Chertsey and Dorking Nursery Schools

MEDICAL NEEDS POLICY AND PROCEDURE

Role of Governing Body
The Governing Body is legally responsible and accountable for fulfilling its statutory duty in regards to supporting children with medical needs. They should ensure that a focus is on an individual child's needs and how their medical condition impacts on school life thus making sure the child accesses and enjoys the same opportunities as other children. They will ensure parents are confident in the ability to support children with medical conditions and that staff are properly trained where relevant. No child can be denied admission due to their medical needs unless their needs are detrimental to the health of the child or others. The Governing Body is responsible for developing and reviewing this policy on a regular basis and making it freely available to staff and parents. The named person responsible for the implementation of this policy is the Executive Headteacher.

This policy and procedure follows The Department for Education and Surrey County Council Guidance, however no guidance can be expected to cover or predict every eventuality. SCC guidance states that "Surrey County Council fully indemnifies all its staff against claims for alleged negligence providing they are acting within the remit of their employment. As the administration of medicines is considered to be an act of "taking reasonable care" of the child/young person, staff agreeing to administer medication can be reassured about the protection their employer would provide. In practice this means that the County Council, not the employee, would meet the cost of damages should a claim for alleged negligence be successful."

Responsibility of parents: in most circumstances the administration of medicine is the responsibility of parents or guardians and they should be administered at home. Medicines should only be administered at school where it would be detrimental to a child's health or school attendance not to.

Parents are responsible for making sure that their child is well enough to attend the setting and participate in the curriculum as normal, including using the outside areas and gardens. However, on occasions, General Practitioners (GPs) may advise that children should attend school while still taking medicine. Where possible, medication timings should be adjusted (ie 4 hour intervals would not require medicine to be taken at nursery if the child attends for their 3 hour session) to avoid the need for medication to be administered at nursery.

If Calpol or other similar medicine has been given to a child prior to arriving at nursery, they must inform staff about the time and reason for the medicine so that the child can be monitored. Parents may be required to collect children if staff deem the child unwell during the day.

In all circumstances, the guidance followed by UK Health Security Agency is followed, including not attending the nursery for 48 hours after all symptoms have disappeared following diarrhoea and/or vomiting as well as the guidance for all other illnesses and diseases.

Parents must complete a consent form from the office giving prior written permission with full details of type of medicine, the circumstances under which it should be given, the frequency and dosage levels. The office will ensure it is completed correctly, stored confidentially with access on a need to know basis, and then sign over to the to the key person to ensure medicine is administered. Where appropriate, a Care Plan is written and signed by parents to ensure correct administration of medicines.

Parents must immediately give the medicine in the original labelled container to a member of the office staff on arrival, with necessary spoons/syringes etc. The medicines are stored in a secure medicine cupboard (or fridge if required) in the nurseries, however there are exceptions, such as Auto Adrenaline Injectors (AAI) or inhalers used frequently, that might be more easily accessible for staff to administer. Medicines

must be in their original containers clearly labelled, with the child's name, type of medicine and dosage instructions. Parents must be made aware that it is their responsibility for ensuring the medicine does not exceed its expiry date, and for disposing of date expired medicines and used Auto Adrenaline Injectors (AAI)s. If this is not possible then the medications should be taken to a local pharmacy for safe disposal.

Medicines are not administered unless they have been prescribed by a doctor. Written records are kept in the secure place in the nursery office of the medicines administered to children, and a copy of the information is shown to the parents and they must sign to say they have seen it.

Responsibility of staff: One member of staff (normally the key person or another member of the same team) will be designated to administer the medicine, and be given training if required - but no member of staff is compelled to administer medicines. (If no member of staff volunteers to administer a medication then the Headteacher must seek assistance from the local authority and health partners).

When administering medicines, staff must:

- Administer medication 1 child at a time
- Wash hands before and after giving medication
- Check written instructions received by the office and confirm name and details on medicine container
- Check prescribed dosage
- Check the expiry date
- Check the timing/ frequency details
- Check correct items are there e.g. spoon
- Check the record of the last dosage given
- Measure the prescribed dose
- Not crush tablet/ dilute medication unless given consent by a medical professional and write down on admin record what you have done
- Check the child's name on the medicine again
- Complete the written record of dosage given, including time date and signature and make sure the parents sign every day to say they have seen and checked this
- If in any doubt do not administer and note on record why medication was not given. In these circumstances inform a senior member of staff immediately and contact parents.
- Note down any other reason why drug was not given when it should have been (signed and dated)
- If the child refuses medication: note down that they refused and why. Inform parents if necessary and follow emergency procedures if necessary

Administering intimate or invasive treatment should be done by two adults if possible to ease practical application of the treatment as well as minimise the potential for accusations of abuse. Staff should protect the dignity of the child as far as possible. In these circumstances a Care Plan would be written and agreed with parents.

Once the child has finished their course of treatment all medicines must be returned to the parent and all forms returned to the office for safe storage.

Children with identified medical needs/conditions

Any child who has an identified medical need or condition will have a medical care plan. This will be completed by the team leader/Head and along with the parents/carers. It will be signed by the Headteacher or a member of the leadership team.

Where a special education need is present the SENCo will also be involved. If the child is on SEN Support then the medical care plan will be linked to their SEND Support document. The child's SEND should be mentioned on the healthcare plan. If a child has an EHCP then the medical care plan will be part of it or work in conjunction with this.

The Headteacher will ensure all relevant staff are made aware of the child and their condition as well as ensuring staff have the relevant training. This training may be from local health services or private companies. The Headteacher will deem what training is necessary and from what source. Staff will not undertake any healthcare procedures or administer specific prescription medication without the relevant

training. The Headteacher will be responsible for whole staff awareness and will put any relevant information into the induction programme for staff.

The team leader will complete any necessary risk assessments and provide appropriate cover for when trained staff are not available. The Headteacher will be responsible for monitoring all healthcare plans and overseeing any transitions from or to the setting. Any meeting about the child will involve, where possible, all staff who work with the child. Health care plans will be reviewed annually or sooner if deemed necessary. If there is not agreement over whether a child should or should not have a healthcare plan then the Headteacher will take the final decision.

Parents are responsible for providing sufficient and up to date information about their child's medical needs. They should be involved in the development and review of the health care plans. They should carry out any action they have agreed to as part of the plan.

When considering the medical needs of children, staff will use their discretion and judgement for each child however the following points are generally deemed inappropriate:

- Assume every child with the same condition requires the same treatment
- Ignore the views of the child and/or parent and/or medical advice
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them staying for normal school activities
- Penalise children for their attendance if it relates to their condition
- Prevent children from eating, drinking or using the toilet whenever they need to, to support their medical needs
- Require parents or make them feel obliged to attend school to administer medication or provide medical support e.g. toileting issues
- Prevent children from participating in any aspect of school life or create unnecessary barriers to this

Treatment for serious medical conditions and allergies
It is Surrey LA Policy to maximise inclusion for children with medical needs and allergies in as full a range of educational opportunities as possible. To promote this aim, the school should assist parents and health professionals by participating in agreed procedures to administer medicines when necessary and reasonably practical.

If a child suffers from a chronic medical condition or allergy which may require urgent action to prevent a possible life-threatening situation developing, the following procedures will be taken:

- The organisation will need to ensure that it can fully meet the needs of the child
- Professional training will be given to all relevant staff to ensure they will recognise the onset of the condition and take appropriate action
- Completed care plan forms will be signed by the parents of children with long term conditions detailing the daily care and medication needs
- An action plan for emergency situations will be devised in conjunction with the parents and medical authorities and made known to all staff. This should include:

    1. Clear procedures for summoning an ambulance
    2. Access to telephones and clear instructions of what to do

- For the most severe conditions an individual treatment plan will be established with the parents and health service, which is periodically reviewed. Sample plans can be found in the SCC guidance on "Young people's health and administration of medicines" e.g.:

    Allergy and anaphylactic care (agreement re meals and snack with parents with a note that it is not always possible to prevent contact)
    Diabetes care (staff should ensure child eats properly)
    Epilepsy
    Rectal drug administration a specific plan for emergency

If for any reason the normal routine for treatment breaks down e.g. the trained or appointed staff members are absent; then other willing staff, may give the treatment, exercising their duty of care. The parents should be contacted and emergency services if appropriate.

First Aid

- Regular training in Paediatric First Aid is provided for staff in ratio. Most classroom staff are trained.
- First aid boxes are provided on all sites. They are checked termly by a designated member of staff to ensure all necessary items are in good condition and in date. However, First Aid boxes are the responsibility of all staff. Staff are required to notify the designated person when any items are used or need replenishment.
- If there is an emergency evacuation, emergency grab bags and necessary medication are available to be taken each of which contains a first aid bag
- A record is completed of accidents and first aid treatments. Parents sign to show that they have been informed of the accident and treatment and are given a copy of the record
- Parents are given an information letter on head injuries when appropriate, this includes all injuries to the facial and mouth area
- If a severe injury takes place requiring hospital treatment: see next section.
- All accident notes are monitored monthly to look at specific trends or where lessons can be learned to improve practice and processes.

Sick or Injured Children

Parents are responsible for ensuring their child is well enough to attend. Children who are ill or infectious must not attend. The schools will ensure that parents are notified when there is an illness which could be infectious, such as chicken pox or slap cheek. This will usually be done through emails, signs and posters. At all times, UKHSA guidance is followed for illnesses and incubation periods.

If a child has a long-term injury or condition and both staff and parents agree that the child is able to attend, then parents need to put this in writing, detailing the condition/ injury and any precautions that may need to be taken to protect the child.

If a child becomes ill or has an accident that requires medical treatment whilst in the care of staff, the parent will be contacted immediately. In the event of being unable to contact the parents, then emergency contacts will be notified. If medical care is needed immediately and it has not been possible to arrange for a parent/ carer to accompany the child, a member of staff should attend with the child and remain at the hospital with them unless/ until the parent/carer arrives. Staff should not take children/young people to hospital in their own car. Awareness is required for any religious/cultural wishes i.e. blood transfusions, which should be communicated to the medical staff for due consideration. In the absence of the parents, health professionals are responsible for any decisions on medical treatment when parents are not available.

In the case of serious accident or injury to or serious illness or the death of any child whilst in the care of the staff, the appropriate authorities will be notified depending on the injury i.e. Ofsted, child protection agencies, Surrey County Council. All accident and injury requiring a hospital visit or emergency care will be logged on Oshens.

Insurance covers all staff supporting children with medical conditions.

All users will be informed of the appropriate policy and expected to adhere to this. Any complaint with regards to a medical needs matter should be made to the Headteacher, if this is not possible, it should be made to the Chair of Governors.

Approved by the Governing Body: July 2026
To be reviewed by: July 2029
Relevant for:-

Nursery: Yes	**Parents**: Yes