

# Supporting Students with Medical Needs Policy 2025/26

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## Supporting Students with Medical Needs

This policy complies with the statutory guidance *Supporting Pupils at School with Medical Conditions* (April 2014; updated June 2014) and has been written with reference to the following guidance and documents:

- Equality Act 2010: advice for schools DfE Feb 2013
- SEND Code of Practice 0 – 25 June 2014
- Safeguarding Policy
- Accessibility Plan
- Teachers Standards 2012
- Human Medicines (Amendment No. 2) Regulations 2014 – allows schools to hold stocks of asthma inhalers containing salbutamol for use in an emergency. These regulations came into effect on 1 October 2014.

### Staff Roles and Contact Details:

<b>Federation Strategic SENCO</b>	Emma Rice-Adams, Postgraduate award in Special Education Needs Coordination, Leeds Beckett University (December, 2015)	emma.rice@baysgarthschool.co.uk
<b>Castledyke Primary SENCO</b>	Naomi Roberts Postgraduate award in Special Education Needs Coordination, Bath Spa University (December, 2019)	naomi.roberts@castledykeprimary.co.uk
<b>Head of School</b>	Catriona Young	catriona.young@castledykeprimary.co.uk
<b>Federation Lead/ Headteacher</b>	Jade Driscoll	jade.driscoll@baysgarthschool.co.uk
<b>Child Protection Officer</b>	Katie Smith	katie.smith@baysgarthschool.co.uk
<b>SEN Governor</b>	Fiona Small	fiona.small@riverviewfos.com

## 1. Introduction

This policy details how Castledyke Primary School will make arrangements to support students at school with medical conditions. Castledyke Primary School's aim is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Parents/carers of children with medical conditions are often concerned that their child's health will deteriorate when they attend school. This is because students with long-term and complex medical conditions may require on-going support, medicines or care while at school to help them manage their condition and keep them well. Others may require monitoring and interventions in emergency circumstances. It is also the case that children's health needs may change over time, in ways that cannot always be predicted, sometimes resulting in extended absences. Castledyke Primary School's aim is to ensure parents/carers feel confident that we will provide effective support for their child's medical condition and that students feel safe. In making decisions about the support we provide, Castledyke Primary School will establish relationships with relevant local health services to help them.

In addition to the educational impacts, there are social and emotional implications associated with medical conditions. Children may be self-conscious about their condition and some may develop emotional disorders such as anxiety or depression around their medical condition. In particular, long-term absences due to health problems affect children's educational attainment, impact on their ability to integrate with their peers and affect their general wellbeing and emotional health. At Castledyke Primary School we recognise that reintegration back into school should be properly supported so that children with medical conditions fully engage with learning and do not fall behind when they are unable to attend. Sometimes, this can include working flexibly, for example, by means of a combination of attendance at school and alternative provision / personalised learning.

Castledyke Primary School also recognises that some children who require support with their medical conditions may also have special educational needs and may have an Education, Health and Care (EHC) Plan – also introduced by the Children and Families Act 2014. When this is the case, we work together with other schools, health professionals, other support services, and the Local Authority to ensure that these pupils' needs are met.

## 2. Definition

Pupils' medical needs may be broadly summarised as being of two types:

- a) **Short-term:** affecting their participation in school activities, for a set period of time.
- b) **Long-term:** potentially limiting their access to education and requiring extra care and support.

## 3. Aims

The aims of this policy are:

- To ensure that Castledyke Primary School complies with the requirements of statutory guidance and that they are implemented effectively within the school;
- To ensure that our expectations of every pupil with medical needs and/or disabilities are sufficiently high and they are presented with maximum opportunity to achieve economic wellbeing.

**The specific aims/objectives of our Medical Needs Policy are as follows:**

- To support pupils with medical conditions, so that they have full access to education, including physical education and educational visits. This includes risk assessments being put in place, for any educational visits and for school activities outside the normal timetable.
- To ensure that *all* school staff involved in the care of children with medical needs are fully informed and, where necessary, adequately trained by a professional for the administration of medication.
- To comply fully with the Equality Act 2010 for pupils who may have disabilities or special educational needs.
- To write, in association with healthcare professionals, parents/carers and students, Individual Healthcare Plans, where necessary.
- To respond sensitively, discreetly and quickly to situations where a child with a medical condition requires support.
- To keep, monitor and review appropriate records.
- To comply with the school's Intimate Care Policy (Appendix B), as required.

**Objectives of the Governing Body in making provision for pupils with medical needs:**

- Do its best to ensure that the necessary provision is made for any pupil who has a medical condition.
- Make sure that all staff are aware of the importance of identifying and making provision for pupils with medical conditions.
- Make sure that parents and carers are notified of a decision by the school that medical provision is being made for their child.
- Make sure pupils with medical conditions experience a broad and balanced curriculum alongside all other pupils, so far as is reasonably practical.
- Make sure, where the school has been informed that a pupil has a medical condition, those needs are made known to all relevant staff.
- Ensure that all staff are aware of the Medical Needs Policy of Castledyke Primary school.
- Ensure the school's Medical Needs Policy is accessible to all students, staff and parents/carers.
- To consult the Local Authority as necessary in the support of pupils with medical needs.

#### **4. Admission Arrangements**

The Governing Body has agreed with the Local Authority admission criteria, which do not discriminate against pupils with medical needs or disabilities and its Admission Policy has due regard for the statutory guidance 2014. Parents or carers seeking the admission of a pupil with mobility difficulties are advised to approach the school well in advance so that consultations can take place.

#### **5. Co-ordination of Castledyke Primary school's Medical Needs Provision**

It is the responsibility of the SENCo to monitor the provision of education for pupils with medical needs at the school.

#### **6. Arrangements for Coordinating the Provision of Education for Pupils with Medical Needs at Castledyke Primary School**

##### **a) Identification:**

The named person responsible for implementing the policy will ensure that the individual medical needs of students, where appropriate, is suitably recorded via an Individual Health Care Plan. Please see Appendix A for details of this process.

**Students who make a Mid-Year Application to Castledyke Primary School:**

For children starting at the school through the mid-year application process, the identification of medical needs of the student will be collected through completion of the admission form. If medical needs are identified these will be discussed during the initial meeting with the Admin Assistant and SENDCO. If the need to complete an Individual Health Care Plan is required, the Admin Assistant and SENDCO will attend a further meeting with parents, along with a health care professional, if required, to ensure that the child has full access to their curriculum through the completion of the IHCP.

**Students who make the Transition to Castledyke as their choice of Primary School:**

For students who make the transition to Castledyke Primary school from an early years setting, the medical needs of the student will be identified by Early Years Lead teacher during their setting and home visits. If the need to complete an Individual Health Care Plan is recognised during this visit, the Early Years Lead teacher will liaise with school SENCo and healthcare professionals to ensure the child has full access to their curriculum offer.

Castledyke Primary School does not have to wait for a formal diagnosis before providing support to students. In cases where a student's medical condition is unclear, or where there is a difference of opinion, judgements will be needed about what support to provide based on the available evidence. This would normally involve some form of medical evidence and consultation with parents/carers. Where evidence conflicts, some degree of challenge may be necessary to ensure that the right support can be put in place. Parents or carers of the child requiring an Individual Health Care Plan will be invited to attend a meeting to help complete the plan.

**b) Provision/Action**

Individual Health Care Plans will help to ensure that Castledyke Primary School effectively supports students with medical conditions. They provide clarity about what needs to be done, when and by whom. They will often be essential, such as in cases where conditions fluctuate or where there is a high risk that emergency intervention will be needed, and are likely to be helpful in cases where medical conditions are long-term and complex; however, not all children will require one. Consideration will also be made as to whether the child's medical needs impact on their ability to access school provision/ activities. The school staff, healthcare professionals and parents or carers should agree, based on evidence, when a healthcare plan would be inappropriate or disproportionate. If consensus cannot be reached, the Head Teacher is best placed to take a final view.

Individual healthcare plans, (and their review), may be initiated, in consultation with the parent or carer, by a member of school staff or a healthcare professional involved in providing care to the child. Plans will be drawn up in partnership between the school, parents or carers, and a relevant healthcare professional, e.g. school, specialist or children's community nurse, who can best advise on the particular needs of the child. Students should also be involved, whenever the child is able to communicate their views. Adaptations for communication needs will be made, should this be necessary, to facilitate the child's voice being heard in this process.

Castledyke Primary School will ensure that plans are reviewed at least annually or earlier, if evidence is presented that the child's needs have changed. They should be developed with the child's best interests in mind and ensure that the school assesses and manages risks to the child's education, health and social wellbeing and minimises disruption. Where the child has a special educational need identified in an EHC Plan, the Individual Health Care Plan should be linked to or become part of that EHC Plan.

Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), Castledyke Primary School will work with the Local Authority and education provider to ensure that the Individual Health Care Plan identifies the support the child will need to reintegrate effectively.

Information on the Individual Health Care Plans includes:

- The medical condition, its triggers, signs, symptoms and treatments;
- The student'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.
- Arrangements for written permission from parents or carers for medication to be administered by the staff during school hours.
- What to do in an emergency, including whom to contact, and contingency arrangements. Some children may have an Emergency Health Care Plan prepared by their lead clinician that could be used to inform development of their Individual Health Care Plan.
- Who will provide the support, their training needs, expectations of their role, confirmation of proficiency to provide support for the child's medical condition.

The IHP is confidential to parents/carers / young people and to those school staff who need to know. Within the primary setting, there will be a number of relevant members of the school community who need to be aware of the pupil's needs. All IHP will be covered by GDPR. The level of detail within an IHP will depend upon the complexity of the child's condition and the degree of support needed.

## **7. Roles and Responsibilities of Staff and Outside Agencies**

### **a) Governing Bodies**

- Must make arrangements to support students with medical conditions in school, including making sure that a policy for supporting students with medical conditions in school is developed, implemented and reviewed.
- They should ensure that a student with medical conditions is supported to enable the fullest participation possible in all aspects of school life.
- Governing Bodies should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions.
- They should also ensure that any member of staff who provides support to students with medical conditions are able to access information and other teaching support materials as needed.

### **b) Head Teacher**

- Will ensure that Castledyke Primary School's policy is developed and effectively implemented with partners. This includes ensuring that all staff are aware of the policy for supporting students with medical conditions and understand their role in its implementation. The Head Teacher will ensure that all staff who need to know are aware of the child's condition.
- Will ensure that sufficient trained numbers of staff are available to implement the policy and deliver against all individual healthcare plans, including in contingency and emergency situations.
- Will ensure staff are appropriately insured and are aware that they are insured to support students in this way, contact the school nursing service in the case of any child who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse.

**c) School Staff**

- Any member of staff may be asked to provide support to students with medical conditions, including applying any reasonable adjustments which are required.
- Staff should receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions.
- Staff should know what to do and respond accordingly when they become aware that a student with a medical condition needs help.

**d) School Nurses**

Castledyke Primary school has access to school nursing services. They are responsible for notifying the school when a child has been identified as having a medical condition, which will require support in school. Wherever possible, they should do this before the child starts at the school. They would not usually have an extensive role in ensuring that schools are taking appropriate steps to support children with medical conditions, but may support staff on implementing a child's Individual Healthcare Plan and provide advice and liaison, for example on training.

**e) Other Healthcare Professionals, including GPs and Paediatricians**

Should notify the School Nurse when a child has been identified as having a medical condition that will require support at school. They may provide advice on developing healthcare plans.

**f) Students**

Students, dependent on their age/communication needs, will be 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.

**g) Parents/ Carers**

- Have a responsibility to provide Castledyke Primary School with sufficient and up-to-date information about their child's medical needs, including any changes that arise. Parents/ carers are key partners and should be involved in the development and review of their child's Individual Healthcare Plan, and may be involved in its drafting.
- They should 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. Parents and carers must complete the parental consent form if they are instructing school staff to administer medication to their child.

**h) Clinical Commissioning Groups (CCGs) – commission other healthcare professionals such as specialist nurses**

- They should ensure that commissioning is responsive to children's needs, and that health services are able to cooperate with schools supporting children with medical conditions.
- They have a reciprocal duty to cooperate under Section 10 of the Children Act 2004 (as described above for Local Authorities). Clinical Commissioning Groups should be responsive to Local Authorities and schools seeking to strengthen links between health services and schools, and consider how to encourage health services in providing support and advice, (and can help with any potential issues or obstacles in relation to this).
- The local Health and Wellbeing Board will also provide a forum for Local Authorities and Clinical Commissioning Groups to consider with other partners, including locally elected representatives, how to strengthen links between education, health and care settings.

**i) Staffing Arrangements and Training**

- Castledyke Primary School recognises and is clear that any member of school staff providing support to a student with medical needs should have received suitable training.

This will be identified during the development or review of Individual Healthcare Plans. It may be that some staff already have some knowledge of the specific support needed by a child with a medical condition and so extensive training may not be required. Key Teaching Assistants who provide support to students with medical conditions will be included in meetings where this is discussed, whenever possible.

- The relevant healthcare professional will be invited to lead on identifying and agreeing with Castledyke Primary School, the type and level of training required, and how this can be obtained. Castledyke Primary School may choose to arrange training themselves and will ensure this remains up-to-date. Training for professionals will be managed by the designated member of staff responsible for Individual Healthcare Plans.
- Training of staff should be sufficient to ensure that staff are competent and have confidence in their ability to support students 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.
- Castledyke Primary School staff must not undertake health care procedures without appropriate training (updated to reflect any individual healthcare plans). A First Aid certificate does not constitute appropriate training in supporting children with medical conditions.
- Castledyke Primary School's policy sets out arrangements for whole school awareness training so that all staff are aware of the school's policy for supporting students with medical conditions and their role in implementing that policy. Staff will be made aware of students' medical needs through whole school briefing procedures and and if necessary through specialist training if required.
- Induction arrangements for new staff should be included. The relevant healthcare professional will be invited to advise on training that will help ensure that all medical conditions affecting students in Castledyke Primary School are understood fully. This includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs.
- The family of a child will often be key in providing relevant information to staff about how their child's needs can be met, and parents or carers will be asked for their views.

## **8. Management of Medical Needs**

Castledyke Primary School recognises that primary school children are not able to independently manage their own health needs and medicines. Where medicines need to be administered, parents/carers complete the education form to give consent as well as dosage and frequency. If the child is deemed independent they will take medication themselves but always in the presence of an adult and medication will always be stored away from children.

Children will have access to their own inhalers, throughout the school day within their classroom first aid bags, though these will be administered by a member of staff to ensure they are administered correctly.

EpiPens, and any necessary diabetic devices are stored by an adult either in the main office or the classroom dependent on need. Where the IHCP deems that medication needs to be on the child's person at all times this will be kept in a small back pack on the child's person throughout the day.

Prior to administering prescription or non-prescription medicines, written parental consent must be obtained. Castledyke Primary School will only accept prescribed medicines if these are in-date, labelled, 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 still be in date, inside an insulin pen or pump, rather than its original container.

If a child refuses to take medicine or carry out a necessary procedure, school staff should not force them to do so, but follow the procedure agreed in the Individual Healthcare Plan. Parents or carers should be informed immediately. If a child is unmedicated when necessary, parents/ carers are expected to remedy the situation, otherwise, the child will be expected to return home- as they are deemed not medically fit to be on the premises.

## **9. Managing Medicines on School Premises**

Castledyke Primary School takes a clear stance on medicines that are brought onto the school site:

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so.
- No child under 16 should be given prescription or non-prescription medicines without their parent/ carer's written consent.
- A child under 16 should never be given medicine containing aspirin, unless prescribed by a Doctor or stated in the child's IHCP. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents and carers should be informed.
- Where clinically possible, medicines should be prescribed in dose frequencies which enable them to be taken outside school hours.
- The school will only accept prescribed medicines that are in-date, labelled, 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 still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container.
- All medicines should be stored safely. Children should know where their medicines are at all times and be able to access them immediately with support from an adult.
- Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens should be always readily available to children and not locked away. This is particularly important to consider when outside of school premises, e.g. on educational visits.
- Castledyke Primary School will keep controlled drugs that have been prescribed for a student securely stored in a non-portable container and only named staff will have access. Controlled drugs should be easily accessible in an emergency. The School office keeps a record of any doses used and the amount of the controlled drug held in school.
- Castledyke Primary School keeps a record of all medicines administered stating what, how and how much was administered, when and by whom. Any side effects of the medication to be administered at school should be noted.
- When no longer required, medicines should be returned to the parent or carer to arrange for safe disposal. Sharps boxes should always be used for the disposal of needles and other sharps.

## **10. Statutory Record Keeping in line with Government Guidance**

Written records are kept of all medicines self-administered by children. Records offer protection to staff and children and provide evidence that agreed procedures have been followed. Parents and carers should be informed if their child has been unwell at school.

## **11. Emergency Procedures**

Where a child has an Individual Healthcare Plan, this should clearly define what constitutes an emergency and explain what to do, including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other students in the school should know what to do in general terms, such as informing a teacher immediately if they think help is needed. The appointed person is responsible for the decision that 999 needs to be called. If a child needs to be taken to hospital, staff should stay with the child until the parent or carer arrives, or accompany a child taken to hospital by ambulance. In the event that school staff are required to accompany a child to hospital the Designated Safeguarding Lead (DSL) should be notified and the appropriate risk assessment undertaken before any eventuality arising. Schools need to ensure they understand the local emergency services cover arrangements and that the correct information is provided for navigation systems.

## **12. Managing Medical Needs Offsite**

Teachers and other school staff should be aware of how a child's medical condition will impact on their participation, but there should be enough flexibility for all children to participate according to their own abilities and with any reasonable adjustments.

Castledyke Primary School will make arrangements for the inclusion of students in such activities with any adjustments as required, unless evidence from a clinician, such as a GP, states that this is not possible.

Castledyke Primary School will consider what reasonable adjustments they might make to enable children with medical needs to participate fully and safely on visits. It is best practice to carry out a Risk Assessment so that planning arrangements take account of any steps needed to ensure that students with medical conditions are included. This will require consultation with parents or carers and students, and advice from the relevant healthcare professional to ensure that students can participate safely. Castledyke Primary School will also use the Health and Safety Executive (HSE) guidance on school trips.

## **13. Unacceptable Practice**

Although staff should use their discretion and judge each case individually with reference to the child's Individual Healthcare Plan, it 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 carers; 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;
- Penalise children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments;
- Prevent students from drinking, eating or taking toilet or other breaks whenever they need to, in order to manage their medical condition effectively;
- Require parents or carers, or otherwise make them feel obliged, to attend school to administer medication or provide medical support to their child. No parent should have to give up working because the school is failing to support their child's medical needs; or
- 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/carers to accompany the child.

#### 14. Liability and Indemnity

Castledyke Primary School will ensure that the appropriate level of insurance is in place and appropriately reflects the level of risk.

#### 15. Concerns or Complaints from Parents

Arrangements made by the Governing Body relating to treatment of concerns or complaints from parents or carers of pupils with medical needs concerning the provision made at the school, should in the first instance be directed to the SENCo. However, should a parent or carer feel that their complaint has not been dealt with satisfactorily by the SENCo, they have the right to refer the matter to the Head Teacher and Governing Body.

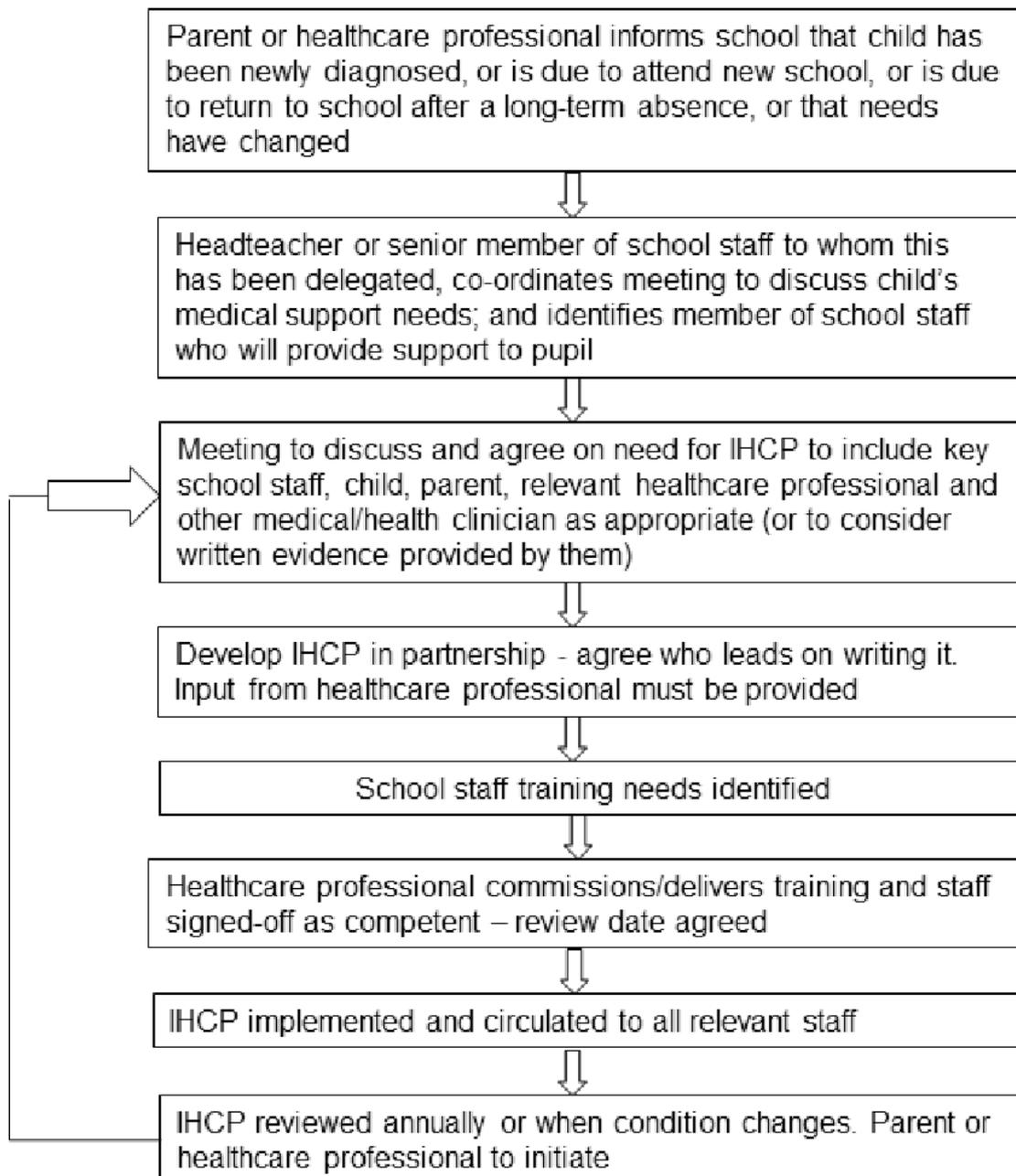
Additional support and advice can be accessed through SENDIASS.

#### 16. Reviewing the Policy

The Medical Needs policy will be reviewed annually.

<b>Signed:</b> _____ <b>Chair of Governors</b>	<b>Signed:</b> _____ <b>Head Teacher</b>
<b>Date:</b> _____	<b>Date:</b> _____

APPENDIX A



## **APPENDIX B**

### **Castledyke Primary School and SRP Intimate Care Policy**

#### **Introduction:**

Castledyke Primary School is committed to ensuring that all staff responsible for intimate care of children and young people will undertake their duties in a professional manner at all times.

Castledyke Primary School takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care.

The Governing Body recognises its duties and responsibilities in relation to the Equality Act 2010 which requires that any child with an impairment that affects his/her ability to carry out normal day-to-day activities must not be discriminated against.

We recognise that there is a need for children and young people to be treated with respect when intimate care is given.

No child shall be attended to in a way that causes distress, embarrassment or pain.

Staff will work in close partnership with parents and carers to share information and provide continuity of care.

#### **Definition:**

Intimate care is defined as any care which involves washing, touching or carrying out an invasive procedure that most children and young people carry out for themselves, but which some are unable to do. Disabled pupils may be unable to meet their own care needs for a variety of reasons and will require regular support.

#### **Our approach to best practice:**

- The management of all children with intimate care needs will be carefully planned.
- Staff who provide intimate care are trained to do so (including Child Protection, and Moving and Handling where appropriate) and fully aware of best practice.
- Where specialist equipment and facilities above that currently available in the school are required, every effort will be made to provide appropriate facilities in a timely fashion, following assessment by a Physiotherapist and/or Occupational Therapist.
- There is careful communication with any pupil who requires intimate care in line with their preferred means of communication to discuss needs and preferences.
- Staff will be supported to adapt their practice in relation to the needs of individual children taking into account developmental changes such as the onset of puberty and menstruation.
- Pupils will be supported to achieve the highest level of independence possible, according to their individual condition and abilities
- Individual intimate care plans will be drawn up for any pupil requiring regular intimate care.
- Careful consideration will be given to individual situations to determine how many adults should be present during intimate care procedures. Where possible one pupil will be cared for by one adult unless there is a sound reason for having more adults present. In such a case, the reasons will be documented.
- Intimate care arrangements will be discussed with parents/carers on a regular basis and recorded on the care plan.
- The needs and wishes of children and parents will be taken into account wherever possible, within the constraints of staffing and equal opportunities legislation.

- Where a care plan is not in place and a child has needed help with intimate care (in the case of a toilet 'accident') then parents/carers will be informed the same day. This information should be treated as confidential and communicated in person, via telephone, or when collected at the end of the day.

### **Child Protection:**

The Governors and staff of Castledyke Primary School recognise that disabled children are particularly vulnerable to all forms of abuse.

Child Protection and Multi-Agency Child Protection procedures will be adhered to at all times.

If a member of staff has any concerns about physical changes in a child's presentation (unexplained marks, bruises or soreness for example) s/he will immediately report concerns to the Designated Person for Child Protection.

If a child becomes distressed or unhappy about being cared for by a particular member of staff, the matter will be investigated at an appropriate level and outcomes recorded.

Parents/carers will be contacted at the earliest opportunity as part of the process of reaching a resolution. Further advice will be taken from partner agencies.

If a child makes an allegation about a member of staff this will be investigated in accordance with agreed procedures.

### **Responsibilities:**

#### **School:**

- Provide a clean and private environment to be changed in.
- Supported by empathetic staff.
- Staff to seek advice and act upon advice given from Health Professionals, where appropriate.
- To complete an Intimate Care Checklist, with parents/carers.
- To generate an Intimate Care plan, with parents/carers.

#### **Parents:**

- To support the school in promoting independence (when appropriate).
- To provide adequate supplies to school.
- To work alongside the school, to generate an Intimate Care plan.

This policy was adopted by the Governing Body on / /

It will be reviewed on / /