POLICY FOR SUPPORTING PUPILS WITH MEDICAL CONDITIONS

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1 INTRODUCTION

- The Children and Families Act 2014 includes a duty for schools to support children with medical conditions.
- Where children have a disability, the requirements of the Equality Act 2010 will also apply. Where children have an identified special need, the SEN Code of Practice will also apply.
- All children have a right to access the full curriculum, adapted to their medical needs and to receive the on-going support, medicines or care that they require at school to help them manage their condition and keep them well.
- We recognise that medical conditions may impact social and emotional development as well as having educational implications.
- Our school will build relationships with healthcare professionals and other agencies to support effectively pupils with medical condition

2 ROLES AND RESPONSIBILITIES

The Named Persons responsible for children with medical conditions is Mr Fairhurst, supported by Miss Kean.

This person(s) is responsible for

- Informing relevant staff of medical conditions
- Arranging training for identified staff
- Ensuring that staff are aware of the need to communicate necessary information about medical conditions to supply staff and where appropriate, taking the lead in communicating this information
- Assisting with risk assessment for school visits and other activities outside of the normal timetable
- Developing, monitoring and reviewing Individual Healthcare Plans (IHCPs)
- Working together with parents, pupils, healthcare professionals and other agencies

The Governing Body is responsible for

- Determining the school's general policy and ensuring that arrangements are in place to support children with medical conditions.

The Headteacher is responsible for

- Overseeing the management and provision of support for children with medical conditions
- Ensuring that enough trained staff are available to implement the policy and deliver individual healthcare plans, including to cover absence and staff turnover
- Ensuring that school staff are appropriately insured and are aware that they are insured

Teachers and Support Staff are responsible for

- The day to day management of the medical conditions of children they work with, in line with training received and as set out in IHCPs

- Working with the named person, ensure that risk assessments are carried out for school visits and other activities outside of the normal timetable
- Providing information about medical conditions to supply staff who will be covering their role where the need for supply staff is known in advance
- Any teacher or support staff member may be asked to provide support to a child with a medical condition, including administering medicines. However, no member of staff can be required to provide this support.

The school nurse is responsible for

- Notifying the school when a child has been identified as having a medical condition which will require support in school. Wherever possible this should be done before the child starts at our school.
- Providing support for staff on implementing a child's individual healthcare plan and providing advice and liaison, including training

3 PROCEDURE WHEN NOTIFICATION IS RECEIVED THAT A PUPIL HAS A MEDICAL CONDITION

- The named persons will liaise with relevant individuals, including as appropriate parents, the individual pupil, health professionals and other agencies to decide on the support to be provided to the child
- Where appropriate, an Individual Healthcare Plan will be drawn up
- Appendix A outlines the process for developing individual healthcare plans

4 INDIVIDUAL HEALTHCARE PLANS (IHCPS)

- An IHCP will be written for pupils with a medical condition that is long term and complex
- It will clarify what needs to be done, when and by whom and include information about the child's condition, special requirements, medicines required, what constitutes an emergency and action to take in the case of an emergency clarity
- IHCPs will be reviewed annually, or earlier if evidence is provided that a child's needs have changed
- All children with an IHCP for a food allergy will be recorded on the school electronic food/lunch ordering system. This ensures kitchen/lunch staff are aware of allergies and dietary needs and allows parents to make food choices suitable for their child's needs. Staff in class will have access to the health care plan and be fully informed of allergies.
- A summary of health care needs will be provided/be available to all specialist teaching staff and lunch time staff. This will include key information and the child's photograph.

5 ADMINISTERING MEDICINES

Prescribed Medicines

- Written consent from parents/carers must be received before administering any prescribed medicine to a child at school (a standard request form is available from the school office)
- Medicines will only be accepted for administration if they are:
    - Prescribed
    - In-date
    - Officially labelled with the child's name and DOB
    - Provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage.
    - The exception to this is insulin which must be in date but will generally be available inside an insulin pen or pump, rather than in its original container.
    - Must be brought to school by an adult and not by the child
- Medicines will be stored safely. Children should know where their medicines are available from at all times, appropriate to age.
- Written records will be kept of all medicines administered to children
- For safeguarding purposes, the supervision will be overseen by two members of the school staff
- Pupils who are competent to manage their own health needs and medicines, after discussion with parents/carers will be allowed to carry their own medicines and relevant devices or will be allowed to access their medicines for self-medication
- Certain long-term illnesses (e.g. asthma) require regular medication. In such cases the child will require an IHCP or an Asthma Health Care Plan detailing how medication will be administered.
- Some short-term illnesses will require regular prescribed medication for a specific period however these children will not require an IHCP or an Asthma Health Care Plan
- Sun cream is not considered a medicine and must be applied at home in the morning unless there is an IHCP in place due to a specific medical condition

Non-Prescribed Medicines

- Administration of non-prescribed medication will be decided on a case by case basis following a discussion with a senior leader. Written consent must be given by parents/carers and a standard form is available from the school office. Medication must be provided in the original packaging and the parent/carer will be required to confirm that the child has used the medication before and did not suffer an allergic reaction. Non-prescribed medicines will be stored and administered as described above.
- All other non-prescribed medicines brought without prior agreement will be confiscated and parents will be asked to collect them.

6 INTIMATE CARE

Intimate care can be defined as care tasks of an intimate or invasive nature, associated with bodily functions, body products and personal hygiene which demands direct or indirect contact with more intimate parts of the body. Examples would include care associated with continence, menstrual management, changing colostomy bags or administering rectal medication as well as more ordinary tasks such as help with washing or bathing. In addition, some children may need help with dressing/undressing or using the toilet. Most children can carry out these functions themselves but it is recognised that some are unable to due to physical disability, learning difficulties, medical needs or needs arising from the child's stage of development.

In most cases intimate care will involve procedures to do with personal hygiene and the cleaning of equipment associated with the processes. In the case of a specific procedure only a person who has been suitably trained and assessed as competent should undertake the procedure. Any child who requires intimate care by an adult due to a medical condition will require an IHCP and an intimate care plan.

Principles of intimate care:

- every child has the right to be safe
- every child has the right to personal privacy
- every child has the right to be valued as an individual
- every child has the right to be treated with dignity and respect
- every child has the right to be involved and consulted in their own intimate care to the best of their abilities
- every child has the right to express their views on their own intimate care and to have such views considered
- every child has the right to have levels of intimate care that are as consistent as possible.

For children requiring intimate care the following must be in place:

- An intimate care plan should be in place
- There must always be two adults present when intimate care is delivered
- Specialist training will be required for more invasive procedures e.g. catheterisation usually through the school nurse. Further consultation with agencies/School Health Practitioner must be sought as required.
- Where ever possible staff should care for a child or young person (CYP) of the same sex, this can prove to be difficult in the case of providing intimate care for boys. School should ensure that parents and the CYP must be happy with the choice of staff.
- As part of the IHCP or intimate care plan consultation with the parents about the training and procedures that are to be carried out should take place. Awareness of the varying needs of CYP from differing cultural backgrounds should be considered. As part of the process involve the CYP in the sequence of care, wishes etc. and identify the method of communication used by the CYP. If a child becomes distressed or unhappy about being cared for by a member of staff as part of their intimate care, parents/carers will be contacted at the earliest opportunity to discuss the concerns to reach a resolution.
- A dated log of intimate care provided for individual children must be kept. Staff must inform parents whenever it has been necessary to provide intimate care for their child
- All aspects of the environment should encompass the dignity of the child and safety of the staff concerned. Every child's right to privacy and modesty will be respected. All children will be taught personal safety skills carefully matched to their level of development and understanding to build their confidence and assertiveness about their own body and its worth. Within our school curriculum, including PSHE lessons, children will be taught about the changes to their body and about how to keep their body safe. This will include lessons designed by the NSPCC around the 'pants' rule. Confident and assertive children who feel their body belongs to them are less vulnerable to abuse
- The usual room for providing intimate care in school is the ground floor disabled toilet on the lower school corridor unless otherwise stated in the IHCP or care plan
- Health and Safety - staff should always wear appropriate personal protective equipment such as gloves when dealing with a child who is bleeding or soiled or when changing a soiled nappy (school will provide gloves, a bin and liners to dispose of any waste). Any soiled waste should be placed in an appropriate waste disposal and placed in a bin which is specifically designated for the disposal of such waste.
- All adults must always be vigilant, to seek advice where relevant and take account of safer working practice e.g. The practitioner may ask the child "Is it Ok to do it this way?" "Can you wash there?" "How does mummy do that?" If staff are unsure how to carry out certain intimate care or treatment procedures, or they are unsure on any aspect of intimate care, they should stop and seek immediate advice from their line manager, senior member of staff or Designated Safeguarding Lead.
- If a member of staff has a concern about physical changes in a child's presentation, e.g. marks, bruises, soreness etc. s/he will immediately report concerns to the Designated Safeguarding Lead
- Staff should always follow the school safeguarding policy

Sometimes children have toileting 'accidents' which are out of character for them. In the event of this, and in the absence of an intimate care plan, the child would be fully encouraged and supported to achieve the highest level of independence that is possible given their age and ability. Parents/carers will be notified the same day if their child has needed assistance. On the rare occasion that a child is soiled to a point where they are unable to clean themselves to a comfortable state, parents/carers will be contacted immediately, so that the child can be taken home to be cleaned thoroughly.

If a child expresses discomfort, either physically or verbally regarding their intimate parts, it is not a matter that should be dealt with by school staff, a phone call will be made to parents/carers at the earliest opportunity. There will be an expectation that parents/carers will come into school to decide on the next course of action for their child. If these concerns are of a safeguarding nature, they should be reported immediately to the Designated Safeguarding Lead.

7 ACTION IN EMERGENCIES

A copy of this information will be displayed in the school office

- Request an ambulance – dial 999 and be ready with the information below. Speak slowly and clearly and be ready to repeat information if asked.
    1. The school's telephone number:
    2. Your name
    3. Your location: Bowlee Park Primary School, Windermere Road, Middleton, Manchester, M24 4LA
    4. Provide the exact location of the patient within the school
    5. Provide the name of the child and a brief description of their symptoms. Any key information contained on the child's IHCP must be passed on
    6. Inform ambulance control of the best entrance to use and state that the crew will be met and taken to the patient
- Contact the parents to inform them of the situation
- A member of staff should stay with the pupil until the parent/carer arrives. If a parent/carer does not arrive before the pupil is transported to hospital, a member of staff should accompany the child in the ambulance.

8 ACTIVITIES BEYOND THE USUAL CURRICULUM

- Reasonable adjustments will be made to enable pupils with medical needs to participate fully and safely in day trips, residential visits, sporting activities and other activities beyond the usual curriculum
- When carrying out risk assessments, parents/carers, pupils and healthcare professionals will be consulted where appropriate

9 GOOD PRACTICE

The following items are expected good practice with regard to children with medical conditions, although the school will use discretion to respond to each individual case in the most appropriate manner.

- ensure children are easily able to access their inhalers and medication and administer their medication when and where necessary/appropriate
- seek the views of the child or their parents; and take note of medical evidence or opinion, (although this may be challenged)
- support them to access normal school activities, including lunch, unless this is specified in their individual healthcare plans and avoid sending children home unnecessarily
- if the child becomes ill and the child needs to move around school they must be accompanied by someone suitable
- allow pupils to drink, eat or taking toilet or other breaks whenever they need to manage their medical condition effectively
- support children with medical conditions to participate all aspects of school life, including school trips
- only require parents to attend school to administer medication or provide medical support to their child, including with toileting issues if it is essential and agreed in the child's health care plan
- always meet individual needs and never assume that every child with the same condition requires the same treatment
- we do not penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments

10 COMPLAINTS

- An individual wishing to make a complaint about actions regarding the school's actions in supporting a child with medical conditions should discuss this with the school in the first instance
- If the issue is not resolved, then a formal complaint may be made, following the complaints procedure as set out in the school complaints policy

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