



L.E.A.D. Academy Trust

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L.E.A.D. ACADEMY TRUST

SUPPORTING PUPILS WITH MEDICAL CONDITIONS

Policy/Procedure management log

Document name	Supporting pupils with medical conditions
Author	Helen Tunney
Date approved	In School – May 2024
Date issued	September 2023
Date of review	September 2024

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Introduction

The L.E.A.D. Academy Trust requires this policy to be implemented by all its member academies.

Academies have a responsibility to make sure that safety measures cover the needs of all pupils at the academy. This may mean making special arrangements for particular pupils who may be more at risk than their classmates. Individual procedures may be required. The academy is responsible for making sure that relevant staff know about and are, if necessary, trained to provide any additional support these pupils may need.

Pupils with special medical needs have the same right of admission to the academy as other children and cannot be refused admission or excluded from the academy on medical grounds alone.

Teachers and other academy staff in charge of pupils have a common law duty to act *in loco parentis* and may need to take swift action in an emergency. This duty also extends to teachers leading activities taking place off the academy site. This could extend to a need to administer medicine.

The prime responsibility for a child's health lies with the parent/carer who is responsible for the child's medication and should supply the academy with information. The academy takes advice and guidance from the Local Authority, Department for Education and health services as appropriate.

The L.E.A.D. Academy Trust defines the policy expectation, but the responsibility for implementation of the policy rests with the Headteacher of each academy.

Aims

This policy aims to ensure that:

- Pupils, staff and parents understand how our school will support pupils with medical conditions.
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities.
- The responsibilities of parents/carers, the Headteacher and staff in relation to supporting medical conditions and the administration of medicines are clearly set out.

Who is responsible for this policy?

The Trust has overall responsibility for the effective operation of this policy and for ensuring compliance with the relevant statutory or Trust framework. The Trust has delegated day-to-day responsibility for operating the policy to L.E.A.D. academies, the Academy Governing Body and the Headteacher of each Trust school.

The Senior Leadership Team at each Trust school has a specific responsibility to ensure the fair application of this policy and all members of staff are responsible for supporting colleagues and ensuring its success.

Legislation and statutory responsibilities

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education (DfE)'s statutory guidance on [supporting pupils with medical conditions at school](#).

This policy also complies with our funding agreement and articles of association.

Roles and responsibilities

Trustees

Trustees are responsible for monitoring support and legal compliance for pupils with medical conditions.

The role of the Academy Governing Body (AGB)

The Governing Body will ensure:

- The policy for supporting pupils with medical conditions is readily accessible to parents and academy staff.
- Any academy policies, plans, procedures and systems are properly and effectively implemented, including the collation and retention of written records of all medicines administered to pupils.
- Arrangements are in place to support pupils with medical conditions; arrangements which ensure that such children can access and enjoy the same opportunities at school as any other child.

- The Academy and multi-agencies work together to ensure that children with medical conditions receive a full education, recognising that in some cases this will require flexibility.
- No child with a medical condition is denied admission or prevented from taking a place in school because arrangements for their medical condition have not been made.
- Sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.
- Individual Healthcare Plans are established where necessary and reviewed at least annually or earlier if evidence is provided that a pupil's needs have changed.
- The Academy complies with their duties under the Equality Act 2010 with regard to disabled pupils.
- The appropriate level of insurance is in place and appropriately reflects the level of risk in the Academy.

The Headteacher

The Headteacher will ensure:

- All staff are aware of the policy for supporting pupils with medical conditions and understand their role in its implementation.
- All staff who need to know (including any temporary/supply staff) are aware of a child's medical condition.
- Sufficiently trained numbers of staff are available to implement the policy and deliver against all Individual Healthcare Plans, including in contingency and emergency situations.
- All staff are aware of the designated persons with responsibility for medical care. For example:
 - Trained Paediatric First Aiders;
- The Healthy Family Team and/or Health Related Education Team is contacted in the case of any child who has a medical condition that may require support at school.
- Risk assessments for school visits, holidays, and other school activities outside of the normal timetable consider the needs of pupils with medical conditions.
- Appropriate cover arrangements are in place to support pupils with medical conditions in cases of staff absence or staff turnover.

Staff

- Only staff who are authorised to do so and have received suitable and sufficient training can provide support to pupils with medical conditions.
- Any member of staff may be asked to provide support to pupils with medical conditions, although they will not be required to do so.
- All staff will take into account the needs of pupils with medical conditions that they teach.
- In exceptional circumstances, staff may be required to administer medicine or take emergency action. All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

Parents

- Parents will be required to provide the Academy with sufficient and up-to-date information about their child's medical condition and needs.
- Parents are key partners and will be involved in the development and review of their child's Individual Healthcare Plan. They must carry out any action they have agreed to as part of its implementation, e.g., provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Pupils

- Pupils with medical conditions will often be best placed to provide information about how their condition affects them.
- The Academy will ensure pupils with a medical condition are involved in discussions about their medical support needs and contribute as much as possible to the development of, and comply with, their Individual Healthcare Plan.
- The Academy will ensure that all pupils know what to do, in general terms, in a medical emergency, such as informing a teacher immediately if they think help is needed.

The role of outside agencies

The Academy will liaise with outside agencies including the School Nursing Service, GPs, paediatricians, the Local Authority etc in order to identify pupils with medical conditions, secure advice on devising Individual Healthcare Plans and develop staff training etc.

Equal opportunities

Our Academy is clear about the need to actively support pupils with medical conditions to participate in school life including school trips and visits, or in sporting activities, and will make reasonable adjustment to any barriers which might prevent them from doing so.

The Academy will consider what reasonable adjustments need to be made to enable all pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

Identifying and supporting pupils with medical needs

- The Academy will ensure pupils' medical needs are identified in time for the start of the relevant school term through liaison with the School Nursing Service, Local Authority and parents via an annual pupil data collection return.
- In other cases, such as a new diagnosis or children joining the school mid-term, every effort will be made to ensure that arrangements are put in place within two weeks.
- It is the responsibility of parents to inform the Academy of any short-term medical needs (for example, a short course of medication) that arise during the course of the school year.
- In cases where a pupil's medical condition is unclear, or where there is a difference of opinion, the Academy will determine the support to be provided based on the available evidence. This will normally involve some form of medical evidence and consultation with parents. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place.
- Where a medical need (beyond a short course of medication) is identified, the Academy will coordinate a meeting to discuss the child's medical support needs and identify school staff who will provide support.

- All medical conditions and needs identified will be recorded on medical tracker.

Individual healthcare plans (IHPs)

The headteacher has overall responsibility for the development of IHPs for pupils with medical conditions. This has been delegated to.

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the Healthy Family Team, specialist or paediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board and the headteacher will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments.
- The pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g., crowded corridors, travel time between lessons.
- Specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions.
- The level of support needed, including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring.
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable.
- Who in the school needs to be aware of the pupil's condition and the support required.
- Arrangements for written permission from parents and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil during school hours.
- Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g., risk assessments

- Where confidentiality issues are raised by the parent/pupil, the designated individuals to be entrusted with information about the pupil's condition.
- What to do in an emergency, including who to contact, and contingency arrangements

Administration of medication protocols

- The Headteacher is responsible for considering all requests related to the administration of medication.
- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so. Where possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- In the event that a child requires medication within school hours, parent must notify the Academy. No medication (prescribed or non-prescribed) will be administered to a child under 16 without prior consultation with, and written permission from the parent or guardian, obtained through the form shown in Appendix 4 (except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents – in such cases, every effort will be made to encourage the pupil to involve their parents while respecting their right to confidentiality). In addition, a note from the family GP confirming the child is fit to attend school and the necessity for the child to take medication during school hours may be required).
- Each request for administration of medication to a pupil in school will be considered individually.
- The Academy encourages and supports children to manage their own medication. Where the Academy agrees to requests for the administration of medication, it is with the understanding that a child will self-administer medication under the supervision of an elected member of staff and in accordance with the Academy procedures. Where pupils cannot self-administer medication, the Academy will coordinate a meeting to discuss the child's needs.
- Any children under 16 will not be given medicine containing aspirin unless prescribed by a doctor.
- Medicines will only be administered (including in supervisory capacity) by staff willing and suitably trained to do so and then only under the overall direction and responsibility of the designated Senior Leader.
- Specific cultural and religious views on a pupil's medical care will be respected but must be made known to the Academy in writing.
- A minimum amount of medication, required by the pupil, will be held in school to accommodate the needs of that pupil.
- Medication must be delivered to school by the parent or escort (not sent to school in the child's bag) and given to the Headteacher or relevant Senior Leader.
- The Academy will only accept prescribed medicines that are in-date, labelled, provided in the original container as dispensed by the pharmacist and include instructions for administration, dosage and storage (except for insulin, which must still be in date but will be provided in a pump or pen rather than its original container). Where a pupil needs two or more prescribed medicines, each should be provided in the separate original container supplied by the pharmacist.
- At Sir Edmund Hillary Academy, non-prescription medicines may be administered for a short period, where a child or young person has returned to education following an illness or injury. The school will **not** accept non-prescription medicines from parents to administer on an 'as and when required' basis (except for antihistamines for allergic reactions) unless otherwise advised by a GP.
- Medicines received will be logged onto the school's drug file, as shown in Appendix 5, and held securely within the school. All essential staff will be able to access medicines in case of emergency.

- The Academy will establish a Pupil Medication Administration Log (see Appendix 4). Persons administering/supervising the administration of medication will check the medication type is correct then log the time and date and sign the chart upon administering medication. At Sir Edmund Hillary Academy, Medical Tracker will become the means for recording the administration of Medicines but Paper proforma will still be available in the event of medication being needed to be taken on trips.
- If pupils refuse to take medication, academy staff will not force them to do so, but will record this in the pupil medication log and follow the procedure agreed in the Individual Healthcare Plan. The Academy will inform the child's parents as a matter of urgency (on the same day the child refused medication). If necessary, the Academy will call the emergency services.
- Some pupils carry their own medication (e.g., inhalers). This decision is based on wishes of parents as well as the age, maturity and ability of the individual child.

Storing and disposal of medication

- The Academy will not store large volumes of medications.
- Wherever possible, parents will be asked to bring in the required dose each day rather than a week's supply.
- Medicines will be stored securely and according to the storage guidelines noted on the original container supplied.
- Non-health-care staff will never transfer medicines from their original containers.
- Pupils will know where their own medication is stored and who holds the key.
- A few medicines, such as asthma inhalers, blood glucose testing meters and adrenaline pens will be readily available to pupils and will not be locked away. These will be kept in a secure area; usually behind the green cross on a classroom cupboard. At Sir Edmund Hillary Academy the paper copy of an Administration of Medicines Request & Log will be kept within a Ziploc bag with the medication.
- If the Academy locks away medicines that a pupil might need in an emergency, all staff will know where to obtain keys to the medicine cabinet and be able to do so without delay.
- Staff will not dispose of medicines. Parents will be requested to collect medicines held at school at the end of each term. Parents will be responsible for the disposal of date expired medicines. All medication will be returned to parents when it has expired or is no longer required.
- Where parents do not collect medicine for discarding, staff will contact the local pharmacist who will collect the medication.
- Insulin and unused needles for diabetic pupils will be locked in a medical fridge. Pupils will be required to bring their own 'sharps' box into school to store any used insulin needles after taking the required dose.

Hygiene/infection control

- All staff will be familiar with normal precautions for avoiding infection and must follow basic hygiene procedures.
- Staff will have access to single-use, protective disposable gloves, hand washing facilities and will take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment. Children can often use illness as a short-hand for feelings of vulnerability and so we expect staff to provide a climate that builds understanding and resilience and engages children who may be learning to handle their state of mind. We do not encourage children to be off school just because they are feeling under the weather.

- Staff should regularly brief their children on what to do when needing the toilet, feeling sick, infection control and they should supervise toileting to ensure good health practices are followed.
- Should there be an outbreak of diarrhoea the school will follow HSC Outbreak of Diarrhoea & Vomiting Outbreak Action Checklist.
- Sometimes parents ask for guidance (or require guidance) on what to do when their child has a specific illness. DO NOT work off your memory as guidance changes regularly. Refer to the HSC Guidance on Infection Control in Schools & Other Child Care Settings. There is always an up to date copy on the back of the School Office door.
- Children can have diarrhoea & sickness for many different reasons and so we expect parents to use their discretion as to what sort of exclusion from school is needed- this could be up to 48 hours after the last incident of diarrhoea or vomiting. If there is a situation where there are more than three or four cases we may impose a 48 hr time period before returning to school.

School trips

- It is good practice to encourage pupils with medical needs to participate in school trips, wherever safety permits.
- Sometimes additional safety measures for outside visits may need to be made. Arrangements for taking any necessary medication will also need to be taken into consideration. For residential visits, the school will provide all parents with a "Visits and Journey's Medical & Dietary Request & Consent" Form – Appendix 8
- Staff supervising excursions will be aware of any medical needs and relevant emergency procedures.
- Sometimes an additional supervisor or parent might accompany a particular pupil.
- During planning, a risk assessment will be undertaken to take account of any steps needed to ensure that pupil with medical conditions is included.
- Where staff are concerned about whether they can provide for a pupil's safety, or the safety of others on a trip, they will seek further advice from the Educational Visits Co-ordinator who will liaise with parents, the school Nurse or the child's GP.

Sporting activities

- Most pupils with medical conditions can participate in extra-curricular sport or in the PE curriculum, which is sufficiently flexible for all pupils to follow in ways appropriate to their own abilities.
- For many, physical activity can benefit their overall social, mental and physical health and well-being. Any restrictions on a pupil's ability to participate in PE will be included in their Individual Healthcare Plan.
- Some pupils may need to take precautionary measures before or during exercise and/or need to be allowed immediate access to their medication if necessary (especially medication for Asthma, Anaphylaxis).
- Teachers supervising sporting activities will be aware of relevant medical conditions and emergency procedures.
- During planning, a risk assessment will be undertaken to take account of any steps needed to ensure that pupils with medical conditions are included.

Emergency procedures

- All staff will be aware of the Academies' procedure for calling the emergency services (999) and conveyance of pupils to hospital by the safest and quickest means available as directed by the emergency services (car/ambulance)
- If a pupil needs to be taken to hospital, staff will stay with the child until the parent arrives, or accompany a child taken to hospital in an ambulance.
- Generally, staff should not take pupils to hospital in their own vehicle, however, in an emergency it may be the best course of action. This should only be carried out if another member of staff accompanies the causality and driver, and the driver holds business vehicle insurance.
- Where a child has an Individual Healthcare Plan, this should clearly define what constitutes an emergency and explain what to do, ensuring that all relevant staff are aware of emergency symptoms and procedures.

Diabetes

- The Academy accepts the responsibility of advising all its staff (teachers, ancillaries and lunch-time welfare assistants etc) in practical diabetes management. The Academy will seek to make close links with the School Nursing Service, as necessary.
- The Academy will seek to develop links with the parents of diabetic children and maintain a record of such pupils and their Individual Healthcare Plans in line with this policy. Parents will be asked to provide details of the necessary treatment.
- Children with diabetes will be encouraged to bring the necessary equipment (be it a fizzy drink, glucose tablets etc) and these will be kept by the Academy or pupil, depending on the age of the pupil and the circumstances (the Academy will liaise with the parents as to the best course of action). The Academy will seek to ensure that the pupil has easy access to whatever is required at all times, whether in the classroom, playground, sports field, swimming pool or on school trips.
- The Academy will aim to allow the pupil to take a full part in school activities unless he/she is severely affected, and teachers will be aware of pupils with diabetes particularly during exercise.

Asthma

- The Academy accepts the responsibility of advising all its staff (teachers, ancillaries and lunch-time welfare assistants etc.) in practical asthma management. The Academy will seek to make close links with the Nursing Service, who will play an important role in educating the staff in asthma management and we will encourage their involvement.
- The Academy will ask all parents if their child has asthma or is very wheezy and if they have to use an inhaler. The Academy will maintain a record of all pupils with asthma and will endeavour to obtain details of every child's treatment from parents, together with 'clear guidance on correct usage' in accordance with the procedures outlined in this policy.
- Pupils with asthma who need a reliever inhaler will be encouraged to have two inhalers - one at home and the other to bring to school daily. At Sir Edmund Hillary the inhaler must be accompanied by a medication form completed by the parent and countersigned by the teacher.
- Pupils who need a preventer inhaler will also be encouraged to have two of these so that they can bring one to school if one needs to be used during the school day.
- Pupils need instant access to reliever inhalers at all times. Delay in taking relief treatment can lead to a severe asthma attack and can, in rare cases, be fatal. The Academy will try to ensure that any pupil has easy access to his/her inhaler at all times whether in the classroom, the playground, the sports field, the pool, during lunchtime and breaks and on school trips. **At Sir Edmund Hillary Academy, if a child needs to use their**

inhaler because they are presenting with difficulties or have asked for it, then the number of puffs and spacing must be recorded by an adult.

- The appropriate time must be given to let the medication take effect and this recorded so the parent understands how long it has taken to get relief. However, if 10 puffs are administered then the child must be taken to A&E even if relief is occurring.
- At Sir Edmund Hillary Academy The appropriate time must be given to let the medication take effect and this recorded so the parent understands how long it has taken to get relief. However, if 10 puffs are administered then the child must be taken to A&E even if relief is occurring.
- At Sir Edmund Hillary Academy, if a child uses their inhaler more twice or more within a week this is an indication that their asthma is not under control and their parent will need to be informed so that they can make an appointment with the child's Asthma Nurse. Asthma can kill and can be unpredictable when it strikes. It has been known for inhalers to get lost or damaged in school settings and therefore the school has an emergency back up.
- The emergency salbutamol inhaler should only be used by children, for whom written parental consent for use of the emergency inhaler has been given, who have either been diagnosed with asthma and prescribed an inhaler, or who have been prescribed an inhaler as reliever medication.
- The inhaler can be used if the pupil's prescribed inhaler is not available (for example, because it is broken, or empty).
- The school will operate within the guidance of the Department of Health's March 2015 publication 'Guidance on the use of salbutamol inhalers in school'. A copy of the most up to date guidance will be kept with the inhaler in the safe storage space (Disabled Toilet First Aid Storage).
- The Academy will liaise with parents about whether the child or the teacher should hold the inhaler. The Academy will aim to allow the pupil with asthma to take a full part in all school activities unless the pupil is severely affected.
- During games and P.E. activities, staff will be aware of pupils with asthma who need to use an inhaler either before or during exercise. Pupils will not be required to participate in games or exercise if they say they are too wheezy to continue. A member of staff will ensure that the pupil takes the inhaler to the pool or the sports field. Any member of staff who feels that a pupil is becoming too over-reliant on their reliever inhaler or has poorly controlled asthma must report their concerns to the Headteacher or relevant Senior Leader, who will contact the parents.
- If a child with severe asthma needs to use a nebuliser to deliver his/her drugs, the Academy will liaise with the parents and the School Nurse to ensure correct management of the nebuliser.
- If classroom pets are likely to cause problems for children with asthma, the Academy will ensure that the asthma sufferer does not come into contact with the pets.
- If a child has an asthma attack at school, they should be treated according to their Individual Health Care Plan. An ambulance should be called if:
 - the symptoms do not improve sufficiently in 5 – 10 minutes;
 - the child is too breathless to speak;
 - the child is becoming exhausted;
 - the child looks blue.

*Reliever inhalers - Ventalin, Brycanyl, Salbutamal

*Preventer inhalers - Intal, Becotide, Pulmicart

Highly infectious diseases (e.g. meningitis)

- As soon as the Academy becomes aware that a pupil or member of staff is affected, the advice of the Public Health Service will be sought and acted upon, keeping parents, staff and others informed as fully as possible.

Allergies

- The Academy should be made aware of children with allergies through the normal admissions channels.
- Most allergies, such as hay-fever, are controllable with inhalers, sprays and drops and the same procedures will take place as laid down for Asthma.
- Where pupils have food allergies an Individual Care Plan will be devised and all staff, including kitchen staff, will be given a list of the pupils involved and the allergies they have. Where pupils have an allergy which produces a violent allergic reaction, such as peanut allergy, the Academy will liaise closely with the parents and local health team to ensure that appropriate measures can be put in place.
- Appendix 8 gives a full description of Allergy and especially Anaphylaxis through Nut Allergy procedures within school.

HIV and Aids

If the School is informed that a pupil or member of staff, or a visitor has the HIV infection or Aids, the advice of the Public Health Service will be sought and acted upon.

Headlice

Head-lice is an increasing and on-going problem, exacerbated by the fact that a small number of parents do not check their children's heads regularly, nor do they carry out sufficiently vigorous treatment.

The academy policy is:

- to send out advice on a regular basis, particularly if there are a lot of parental complaints;
- keep a close check on children during the course of the teaching day;
- send home letters to individuals who are affected, with a warning and advice on how to treat the condition and a request not to send the child back to school until treatment has begun;
- send a 'head-lice alert' notice home with children in the same class;
- educate children about personal cleanliness (including hair-brushing) within the curriculum.
- The Academy is not in a position to check or treat children's heads themselves nor to allow other parents to do so. Parental permission must be sought for the School Nurse to check heads.

Intimate care

- Intimate care can be defined as any care which involves washing, touching or carrying out a procedure to intimate personal areas which most people usually carry out themselves, but some pupils are unable to do because of their young age, physical difficulties or other special needs. Examples include care associated with continence and menstrual management as well as more ordinary tasks such as help with washing, toileting or dressing. It also includes supervision of pupils involved in intimate self-care.
- Pupils who require regular assistance with intimate care have written Individual Health Care Plans agreed by staff, parents/carers and any other professionals actively involved, such as School Nurses or physiotherapists.
- Additional vulnerabilities that may arise from a physical disability or special educational needs must be considered with regard to Individual Health Care plans.

- The religious views, beliefs and cultural values of children and their families should be taken into account, particularly as they might affect certain practices or determine the gender of the carer.
- Where an Individual Health Care Plan is not in place, parents/carers will be informed the same day if their child has needed help with meeting intimate care needs (e.g. has had an 'accident' and wet or soiled him/herself). It is recommended practice that information on intimate care should be treated as confidential and communicated in person by telephone or by sealed letter, not through the home/school diary.
- Adults who assist a pupil with intimate care should be employees of the Academy, not volunteers and therefore have the usual range of safer recruitment checks, including enhanced DBS checks.
- As part of safer working practice, intimate care will normally be provided by a member of staff who is the same gender as the pupil, but the Academy will seek to allow every pupil to have a choice about the member of staff who will provide their intimate care.
- Accurate records should be kept when a child requires assistance with intimate care; these can be brief but should, as a minimum, include full date, times and any comments such as changes in the child's behaviour. It should be clear who was present in every case.

The following guidelines assist in promoting positive attitudes to intimate care:

- Be familiar with the pupil beforehand in other contexts to gain an appreciation of their moods and verbal and non-verbal communication.
- Speak to the pupil personally by name so that they are aware of being the focus of the activity.
- Give explanations of what is happening in a straightforward and reassuring way;
- Enable the pupil to be prepared for and to anticipate events whilst demonstrating respect for their body e.g. by giving a strong sensory clue such as using a sponge or pad to signal intention to wash or change.
- When washing, always use a sponge or flannel and where possible encourage the pupil to attempt to wash private parts of the body themselves.
- Provide facilities which afford privacy and modesty.
- Respect a pupil's preference for a particular carer and sequence of care.
- Keep records which note responses to intimate care and any changes in behaviour.
- Agree appropriate terminology for private parts of the body and functions to be used by staff and encourage pupils to use these terms as appropriate.
- Speak to older pupils in a way that reflects their age.

In order to ensure the health and safety of staff and pupils involved in intimate care:

- There must be sufficient space, heating and ventilation to ensure the pupil's safety and comfort.
- More than one member of staff should be available if a pupil is difficult to move or handle.
- Hoists must be provided for staff moving heavier pupils.
- There must be a suitable changing table.
- There must be a disabled toilet and/or appropriate toilet seats for children who require them.
- Items of protective clothing, such as gloves and disposable aprons, should be provided and readily accessible.
- Special bins must be provided for the disposal of wet or soiled pads.

- There must be special arrangements for the disposal of any contaminated waste/clinical materials .
- Supplies of suitable cleaning materials should be provided for cleaning and disinfecting changing surfaces.
- Supplies of fresh clothes should be easily to hand so that the child is not left unattended whilst they are found.
- Checks should be made beforehand to ensure that there are suitable facilities for intimate care available on excursions and residential experiences.

From a safeguarding perspective, it is acknowledged that intimate care involves risks for children and adults. The Academies safeguarding procedures will be adhered to. If a member of staff has any concerns about physical changes in a pupil's presentation, these will be reported immediately to the Designated Safeguarding Lead. If a pupil, or any other person, makes an allegation about an adult working at the school, this will be dealt with in accordance with the school's policy on dealing with allegations of abuse against members of staff (see Safeguarding (Child Protection) Policy).

Unacceptable practice

The Academy acknowledges that is not generally acceptable practice to:

- Prevent children from easily accessing their inhalers and medication and administering their medication when and where necessary.
- Assume that every child with the same condition requires the same treatment.
- Ignore the views of the child or their parents; or ignore medical evidence or opinion, (although this may be challenged).
- Send children with medical conditions home frequently or prevent them from staying for normal school activities, including lunch, unless this is specified in their Individual Healthcare Plans.
- If the child becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable.
- Penalise children for their attendance record if their absences are related to their medical condition e.g. hospital appointments.
- Prevent pupils from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively.
- Require parents, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the Academy is failing to meet their child's medical needs.
- Prevent children from participating, or create unnecessary barriers to children participating, in any aspect of school life, including school trips, e.g. by requiring parents to accompany the child.

Liability and indemnity

The Trust has arranged cover liability arising from the provision of incidental medical treatment arising out of the following activities:

- First aid.
- Administration of prescribed and non-prescribed drugs or medicines.

Some examples of the treatments deemed to be covered are: use of EpiPens, use of defibrillators, injections, dispensing prescribed and non-prescribed medicines, application of appliances such as splints and oral and topical medication.

The Academy will liaise with the insurance providers to determine whether individual cover may be required for any health care procedures.

Training

Staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. The Office Manager will commission appropriate Paediatric First Aid to ensure that each Phase in school has the right number of First Aiders for the age group of children, paying particular attention to the statutory requirements of the EYFS. These will be commissioned from an appropriately recognised body. Some training for specific conditions will be sourced from the National College. There may be a variety of conditions across school that require specific training and these will be sourced from relevant healthcare providers and reviewed as and when training expires or personnel changes around the child. Details of this training will be recorded (see Appendix 8) and held by the Office Manager.

Training needs will be identified during the development or review of Individual Healthcare Plans as well as part of the Performance Appraisal arrangements and CPD planning. Some staff may already have some knowledge of the specific support needed by a child with a medical condition and so extensive training may not be required.

Training will be sufficient to ensure that staff are competent and have confidence in their ability to support pupils with medical conditions, and to fulfil the requirements as set out in Individual Healthcare Plans. They will need an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures.

A first-aid certificate will not constitute appropriate training in supporting children with medical conditions.

Staff will not give prescription medicines or undertake healthcare procedures without appropriate training.

As part of staff initial induction and annual training, the Academy will provide whole school awareness training regarding the Academies' policy for supporting pupils with medical conditions and their role in implementing that policy. This will include preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.

Complaints

Any individuals wishing to raise a complaint relating to the support provided for pupils with medical conditions should follow the School's Complaint Policy.

Monitoring, evaluation, and review

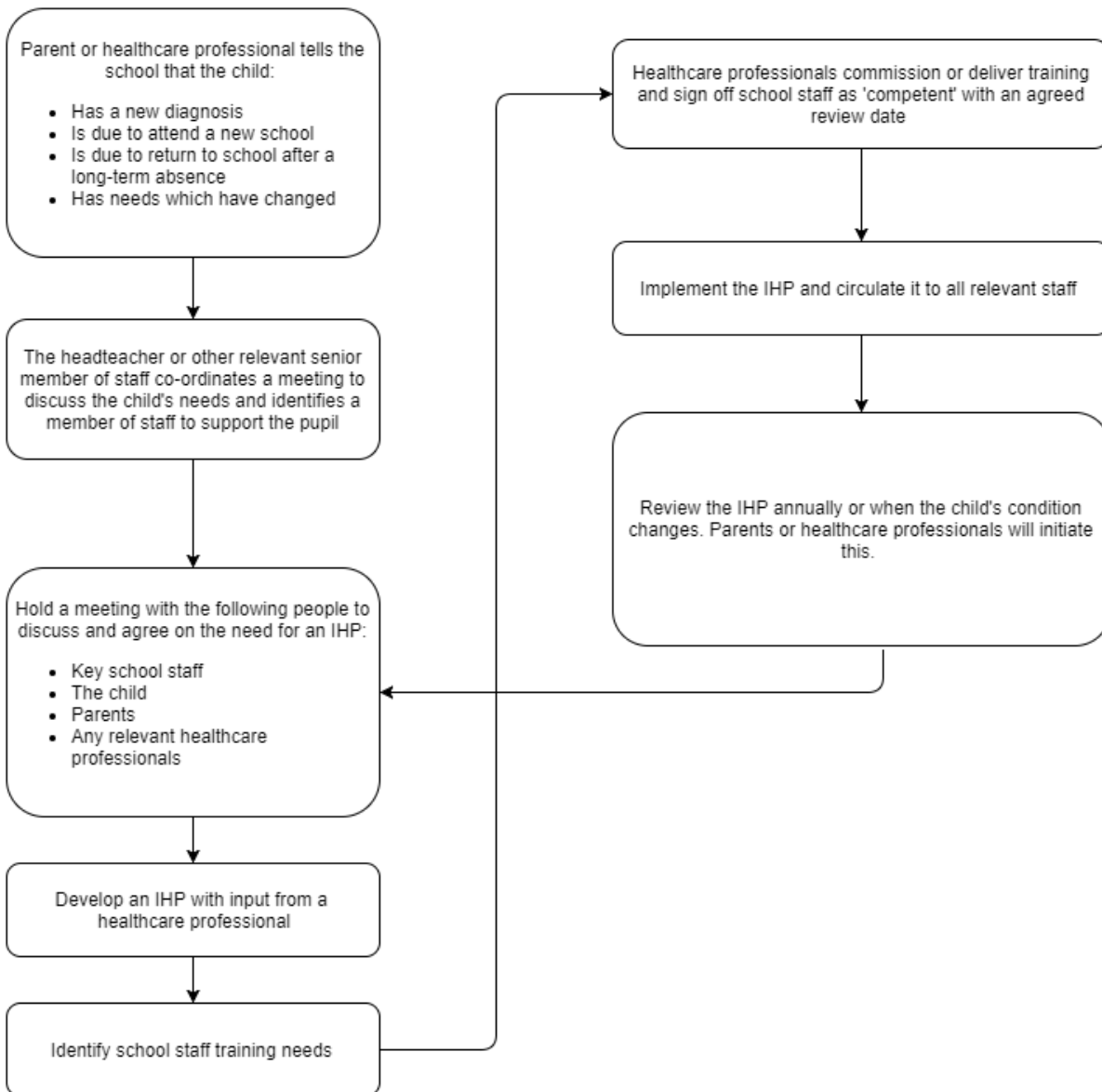
- The policy will be promoted and implemented throughout all Trust schools.
- The Trust will monitor the operation and effectiveness of arrangements referred to in this policy at each Trust school.
- The Trust will review this policy annually.

Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding

Appendix 1: Being notified a child has a medical condition.



Appendix 2: Healthcare Plan for pupils with medical needs

**Individual Healthcare Plan
for Pupils with Medical Needs**



L.E.A.D. Academy Trust

Plan Number (pupil initials plus number) :

Student details		
Name of school		<i>photo here</i>
Student name		
Date of birth		
Class/Tutor group		
Student address		
Medical diagnosis or condition		
Date		
Review date		

Contact details			
Family Contact 1		Family Contact 2	
Name		Name	
Phone number (home)		Phone number (home)	
Phone number (work)		Phone number (work)	
Mobile number		Mobile number	
Relationship to child		Relationship to child	
Clinic / hospital contact		GP	
Name		Name	
Phone number		Phone number	

Who is responsible for providing support in school
Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc.

**Individual Healthcare Plan
for Pupils with Medical Needs**



L.E.A.D. Academy Trust

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision
Daily care requirements
Specific support for the student's educational, social and emotional needs
Arrangements for school visits/trips etc
Other information
Describe what constitutes an emergency, and the action to take if this occurs

**Individual Healthcare Plan
for Pupils with Medical Needs**



L.E.A.D. Academy Trust

Who is responsible in an emergency (<i>state if different for off-site activities</i>)
Plan developed with
Staff training needed/undertaken – who, what, when
Parent Name: _____ Signature _____ Date _____
Paediatric Trained First Aider for Phase or Responsible Person in School Name: _____ Signature _____ Date _____
Teacher Name: _____ Signature _____ Date _____
Head teacher Name: _____ Signature _____ Date _____
Form copied to: Pupil File <input type="checkbox"/> Phase Care File <input type="checkbox"/> Uploaded to Medical Tracker. <input type="checkbox"/>

For those diagnosed with Asthma only:

Specific Consent to use school emergency inhaler:

1. I can confirm that my child has been diagnosed with asthma / has been prescribed an inhaler [*delete as appropriate*].
2. My child has a working, in-date inhaler, clearly labelled with their name, which they will bring with them to school every day.
3. In the event of my child displaying symptoms of asthma, and if their inhaler is not available or is unusable, I consent for my child to receive salbutamol from an emergency inhaler held by the school for such emergencies.

Signed:

Date:

Appendix 3: Model letter

Dear Parent

RE: DEVELOPING AN INDIVIDUAL HEALTHCARE PLAN FOR YOUR CHILD

Thank you for informing us of your child's medical condition. I enclose a copy of the academies' policy for supporting pupils at school with medical conditions for your information.

A central requirement of the policy is for an Individual Healthcare Plan to be prepared, setting out what support each pupil needs and how this will be provided. Individual Healthcare Plans are developed in partnership between the Academy, parents, pupils, and the relevant healthcare professional who can advise on your child's case. The aim is to ensure that we know how to support your child effectively and to provide clarity about what needs to be done, when and by whom. Although Individual Healthcare Plans are likely to be helpful in the majority of cases, it is possible that not all children will require one. We will need to make judgements about how your child's medical condition impacts on their ability to participate fully in school life, and the level of detail within plans will depend on the complexity of their condition and the degree of support needed.

A meeting to start the process of developing your child's Individual Healthcare Plan has been scheduled for xx/xx/xx. I hope that this is convenient for you and would be grateful if you could confirm whether you are able to attend. The meeting will involve [the following people]. Please let us know if you would like us to invite another medical practitioner, healthcare professional or specialist and provide any other evidence you would like us to consider at the meeting as soon as possible.

If you are unable to attend, it would be helpful if you could complete the attached Individual Healthcare Plan template and return it, together with any relevant evidence, for consideration at the meeting. I [or another member of staff involved in plan development or pupil support] would be happy for you contact me [them] by email or to speak by phone if this would be helpful.

Yours faithfully

Parental Request for School to Administer Medication and Administration Log



L.E.A.D. Academy Trust

The school staff will not issue your child's medicine unless you complete and sign this form.

Details of Student			
Student name			
Date of birth		Tutor group	
Address			
Condition or illness			
Is this medication part of a pre-agreed Health Care Plan. If so, state number.		Yes / No	Number
Medication			
Name/type of medication (as described on the container)			
For how long will your child take this medication			
Date dispensed		Expiry date	
Storage method <i>(to be agreed with school staff)</i>	Fridge (location _____) On the Pupil's Person	Locked Cupboard (location _____) Classroom First Aid Cupboard- not locked	
Full directions for use			
Dosage and method			
Timing / circumstances in which to be administered			
Special precautions / other instructions			
Side effects			
Self-administration*	YES / NO (delete as appropriate)		
Procedures to take in an emergency			
Contact details			
Name			
Relationship to student			
Daytime telephone number			
Address			
The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school staff administering medicine in accordance with the school policy. I will inform the school immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped. I understand that I must deliver the medicine personally to the school.			
Date		Signature(s)	

NB: Medicines supplied must be in the original container as dispensed by the pharmacy.

*Please note, if your child cannot self-administer their medication under the supervision of school staff, the Academy will contact you to arrange a meeting to discuss your child's needs.

Office Staff: Complete Drugs Storage Log and set up Pupil Medication Administration Log on reverse

Administration Log

Student name	
Medication name and strength	
Dose	
Frequency/ circumstances in which to be administered	
Predicted end date of treatment	
Staff Member(s) to administer	
Storage Method* _____ Fridge * _____ Locked Cupboard * _____ Classroom FA Cupboard- not locked *Pupil's Person	
Individual Health Care Plan No. (if relevant)	

Date	Time Given	Dose Given	Reactions	Staff Name	Staff Initials	Student or Counter Signature

Date medication collected from school and taken home by parent			
Quantity returned to parent			
Parent name		Parent signature	



School Drug Inventory & Log

Student's Name	Name of Medication	Health Care Plan No. (if applicable)	Storage – detail precise location: <i>*Fridge</i> <i>*Locked Cupboard</i> <i>*Classroom First Aid Cupboard- not locked</i> <i>*On Pupil's Person</i>	Signature of Staff Accepting Delivery	Date / Time Medicine Accepted	Date / Time Medicine Returned +notes (eg course completed, expired)

Appendix 6: Visits & Journeys Medical & Dietary Request & Consent



Sir Edmund Hillary Academy



Visits and Journeys Medical & Dietary Request & Consent

This form is to be returned by:	
School:	Sir Edmund Hillary Academy
Visit destination:	
Date of visit:	

Student/s details

Name:	
Date of birth:	

Medical Information

Does your child require medical treatment? This may include non-prescription medicine for instance for hay fever or travel. All medicines to be provided in a separate, named bag.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
---	---------------------------------	--------------------------------

If medical treatment is required please describe:	
---	--

To the best of your knowledge has she/he been in contact with any contagious diseases or infectious diseases within the last 4 weeks?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so give brief details:
---	---------------------------------	--------------------------------	---------------------------

Is she/he allergic to any medication?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so give brief details:
---------------------------------------	---------------------------------	--------------------------------	---------------------------

Has your son/daughter received tetanus jab in the last 5 years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
---	---------------------------------	--------------------------------

Please indicate any special dietary requirements due to medical, religious or moral reason:	
---	--

Parental declaration

I give my permission for my daughter/son _____ to take part in the above activity as described including all activities.

I undertake to inform the visit organiser or the Head teacher as soon as possible of any relevant changes in medical circumstances occurring before the journey.

I hereby authorise any accompanying member of staff of the school to give consent to such medical treatment as is considered necessary for my child by a qualified medical practitioner during the visit.

Print parent/guardian:

Signed parent/guardian:

Contact information	
Home Address:	
Day/ Night time telephone number:	
Work telephone number:	
Name of Family Doctor:	
Medical Practice phone numbers:	
Practice Address:	

Medication			
Name/type of medication (as described on the container)		Storage Instructions	
Date dispensed		Expiry date	
Full directions for use			
Dosage and method			
Timing/ circumstances in which to be administered			
Special precautions / other instructions			
Side effects			
Self-administration*	YES / NO (delete as appropriate)		
Procedures to take in an emergency			

For Staff to Complete

Date	Time Given	Dose Given	Reactions	Staff Name	Staff Initials	Student Signature

**Staff Training Record –
Administration of Medication**



L.E.A.D. Academy Trust

Details of Training	
Name of member of staff	
Type of training received	
Date training completed	
Training provided by	
Profession and title	
Organisation	
Training review/refresher date	
Declaration	
I confirm that the aforementioned member of staff has received the training detailed above and is competent to carry out necessary treatment.	
Trainer's signature	
Qualification	
Date	
I confirm that I have received the training detailed above.	
Staff signature	
Date	

Appendix 8: Allergies & Anaphylaxis

3. Allergies & Anaphylaxis – This Academy is Nut Free

Amongst the many allergies that children and adults may have one of the most common and life-threatening is an allergy to nuts. Although we recognise that this cannot be guaranteed, Sir Edmund Hillary Primary School aims to be a Nut-Free school. This policy serves to set out all measures to reduce the risk to those children and adults who may suffer an anaphylactic reaction if exposed to nuts. The school aims to protect children who have allergies to nuts yet also help them, as they grow up, to take responsibility as to what foods they can eat and to be aware of where they may be put at risk. We therefore manage the risk by reducing the possibility of exposure, preparing for incident management and education for the sensitised pupil and their community.

What is Anaphylaxis?

Anaphylaxis (also known as anaphylactic shock) is an allergic condition that can be severe and potentially fatal.

Anaphylaxis is your body's immune system reacting badly to a substance (an allergen), such as food, which it wrongly perceives as a threat. The whole body can be affected, usually within minutes of contact with an allergen, although sometimes the reaction can happen hours later.

Symptoms

The symptoms of anaphylaxis usually start between three and sixty minutes after contact with the allergen. Less commonly they can occur a few hours or even days after contact.

An anaphylactic reaction may lead to feeling unwell or dizzy or may cause fainting due to a sudden drop in blood pressure. Narrowing of the airways can also occur at the same time, with or without the drop in blood pressure. This can cause breathing difficulties and wheezing.

Other symptoms:

- Swollen eyes, lips, genitals, hands, feet and other areas (this is called angioedema)
- Itching
- Sore, red, itchy eyes
- Changes in heart rate
- A sudden feeling of extreme anxiety or apprehension
- Itchy skin or nettle-rash (hives)
- Unconsciousness due to very low blood pressure
- Abdominal cramps, vomiting or diarrhoea, or nausea and fever.

Anaphylaxis varies in severity. Sometimes it causes only mild itchiness and swelling, but in some people it can cause sudden death. If symptoms start soon after contact with the allergen and rapidly worsens, this indicates that the reaction is more severe.

Food in School:

Lunch boxes: We do not allow nuts or nut products in school lunch boxes. Being a "Nut-Free Academy" means that the following items should not be brought in:

- **Packs of nuts**
- **Peanut butter or Nutella sandwiches**
- **Fruit and cereal bars that contain nuts**
- **Chocolate bars or sweets that contain nuts**
- **Sesame seed rolls (children allergic to nuts may also have a severe reaction to sesame)**
- **Cakes made with nuts**

We have a policy to not use nuts in any of our food prepared on site at the academy both for curriculum and community purposes and through the school kitchen. Our school kitchen suppliers provide us with nut-free products. However, we cannot guarantee freedom from nut traces.

Staff - a duty of care

Staff and volunteers must ensure they do not bring in or consume nut products into the Academy and ensure they follow good hand washing practice.

Caution must be taken at certain times of year such as Easter and Christmas. If Staff distribute confectionary, care must be taken to ensure that no nuts are included in the product. Fruit sweets such as Haribo are a better alternative. Particular products that are a cause for concern are: - Celebrations – Roses – Heroes – Quality Street. Staff should always check-“are you allowed x,y,z?” not just for allergens but also gelatine for instance, for diets based on religious grounds.

The principles apply whether there is a known allergy sufferer in the target class or group or not. This is to minimise risk because of the unpredictability of children.

All product packaging must be checked for warnings directed at nut allergy sufferers and if the following or similar are displayed, the product must not be used in school. Packaging must be checked for:

- o Not suitable for nut allergy sufferers;
- o This product contains nuts;
- o This product may contain traces of nuts;

All indicate this is unsuitable for consumption in school.

Epi Pen trained staff are named First Aiders- those who have done the First Aid at Work training.

School Lunchtime Procedure

A table will be reserved for children who suffer from food allergies and their friends, at the front of the dining hall. Children who sit at this table will have their food checked- school dinners are known to be safe, but for children bringing in packed lunches, each item will be assessed by the MDSA who is managing the cleaning and wiping station.

Any items found that may contain nuts will be taken from the child sensitively and handed to the class teacher. The Senior MDSA will be informed and the class teacher and Senior MDSA will determine the means by which the parent who sent in the item will be informed. A member of SLT will be informed.

Trips & Outings

Like wise on a school outing whereby children are bringing in their own packed lunches, an area will be determined for children who suffer from food allergies and a small group of friends. A member of staff will check the lunch boxes of those children sitting in the vicinity of a vulnerable child and remove items that may cause concern, to be handed back to the parent on arrival back at school.

Parents and Carers -responsibilities and advice

Parents and carers must notify staff of any known or suspected allergy to nuts and provide all medical and necessary information. This will be added to the child’s care plan and if necessary a meeting organised with the school nurse. Homemade snacks or party food contributions must have a label detailing all ingredients present and the kitchen environment where the food was prepared must be nut free. If you are unsure about a selection please speak to a staff member before bringing the food item into school.

The school requests that parents and carers observe the nut-free policy and therefore **do not** include nuts, or any traces of nuts, in packed lunches.

If parents are sending in birthday treats these should be sealed packet sweets such as Haribo or Love Hearts and not homemade baking or chocolate assortments such as Celebrations or Miniature Heroes.

Termly reminders of policy are put out to parents via text to catch any children who are new to school or have changed their lunchtime arrangements and whose parents need prompting to think again about what the child’s lunch may contain.

Children

All children are regularly reminded about the good hygiene practice of washing hands before and after eating which helps to reduce the risk of secondary contamination. Likewise, children are reminded and carefully supervised to minimise the act of food sharing with their friends. They will have been briefed by staff if one of their classmates needs looking after in the event of an allergic reaction and how we need to manage food carefully around their friend.

Health Plans and Emergency Response

We have individual Healthcare plans for children with allergies and Allergy Lists are displayed highlighting Healthcare plans in place, triggers, medication (Medication will be stored, administered and documented in accordance with our Administering Medicine Policy).

Nappy Changing and Toileting Policy

Sir Edmund Hillary EYFS

At Sir Edmund Hillary Academy children are part of EYFS between the ages of 2 or 3, up to 5 years. As a school we aim to be inclusive to all children and give consideration to the individual needs of each child. We see toilet training as a self-care skill that all children should have the opportunity to learn through the full support and non-judgemental concern of adults.

Aims:

- To ensure that children in our care are comfortable and happy at all times.
- To safeguard the rights and promote the welfare of children.
- To provide guidance and reassurance to staff who are required to change children.
- To assure parents/carers that staff are knowledgeable about personal care and that their individual concerns are taken into account.
- To protect children from discrimination and ensure the inclusion of all.

Basic Principles:

- Children have the right to feel safe and secure.
- Children will be respected and valued as individuals.
- Children have the right to privacy and dignity.
- In order to promote and develop greater independence, children need to be supported in their understanding of toileting procedures.

To ensure children are comfortable and happy, nappies will be checked every three hours and changed if wet or soiled.

Vulnerability to Abuse:

As a school we ensure that all staff are familiar with our safeguarding policy as well as our procedures to develop each child's resilience and protect them from any form of abuse.

It is important that children are changed in a reassuring and caring way by a member of staff they have a close relationship with. Furthermore, it is important that we signal our intention to change a child's nappy before doing so, ensuring that the child understands and anticipates what is going to happen, as appropriate to their development. This helps give children the

important message that not just anyone can pick them up, take them off and undress them.

Staff should always change children in the nappy-changing area which, whilst allowing for some privacy, is not closed off. This is part of making sure there is a culture of openness which safeguard children and ensures all adults follow safe working practices.

Achieving Continence:

We will encourage all children to achieve continence when they exhibit signs that they are ready. This will be achieved through positive praise, working with parents and having high expectations. In addition to this, a child's key person will ensure that nappy changing times are relaxed and a time to promote increasing independence.

Protection for Staff:

As far as possible, a member of the EYFS staff will carry out nappy changing procedures. Protection for that person will be undertaken in the following ways:

- Each instance of intimate care will be recorded by the adult who completed it. Details recorded will include:
 - What personal care tasks were carried out
 - By who
 - The time and date it was completed.
- If a situation occurs that causes a member of staff concern, a second member of staff will be called and the incident reported to the line manager and recorded.
- Where staff are concerned about a child's actions or comments whilst carrying out a personal care procedure, this should be recorded and discussed with the school's designated safeguarding lead immediately.

Changing Procedure followed by staff:

- Prepare the changing area by cleaning it with antibacterial spray.
- Ensure the following items are ready before changing: clean nappy, wipes and nappy cream if required (NB – where cream is used the child should have their own named cream and written permission obtained from the parent).

- Wash and dry your hands and put on a pair of disposable gloves and a disposable apron. (NB – staff must put a fresh pair of gloves on for every child that has a nappy changed).
- Support the child onto the nappy changing unit – ensure it is lowered fully.
- Remove the child’s clothing to access the nappy.
- Staff members will then remove the child’s nappy and clean the area, always from front to back using wipes and cream provided by parents/carers. The member of staff must ensure the child is clean and comfortable by putting on a clean nappy and a clean set of clothes if required.
- If the child’s clothes are soiled, they should be bagged separately and sent home, they should not be rinsed by hand.
- The staff member must then wash the changing table with antibacterial spray.
- Soiled nappies will be placed into a tie handle bag, then placed into the designated nappy bin.
- The staff member must then place the used gloves into the bin provided, wash their hands with liquid soap and running water and then dry them on a disposable paper towel.
- Staff will help the child to wash their hands using liquid soap, warm water and paper towel.

Toilet Trained/Training:

- If a child is old enough to meet their own toileting needs, the staff member can support the child according to age and ability to use a potty or toilet, ensure they are comfortable, clean and dry and have washed their hands afterwards.
- Staff members will also ensure that potties are available for children being toilet trained and cleaned with antibacterial cleaner after every use.
- When supporting a child that needs to be changed the staff member will approach the child and explain that they would need to clean and change into some dry clothes.
- The staff member will put on a pair of disposable gloves/apron.
- Remove the wet/soiled clothes from the child.
- Clean the areas that need cleaning. The staff member will talk through with the child what they are about to do so that they are happy and

understanding. If a child is capable of doing so, they can help with the removal of any clothes.

- Wet/soiled clothing will be put into a bag so they can be sent home.
- The staff member will wash their hands with antibacterial soap and running water and then dry them on a disposable paper towel.
- Staff will help the child to wash their hands using liquid soap, warm water and paper towel.
- Staff will return to the changing area and clean the area using the cleaning materials and liquid provided.

Parental Responsibilities:

- Parents understand and agree the procedures that will be followed when their child is changed at school
- The school requires the parents to supply nappies, wipes and sundries that will be used and applied as necessary.
- Parents understand that they will be asked to collect their child from school if their child shows symptoms of illness or indications of ill health (2 watery/loose nappies in quick succession).
- Parents must send their child in nappies or protective underwear until they are dry and clean the majority of the time. We ask that children are only sent in with pull-ups if toilet training.



Care Plan for those Children not yet Toilet Trained

Name of child.....

D.O.B.....

Home Address.....

.....

Telephone Number.....

Parent/Carer name/s.....

Description of daily care needs (when to be changed, any special requirements?)

Who shall take main responsibility for changing procedures?

Additional notes:

Parent's signature _____



Appendix 11: Toileting Care Record

Toileting Care Record

Name:

Date	Time	Action	Initials