

## 16 Supporting Children with Medical Conditions Policy

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## **1. Aims**

This policy aims to ensure that:

- Children, staff and parents understand how our Nursery will support children with medical conditions
- Children with medical conditions are properly supported to allow them to access the same education as other children, including Nursery trips and activities

The Management team will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of children' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support children with medical conditions
- Providing supply staff with appropriate information about the policy and relevant children
- Developing and monitoring individual healthcare plans (IHPs)

**The named person with responsibility for implementing this policy is Melanie Kaye.**

## **2. Roles and responsibilities**

### **2.1 The Nursery manager**

The Nursery manager will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Ensure that there is a sufficient number of trained staff available to implement this policy and deliver against all individual healthcare plans (IHPs), including in contingency and emergency situations
- Ensure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development of IHPs
- Make sure that Nursery staff are appropriately insured and aware that they are insured to support children in this way
- Contact the Nursery nursing service in the case of any child who has a medical condition that may require support at Nursery, but who has not yet been brought to the attention of the manager
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

### **2.2 Staff**

Supporting children with medical conditions during Nursery hours is not the sole responsibility of one person. Any member of staff may be asked to provide support to children with medical conditions, although they will not be required to do so. This includes the administration of medicines.

Those staff who take on the responsibility to support children with medical conditions will receive sufficient and suitable training, and will achieve the necessary level of competency before doing so.

Staff will take into account the needs of children with medical conditions that they teach. All staff will know what to do and respond accordingly when they become aware that a child with a medical condition needs help.

## **2.3 Parents**

Parents will:

- Provide the Nursery with sufficient and up-to-date information about their child's medical needs
- Be involved in the development and review of their child's IHP and may be involved in its drafting
- Carry out any action they have agreed to as part of the implementation of the IHP, e.g. provide medicines and equipment, and ensure they or another nominated adult are contactable at all times

## **2.4 Children**

Children with medical conditions will often be best placed to provide information about how their condition affects them. Children should be fully involved in discussions about their medical support needs and contribute as much as possible to the development of their IHPs. They are also expected to comply with their IHPs.

## **2.5 Healthcare professionals**

Healthcare professionals, such as GPs and pediatricians, will liaise with the Nursery's nurses and notify them of any children identified as having a medical condition. They may also provide advice on developing IHPs.

## **3. Equal opportunities**

Our Nursery is clear about the need to actively support children with medical conditions to participate in Nursery trips and visits, and not prevent them from doing so.

The Nursery will consider what reasonable adjustments need to be made to enable these children to participate fully and safely on Nursery trips and visits.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that children with medical conditions are included. In doing so, children, their parents and any relevant healthcare professionals will be consulted.

## **4. Being notified that a child has a medical condition**

When the Nursery is notified that a child has a medical condition, the process outlined below will be followed to decide whether the child requires an IHP.

The Nursery will make every effort to ensure that arrangements are put into place within 2 weeks, or by the beginning of the relevant term for children who are new to our Nursery.

## **5. Individual healthcare plans**

The Nursery manager has overall responsibility for the development of IHPs for children with medical conditions. This has been delegated to Miss Susan Reynolds, Deputy.

Plans will be reviewed at least annually, or earlier if there is evidence that the child's needs have changed.

Plans will be developed with the child's best interests in mind and will set out:

- What needs to be done
- When
- By whom

Not all children with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the Nursery manager will make the final decision.

Plans will be drawn up in partnership with the Nursery, parents and a relevant healthcare professional, such as the Nursery nurse, specialist or pediatrician, who can best advise on the child's specific needs. The child will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a child has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The Nursery manager/role of individual with responsibility for developing IHPs, will consider the following when deciding what information to record on IHPs:

- The medical condition, its triggers, signs, symptoms and treatments
- The child's resulting needs, including medication (dose, side effects and storage) and other treatments, time, facilities, equipment, testing, access to food and drink where this is used to manage their condition, dietary requirements and environmental issues, e.g. crowded corridors, travel time between lessons
- Specific support for the child's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- The level of support needed, including in emergencies. If a child is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- Who will provide this support, their training needs, expectations of their role and confirmation of proficiency to provide support for the child's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- Who in the Nursery needs to be aware of the child's condition and the support required
- Arrangements for written permission from parents and the Nursery manager for medication to be administered by a member of staff, or self-administered by the child during Nursery hours
- Separate arrangements or procedures required for Nursery trips or other Nursery activities outside of the normal Nursery timetable that will ensure the child can participate, e.g. risk assessments
- Where confidentiality issues are raised by the parent/child, the designated individuals to be entrusted with information about the child's condition
- What to do in an emergency, including who to contact, and contingency arrangements

## **6. Managing medicines**

Prescription and non-prescription medicines will only be administered at Nursery:

- When it would be detrimental to the child's health or Nursery attendance not to do so **and**
- Where we have parents' written consent

**The only exception to this is where the medicine has been prescribed to the child without the knowledge of the parents.**

Children under 16 will not be given medicine containing aspirin unless prescribed by a doctor.

Anyone giving a child any medication (for example, for pain relief) will first check maximum dosages and when the previous dosage was taken. Parents will always be informed.

The Nursery will only accept prescribed medicines that are:

- In-date
- Labelled
- Provided in the original container, as dispensed by the pharmacist, and include instructions for administration, dosage and storage

The Nursery will accept insulin that is inside an insulin pen or pump rather than its original container, but it must be in date.

All medicines will be stored safely. Children will be informed about where their medicines are at all times and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available to children and not locked away.

Medicines will be returned to parents to arrange for safe disposal when no longer required.

### **6.1 Controlled drugs**

Controlled drugs are prescription medicines that are controlled under the Misuse of Drugs Regulations 2001 and subsequent amendments, such as morphine or methadone.

All controlled drugs are kept in a secure cupboard in the Nursery office and only named staff have access.

Controlled drugs will be easily accessible in an emergency and a record of any doses used and the amount held will be kept.

### **6.2 Unacceptable practice**

Nursery staff should use their discretion and judge each case individually with reference to the child's IHP, but it is generally not acceptable to:

- Prevent children from easily accessing their inhalers and medication, and administering their medication when and where necessary
- Assume that every child with the same condition requires the same treatment
- Ignore the views of the child or their parents
- Ignore medical evidence or opinion (although this may be challenged)
- Send children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal Nursery activities, including lunch, unless this is specified in their IHPs
- Penalize children for their attendance record if their absences are related to their medical condition, e.g. hospital appointments
- Prevent children from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- Require parents, or otherwise make them feel obliged, to attend Nursery to administer medication or provide medical support to their child, including with toileting issues. No parent should have to give up working because the Nursery is failing to support their child's medical needs
- Prevent children from participating, or create unnecessary barriers to children participating in any aspect of Nursery life, including Nursery trips, e.g. by requiring parents to accompany their child
- Administer, or ask children to administer, medicine in Nursery toilets

## **7. Emergency procedures**

Staff will follow the Nursery's normal emergency procedures (for example, calling 999). All children's IHPs will clearly set out what constitutes an emergency and will explain what to do.

If a child needs to be taken to hospital, staff will stay with the child until the parent arrives, or accompany the child to hospital by ambulance.

## **8. Training**

Staff who are responsible for supporting children with medical needs will receive suitable and sufficient training to do so.

The training will be identified during the development or review of IHPs. Staff who provide support to children with medical conditions will be included in meetings where this is discussed.

The relevant healthcare professionals will lead on identifying the type and level of training required and will agree this with the Nursery manager/role of individual. Training will be kept up to date.

Training will:

- Be sufficient to ensure that staff are competent and have confidence in their ability to support the children
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures

Healthcare professionals will provide confirmation of the proficiency of staff in a medical procedure, or in providing medication.

All staff will receive training so that they are aware of this policy and understand their role in implementing it, for example, with preventative and emergency measures so they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

## **9. Record keeping**

The nursery manager will ensure that written records are kept of all medicine administered to children for as long as these children are at the Nursery. Parents will be informed if their child has been unwell at Nursery.

IHPs are kept in a readily accessible place which all staff are aware of.

## **10. Liability and indemnity**

The nursery manager will ensure that the appropriate level of insurance is in place and appropriately reflects the Nursery's level of risk.

The details of the Nursery's insurance policy are:

**Berkeley Insurance Group – Personal Accident – Employers Liability and Public Liability**

### **11. Complaints**

Parents with a complaint about their child's medical condition should discuss these directly with the Melanie Kaye, Nursery Manager in the first instance. If the Nursery manager cannot resolve the matter, they will direct parents to the Nursery's complaints procedure.

### **13. Monitoring arrangements**

This policy will be reviewed and approved every 2 years.

### **14. Links to other policies**

This policy links to the following policies:

- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs information report and policy