nurse Concept Roles and Responsibilities

Corrective Interventions

- Eyesight
- Hearing
- Dental
- Ashma
- Lice
- Rashes
- Nutrition
- Personal Hygiene
- Girls Health
    - Recognition and intervention

Other Treatable Medical Risks:

- Polio
- Rickets
- Leprosy
- Water Risk Diseases Cholera Typhoid Gastroenteritis Dengue
- Liver Kidney Heart defects
- Diabetes
- Meningitis
- Epilepsy

Mental Health Disorders SLDs 'Special Learning Disabilities'

Learning disabilities are disorders that affect the ability to understand or use spoken or written language, do mathematical calculations, coordinate movements, or direct attention. Although learning disabilities occur in very young children, the disorders are usually not recognized until the child reaches school age.

A learning disability is a neurological disorder that affects a person's ability to process and understand information. It can affect a person's ability to read, write, listen, speak, spell, and do the math. Learning disabilities are not the same as intellectual disabilities, and they do not reflect a person's intelligence or motivation.

Learning disabilities can range in severity and may affect only one specific skill or a combination of skills. They are usually present from birth or early childhood and can persist throughout a person's life.

Some people with learning disabilities may need accommodations in order to succeed academically and professionally, while others may be able to overcome their challenges with extra support and effort.

Learning disabilities can be incredibly isolating, but they're also extremely common.

The good news is that thanks to advances in medicine and technology, there are ways to treat these conditions so they don't become insurmountable obstacles.

Ref: LDRFA

School Nurse Concept Roles and Responsibilities

Numeracy – Literacy – Social Interaction – Physical Participation

Potential Mental Health Challenges:

- **Dyslexia**
- Dyslexia is the number one learning disability that affects people of all ages. It affects a person's reading and language processing skills.

- **Autism**
  - Autism, also called autism spectrum disorder or autism spectrum condition, is a type of neurodiversity. As a medicalized experience, it is also described as a neurodevelopmental disorder marked by deficits in reciprocal social communication and the presence of restricted and repetitive patterns of behavior
- **ADHD**
  - ADHD, or Attention Deficit Hyperactivity Disorder, **is a neurodevelopmental disorder** that affects a person's ability to pay attention, control impulsivity, and regulate their level of hyperactivity. It's the second most common learning disability and can affect people of all ages, although it is most often diagnosed in children.
- **Dyscalculia Numeracy issues**
  - Dyscalculia is a learning disability that affects math skills. It can make it difficult for a person to understand math concepts, perform arithmetic calculations, and solve math problems.

- **Dysgraphia Affecting** person's ability to write Writing Issues
  - Dysgraphia is a learning disability that affects a person's ability to write. It can manifest as difficulty with spelling, poor handwriting, or trouble putting thoughts on paper.

- **APD / VPD Auditory and visual processing disorders**
  - Auditory and visual processing disorders are neurological conditions that can cause difficulty in processing information from sound and sight. This can be caused by a brain injury, such as a concussion, or it may be due to a genetic disorder.

- **NVLD Non Verbal Disorder**
  - Nonverbal learning disability (NVLD) is characterized by core deficits in visual spatial processing and social impairment. Additional proposed diagnostic criteria include average to superior verbal intelligence and deficits in visuoconstruction abilities, fine motor coordination, mathematical reasoning, visuospatial memory and social skills.
- **SPD Sensory Processing Disorder**
  - Sensory processing disorders disrupt how the nervous system processes sensory information
- **LPD Language Processing Disorder**
  - People who have a Language Processing Disorder find it unusually difficult to understand language and organise their words to express what they have to say. Both adults and children can be affected, with the symptoms appearing differently depending on a person's age.

- **Dyspraxia DCD**
  - Dyspraxia is a neurological disorder that affects a person's ability to plan and coordinate movement. It can affect fine motor skills, such as writing or tying shoelaces, as well as gross motor skills, such as balance and coordination.
  - Dyspraxia can also affect a person's ability to process information and perform tasks in the correct order.
- **EFD Executive Function Disorder**
  - EFD Executive functions are those cognitive abilities that help you plan, pay attention, complete tasks, and remember directions. These functions help you go from the planning stages of a task to completion.
  - A person with executive function disorder has difficulty with goal-oriented behavior.
- **Epilepsy**
  - Epilepsy is a common condition that affects the brain and causes frequent seizures. Seizures are bursts of electrical activity in the brain that temporarily affect how it works. They can cause a wide range of symptoms. Epilepsy can start at any age, but usually starts either in childhood or in people over 60
- **Mass psychogenic illness** (**MPI**), **[Mass Hysteria]**
  - also called **mass sociogenic illness**, **mass psychogenic disorder**, **epidemic hysteria** or **mass hysteria**, involves the spread of illness symptoms through a population where there is no infectious agent responsible for contagion.[1] It is the rapid spread of illness signs and symptoms affecting members of a cohesive group, originating from a nervous system disturbance involving excitation, loss, or alteration of function, whereby physical complaints that are exhibited unconsciously have no corresponding organic causes that are known.

Collaboration and Integration with Municipality Services:

Most Municipalities will have either a hospital or multiple Ward Health Centres which include Birthing and Dispensary service facilities. In a crisis it is essential that all medical facilities and staffs collaborate and coordinate their expertise in response. **Behavioral Psychologist officers** are essential team members within Inclusivity, especially involving Social issues. **Psychologists are not doctors** and can not prescribe medicines, they focus on providing psychotherapy (talk therapy) to help patients come to terms with distressful scenarios, or in post disaster recovery.
However, with mental challenges the **Psychiatrists are medical doctors** capable to diagnose illness, manage treatment and provide a range of therapies for complex and serious mental illness.

Our 'Nurse Plus' within the 'Care Plus' program, will require the Nurses to undertake additional awareness training to identify inherent mental and medical issues affecting children's learning and attention in class and within social interactions.
Within each individual Municipality, deliberations will identify the partnership and potential of sharing services and facilities to the benefit of Schools. As part of a Crisis Management Plan or and the enhanced education system, protocols and responsibilities will be identified to maximize budgets and duty of care.

School Nurse Concept Roles and Responsibilities

Social Issues

- Family functionality
  - neglect
- Physical Bullying
  - abuse
- Social media Bullying
  -
- Stigmas
  -
- Menstruation Huts
  -
- Child Marriage
  -
- Gender stigmatization
  -
- Cast/ Marginalization
  -
- Religion Cults and Extremism
  -
- Culture differentials
  -
- Beliefs Indoctrination
  -
- Indoctrination Brain washing
  -
- Vashikaran adverse power control
  -
- Boksi Boksa healing powers
  -
- Hill Dalit Badi [when used in negative context]
  -
- Buti Cultural belief Protection
  -
- Jhankri Pratha
  -
- Mass Hysteria
  -
- Trafficking / Forced Labour
  -

School Nurse Concept Roles and Responsibilities

Appendix One

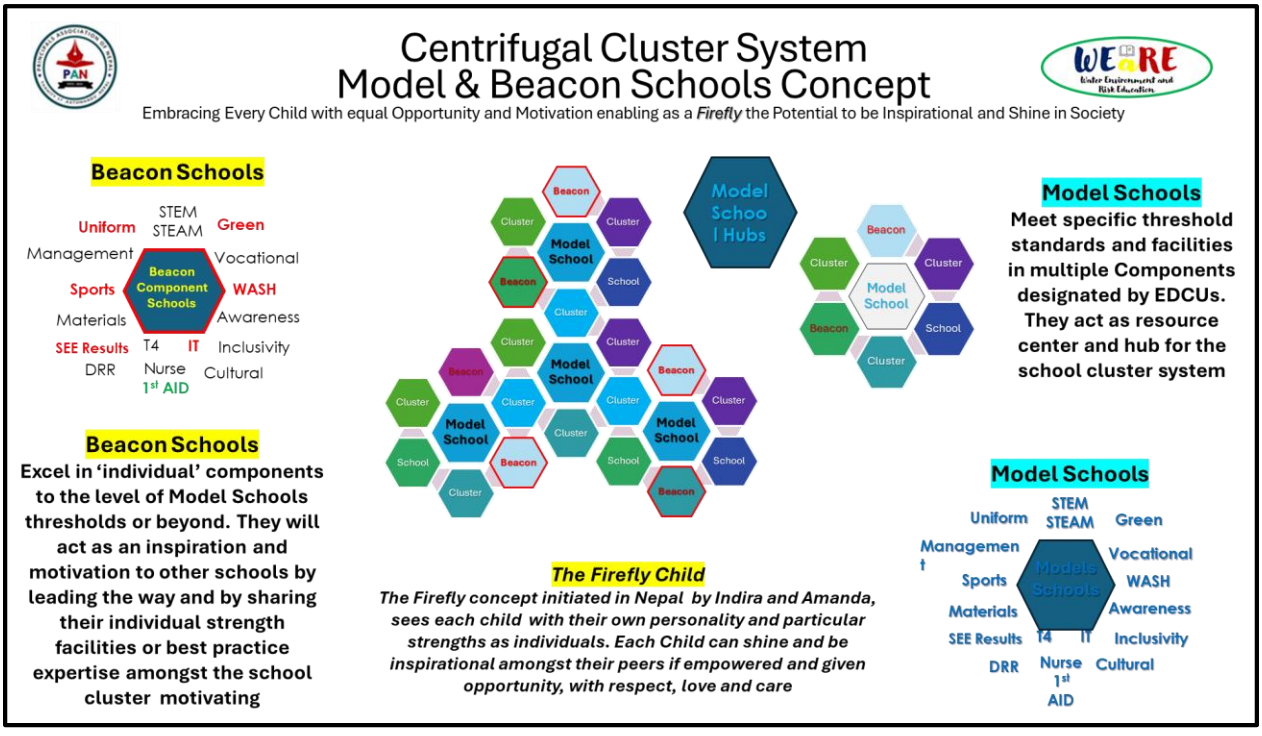
FCDO UK Government RAIN Program **[Resilience, Adaptation and Inclusion in Nepal]**

Inclusion needs to be at the heart of interventions. For example, the Post Earthquake Reconstruction Programme made efforts to ensure the poorest were not left behind by directing support towards the most vulnerable populations in earthquake affected areas through specific socio-economic interventions and improving access to government services and support (including connecting people to social security allowances). Explicit focus on the most vulnerable is important to ensure a robust understanding of who is left behind. This is a dynamic process as needs and contexts continue to evolve through the course of programmes.

Inclusion is at the heart of the RAIN programme. This aligns with the FCDO International Women and Girls Strategy 2023-2030. The strategy sets out the UK's ambition to support women and girls impacted by crises and shocks, including climate change and invest in key 'enablers' such as access to social protection. The strategy also highlights our approach to integrating gender and social inclusion (GESI) objectives into our climate finance programmes and strategies, enabling women and girls to be drivers of locally led adaptation and supporting their leadership in a just transition to a green and inclusive economy.

Gendered differences in disaster outcomes tend to reinforce existing inequalities. 'Patriarchal risks' - often rooted in the prevalence of extreme forms of gender-based discrimination, the structurally inferior role ascribed to women and girls, restrictions on women's economic activities, and the reliance on the male breadwinner – increase the vulnerability of women who do not have male support20 . People with disabilities are also disproportionately affected by emergencies. A 2023 Humanity and Inclusion (HI) study on impact of climate change on persons with disabilities in Nepal found that they are a uniquely vulnerable population due to lack of access to timely and inclusive early warning information and a reluctance to evacuate to shelters due to logistical and transportation constraints as well as safety concerns. The research also showed gaps and omissions in terms of inclusion of persons with disabilities in local climate governance. 21 In addition, they also face issues with accessing quality healthcare during a crisis and are also more likely to experience higher levels of mortality and morbidity.

Appendix Two



A centrifugal systems that aids the psychology of motivation, recognition and inclusivity

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