



Blenheim

Medical Needs including Intimate Care Policy

Committee: Community

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At Blenheim High School we believe that inclusion and equal opportunities for students with medical or intimate care needs are an entitlement and we believe that, as a school, we have the responsibility to create the conditions for each one of our students to access their education. As a school staff and Governing Body we will give regard to the required curriculum adjustments, necessary environmental aspects and desirable social support to minimise barriers for these most vulnerable members of our school community. We will foster a school community, which accepts others as they are and values the diversity of life. We have adopted the LA model policy and wherever possible will work in partnership with parents/carers to provide continuity of care for students. Where possible, students will always be encouraged to manage their own care plans.

This policy should be read in conjunction with the Safeguarding Policy.

Definitions

Medical Needs

During their time with us students may be affected by a wide range of medical needs. These needs include:

- Long term medical conditions: cystic fibrosis, epilepsy, diabetes, cerebral palsy
- Recurring medical conditions: CFS/ME, leukaemia
- Life threatening conditions: leukaemia, cystic fibrosis
- Operations, road accidents and sports injuries resulting in a period of recuperation
- Mental Health: mood disorders (including depression, anxiety disorders, obsessional compulsive disorders, eating disorders, self-harming behaviour, ADHD, psychotic disorder, tic disorders (including Tourette's syndrome)
- Effects of treatment for diagnosed medical conditions: steroids, chemotherapy, radiotherapy, medications affecting performance and behaviour e.g. psychotropic medication
- Infectious diseases: tuberculosis
- Degenerative conditions where deterioration in eyesight or physical mobility are expected: Duchenne Muscular Dystrophy

Intimate Care

Intimate Care encompasses areas of personal care that most pupils will carry out for themselves, but which some are unable to do for reasons of age, impairment or disability. Intimate care can normally be defined as any activity associated with care that involves bodily functions, body products and personal hygiene that demands direct or indirect contact with, or exposure of, the genitals. The principles of the Safeguarding Policy must be adhered to at all times.

Our Aim

~~We support the Surrey Local Authority aim as stated in the Education Development Plan II 2002-2007 and we will follow the principles of Safeguarding at all times:~~

~~The aim is~~ **To ensure that each student reaches his or her full potential and to secure the highest possible standards of attainment for all, through a broad and balanced school education which prepares students for the responsibilities and opportunities of adult life.**

As a school we are committed to providing students with medical needs with as much education as we are able and their condition allows in order to minimise disruption. Our emphasis is on the continuance of the learning process for those students with physical or mental health problems, including students with life threatening or terminal illnesses. The situations of the children/young people on roll vary widely but they all have the right to education suited to their age, ability, needs and health at the time. For students recovering from trauma or illness, a teacher can play a vital part in the recovery process because education is seen as a normal childhood activity.

Rights and Responsibilities of the Student

Students have the right to an education that helps them reach their potential and secure the attainments needed to pursue a career path and prepare them for full participation in adult life. They know that they have the right to an education in the community alongside those who they see as their peers and role models. They have a right to be consulted and they accept that they (or their parents on their behalf for younger students) will have to agree to co-operate with their negotiated personal education plan. They know that they will remain on roll at Blenheim High School while ever possible. They can expect flexible approaches, e.g. in timetabling, full use of Information and Communication Technology, and small steps or negotiated tasks toward their maximum involvement in school life.

Rights and Responsibilities of the School

We see it as our responsibility to keep the student on roll and work with their parent/carer to ensure access to education. At Blenheim the Pastoral Leaders co-ordinate the work for students with medical needs and will liaise with parents, our SENCO (where appropriate), and various agencies as part of ensuring that the student has full and continuous access to education. For a student whose need is not thought to be recurring and whose absence is likely to be less than 15 days, it is our responsibility to provide work to be done at home.

The named teachers for children with medical needs will

- Produce and co-ordinate the Personal Education Plan. This includes arranging, chairing, and recording planning meetings and re-integration meetings with associated services. For those on the Special Educational

Needs Code of Practice, the Special Educational Needs Co-ordinator (SENCO) will conduct review meetings in liaison with the named person. This plan may form part of an Individual Pathway Plan or Education Health and Care Plan

- Seek written parental permission to liaise with health and related services including Child and Adolescent Mental Health Services (CAMHS).
- Ensure that arrangements for exam entry fees and requests for concession are well planned in discussion with our SENCO and educational psychologist as to the student's need for special arrangements e.g. an alternate setting, extra time to allow for rest breaks.
- Liaise with the school's careers co-ordinator as appropriate.

For students out of school, we will aim to:

- Ensure that students who have an illness/diagnosis which indicates prolonged or recurring periods of absence from school, whether at home or in hospital, have access to education, so far as possible from day one.
- Ensure that half-termly work plans are made available to hospital or home teaching staff in the agreed National Curriculum subjects which the student would normally be studying and realistically can continue to study in light of their medical condition.
- Supply the hospital or home teaching staff with up to date information about the student including AH scores, reading levels, and code of practice details. This includes any current Individual Education Plans or Pastoral Support Programme.
- Where possible, offer a loan of appropriate resource materials to hospital or home teaching staff.
- Ensure prompt assessment of coursework
- Ensure that concessions for external exams are well planned with SENCO, Educational Psychologist and hospital teaching and home tutoring staff.

For students in need of intimate care we will aim to:

- Ensure that where intimate care is required, children should be autonomous as far as possible. Staff should encourage students to do as much for themselves as they can. Older students should always be spoken to in a way that always reflects their age.

Statemented students with medical needs/intimate care needs can expect our help in priority referral to the Surrey Pathways team to

- Have career interviews
- Investigate work experience placements
- Visit colleges on open days

As a school we have the right to expect the health network to fulfil their responsibility as part of facilitating continuous access to education for our students with medical needs. This may include advice or practical tasks to enable training of ancillary staff to carry out medical procedures.

As a school we have the right to expect the student and parent to abide by the home-school agreement and any agreements in individual plans.

Rights and Responsibilities of Parents/Carers

Each student's parents or carers have signed a home-school agreement and this is extended as needed. Parents may need frequent feedback on how their child's medical condition or medical treatment is impacting on the youngsters' day at school: academically, physically or socially. Parents may be asked to agree to adjust their parenting approaches or patterns in delicate situations involving mental health conditions. At all times parents are involved as much as is practical and their knowledge and instinct is given regard. Permission to liaise with outside agencies is always sought and recorded in writing. It is expected that parents will share relevant information in a timely way.

Parents and carers should be kept fully informed on a regular basis of all current school procedures that deals with their child's medical or intimate care. Where there is a care plan, their wishes and agreements should be recorded, along with the needs and wishes of the child. These should be carefully considered alongside any possible constraints, such as staffing or legislation with respect to equal opportunities.

Child Protection Issues

All staff providing intimate care should be fully aware of child protection issues and be aware that their behaviour is open to scrutiny. Since much intimate care often involves an adult touching the private parts of a pupil's body, there are consequent risks to both children and adults. While it is unrealistic to completely eliminate these risks, their importance should be acknowledged by the creation of an awareness of their importance to maximise safety for all concerned.

The most obvious will be that except in a life-threatening or emergency situation a male member of staff should not involve himself in the routine intimate care of girls. This will include bathing, changing and toileting and will apply whether a man is acting alone or with another male. This is particularly important when adolescent girls are involved.

Although this is not so much a problem for women, religious and cultural views of families must always be taken into account. For instance, for religious reasons some families might not consider it appropriate for a female member of staff to provide intimate care for a teenage boy. This further illustrates the need to have an open dialogue between parents and school. As a general rule, where possible, except with the very young, it is better that staff should work with children of the same sex when providing intimate care.

It is important that child protection procedures and inter-agency child protection procedures are accessible to all staff. Training should ensure that staff are familiar

with these procedures and that they are fully adhered to. If a member of staff has concerns about changes in a child's behaviour or physical changes on a child such as unexplained marks, bruises or soreness, these concerns should be reported to the appropriate authority in accordance with the procedures.

Surrey Children's Services

Educational Welfare

- If our school daily check of registers and prompt contact with parents or carers on the first day of absence raises any concern or worrying pattern, we will liaise immediately with relevant pastoral staff and the Education Welfare Officer (EWO), where appropriate.
- If we are made aware that a student is away or is likely to be away from school due to medical needs for more than 15 working days, we will notify our EWO.

Behaviour and Student Support (BPS)

- Advice: BPS teachers have specialist knowledge of medical conditions and the effect of illness on the development and progress of children and young people.
- Teaching: Teaching can be at home, at hospital, within school as a staged return, any other agreed venue, e.g. PRUs or a combination of these. Teaching can be individual or in groups. Children generally do better educationally and socially when taught in groups; this may also help re-integration into school.
 - Students absent from school for 15 days or more should receive a minimum of five hours' teaching per week.
 - Students known to be chronically sick should receive teaching from day five of absence, for a minimum of 5 hours per week (with medical confirmation).
 - Students admitted to hospital receive teaching from day 5 for a minimum of five hours per week.
 - Students with a recurrent hospital admission have teaching from day one, providing the child's medical condition can tolerate the teaching on offer. The teaching support in hospital is for a minimum of 5 hours per week.

Educational Psychology The advice of our educational psychologist is sought as to the psychological effects or impact an illness may have on the learning task or expected progress through the work schemes.

Social Services

- The Assessment Team, Children's Team and Family Centre should join with our school in promoting the welfare of children and young people known jointly to us. This includes '~~Children in Care~~' '[Looked After Children](#)' of the LA

- The role of foster carers and residential social workers in loco parentis during the formulation of the Personal Education Plan (PEP) is vital.

Related Agencies

Health Services

- We use our school nurse where available and school doctor where available as the first point of advice and referral unless there is on-going liaison with other health practitioners due to previous involvement. This could be for a student with a statement of special educational need, or Education, Health and Care Plan. Also, a student who is on the SEND register requiring additional support within the Special Educational Needs Code of Practice or a student with a Pastoral Support Plan, where the parent has already given written permission for the exchange of information.
- Child and Adolescent Mental health Services (CAMHS). We use the professional's advisory telephone with the 24 hour call back service for our first point of contact. The number is available from our SENCO and Pastoral teams. If the advice suggests a referral should be made, we discuss the referral with the family and obtain their agreement and consent.

Surrey Pathways Team (Careers Guidance)

The Surrey Pathways Team will provide a personal adviser to help prepare students with Statements or Education and Health Care Plans, for their next step in education and work while overcoming any medical barriers to full participation. The expert advice and guidance will be especially important to have at the earliest opportunity for our students with medical needs.

School Ownership

The school may hold a meeting to establish reintegration objectives for a student as soon as it is appropriate.

Partnership/Collaboration

The school will seek to establish working relationships with agencies, always including the parent and young person where appropriate.

Flexibility

The school will adjust timetables to meet the challenging medical needs of the student during reintegration.

Responsiveness

The school may use ICT strategies to meet individual curriculum needs and ensure parents/carers are provided with adequate information.

Clarity

The school will ensure the roles and responsibilities of those involved are clearly outlined and recorded. The use of a Personal Education Plan (PEP) will be used where appropriate.

Governors

Governors will monitor the effectiveness of this Policy in conjunction with Child Protection and the Link Governor will report to the full Governing Body.

Appendix

Personal Education Plan / Medical Needs

Appendix 1

PERSONAL EDUCATION PLAN

CHILDREN WITH MEDICAL NEEDS/INTIMATE CARE NEEDS

Student Name	DOB	NC YEAR
Parent/Carer	Tel	
Any other current plans, IEP, BSP, PSP, LAC		
Summary of Medical Needs/Intimate Care Needs		
Area where student will experience difficulty		
Attendance in the last 6 months:		
Date of Planning Meeting:	Review Date:	
Network meeting	Present/Apologies	
Designated School Co-ordinator		

Other school representatives:

Student
Parent/Carer
Services/Agencies
EWO
Behaviour Support
Social Services
EP
Health
Surrey Pathways (Careers)
Other

Agreed targets for this term:

Strategies for this term as agreed with services, agencies, parent and student

Review date

Tick below if attended:

Review participants
Designated School Co-ordinator
Other school representatives
Student
Parent/Carer
Services/Agencies
EWO
Behaviour Support
Social Services
EP
Health
Surrey Pathways (Careers)
Other