



ACLET CLOSE NURSERY SCHOOL

**POLICY FOR SUPPORTING PUPILS IN SCHOOL
WITH MEDICAL CONDITIONS
AND ADMINISTERING MEDICATION**

Reviewed: December 2025

Next review: December 2026

Aclet Close Nursery school is an inclusive community that welcomes and supports pupils with medical conditions. We aim to ensure that pupils with medical conditions receive appropriate

care and support at school. All pupils have an entitlement to a full time curriculum, or as much as their medical condition allows.

This policy has been developed in line with the Department for Education's statutory guidance released in April 2014 and updated in 2017 – 'Supporting pupils at school with medical conditions' under a statutory duty from section 100 of the Children and Families Act 2014.

The school will have regard to the statutory guidance issued. We take account of it; carefully consider it and make all efforts to comply. We provide all pupils with any medical condition the same opportunities as others at school.

We will help to ensure they can:

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution
- Achieve economic well-being once they leave school

The school makes sure that all staff understand their duty of care to children and young people in the event of an emergency.

All staff feel confident in knowing what to do in an emergency.

The school understands that certain medical conditions are debilitating and potentially life threatening, particularly if poorly managed or misunderstood.

All staff understand the medical conditions that affect pupils at this school.

The named school staff responsible for this medical conditions policy and its implementation are Mrs Lisa Jenkins and Mrs Staines, Co-Head Teachers.

Policy framework

This school is an inclusive community that supports and welcomes pupils with medical conditions.

- The school is welcoming and supportive of pupils with medical conditions. It provides children with medical conditions with the same opportunities and access to activities (both school based and out of school) as other pupils. No child will be denied admission or prevented from taking up a place in this school because arrangements for their medical condition have not been met.
- The school will listen to the views of pupils and parents.

- Pupils and parents feel confident in the care they receive from this school and the level of that care meets their needs.
- Staff understand the medical conditions of pupils at this school and that they may be serious, adversely affect a child's quality of life and impact on their ability to learn.
- All staff understand their duty of care to children and young people and know what to do in the event of an emergency.
- The whole school and local health community understand and support the medical conditions policy.
- The school understands that all children with the same medical condition will not have the same needs.
- The school recognises that duties in the Children and Families Act and Equality Acts relate to children with a disability or medical conditions.

The school's medical condition policy is drawn up in consultation with a wide range of local stakeholders within both the school and health settings.

- Stakeholders include pupils, parents, school staff, Governors and relevant health services and supporting organisations.

The medical conditions policy is supported by a clear communication plan for staff, parents and other key stakeholders to ensure its full implementation.

- Pupils, parents, relevant local healthcare staff, and other external stakeholders are informed of and reminded about the medical conditions policy through clear communication channels.

All children with a medical condition should have an individual healthcare plan (IHP).

- The IHP details what care a child needs in school, when they need it and who is going to give it.
- The IHP will include information on the impact any health condition may have on a child's learning, behaviour or classroom performance.
- The IHP will be drawn up with input from the parent/carer, relevant school staff and healthcare professionals, ideally a specialist if the child has one.
- The school use templates based on the Department for Education's 'Supporting Pupils with Medical Conditions' document.

All staff understand and are trained in what to do in an emergency for children with medical conditions at this school.

- All school staff are aware of the medical conditions at this school and understand their duty of care to pupils in an emergency.
- All staff are informed about what to do in an emergency and this is refreshed, when needed.
- A child's IHP explains what help they need in an emergency.

All staff understand and are trained in the school's emergency procedures.

- All staff know what action to take in an emergency and receive updates, when needed.
- If a pupil needs to attend hospital, a member of staff (preferably known to the pupil) will stay with them until a parent arrives, or accompany a child taken to hospital by ambulance. They will not take pupils to hospital in their own car.

The school has clear guidance about record keeping.

- Parents at this school are asked if their child has any medical conditions on the enrolment form.
- The school uses an IHP to record the support an individual pupil needs around their medical condition. The IHP is developed with the parent, school staff, specialist nurse (where appropriate) and relevant healthcare staff.
- The school has a centralised register (folder) of IHP which is kept in the office.
- IHPs are regularly reviewed annually or whenever the child's needs change.
- Other school staff are made aware of and have access to the IHP for the pupils in their care.
- The school seeks permission from parents before sharing any medical information with any other party.
- The school keeps an accurate record of all medication administered including the dose, time, date, supervising staff and witness.
- The school makes sure that all staff providing support to a pupil and other relevant teams have received suitable training and ongoing support, to make sure that they have the confidence to provide the necessary support and that they fulfil the requirements set out in the pupil's IHP. This should be provided by the specialist nurse/health visitor/other suitably qualified healthcare professional and/or parent. The specialist nurse/health visitor/other suitably qualified healthcare professional will confirm their competence, and the school keeps an up to date record of all training undertaken and by whom.

The school ensures that the whole school environment is inclusive and favourable to pupils with medical conditions. This includes the physical environment as well as social, sporting and educational activities.

- The school is committed to providing a physical environment accessible to pupils with medical conditions and pupils are consulted to ensure this accessibility. The school is also committed to an accessible physical environment for out of school activities.
- The school makes sure the needs of pupils with medical conditions are adequately considered to ensure their involvement in structured and unstructured activities and extended school activities.
- All staff are aware of the potential social problems that pupils with medical conditions may experience and use this knowledge, alongside the school's positive behaviour policy, to help prevent and deal with any problems. They use key group activities to raise awareness of medical conditions to help promote a positive environment.
- The school understands the importance of all pupils taking part in physical activity and that all relevant staff make appropriate adjustments to the environment to make sure it is accessible to all pupils.
- The school understands that all relevant staff are aware that pupils should not be forced to take part in activities if they are not well. They should also be aware of pupils who have been advised to avoid/take special precautions during activity, and the potential triggers for a pupil's medical condition when exercising and how to minimise these.
- The school makes sure that pupils have the appropriate medication/equipment/food with them during physical activity.
- The school makes sure that pupils with medical conditions can participate fully in all aspects of the curriculum and enjoy the same opportunities at school, such as limited concentration and frequent tiredness, may be due to a pupil's medical condition. The school will not penalise pupils for their attendance if their absences relate to their medical condition.
- The school will refer pupils with medical conditions who are finding it difficult in Nursery to the SENDCo who will liaise with parents and healthcare professionals.
- The school makes sure that a risk assessment is carried out before any out of school visit. The needs of pupils with medical conditions are considered during this process and plans are put in place for any additional medication, equipment or support that may be required.

The school is aware of the common triggers that can make common medical conditions worse or can bring on an emergency. The school actively works towards reducing or eliminating these health and safety risks.

- The school is committed to identifying and reducing triggers both at school and out of school visits.
- The IHP details pupils' triggers and a trigger reduction schedule.
- Risk assessments are carried out on all out of school activities, taking into account the needs of pupils with medical needs.

Where a child is returning to school following a period in hospital, this school will work with relevant health professionals, parents and the child to ensure that they receive the support they need to reintegrate effectively.

- The school works in partnership with all relevant parties including the pupil to ensure that the policy is planned, implemented and maintained successfully.

Each member of the school and health community knows their roles and responsibilities in maintaining and implementing an effective medical conditions policy.

- The school works in partnership with all relevant parties including the pupil (where appropriate), parent, school's governing body, all school staff and healthcare professionals to ensure that the policy is planned, implemented and maintained successfully.
- This school is committed to keeping in touch with a child when they are unable to attend school because of their condition.

The medical conditions policy is regularly reviewed, evaluated and updated.

- In evaluating the policy, the school seeks feedback from key stakeholders including pupils, parents, healthcare professionals, school staff and Governors. The views of parents and their children are central to the evaluation process.

This school has clear guidance on providing care and support and administering medication at school.

- The school understands the importance of medication being taken and care received as detailed in the pupil's IHP.
- The 'Administering Medication Policy' is adhered to by staff when administering medication.
- The school's Governing Body has made sure that there is an appropriate level of insurance and liability cover in place.
- The school will not give medication (prescription or non-prescription) to a child under 16 without a parent's written consent except in exceptional circumstances.
- When administering medication, for example, pain relief, this school will check the maximum dosage and when the previous dose was given. Parents will be informed. The school will not give a pupil under 16 aspirin, unless prescribed by a doctor.
- Parents at this school understand that they should let the school know immediately if their child's needs change.

This school has clear guidance on the storage of medication and equipment at school.

- The school makes sure that all staff understand what constitutes an emergency for an individual child and make sure that the medication/equipment (e.g. epi-pen) is readily available, wherever the child is in the school and during off-site activities and is not locked away.
- The school will make sure that all medication is stored safely, and that staff know where it is at all times and have access to them immediately.
- The school will store medication that is in date and labelled in its original container where possible, in accordance with its instructions. The exception to this insulin, which though must still be in date, will generally be supplied in an insulin injector pen or pump.
- Parents are asked to collect all medications/equipment at the end of the school year, and to provide new and in-date medication at the start of each year.
- The school disposes of needles and other sharps in line with local policies. Sharps boxes are kept securely at school and will accompany a child on off-site visits. They are collected and disposed of in line with local authority procedures.

Administering medicines

Whilst it is not our policy to care for sick children, who should be at home until they are well enough to return to the setting, we will agree to administer medication as part of maintaining their health and well-being or when they are recovering from illness. In many cases, it is possible for children's GPs to prescribe medicine that can be taken at home in the morning and evening. As far as possible, administering medicines will only be done where it would be detrimental to the child's health if not given in the setting. If a child has not had a medication before, it is advised that the parent keeps the child at home for the first 48 hours to ensure there are no adverse effects, as well as time for the medication to take effect. Parents are required to complete all relevant paperwork; school will ensure that medicines are stored correctly and that records are kept according to procedures.

Procedures

- Children taking prescribed medication must be well enough to attend Nursery
- Only medication prescribed 4 times a day is administered. It must be in date and prescribed for the current condition
- Children's prescribed medicines are stored in their original containers, are clearly labelled and are inaccessible to the children
- Parents give prior written permission for the administration of medication. No medication may be given without this consent being signed. *Please note the exception of when a qualified first aider recommends the emergency use of nursery's Salbutamol inhaler to help open airways for a child, this will be done "in loco parentis".*

- The administration is recorded accurately each time it is given and signed by the member of staff administering the medication and **witnessed by another staff member**.
- Copies of the forms to be completed with parents can be found in the filing cabinet in the main office.

Storage of medicines

- All medication is stored safely in a lockable cupboard or refrigerated
- Staff are responsible for ensuring medicine is handed back at the end of the session
- If the administration of prescribed medication requires medical knowledge, individual training is provided for staff by a health professional
- No child may self-administer. Where children are capable of understanding when they need medication, for example, with asthma, they should be encouraged to tell a member of staff what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication

Children who have long term medical conditions and who may require ongoing medication

- A Care Plan is carried out for each child with long term medical conditions that require ongoing medication. This is the responsibility of the Co-Head Teachers or Admin Officer. Other medical or social care personnel may need to be involved in the Care Plan
- Parents also contribute to the Care Plan and support staff with any risk factors for their child
- For some medical conditions, staff will need to have training in a basic understanding of the condition as well as how the medication is to be administered correctly
- For more serious medical needs depending on the needs of the child e.g. allergic reaction to nuts, which may require immediate reactions by staff to ensure the child's safety, a shortened version of the plan along with a photograph of the child will be circulated and displayed in appropriate places

Managing medicines on trips and outings

- If children are going out on outings, staff accompanying the child must remove the medicine from the lockable cupboard where it is stored. Upon return, the member of staff must replace the medication back in the lockable cupboard.

Non-Prescription Medication held in school

We keep in nursery a small emergency first aid kit, which contains some over-the-counter remedies and medicines that may help comfort a child and enable play and learning to continue without too much interruption to their day. This includes;

- **Sudocrem** (for nappy rash and minor skin irritations)
- **Calpol** (to reduce a high temperature or for pain relief) – Checks will be made with Parents/Carers to ensure Calpol was not administered within the last 4 hours. Calpol can be administered with consent of parents/Carers and advised to take the child home for monitoring at their earliest convenience.
If a child has needed Calpol before their nursery session, then they are usually not well enough to be at nursery and parents are advised to keep them at home until they are well enough to attend without the need for Calpol.
- **Salbutamol Inhaler** (to open airways in the event of sudden and severe breathing difficulties) In the event of a child experiencing breathing difficulties, yet there is no diagnosis of Asthma, a Salbutamol Inhaler WILL BE ADMINISTERED – Parents will be contacted afterwards to ensure the child receives urgent medical attention or an ambulance could be called based on the severity of attack.
- **Sting treatment** (for wasp and bee stings). This will be an antihistamine or sting pen.

We will only administer the above non-prescription medications if consent has been given by a Parent/Carer by completing a consent agreement for setting to give medicines form which will be included in our new starter pack.