



Supporting Children at Pre-School with Medical Conditions Policy

EYFS Key themes and Commitments

A Unique Child	Positive Relationships	Enabling Environments	Learning & Development
1.2 Inclusive Practice 1.4 Health & Well-being	2.1 Respecting Each Other 2.2 Parents as Partners 2.3 Supporting Every Child		

At Bottesford Bunnies Pre-School we want all children to have successful and fulfilling lives. Section 100 of the Children and Families Act 2014 places a statutory duty on all schools to effectively manage and meet the needs of children with medical conditions, medical needs and physical disabilities. The aim is to ensure that all children with medical conditions are properly supported in pre-school. The outcome should be that they can play a full and active role in pre-school life, such that they remain healthy and achieve their full potential.

This policy document should be considered in conjunction with all other duties, policies and guidance, for example Health & Safety legislation, the SEND code of practice and the Equality Act 2010 that may impact on support/provision with medical conditions.

Some children with medical conditions may be disabled, where this is the case the Pre-school must comply with the duties under the Equality Act 2010. Pre-school is required to make reasonable adjustments to minimise or remove barriers to access and participation. Some children may also have special educational needs (SEN), for these children, this policy should be read in conjunction with the pre-school SEND policy.

Supporting a child with a medical condition during pre-school hours is not the sole responsibility of one person and the pre-school's ability to provide effective support will depend on co-operative working with other agencies including healthcare professionals, the local authority, parents/carers, the child and, where appropriate,

social care or other outreach professionals. This type of partnership working aims to ensure that the needs of children with medical conditions are met effectively.

Medical conditions can sometimes result in short term, frequent or long-term absence from pre-school which can impact on educational attainment. Pre-schools are required to recognise and consider the potential social and emotional implications associated with a medical condition, as well as the educational impact, when planning the child's needs.

1. Roles and Responsibilities

1.1 Director

The Director (Clare Williams) is responsible for:

- ensuring that she develops and effectively implements policy with partners and pre-school staff, including regular policy review;
- ensuring that she makes all staff aware of this policy on supporting children with medical conditions and all staff understand their role in its implementation.
- designating a named individual who is responsible for effective implementation of this policy (Jannine Ladden– SENCO)
- ensuring this policy clearly identifies how the roles and responsibilities of staff who are involved in the arrangements to support pupils at pre-school with medical conditions are made clear to both staff and parents/carers.
- ensuring that all relevant staff are aware of an individual child's medical condition and needs;
- ensuring that sufficient numbers of staff receive appropriate training to fulfil the roles and responsibilities of supporting children with medical conditions e.g. pre-school is able to deliver against all care plans and implement policies, including for example in contingency or emergency situations and management of staff absence,
- ensuring that a system is in place which identifies procedures to be followed on receipt of notification of a child's medical needs, procedures should cover any transitional arrangements.
- ensuring that cover arrangements are always available in the event of staff absence or staffing changes including briefing for volunteers, cover and appropriate induction for new members of staff
- ensuring that care plans are in place, where appropriate and developed in consultation with parents/carers, healthcare professionals and relevant staff.
- ensuring that care plans are monitored and are subject to review, at least annually, or sooner if needs change, this is 3 months at Bottesford Bunnies.
- ensuring that risk assessments relating to the pre-school environment are in place, as appropriate including considerations for actions to take in the event of emergency situations.
- ensuring that appropriate insurance is in place to support staff to undertake this role.
- ensuring that a complaints procedure is in place and is accessible.

1.2 Staff

Any member of staff may be asked to provide support for a child with a medical condition, including the administration of medicine(s) and medical intervention(s) although they cannot be required to do so, this is a voluntary role.

Staff will receive sufficient and suitable training and achieve competency before they take on responsibility for supporting children with medical conditions.

Where children have a Care Plan, the roles and responsibilities of staff will be clearly recorded and agreed.

Staff read and sign the Care Plan to show they have read and understood the medical condition and the required action to take.

1.3 Parents/carers Responsibilities

Parents/carers are required to:

- provide the pre-school with sufficient and up to date information about their child's medical needs and to update it at the start of each pre-school year/term.
- complete if appropriate parental/carer agreement to gain consent for medicines/medical interventions/emergency calpol to be administered at pre-school, use of Lifevac as a last resort for choking incidents.
- provide up to date contact information so that parents/carers or other nominated adults are contactable at all times.
- carry out any action they have agreed to as part of the implementation of a Care Plan.
- provide any medication in its original packaging, with the pharmacy label stating the following:
 - a) the child's name
 - b) the child's date of birth
 - c) name of medicine
 - d) frequency/time medication administered
 - e) dosage and method of administration
 - f) special storage arrangements
- ensure that medicines or resources associated with delivery of a medical intervention have not passed the expiry date;
- collect and dispose of any medicines held in pre-school as agreed.
- provide any equipment required to carry out a medical intervention
- collect and dispose of any equipment used to carry out a medical intervention

In the event that staff are unable to follow specific medication/feeding tasks, parents/carers will need to come to pre-school to administer.

2. Child's Information

Parents/carers are required to give the following information about their child's medical condition and to update it at the start of each pre-school year or sooner, if needs change.

- a) Details of child's medical conditions and associated support needed at pre-school
- b) Medicine(s) including any side effects
- c) Medical intervention(s)

- d) Name of GP/Hospital and Community Consultants/Other Healthcare Professionals
- e) Special requirements e.g. dietary needs
- f) Who to consult in an emergency
- g) Cultural and religious views regarding medical care

3.Managing Medicines/Medical Interventions on Pre-School Premises

While 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 prescribed medication (clearly labelled) as part of maintaining their health and well-being or when they are recovering from an illness. We ensure that where medicines are necessary to maintain health of the child, they are given correctly and in accordance with legal requirements.

In many cases, it is possible for children's GP's 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, the parent **MUST** keep the child at home for the first 48 hours to ensure that there are no adverse effects, as well as to give time for the medication to take effect.

No medication/medical intervention will be administered without prior written permission from the parents/carers (apart from emergency calpol, see section below)

No changes to administration method or dosage of medication or changes in procedures relating to medical interventions will be carried out without written authority from parents/carers.

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 an educator what they need. However, this does not replace staff vigilance in knowing and responding when a child requires medication.

Any member of staff, on each occasion giving medicine/medical intervention to a child should check:

- a) Name of the child
- b) Written instructions provided by the parents/carers or healthcare professional or as agreed in a Care Plan
- c) Prescribed dose, if appropriate
- d) Expiry date, if appropriate
- e) When last administered and dose, if appropriate

The administration of medicine is recorded accurately on a medication form each time it is given and is signed by the person administering the medication and a witness. Parents/carers are shown the document at the end of the session and asked to sign the document to acknowledge the administration of the medicine. A medication form must be completed for each day, that the medication is to be administered. Parents/Carers are text to notify them if an inhaler has been given. Parents/carers must also sign the form, if the medication has not been given. The medication documents are reviewed regularly, to look at the frequency of medication given in the setting. For example, a high incidence of antibiotics being prescribed for a number of children at similar times may indicate a need for better infection control.

Administering of Emergency Paracetamol (Calpol)

On registration, parents will be asked to sign an emergency medication consent for Paracetamol. If a child experiences a high temperature whilst at Preschool, staff will contact parents to collect the child, however if staff cannot contact parents or emergency contacts and feel that the child needs emergency paracetamol then this consent will allow us to administer this.

Emergency paracetamol will be administered under the following conditions only-

- a) temperature of above 38 degrees
- b) completed permission consent at registration
- c) Manager to make decision to administer to safeguard the wellbeing of the child.

Administering of Emergency Piriton

Piriton will be kept on site for emergencies only.

On registration, parents will be asked if they would sign the emergency medication consent for liquid piriton.

If a child experiences an allergic reaction/anaphylaxis whilst at preschool, staff will contact parents to collect the child. If staff cannot contact parents or emergency contacts, the Manager will make the decision as to whether Emergency piriton is administered.

3.1 Refusing Medication/Medical Intervention

If a child refuses to take their medication/medical intervention, staff will not force them to do so. Refusal to take medication will be recorded and dated on the medication document. Reasons for refusal to take medications/medical intervention must also be recorded as well as the action then taken by the member of staff.

Parents/carers will be informed as soon as possible. Where the child is potentially placing themselves at risk by refusal, parents/carers will be informed immediately.

3.2 Non-controlled drugs and medical resources

All medicines and medical equipment/resources will be stored safely as agreed with parents/carers, as on the label e.g refrigerated or described in the child's care plan.

All emergency medicines, such as asthma inhalers and adrenaline pens, should be readily available to staff and should not be locked away but stored safely out of reach of children. At Bunnies, these items are kept in a basket on a high shelf in the main room. Other non-emergency medicines must be kept in a secure place not accessible to children. They will be clearly labelled with the child's name, date of birth and date of expiry.

4. Training

Staff must not give prescription medicines or undertake healthcare procedures without appropriate training. A First Aid Certificate does NOT constitute appropriate training in supporting children with medical conditions. All staff must be made aware of the pre-school's policy for supporting children with medical conditions and their role in implementing that policy through for example training at team meetings, involvement in development of Care plans etc. Specialist training and advice will be provided by appropriate healthcare professionals e.g. specialist epilepsy nurse, epi pen training by community nurse etc.

Training for all staff will be provided on a range of medical needs.

Supporting a child with a medical condition during pre-school hours is not the sole responsibility of one person.

Training will ensure that sufficient numbers of staff are competent and have confidence in their ability to support children with medical conditions, and to fulfil the requirements that are set out in individual care plans, induction training will raise awareness of pre-school policy and practice on supporting children with medical condition(s)

Training will be sufficient to ensure staff are competent and have confidence in their ability to deal with all situations. Pre-school will make every effort to ensure that specialist training will be completed as quickly as possible to ensure that the child is able to attend pre-school safely.

A record of staff training carried out will be kept, identifying the date review or refresher training will be required where appropriate.

5. Care Plans

Where appropriate, a care plan will be drawn up in consultation with the pre-school, parents/carers, health professional and any other relevant professional, these are reviewed termly.

6. Off- Site Activities

Bottesford Bunnies off-site activities involve parents/carers.

Children with medical conditions will be actively supported in accessing all activities on offer including trips and outings.

Preparation and forward planning for all off-site activities will take place in good time to ensure that arrangements can be put in place to support a child with a medical condition to participate fully.

Pre-school will consider what reasonable adjustments need to be put in place to enable children with medical conditions to participate safely and fully.

Pre-school will carry out a thorough risk assessment to ensure the safety of all children and staff. In the case of children with medical needs the risk assessment process will involve consultation with parents/carers and relevant healthcare professionals to ensure the child can participate safely.

In some circumstances evidence from a clinician, such as hospital consultant may state that participation in some aspects offered is not possible. Where this happens, pre-school may need to make alternative arrangements for the child.

Arrangements will be in place to ensure that a care plan can be implemented fully and safely when out of pre-school. Risk assessment will identify how the care plan

will be implemented effectively off-site and where additional supervision or resources are required.

7. Managing Emergencies and Emergency Procedures

A child's Care Plan will clearly define what constitutes an 'emergency' and the action to be taken, including ensuring that all relevant staff are aware of emergency symptoms and procedures.

If a child is taken to hospital, staff will stay with the child until the parents/carers arrive, or accompany a child taken to hospital by ambulance. Accurate information about the child will be provided to the emergency services at the call out stage, during any first response stage or subsequently moving on to hospital.

8. Confidentiality and Sharing Information within Pre-School

Pre-school is aware of the need to manage confidential information sensitively and respectfully, maintaining the dignity of the child and family at all times.

Pre-school will disseminate information to key members of staff involved in the child's care on a need-to-know basis, as agreed with parents/carers.

Where the child has a care plan, this will be shared with staff at team meetings or sooner should the need arise.

Pre-school will ensure that arrangements are in place to inform new members of staff of the child's medical needs.

Pre-school will ensure that arrangements are in place to transfer information on a child's medical needs to staff during any transition.

9. Accidents

All accidents at pre-school are recorded on Connect Childcare for the parents to read, then signed on collection or by parent on Parent zone. If possible, we endeavour to also inform them on collection of the child. (Written forms for more serious accidents)

Minor Accidents

Staff must wear protective clothing when appropriate, (also following most recent Covid guidelines) Added all staff are first aid trained.

The child should be removed to a quiet area.

The child's injury should be assessed by the educator.

The injury should then be treated.

The child is reassured and comforted and resettled into play.

The accident should then be reported on Connect Childcare The child's

Parent/Carer should also be informed when they arrive to collect the child.

In the event the accident is more severe (although not a major accident) the Parent/carers will be called to advise them of the accident, the treatment given and if they need to collect their child from pre-school. **If a parent/carers is telephoned this will be recorded.**

We may ask parents if they would like to see a picture/photo of the injury.

Major Accidents

Staff must wear protective clothing (e.g., gloves) at all times.

If able to be moved, the child must be taken to a quiet area and the Manager/Deputy/Director notified.

If there is a doubt whether the child can be moved, the First Aider and Manager/Deputy must make a decision.

If the child cannot be moved, children should be moved away from the area and the child be made as comfortable as possible and kept warm.

The First Aider and Manager/ Deputy Manager will assess the situation and decide whether the child needs to go to hospital immediately or whether they have to wait for a Parent/carer to collect them.

If the child needs to go to hospital immediately, an ambulance should be called. The Parent/Carer will then be contacted and arrangements made to meet at the hospital.

A educator will accompany the child to hospital and remain with the child until the parent/carer arrives.

The educator MUST NOT sign for any treatment to be administered.

If the child can wait to go to hospital, the Parent/Carer should be contacted.

An educator should remain with the child at all times and the child be made as comfortable as possible.

When the Parent/Carer arrives, it will be at their discretion, whether they take the child to hospital.

The accident should be reported on an accident form, as well as Connect childcare and signed by parent/carer.

All major accidents MUST be reported to Ofsted within 14 days. The pre-school will also notify local child protection agencies of any serious accident or injury to, or the death of, any child while in our care and act on any advice from those agencies (DfE 2021 3.52)

Major accidents will also be reported to North Lincs Council and RIDDOR.

10.Infection Control

There may be times when a child is taken ill at the pre-school and the nature of the illness requires them to be excluded from the setting. In such circumstances to prevent the spread of infection, the child will be cared for with an educator (wearing protective clothing) away from all other children, until their parent can collect them.

If the Parent/carer is not available, attempt to contact all emergency numbers in the child's file.

If no contact can be made with the Parent/Carer or emergency contacts, all attempts to lower the child's temperature must be made by the following:

Removing some of the child's clothing where appropriate
Administer emergency Calpol if parents have given consent.
Place a flannel soaked in tepid water on the arms, legs and head of the child.
Asking the child to rest.
If the child becomes unconscious or fits, the educator must contact the Director (Clare Williams) and an ambulance be called
If the sudden illness is a result of a sustained head injury, the procedure for sudden illness must be followed (see Major Accidents)

Depending on the nature of the child's illness the "Guidelines on Infection in Schools and other Child Care Settings" guidance will be followed for the length of time the child should be excluded from Pre-School. This information can be gained from
<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>

If your child becomes ill at home please telephone the setting by 9.15am on the first day of absence, and every day after, where necessary. The Director (Clare Williams) or Manager will contact the family if a child is absent without notification.

Children and adults with sickness and diarrhoea will not be allowed into the setting for 48 hours as it is highly contagious.

No child will be admitted to the setting if they are suffering from a contagious illness

11. Existing Injuries

If a child arrives at the setting with an existing injury, this is noted on an 'Existing Injuries Report' form, which is signed by both the parent/carer and educator and witnessed by another member of staff. When a child informs us or an educator becomes aware of an existing injury, the form must be completed ready to clarify with the parent/carer that the information is correct, or to ascertain how the injury was obtained at the end of the session, the parent/carer will be contacted for more information. All existing injury forms must be shown to one of the Safeguarding Coordinators who will also countersign the form, this is to ensure that the safety and well-being of the child – Refer to Safeguarding Policy and Procedures. All existing injuries forms will then be discussed at the next staff meeting as part of the agenda item under Safeguarding and recorded on the existing injury monitoring sheets)

12. Unacceptable Practice

Although pre-school staff will use their discretion and judge each case on its merits with reference to the child's care plan, it is not generally acceptable practice to:

- require parents/carers to regularly attend pre-school to administer preventative medicines/medical interventions or provide medical support to their child for diagnosed chronic illness or medical conditions.

- prevent children from participating or creating unnecessary barriers to children participating in any aspect of pre-school life.
- assuming that every child with the same condition requires the same treatment.
- ignore the views of the child and/or their parents/carers (although this may be challenged)
- ignore medical evidence or opinion (although this may be challenged)
- send children with medical conditions home frequently unless agreed with the parents
- prevent children with medical conditions from staying at pre-school for normal pre-school activities, including lunch, unless this is specified in the care plan
- if the child becomes ill, to leave them unattended.
- prevent children from eating, drinking or taking toilet/other breaks whenever they need to in order to manage their medical condition effectively.

13. Liability and indemnity

The Director of Bottesford Bunnies (Clare Williams) ensures that appropriate insurance is in place and that it reflects the level of risk. The insurance covers staff providing support to pupils with medical conditions. From time to time, the pre-school will need to review the level of cover for healthcare procedures and any associated related training requirements (such as may be the case with specific children with complex needs)

14. Complaints

Parents/carers who are dissatisfied with the support provided should discuss their concerns directly with the Pre-school. If for whatever reason this does not resolve the issue, a formal complaint can be made via the pre-school's complaints procedure.

Policy Review

- This policy will be reviewed annually, or sooner if required.
- Any complaints regarding this policy should be dealt with via the current complaints procedure.

References to other policies:

- Communication & Working in Partnership
- Complaints
- Confidentiality
- Equality of Opportunity

- Safeguarding Children

This policy is in line with EYFS and Every Child Matters –

Adopted at staff meeting on Thursday 28th February 2019 by Owner, Manager and Practitioners.

Next review date February 2020

Reviewed and updated at staff meeting Monday 23rd November 2020 by Director, Managers and Practitioners.

Next review date November 2021

Reviewed and updated by Director (CW) Manager, Deputy and Practitioners at Staff meeting November 11th, 2021

Next review date November 2022

Reviewed and updated by Director (CW) Manager, Deputies and Educators at Staff meeting November 30th, 2022

Next review November 2023

Reviewed and updated by Director, Manager, Deputies and Educators at staff meeting January 24th 2024.

Next review date January 2025.