



Supporting Pupils with Medical Needs

Drafted by: Welfare Officer

Approved by Governors on: July 2017

Review date: To be determined by Headteacher/Governing Body

Person (position, not name) to perform review: Welfare Officer.

This policy should be read in conjunction with all other policies and not as a standalone policy.

N. B. Reference should also be made to the:

- London Borough of Ealing: *Guidelines and Code of Practice on the Administration of Medicines in Schools*
- Department for Education: Supporting pupils at school with medical conditions

INTRODUCTION

There are five types of medical treatment likely to be required in school:-

1. Minor ailments
2. Emergency¹
3. Short term illnesses/conditions requiring medication that must be administered within school hours.
4. Long term illnesses/conditions requiring medication that must be administered within school hours.
5. Students who have conditions that can, often without warning, require swift emergency medication².

Whilst parents are responsible for their child's medication (i.e. ensuring that it is correct and in date), it is the Headteacher who decides if a school can assist a student who needs medication during the school day.

To ensure that risks to health are minimised it is essential for schools to establish safe systems.

- It is recognised that school staff have legitimate concerns over their legal position in administering medicines.
- There is no legal duty that requires school staff to administer medication. Contractually, staff cannot be forced to administer medicines but they are under a duty to obey reasonable instructions, taking into account the circumstances, the nature of the drugs concerned, and their personal expertise.
- In the event of an emergency, Staff should be aware that the consequences of taking no action are likely to be more serious than those of trying to assist.

GENERAL INFORMATION

The school will display the name of the Welfare Officer (if any) and that of authorised First Aiders in the School Office.

As stated in the Health and Safety Policy, there will be a qualified First Aider available at all times when pupils are in school (H & S Policy: Implementation, point 3)

¹ As there is such a wide variety of possible emergencies, this policy will not name any as the priority is for professional emergency treatment at this time.

² See note above.



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In addition to the Medical Room, first aid kits are to be found in the following locations:

- Reception
- Technology
- Science
- PE Office
- VI Form/Parish Centre

The school will ensure that students know what to do in the event of an emergency, e.g. tell a member of staff that another student needs assistance.

EMERGENCY PROCEDURES (See H & S Policy Appendix 2: First Aid)

- All staff should be aware of who is responsible for carrying out the appropriate emergency procedures in school.
- Reception should be advised of the need to call for an ambulance, however, it may be necessary for a staff member to make the call direct. This is a matter of judgement on the part of the staff member.
- If an ambulance is required, it should be summoned immediately, preferably while someone else administers any first aid procedures that may be required. To assist the ambulance service, and avoid delay, the caller must give as much information as possible. (See the form in *Appendix 1*)
- If a medical emergency arises, parents/carers should be informed as soon as possible.
- A student taken to hospital by ambulance should be accompanied by a member of staff who should remain until the student's parents/carers arrive. Staff should not take students to hospital in their own car.
- When a student has an accident that requires hospital treatment, a letter with the student's name, address, doctor's name, details of the accident and the student's condition must be given to the hospital.
- In the event of an accident, the incident will be logged to the local council via the online incident form. All previous incident forms can be found online.
- If no teacher had responsibility at the time of the accident, the School Welfare Officer, attending First Aider, or SLT member responsible at the time completes the online form.

MEDICATION – IMPLEMENTATION OF POLICY

The Headteacher is responsible for implementing the school's policy on medication and drawing up relevant procedures for the staff to follow. No staff member has any obligation to administer medication, however, they may volunteer to undertake this duty, as long as they are appropriately trained. It is the responsibility of the Headteacher to arrange for appropriate training in different procedures. (See *Appendix 2*)

It is good practice to allow students, who can be trusted to do so, to manage their own medication. This will depend on their degree of maturity. This should be considered in agreement with parents/carers and written parental consent will be needed. Staff should supervise students who administer their own medication, and the guidance for the storage of medication must still be followed.

If students refuse to take their medication, school staff should not force them to do



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so. Parents/carers should be contacted immediately and, if necessary, the school should call the emergency services.

If a student appears to have not taken his/her medication before arriving at school, staff should contact the parents/carers and ascertain whether this is the case. School staff cannot administer additional medication unless parents/carers confirm that their child has not had their home dosage.

Students who require regular medication should, if possible, have an Individual Health Care Plan (IHCP) drawn up before they start school, in liaison with the school welfare staff. (See Appendix 2 and the section on IHCPs in this document)

In some cases children require unusual administrations of medicine, for example, injections. Such cases need to be considered individually. In all cases proper training via the health service must be obtained before a school accepts a commitment of this kind. Sometimes a treatment can be classed as intimate or invasive. In such a case staff may need to carry out such treatment working in pairs (refer to section on intimate care).

CONFIDENTIALITY

The school will endeavour to maintain confidentiality concerning the medical needs of students, however, in the interests of safety some medical information relating to a student's condition and treatment may need to be made available to school staff. This will need to be discussed at the meeting convened to arrange an Individual Health Care Plan.

Sometimes it will be appropriate for a photograph to be kept with the student's Individual Health Care Plan. Normally these will be displayed in areas where students have restricted access, e.g. staffroom/school office. This will be discussed with parents/carers/students as appropriate.

ADMINISTERING MEDICATION

Schools have a duty, acting *in loco parentis*, to take reasonable care of children and this includes the possibility of administering medicine. (In this document the word "medicine" is used to include "medicines and prescribed drugs", the term "medication" is used to refer to a person's particular dose of medicine and the term "administration" means the acts involved in giving or applying the dose of medicine).

Coordinating and sharing information on an individual pupil with medical needs can be difficult. The Headteacher will decide which member of staff has specific responsibility for this role. This person can be a first contact for parents and staff, and liaise with external agencies. Members of staff with this role should attend training on managing medicines and drawing up policies on medicines. (Local Authorities Regional Consortia and others provide such training.)

Legally, it is not possible to disclaim liability for any serious adverse consequences of administering medicines in schools. In practice, any claim would lie against the employer.

No member of staff should be asked to administer medicines unless s/he has received appropriate training and guidance. **S/he should also be aware of possible side effects of the medication and what to do if they occur.** For the more



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commonplace medicines, appropriate training should entail familiarisation with the LBE Guidelines.

RECORD KEEPING

Administration of medication in the school requires careful record keeping.

Records must be kept for the following:-

- Medication (prescribed and non-prescribed) administered or supervised (See *Appendix 5*)
- Individual Health Care Plan (See *Appendix 3*)
- Notification from parents/carers giving consent regarding medication issued. (See *Appendix 6*)

RECORDS

- Careful records of medication and administration must be kept in order to avoid the risk of double dosing.
- All records referred to in this policy will be kept for a period of ten years (as legal action may be brought at any time up to the age of 21).
- Records concerning IHCPs should be transferred with the student to any subsequent schools.
- Parents/carers are responsible for supplying information about the medication that their child needs to take at school and for letting the school know of any changes to the prescription or the support needed. The school will only accept written information from the family's doctor and a copy of this document must be kept with the medication. (See *Appendix 6* for the Authorisation Form). This should provide details of the:-
 - Name of the medication
 - Dosage
 - Method of administration
 - Time and frequency of administration
 - Other treatment (if appropriate)
 - Side effects – if any
 - Expiry date of the medication

SHORT TERM MEDICAL NEEDS/CONDITIONS

If a student has been prescribed short-term medication for an illness and the medication cannot be taken entirely outside of school, an Authorisation Form needs to be completed by parents/carers, as long as the student is fit enough to return to school. (See *Appendix 6*)

LONG TERM MEDICAL NEEDS / CONDITIONS

Medical needs and conditions can present a significant barrier to participation and achievement and this policy is designed to help Cardinal Wiseman Catholic School to identify and address those barriers and thereby contribute to the promotion of inclusion for our students.

It is also designed to establish effective management systems in order to support individual students with medical needs.

Any student with significant medical needs should have an individual Health Care Plan



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(IHCP). (See *Appendix 3*)

Parents/carers will have to complete an Authorisation Form giving consent for medication to be administered. (See *Appendix 6*)

It is important that responsibility for students' safety is clearly defined and that each person involved with a student with medical needs is aware of what is expected of them. Close co-operation between school, parents/carers, health professionals and other agencies is crucial in order to provide a suitably supportive environment for students with medical needs to enable them to participate in school activities.

PARENTS AND CARERS:-

- Must provide current contact details and ensure they or a nominated adult are contactable at all times
- Are responsible for making sure that their child attends school when well enough to do so.
- Should provide the school with sufficient and up to date information about their child's health care needs, special dietary requirements and treatment.
- Should collaborate with health professionals and the school to enable an individual health care plan to be drawn up.
- Should carry out any action they have agreed to as part of their child's Individual healthcare plan e.g. provide medicine and equipment and ensure they or another nominated adult are contactable at all times.
- Must ensure that any required medication is available in school with its original pharmacy label.
- Must ensure that any required medication is in date.
- Must provide written consent to medication being given by school staff. (See *Appendix 6* for the Authorisation Form)

THE SCHOOL

Day to day decisions about health care needs and administering medication will normally fall to the Headteacher or designated responsible person who should:-

- ensure staff who help students with their health care needs (including administration of medication) receive proper support and training when necessary.
- make sure that all parents/carers are aware of the school's policy and procedures for dealing with health care needs.
- consult with the relevant health professional regarding decisions relating to the attendance of students with communicable diseases.
- be responsible for developing and implementing the school's medical policy and for developing detailed administrative procedures for meeting the health care needs of the students. This must include thorough documentation of any medication that is administered to a student.
- ensure appropriate safe storage is available for medication.
- ensure that emergency medication such as asthma inhalers or epipens are immediately accessible.
- agree with the parents/carers exactly what support the school can provide for a student with health care needs. *Where there is a concern about whether the school can meet a student's needs, or where the parents' expectations appear*



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unreasonable, the Headteacher can seek advice from the school's (or other medical advisor) and, if appropriate, the LEA, through the London Borough of Ealing Children's Trust. It is likely that staff who volunteer to care for complex health care needs will require to have special training.

- inform with the school's catering provider regarding any special dietary requirement resulting from a medical condition as identified in the Individual Health Care Plan.
- let staff know about the provision for indemnity against legal liability made for all staff who volunteer to administer medication, and that the necessary training will be arranged.

SCHOOL STAFF:-

- have a duty of care to all students.
- are expected to use their best endeavours and should particularly be made aware of appropriate actions in an emergency situation. These may be different for each student and should be communicated to all staff who may have contact with the student.
- may wish to volunteer to administer medication.
- should have proper training and guidance if they volunteer to administer medicines.
- Staff must check the expiry date to ensure medication is in date before administration of the medicine.
- should contribute to risk assessments as appropriate.

STUDENTS:-

- should be involved (as appropriate) in the drawing up of their own Individual Health Care Plan.
- students can transport their medication if they have the mental and physical capacity to do so and if agreed between the parent/carer and the school.
- should, if responsible for transporting medication, hand it directly to the appropriate member of school staff, for safe storage.
- Should not carry medication on them, this should be handed to the medical room or an appropriate member of staff
- make themselves available, as required, to take their medication.
- inform a member of staff if feeling unwell.

HOW MEDICATION COMES INTO SCHOOL

It is the responsibility of the parent/carer to ensure that the school is aware of any significant medical needs of their child.

- Parents/carers should bring the medication into school in the containers supplied from the pharmacist, labelled with the student's name, the dosage instructions and the expiry date of the medication. If the medication is not labelled in this way it should not be administered and parents/carers should be contacted immediately in order to rectify this. **The school will not accept medicines that have been taken out of the container as originally dispensed nor make changes to dosages on parental instructions.**
- Staff need to be clear about the school's procedures for the storage of medication.
- Supplies of regular essential medication should be kept in school at all times, and parents may need to obtain extra supplies to accommodate this.



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- Parents/carers will need to sign a consent form available from the school stating clearly the type of medication, dosage, and times. This should be kept in the medical room.
- Parents/carers need to know they have a responsibility to notify the school immediately of any change to their child's medication, dosage, or timing. If new medication is brought into school with different dosage or times, a new consent form will need to be completed by the parent/carer.
- Parents/carers need to notify the school if their child's medication goes out of date and replenish if need be
- If a student is prescribed medication on a medium or long-term basis (i.e. for longer than one week), it is anticipated that parents/carers will request an additional set of the prescribed medication with printed advice from the pharmacist/GP and any other relevant information regarding administration of the medicine, to provide to an appropriate member of staff. Parents/carers will be asked to complete the school's Medical Authorisation Form (see *Appendix 6*).
- Parents/carers of students prescribed medication for less than one week that has to be administered in school hours should contact school and advise them that their child will require the administration of the medication. They should then arrange with school to deliver the medication and supply printed advice from the pharmacist/GP, and any other relevant information regarding administration of the medication, to an appropriate member of staff. Parents/carers will be asked to complete the school's form for the Administration of Medicine (see *Appendix 6*).

SCHOOL TRIPS/EDUCATIONAL VISITS

- Staff supervising excursions should always be aware of any medical needs and relevant emergency procedures and should be appropriately trained.
- Sometimes additional safety measures may need to be taken for outside visits. It may be that an additional supervisor, or another staff member might be needed to accompany a particular student. Arrangements for taking any necessary medicines will also need to be taken into consideration.
- Staff supervising excursions should always be aware of any medical needs, and relevant emergency procedures. A copy of any health care plans should be taken on visits in the event of the information being needed in an emergency.
- If staff are concerned about whether they can provide for a student's safety, or the safety of other children on a visit, they should seek parental views and medical advice from the school health service or the child's GP. See DfE guidance on planning educational visits.

STORAGE OF, AND ACCESS TO, MEDICATION

- All medication should be stored safely, preferably in a secure place specifically designated for that purpose. This storage place should not be accessible to students and should be in an area supervised by staff.
- Care should be taken to store medication at the correct temperature. Some medication will need to be refrigerated, this may be kept in a refrigerator containing food, however, it must be in an airtight container and clearly labelled.
- If medication is kept safely locked away, all staff should know where to obtain the keys in case of an emergency.
- Emergency medication and regular daily medication should be carried out in a



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safe manner by staff whenever the student is taken out of school e.g. on an educational visit. When medication is taken out of school, it should be signed for by the responsible member of staff and signed back in on return to school.

- Each time medication is given to a student, there must be a written record signed by the member of staff who administered the medication. (See *Appendix 5*) It is good practice to have a second member of staff witness the administration of medication, however this will not always be possible.
- Careful checks must be kept of expiry dates of all medication.
- Some students will need immediate access to their own medication for conditions such as asthma and therefore will be able to carry their own inhalers, dependent on their age and maturity.
- Medication containing aspirin will not be administered to pupils unless prescribed by a medical professional.

PRESCRIBED MEDICATION

Prescribed medication may only be given to a student if all the procedures above are completed. If a student has been prescribed short-term medication for an illness and the medication cannot be taken entirely outside of school, an authorisation form needs to be completed by parents/carers, as long as the student is fit enough to return to school.

It is the responsibility of the parent/carer to ensure that medication is within date and to collect and dispose of any unwanted and/ or expired medications.

NON-PRESCRIBED MEDICATION OR ALTERNATIVE REMEDIES

Some students may occasionally benefit from receiving non-prescribed medication, or alternative remedies, however, these may only be given with the written permission of parents/carers requesting that school staff do this under particular circumstances. This medication must be supplied by the parents/carers in a clearly labelled container as for prescribed medications, and should be stored as other medicines.

EMERGENCY ASTHMA INHALER

The school is equipped with an Emergency asthma inhaler. Known asthmatic pupils have access to the school's emergency asthma inhaler once written consent has been provided by parents/carers. The emergency asthma inhaler can be used in the event of a pupil displaying symptoms of asthma and if their inhaler is not available or is unusable. A record of usage will be kept by school staff.

DISPOSAL OF OUT OF DATE / UNNECESSARY MEDICATION

Medication should be checked regularly for expiry dates. Any out-of-date medication, or any which is not necessary for the student any longer must be returned to parents/carers or disposed of with parents/carers consent. If contact with parents has been unsuccessful then staff to dispose of expired medication unless specified by parents/carers.

DISPOSAL OF MEDICAL AND ROUTINE WASTE

Medical waste including sharps:

- All medical waste must be disposed of in a yellow/orange Clinical Waste Disposal Bag. Sharps boxes should always be used for the disposal of needles. Sharps boxes can be obtained by parents on prescription from the student's GP



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or paediatrician. Collection and disposal of the boxes should be arranged with the Local Authority's environmental services.

Routine waste (e.g. gloves, wipes etc.)

- This type of waste needs to be double-bagged so it should be placed in a plastic bag which should then be securely fastened.
- This bag should then be placed in a bin liner which is tied tightly at the top before being disposed of.

HYGIENE AND INFECTION CONTROL

All staff should be familiar with normal precautions for avoiding infection and follow basic hygiene procedures. Staff should have access to protective disposable gloves and take care when dealing with spillages of blood or other body fluids and disposing of dressings or equipment.

INTIMATE CARE

Intimate care can be defined as:-

1. Any care which involves washing, touching or carrying out a procedure to intimate personal areas which most people usually carry out themselves. Some students are unable to do this because of their 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. Help may also be needed with changing colostomy bags and other such equipment. It may also require the administration of invasive medication.
2. The supervision of children involved in intimate self-care.

The issue of intimate care is a sensitive one and will require staff to be respectful of the student's needs. The student's dignity should always be preserved with a high level of privacy, choice and control. There must be a high awareness of child protection issues. Staff behaviour must be open to scrutiny and staff must work in partnership with parents/carers to provide continuity of care to children/young people. As an additional safeguard, staff involved in meeting intimate care needs will not usually be involved with the delivery of sex education to the same children, wherever possible.

Students who require regular assistance with intimate care will have written Individual Health Care Plans. (See *Appendix 3*)

Wherever possible the same student will not be cared for by the same adult on a regular basis. Ideally there will be a rota of carers known to the student who will take turns in providing care. This will ensure, as far as possible, that over-familiar relationships are discouraged from developing, whilst at the same time guarding against the care being carried out by a succession of completely different people.

Wherever possible staff should only care intimately for an individual of the same sex. It is not always practical for two members of staff to assist with an intimate procedure and also this does not take account of the child's privacy. It is advisable, however, for a member of staff to inform another adult when they are going to assist a child with intimate care.



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All staff should be aware of the need for confidentiality. Sensitive information will be shared only with those who need to know.

Communication Regarding Intimate Care

Authorisation Form - Permission must be sought from the parent/carer before any form of Intimate Care can be undertaken. (See *Appendix 7*) All those staff working with the child or young person should know that permission has been given before undertaking any Intimate Care.

Communication of Intimate Care information to Parent/Carer

Information on sensitive issues such as Intimate Care will be communicated by telephone, sealed letter or personal contact, as appropriate.

INDIVIDUAL HEALTH CARE PLANS (See *Appendix 3*)

The main purpose of an Individual Health Care Plan (IHCP) for a student with medical needs is to identify what intervention and support is required in school. It clarifies for staff, parents, and the student, anything that the school can expect to provide and receive. It addresses the individual needs of a student.

For a student with medical needs, the school will need to agree with the parents exactly what support can be provided. Where parents'/carers' expectations appear unreasonable, *the Headteacher can seek advice from the school's (or other medical advisor) and, if appropriate, the LA.*

The school's Medical Policy must be applied in all cases. School staff must not make judgements regarding medication and should follow the directions on the medication label.

Contributors to an IHCP may include the following:-

- Headteacher
- Parent/carer
- Family practitioner or other medical personnel
- Student as appropriate
- School Welfare Officer
- SENCO
- Class Teacher/Tutor/Head of Year
- Support staff

The plan should include how frequently, and by whom, it should be reviewed. This should occur at least once a year, although this may be more frequently if appropriate, unless advised differently by a healthcare professional

An IHCP may identify additional training and/or information required by staff. The School Welfare Officer is well placed either to provide, or to co-ordinate such training. The School Welfare Officer should be available for advice, support and co-ordination of care in relation to children with special needs.

All staff should treat medical information confidentially. The extent to which information can be shared across agencies, for the benefit of the student should be agreed with the parent/carer and student (as appropriate).

Staff should not be held responsible if they give incorrect medical assistance when

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appropriate information has been withheld from the school.

Staff with student(s) with medical needs in their class or group, should be informed about the nature of the condition, and when and where the student(s) may need extra attention. The student's parents and health professionals should provide this information.

All staff should be aware of the likelihood of an emergency arising and what action to take if one occurs. Back up cover should be arranged for when the member of staff responsible is absent or unavailable. At different times of the day other staff may be responsible for children, such as lunchtime supervisors. It is important that they are also provided with training and advice.



Appendix 1

Contacting Emergency Services

Speak clearly and slowly and be ready to repeat information if asked

Request for an Ambulance	
	<i>Dial 999, ask for ambulance and be ready with the following information</i>
1	Your telephone number
2	Give your location as follows
3	State that the postcode is
4	Give exact location in the school/setting
5	Give your name
6	Give name of student and a brief description of student's symptoms
7	Inform Ambulance control of the best entrance and state that the crew will be met and taken to



Appendix 2

STAFF TRAINING RECORD - ADMINISTRATION OF MEDICINES

Example of form for recording medical training of staff.

Name:

Type of training received:

Date training completed:

Training provided by:

I confirm that has received the training detailed above and is competent to carry out any necessary treatment.

Trainer's signature: Date:

I confirm that I have received the training detailed above.

Staff signature: Date:

Suggested Review Date:



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Appendix 3

Name _____

Date of Birth _____

Condition _____

Class _____

Date

Name of School _____

Review Date

PHOTO

CONTACT INFORMATION

Family Contact 1

Name _____

Phone No. (Work) _____

(Home) _____

Relationship _____

Email _____

Family Contact 2

Name _____

Phone No. (Work) _____

(Home) _____

Relationship _____

Email _____

Clinic/Hospital Contact

Name _____

Phone No. _____

Phone No. _____

G.P.

Name _____

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Plan developed with

Describe medical needs and give details of pupil's individual symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

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: (e.g. before sport/at lunchtime)

Who is responsible for providing support in school



Arrangements for school visits/trips etc

Describe what constitutes an emergency for the pupil, and the action to take if this occurs:

Who is responsible in an Emergency: (State if different on off-site activities)

Other information

Follow up care: (e.g parents to update of any incidents occurring outside of school hours, changes in medication etc)



Staff training needed/undertaken – who, what, when

Form copied to:

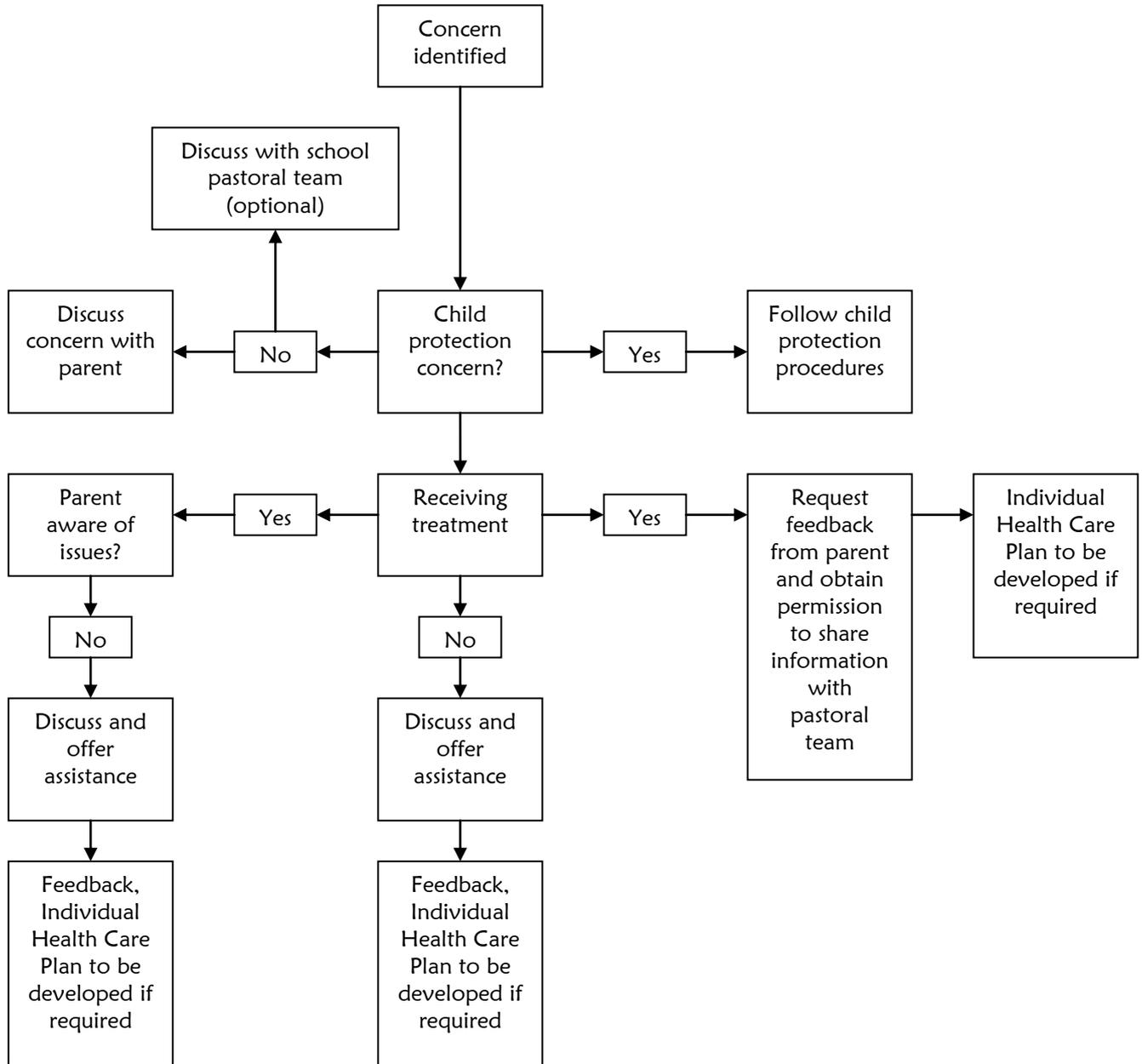




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Appendix 4

Process Chart: What to do if there are concerns about a student





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Appendix 5 Record of Medication given to a pupil

Name & Tutor Group:

Medication Name:

Direction/route of use:

Condition for which medication is administered:

Strength of Medication:

Quantity received:

Form of Medication:
Expiry date:

Circle: Returned/Disposed/Used
Date:

Date & Time	Quantity taken	Side Effects/Condition if different from above	Sign

Date & Time	Quantity taken	Side Effects/Condition if different from above	Sign



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Appendix 6 Medication Authorisation Form

To the Parent or Carer: The school will not give your child medication unless you:-

- I. Complete and sign this form.
- and**
- II. The Headteacher has agreed that the school staff can administer the medication.

To the Headteacher: Mr Kiely School: Cardinal Wieman School

I will ensure that any medication to be used in school is not date expired.

Administration of prescribed medication

Please arrange for the medication to be administered to:

Details Of Student:

Name:
Year and Tutor:

Condition/illness:

MEDICATION

Name/Type of Medication (as described on the container)

Full Directions for use:

Dosage and method:

Timing:

Special Precautions:

Side Effects:

Self Administration: YES / NO (Please delete as appropriate)

Procedure to be taken in an emergency:

Contact Details:

Name of Parent/carer:

Relationship to pupil:

Daytime Tel: No.



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Signature(s):

Date:

I understand that I must deliver the medication personally to the Medical Room and accept that this is a service which the school is not obliged to undertake.

I am unable to deliver medication personally and therefore give consent for my child to deliver the medication to the Medical



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Appendix 7

Intimate Care Authorisation Form

Permission for Cardinal Wiseman Catholic School to provide intimate care

Student's name:.....

Year/TutorGroup:.....

Parent/Carer name(s):.....

Address:.....

Phone number:

I/We give permission for school to provide intimate care to my/our child.
(Please specify the type of care needed.)

I//We understand the above procedures that will be carried out and will contact the school immediately if there are any concerns.

I/We will advise the school of anything that may affect issues of personal care (e.g.if medication is changed, or my child has an infection)

Signature:.....

Name:.....

Relationship to child:.....



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Date:..... Review Date:

To be reviewed by:

Appendix 8: Parental Consent Form - IHCP

Date:

Dear Parents/Guardians of _____ ,

Re: Individual Health Care Plan

Pupil:

As your child has a Health Care Plan, it may be necessary to share the plan or information from the plan with school staff. As this will help them understand and support your child more effectively during the school day, after school activities and school trips.

In signing this document you are agreeing to your child's Health Care Plan to be shared amongst school staff as deemed appropriate by the school.

Parents/Carers name: _____

Parent/Carers signature: _____

Date: