Saint Edmund's Catholic Primary School

'Together we learn and grow through worship and celebration'

Supporting Pupils with Medical Conditions (including Intimate Care)

Committee responsible for policy	Community
Approved by **Committee**/FGB	January 2025
Statutory/Non-statutory	STATUTORY
Frequency of Review	Free to determine - 4 YEARS or earlier if appropriate and in line with Child Protection and Safeguarding Policy (annual)
Date of next review	**January 2029**
Purpose of policy	To ensure the school understands its duty of care to children and young people in the event of an emergency and when supporting children with long term medical needs.
Consultation	Parents, Medical Agencies as appropriate LA guidance Appropriate Government documentation and guidance
Links to other policies	Equalities, Accessibility SEND,

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Supporting Pupils with Medical Conditions

This school aims to support and welcome pupils with medical conditions and to provide all pupils with any medical conditions the same opportunities as others at the school.

This school understands that certain medical conditions are serious and can be potentially life-threatening, particularly if ill managed or misunderstood. The school also ensures staff understand their duty of care to children and young people in the event of an emergency.

St Edmund's understands the importance of medication being taken as **GP PRESCRIBED ONLY** and has clear guidance on the administration, storage and record keeping of medication at school, as outlined in the documents below and which are also available in the Safeguarding Policy Documents Folder, kept in the Head Teacher's office.

DCSF/Dept of Health "Managing Medicines in Schools and Early Years Settings"
Dated March 2005 Reference 1448-2005DCL-EN

Richmond and Twickenham NHS PCT Administration of Medicines in School Policy Procedures Issue/Version Date 15.11.2003

DfEE Guidance on First Aid for Schools

The school has consulted on the development of this medical condition policy with a wide-range of key stakeholders within both the school and health settings. These key stakeholders include:

- School nurse; head teacher; inclusion manager; welfare assistant; local healthcare professionals; school governors.

Healthcare Plans are updated annually at the start of the school year and when a child is enrolled as a new pupil. School staff are informed of, and regularly reminded about the medical conditions' policy and the confidential medical conditions' list.

STAFF

Staff are trained in what to do in an emergency for the most common serious medical conditions by regular First Aid Training. Staff are also aware of the most common serious medical conditions and the action needed to be taken in an emergency. General training is refreshed for staff at regular intervals.

In an emergency situation school staff are required under common law duty of care to act like any reasonably prudent parent. This may include administering medication.

If a pupil needs to be taken to hospital, a member of staff will always accompany them and will stay with them until a parent/carer arrives. The school tries to ensure that the staff member will be one the pupil knows.

PARENTS

The parents of a child at this school have a responsibility to:

- keep their child at home if they are not well enough to attend school;
- ensure that they send a note/explanation to the school if their child is unable to participate in a lesson due to medical conditions;
- tell the school if their child has a medical condition;

- inform the school about any prescribed medication their child requires during school hours and while taking part in visits, outings, field trips or other out-of-school activities;
- tell the school immediately about any changes to prescribed medication, what they take, when, and how much, if the administration method changes or any discontinuance;
- inform the school of any changes to their child's condition;
- ensure their child's medication and medical devices are labeled with their child's full name, and are supplied in their original packaging (for example: boxes for inhalers etc);
- ensure that their child's medication is within expiry dates;
- for children with long term medical conditions - ensure the school has complete and up-to-date information for their child's Individual Healthcare Plan (IHP);
- for children with long term medical conditions - ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition within school;
- to stay off school for at least 48 hours from the last time their child had sickness or diarrhoea as per NHS guidelines
- ensure that they or another nominated adult are contactable at all times

MEDICATION

All medication that is supplied by the Parent needs to be GP PRESCRIBED and in its original container. All medication needs to be labelled with the pupil's name, the name of the medication, expiry date and the **Prescriber's** instructions for administration, including dose and frequency. All Parents/Carers must complete the "Administering Medicine in School Consent Form" in a manner that is explicit to the staff member administering the medicine.

Medication is stored in accordance with these instructions, paying particular note to temperature. Some medication for pupils at this school may need to be refrigerated. This needs to be clearly labelled. Refrigerators used for the storage of medication are located out-of-reach of children or in supervised spaces.

All medication is sent home with pupils at the end of the school year. It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic term/year.

For the safe disposal of medication, parents are asked to collect out-of-date medication.

The school reserves the right to refuse to administer certain medicines: ie. If a child requires a more complex medicine which staff cannot administer without the correct training. The school is happy for a Parent/Carer to come into the school to perform this themselves.

CONSENT TO ADMINISTER MEDICINES

If a pupil requires regular GP Prescribed medication at school, parents are asked to provide consent on either the Healthcare Plan (Long term) or the Medication Form Appendix D (Short term) giving staff permission to administer medication on a regular/daily basis. These documents are kept in the Welfare Room.

*Under **NO CIRCUMSTANCES** can medication be given to a child unless parental consent has been sought.*

LONG TERM/CHRONIC CONDITIONS and INDIVIDUAL HEALTHCARE PLANS (IHP)

Where a child has a long-term or chronic condition, the school will work with the parents to produce an Individual Healthcare Plan. The school requires a letter from a doctor/consultant outlining the child's condition and any special measures/ precautions or care that we need to be aware of. The healthcare plan will specify any necessary information about the nature of the condition, its triggers, signs/symptoms. It will also outline any prescribed medications, treatments or procedures and details of the child's doctor/consultant. Any variation from the agreed plan must be documented and reported.

With parental permission, photographs are displayed of children with long-term/chronic conditions that all staff may need to be aware of. These are not on public display and names are not included.

RECORD KEEPING

This school keeps an accurate record of each occasion that an individual pupil is given or supervised taking medication. Details of the supervising staff member, pupil, dose, date and time are recorded. If a pupil refuses to have medication administered, this is also recorded and parents are informed as soon as possible.

POLICY ON INTIMATE CARE

The school is committed to ensuring that all staff responsible for the intimate care of children will undertake their duties in a professional manner at all times, be respectful of the child's needs and preserve their dignity. The child's welfare and dignity is of paramount importance. The school's practices are in accordance with the Child Protection and Safeguarding Policy.

Definition

Intimate care is one of the following:

- *Supporting* a pupil with dressing/undressing;
- Providing comfort or support for a distressed pupil;
- Assisting a pupil requiring medical care, who is not able to carry this out unaided;
- Cleaning a pupil who has soiled him/herself, has vomited or feels unwell.
- Assisting a child who has incontinence as part of a medical condition.

In the case of such a procedure, only a person suitably trained and assessed as competent will undertake the care of the child.

There will always be a high awareness of child protection issues. Staff will work in partnership with parents/carers and the child to provide continuity of care wherever possible. The child's dignity will always be preserved with a high level of privacy, choice and control.

For safeguarding purposes 2 members of staff will be present to assist the child, where possible. Any child with intimate care needs will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for him/herself as s/he can. This may mean, for example, giving the child responsibility for washing themselves. No child will be attended to in a way that causes distress or pain.

Where children have **specific** intimate care needs, these will be carefully planned using an Intimate Care Plan.

The Protection of Children

All children will be taught personal safety skills carefully matched to their level of development and understanding. If a staff member has any concerns about a child's physical wellbeing (bruises, marks etc.) they will immediately report concerns as per school procedures-see safeguarding policy.

If a child becomes distressed or unhappy regarding being cared for by a particular member of staff, the matter will be looked into, parents will be consulted and outcomes recorded. Staffing schedules will need to be altered until the issue is resolved as the child's needs remain paramount. If a child makes allegations against a member of staff, procedures will be followed-see safeguarding policy for the school's procedures on 'Allegations Involving School Staff/Volunteers'.

Health & Safety Guidance

Staff will wear an apron and gloves when dealing with a child who is soiled or those who wear incontinence pads as part of a medical condition. Any soiled waste will be placed in a polythene waste disposal bag and sealed. The bag will then be placed in a bin, (with a liner) specifically designed for such waste. This bin is collected on a weekly basis as part of the usual refuse. It is not classed as clinical waste.

Physical Contact

All staff engaged in the care and education of children and young people need to exercise caution in the use of physical contact. Staff must be aware that even well-intentioned contact might be misconstrued by the child or an observer. Staff must always be prepared to justify actions and accept that all physical contact is open to scrutiny.

The expectation is that when staff make physical contact with pupils it will be:

- for the least amount of time necessary;
- appropriate, given their age, stage of development and background;
- in response to the pupil's needs at the time.

If a child appears to be seeking out inappropriate physical contact, staff will deter the child, seek witnesses and document and report the incident. This is necessary procedure in order to prevent against staff being vulnerable to allegations of abuse-see safeguarding policy.

Special Needs
All children have the same rights to privacy and safety when receiving intimate care. Additional vulnerabilities (any physical disability or learning difficulty) must be considered when drawing up care plans for individual children. Regardless of age and ability, the views and emotional responses of children with special needs will be actively sought when drawing up or reviewing a care plan.

Summary
Medical arrangements must be understood and agreed by all concerned, justified in terms of the child's needs and consistently applied and open to scrutiny. Where possible, consultation with colleagues will take place where any variation from arrangements is anticipated.

If parents have questions or concerns about the care of their child, please email the school office on office@st-edmunds.richmond.sch.uk, your email will be treated in confidence and an appointment made with the appropriate member of staff.

Review of Procedures
The procedures which are in place will be reviewed by the Community Committee. They are free to determine the frequency of review. As such policy will be reviewed every four years or earlier if there are up to date changes in practice that deem it appropriate to do so. It will also be reviewed in light of the Child protection and Safeguarding policy which is reviewed annually.

The Community Committee will report to the Full Governing Body.