

## Supporting Pupils with Medical Conditions Policy

### Introduction

The purpose of this policy is:

- To support regular attendance of all pupils
- To ensure staff understand their roles and responsibilities in administering medicines
- To ensure parents understand their responsibilities in respect of their children's medical needs
- To ensure medicines are stored and administered safely

We recognise the requirement to promote the good health of the children, take necessary steps to prevent the spread of infection and take appropriate action when they are ill.

### Guidelines for Short Term Illness

As most children attend on a part time basis it is not necessary for us to administer prescribed medicines for short term illnesses. Parents are asked to keep their children at home until they are well enough to return to nursery school. If a child has been prescribed medication which they have not taken before, it is advised that the parent keeps the child at home for the first 48 hours to ensure no adverse effect and to give the medication time to be effective.

### Children who have Long Term Medical Conditions

The Children and Families Act 2014 places a duty on schools to make arrangements for children with medical conditions. **Pupils with medical conditions have the same right of admission to school as other children and cannot be refused admission or excluded from school on medical grounds alone.**

LMNSF Schools will follow guidance contained in 'Statutory framework for the early years foundation stage.

### Identification

We will work with the parents and medical professionals to ensure we have specific protocols in place as soon as the child starts school. This may take the form of information sharing, developing specific care plans, organising training, employing new staff or reorganising classroom facilities.

### Provision and Organisation

Training regarding specific conditions will be delivered as required. This is usually within the term of a new pupil beginning nursery school but if necessary before they commence their education at LMNSF Schools. *General training on awareness of medical conditions and their possible medication implications will occur annually. This will run in parallel with the nursery's first aid training, which will continue to be under the guidance of the Health and Safety Policy.* Pupils requiring continuous support for a medical condition will be given an Individual Health Care Plan (IHCP).

### Individual Health Care Plans (IHCP)

The main purpose of an IHCP is to identify the level of support that is needed at school for an individual child. The IHCP clarifies for staff, parents/carers and the child the help the school/centre can provide and

receive. These plans will be reviewed termly as a minimum, or more frequently at the request of parents/carers or the school, or as required

An IHCP will include:

- Details of the child's condition
- What constitutes an emergency
- What action to take in an emergency
- What not to do in the event of an emergency
- Who to contact in an emergency
- The role of staff
- Special requirements e.g. dietary needs, pre-activity precautions
- Side effects of medicines

A copy will be given to parents/carers, class teachers and keyworkers. A copy will be retained in the medical needs file in the office and a copy placed along with any medication in the first aid area in the kitchens by each classroom. The general medical information sheet given to all staff will indicate that the child has an IHCP. Key medical information will also be noted in the medical details section for the child on registration and will be kept with their contact details in the school office.

All trained staff will ensure they are aware of the protocols and procedures for specific pupils in school through attending training provided and reading care plans devised for individual pupils.

### **Managing medicines on school premises**

- Medicines can only be accepted if they are in date, labelled with the child's name, provided in the original container as dispensed by a pharmacist and include the pharmacy label which includes instructions for administration, dosage and storage. The exception is insulin which must be in date but will generally be inside a pen or pump.
- Medicines should be stored safely; asthma reliever inhalers and epi pens are kept in the First Aid area in each classroom kitchen which staff have immediate access to. This will not be locked as it is out of reach of children and will enable quick access for staff.
- All of the appropriate paperwork must be completed and signed by a parent before any medicines can be administered. ***See appendix 1 - Consent Form to Administer Medicine***

### **Managing medicines on school outings**

- if a child with long term medical needs is going on a school trip, there should be a member of staff who is fully informed about the child's needs/medication.
- Medication and the health care plan should be taken in a sealed plastic box clearly labelled with the child's name.

### **Parents' Responsibility**

- Parents must sign Consent Form to Administer Medicine form (and a health care plan if required) before a medicine can be administered by staff.
- Parents are responsible for ensuring that all medications kept in school are kept up to date.
- Parents are responsible for notifying the school if there is a change in circumstances e.g. is a child is deemed to be no longer asthmatic.

### **Recording medicines administered**



- If medication is required then and medicine administered should be recorded on the Medicine Administration Record sheet. Two members of staff must make sure they check the dose and sign and date as appropriate.
- Where required then parents should inform nursery of any medication given before the Nursery session at home. This should also be recorded and signed by parents to ensure that we know how much medicine the child has already had to prevent an accidental over dose.
- Parents must sign the record after any medication is given to ensure they are aware of the dose and timing of the last dose.

**Updated January 2026**



LINCOLNSHIRE  
MAINTAINED NURSERY SCHOOL FEDERATION

## Individual Health Care Plan

Name:

Date of Birth:

Home Address:

Parent Contact Details:

Conditions and symptoms:

Daily care:

What would be an emergency situation and what should be done if one occurs:

Who is responsible in an emergency:

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Staff training needed/undertaken – who, what, when

Signed: (Parent/Carer)

Signed: (School)

Date: Date for review:

Please ensure that the following has been documented above:

- Details of the child's condition
- What constitutes an emergency
- What action to take in an emergency
- What not to do in the event of an emergency
- Who to contact in an emergency
- The role of staff
- Special requirements e.g. dietary needs, pre-activity precautions
- Side effects of medicines

**Consent Form to Administer Medicine**

**School staff are unable to give any medication unless this form is completed and signed.**

I request and authorise that my child be given the following medication:

Name of child		Date of birth	
Address			
Contact phone number during nursery hours			
Name of medicine			
Special precautions e.g. take after eating			
Any side effects that the medicine may cause which we need to know about			
Dose		Time of dose	
Start date		Finish date	

**This medication has been prescribed for my child by the GP/other appropriate medical professional whom you may contact for verification**

Name of medical professional	
Contact telephone number	

I confirm that:

-It is necessary to give this medication during the school day and there is no other alternative timing/pattern where it can be administered out of school hours

-I agree that it is my responsibility to collect the medicine at the end of each **session/week/school term** (delete as appropriate)

-This medicine has previously been given to the child without adverse effect

-The medication is in the original container indicating the contents, dosage and the child's full name and it is within its expiry date.

**Please note that we are unable to administer medicines that are not prescribed and that are not in their original container with the pharmacy official label on.**

Signed (parent/carer)	
Date	



**Medicine Administration Record**

Name of child	
Date of birth	
Name of medication	
Expiry date	

**Please ensure any medication given before the Nursery session at home is also recorded and signed by parents to ensure that we know how much medicine the child has already had.**

Date	Time	Dose	Name of person administering medicine	Signature of person administering medicine	Signature and name of witness	Comments	Parents signature to say they have been informed the medicine has been administered

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