



ASHMORE PARK

AND

PHOENIX NURSERY SCHOOLS FEDERATION

SUPPORTING CHILDREN WITH MEDICAL NEEDS POLICY

Senior Leadership Team Review Date	23.09.2025
Governing Board Approved/Adopted	30.09.2025
Signed on behalf of the Governing Board/Committee	S.7 hacey
Policy to be Reviewed Date	30.09.2026

Introduction

This policy is written in line with the statutory guidance from the DfE issued under Section 100 of the 'Children and Families Act 2014'.

Both schools recognise that:

- Children with medical conditions should be properly supported so that they have full access to education, including school trips and physical activities;
- Parents/Carers of children with medical conditions are often concerned that their child's health will deteriorate because their condition(s) may require on-going support, medicines or care whilst at school to help them manage their condition, and keep them well;
- There are social and emotional implications associated with medical conditions that may lead children to become self-conscious, which may lead to anxiety;
- 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 well-being, and emotional health.

We aim to ensure that all children with medical conditions, in terms of both their physical and mental health, are properly supported in our schools so that they can play a full and active role in school life, remain healthy and achieve their academic potential.

Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. To provide effective support for children with medical conditions each school will work cooperatively with other agencies.

Role of the Governing Board

The Federation's Governing Board is responsible for ensuring that arrangements are in place to support children with medical conditions. They must ensure that such children can access and enjoy the same opportunities at school as any other child.

The Governing Board will consider that medical conditions, which require support, may affect the child's quality of life or be life threatening and they will ensure that the focus is on the needs of each individual child, and how their medical condition impacts on their school life. It is recognised that every child should be treated as an individual and that the same condition may not require the same treatment as that of another child.

The Governing Board will ensure that no child with a medical condition is denied admission or prevented from accepting a place in one of our schools because arrangements for their medical condition cannot be made.

The Governing Board will ensure that this policy and any procedures for supporting children with medical conditions are implemented and that sufficient staff have received suitable training and are competent before taking on the responsibility to support children with medical conditions.

This policy should be read in conjunction with the Federation's 'Asthma Policy' and the 'Allergy Management Policy'. Each policy provides specific guidance on the procedures in place to safeguard our children who are diagnosed with asthma or allergies, within our schools.

Role of the Headteacher

The Headteacher will:

- Ensure that the policy is effectively implemented and that each school works in partnership with all external specialist agencies;
- Ensure staff are aware of the policy and understand their role in its implementation;
- Ensure that there are sufficiently trained staff to deliver the prescribed requirements identified and stipulated in a child's Individual Health Care Plan (IHCP)
 - Contingency planning will be undertaken on an individual basis as and when required and the appropriate action will be taken to meet the needs of that child.
- Have overall responsibility for the development of the child's IHCP;
- Ensure that the appropriate Health Professional(s)/external specialist agencies are contacted for all children with medical conditions prior to the child starting school or as soon as is practically possible.

Role of School Staff

Any member of staff may be asked to provide support to children with medical conditions, including the administering of medicines, although they cannot be required to do so. Nominated staff will receive sufficient and suitable training and achieve the necessary level of competency before they take on responsibility to support children with medical conditions. All staff will be expected to know the appropriate action to take when a child with a medical condition needs help.

Working Together with Other Agencies

The applicable school will work with the appropriate Health Professional(s)/external specialist agencies on the implementation of a child's IHCP. The Headteacher will seek advice from professionals and specialist training will be arranged as and when required. The applicable school will follow medical advice and medical evidence provided by the child's Healthcare Professional(s).

Role of Parents/Carers

Parents/Carers should provide the applicable school with sufficient and up-to-date information about their child's medical condition. Parents/Carers are key partners and will be involved in the development and review of their child's IHCP. Parents/Carers should carry out any action they have agreed to as part of the plan's implementation. Parents/Carers will not be asked to, or be made to, feel obliged to attend school to administer medication or medical support (including toileting).

Arrangements

The Governing Board has delegated the responsibility for policy implementation to the Headteacher.

Procedures to be followed when notification is received that a child has a medical condition

Once notification has been received that a child has a medical condition, the Headteacher and a 'Named Person' in school will liaise with the appropriate Healthcare Professional(s). The applicable school will aim to have arrangements to support the child in place as soon as is practically possible so that the child can benefit from the learning opportunities available at their school, and to remove barriers to their engagement. If a child is prescribed medication, the parent/carer will be asked to complete a 'Parent Consent Form for School to Administer Medicine' form, see Appendix 1. A 'Record of Administration Form', see Appendix 2, will also be generated and the member of staff administering the medicine will document each time medication is administered to the child, and the parent/carer will be notified upon collection of their child.

Individual Health Care Plans

Individual Health Care Plans can help to ensure that we can effectively support children with medical conditions. They provide clarity about what needs to be done, when and by whom. Not all children will require a health care plan, but they are essential for those children with long-term and complex needs, and where there is a high risk of emergency intervention. In all instances the requirement to not have an IHCP will need to be made in conjunction with the applicable school, the appropriate Healthcare Professional(s) and the parents/carers.

IHCP's will be drawn up in partnership with the child's parent/carer and all relevant Healthcare Professional(s), who can best provide advice on the particular needs of the child. The applicable school's Individual Health Care Plan will include:

- The medical diagnosis or condition, its triggers, signs, symptoms and treatments;
- The parents/carers contact details;
- The Healthcare Professional/Clinic/Hospital contact details;
- The G.P.'s contact details;
- The nominated person in school responsible for providing support to the child;
- The child's medical needs, to include details of the child's symptoms, triggers, signs, treatment, facilities, equipment/devices (if applicable), environmental issues etc.;
- The name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by details with/without supervision;
- Daily care requirements;
- Specific support for the child's educational, social and emotional needs;
- Arrangements for school visits/trips etc. as and when applicable;
- Any other relevant information;
- Details of what constitutes as an emergency for the child, and the action to take if one occurs;
- Who is responsible in an emergency;
- Who the Individual Health Care Plan has been developed in conjunction with;
- Staff training needed/undertaken to inc. who, what, when; and
- Who the form has been distributed to.

Staff Training

Any member of staff identified to support a child with a medical condition will receive sufficient and suitable training and achieve the necessary level of competency before they take on the responsibility of supporting a child with a medical condition(s). During the development of a child's IHCP the level of expertise of the staff identified to support the child will be identified and, with the support of the Healthcare Professional(s), the type and level of any training required will be identified. In some instances, staff may not need extensive training but will need an understanding of the specific medical condition, the implications and preventative measures.

Staff will not be permitted to give prescription medicines or undertake health care procedures without appropriate training. First aid training does not constitute appropriate training in supporting children with medical conditions.

This policy will form part of the induction programme for new staff and supply staff, existing staff will review the policy annually, in the autumn term, or as and when policy/procedure is amended.

Training will be provided by an external Healthcare Professional and/or an external specialist agency, depending on the advice received from the child's medical team, who are involved in the child's care. The level of proficiency of staff and the level of need will be evaluated as and when necessary.

Procedures for Supporting Children

Child's role in managing their own needs

Each school recognises that due to the young age of its children, it is unlikely that children will be able to manage their own health needs. Each school encourages the development of independence and self-help skills and will work with the child's parents/carers, and Healthcare Professional(s) to encourage the child to develop the necessary skills, with supervision, as and where it is appropriate.

Where a child refuses to take their medicine or staff are unable to carry out the prescribed procedure e.g. due to the age of the child, staff will take the necessary action stipulated in the child's IHCP and inform the child's parent/carer.

Managing Medicines in School

- Medicines will only be administered at school when it would be detrimental to a child's health or school attendance not to do so;
- No child will be given prescription medication without their parents/carers written consent;
- The applicable school will only accept prescribed medicines, which are in date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage;
 - Insulin provided in an insulin pump or pen, rather than in its original container will be accepted.
- Due to the age and cognitive development of children in our schools, all medicines will be stored safely in a locked first aid cabinet. All administering equipment including inhalers will also be stored out of the reach of children. This is not to prevent children from accessing

their medication; however, it is to prevent unnecessary harm being caused to the child or to other children if the medication is taken unsupervised;

- On school trips the parent/carer if in attendance will carry the medication for their child, if the parent/carer is not present the medication will be allocated to a member of staff.
- When no longer required, medication will be returned to the parent/carer to arrange safe disposal;
 - Sharps boxes will always be used for the disposal of needles and other sharps.
- Written records will be kept of all medicines administered to children.

Emergency Procedures

When a child has an IHCP, details as to what constitutes as an emergency for that child will be clearly defined, and the action(s) to be taken will be included. All relevant staff will be aware of the child's symptoms and the procedure to be followed in the event of an emergency.

In an event that an ambulance is called a member of staff will accompany the child to hospital and will stay with the child until the parent/carer arrives. On the rare occasion that an emergency occurs and a child needs to be taken to hospital (rather than escorted in an ambulance), the Headteacher will ensure that the appropriate car insurance is in place prior to the child being transported to hospital. In all instances two members of staff will transport the child, and a member of staff will stay with the child until the parent/carer arrives.

Off-site Visits

Arrangements will be made to ensure that children with medical conditions can be supported to take part in off-site visits. When arranging off-site visits, the Headteacher, Educational Visit Coordinator (EVC) and staff will need to consider how a child's medical condition could impact their ability to access the planned visit/activity. In all instances guidance will be sought from the child's parents/carers and/or Healthcare Professional to ascertain what reasonable adjustments can be made to allow the child to participate in the visit/activity etc. Parents/Carers will not be asked to attend an off-site visit with their child to support their medical needs as the appropriate school will provide the appropriate level of support for the child. Parents/Carers of children with additional needs often ask if they may accompany their child due to their age and developmental level, and the child's school will accommodate parents/carers who request this wherever possible.

Insurance

Each school has liability insurance through Wolverhampton City Council. The Council guidance for schools' states:

'Schools can be required to administer drugs to pupils with medical needs so they can participate in education. Staff should be aware that where they are required to carry out this support any public liability claim arising from the administration of drugs (including by injection) will be dealt with by the Council's liability policy provided that:

i) a General Practitioner or other suitably qualified person gives staff training in the administration of drugs and any injections

ii) the drugs administered do not fall within a category which under legislation requires such treatment only to be administered by a qualified practitioner'.

Complaints

If parents/carers are dissatisfied with the support provided for a child with a medical condition, they should discuss this directly with the Headteacher. If this does not resolve the issue, parents/carers may make a formal complaint through the Federation's complaints procedure.



PARENT CONSENT FORM FOR SCHOOL TO ADMINISTER MEDICINE



	<u>γ:</u> Parent/Car	er's Signature er Signature	Date Staff Member Signatu
Parents/Carer's Name Medication Received into Nurser	<u>y:</u>	-	
Parents/Carer's Name Medication Received into Nurser		er's Signature	Date
stopped.	Parents/Car	er's Signature	Date
stopped.	Parents/Car	er's Signature	Date
stopped.			
The above information is, to the backword staff, to administer medic immediately, in writing, if there is	cine in accordan	ce with the Fede	ration's policy. I will infor
Address			
Relationship to Child			
Contact Telephone No.			
CONTACT DETAILS Name			
N.B: Medicines must be in the origin	al container as di	spensed by the pha	rmacy
Procedures to be Taken in an Er			
Known Side Effects			
Special Precautions/Other Instr	uctions		
Timing(s)			
Dosage and Method			
Expiry Date			
MEDICINE Name/Type of Medication			
Medical Condition/Illness			
Educator Group			
Date of Birth			
- · · · · · · · · · · · · · · · · · · ·			
Name of Child			

Ashmore Park

RECORD OF MEDICATION ADMINISTERED



TO AN INDIVIDUAL CHILD

Name of School	
Name of Child	
Date Medicine Provided by Parent/Carer	
Educator Group	
Name of Medication	
Expiry Date	
Quantity returned	
Dose and Frequency of Medication	

DATE	TIME	DOSAGE	NAME OF STAFF ADMINISTERING MEDICATION	STAFF SIGNATURE	

RECORD OF MEDICATION ADMINISTERED TO AN INDIVIDUAL CHILD

TIME	DOSAGE	NAME OF STAFF ADMINISTERING MEDICATION	STAFF SIGNATURE
		TIME DOSAGE	ADMINISTERING



INDIVIDUAL HEALTHCARE PLAN



Name of School	
Name of Child	
Educator Group	
Date of Birth	
Child's Address	
Medical Diagnosis/Condition	
Date	
Review Date	
FAMILY CONTACT INFORMATION	
Name	
Relationship to Child	
Phone No. (Mobile)	
Phone No. (Home)	
Phone No. (Work)	
Name	
Relationship to Child	
Phone No. (Mobile)	
Phone No. (Home)	
Phone No. (Work)	
HEALTHCARE PROFESSIONAL/CLINIC/HO	SPITAL CONTACT DETAILS
Name	
Phone No.	
G.P. CONTACT DETAILS	
Name	
Phone No.	
Who is Responsible for Providing Support in School	
Describe medical needs and give details of the equipment or devices, environmental issues	ne child's symptoms, triggers, signs, treatments, faciliti etc.

Name of medication, dose, method of administration, when to be taken, side effects, contra-indicat to be administered by, with/without supervision
Daily care requirements
Specific support for the child's educational, social and emotional needs
Arrangements for school visits/trips etc.
Any other information
Describe what constitutes an emergency, and the action to take if this occurs
Who is responsible in the event of an emergency
Who the Health Care Plan has been developed with
Staff training needed/undertaken to inc. who, what, when
Who the form has been distributed to