The Lloyd Williamson Nurseries

Supporting Children with Medical Conditions Policy

2026-2027

Updated by Ramona Cristea and Lucy Meyer
Date: 14.10.26
Due for Update: October 2027

Contents

1. Aims 2
2. Legislation and statutory responsibilities 3
3. Roles and responsibilities 3
4. Equal opportunities 4
5. Being notified that a child has a medical condition 4
6. Individual healthcare plans (IHPs) 4
7. Managing medicines 5
8. Emergency procedures 6
9. Training 6
10. Record keeping 7
11. Liability and indemnity 7
12. Complaints 7
13. Monitoring arrangements 8
14. Links to other policies 8
Appendix 1: Being notified a child has a medical condition 8
Appendix 2: Procedures for children who are sick or infectious 9

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1. Aims

At Lloyd Williamson Nurseries we understand that medical conditions requiring support at nursery can affect quality of life and may be life-threatening.

Our nurseries will support children with medical conditions so that they have full access to education, including trips and outdoor play.

This policy aims to:

- Make sure that staff and parents/carers understand how our nurseries will support children with medical conditions
- Set out the roles and responsibilities for everyone in the nursery in regard to children with medical conditions
- Set out the procedure for creating, reviewing and managing individual healthcare plans (IHPs)
- Set out how we will manage medicines in the nurseries
- Reassure parents/carers that the school will help their child feel safe, supported and included

The SLT is responsible for implementing this policy is

Manager – Ramona Crista

Director – Lucy Meyer

Senior Leadership Team (SLT) – Ramona Cristea and Lucy Meyer

2. Legislation and statutory responsibilities

This policy is based on the statutory guidance on supporting pupils with medical conditions at school and the Early Years statutory framework from the Department for Education (DfE).

3. Roles and responsibilities

The SLT is in charge of implementing this policy

The SLT will:

- Make sure all staff are aware of this policy and understand their role in its implementation
- Make sure 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
- Make sure that all staff who need to know are aware of a child's condition
- Take overall responsibility for the development and monitoring of individual healthcare plans (IHPs)
- Make sure that nursery staff are appropriately insured and aware that they are insured to support children in this way
- Manage cover arrangements in the case of staff absence or turnover, to make sure a suitable staff member is always available.
- Approve risk assessments for nursery trips and activities outside the normal nursery timetable that involve provision for children with medical conditions
- Make sure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date
- Implement systems for obtaining information about a child's needs for medicines and keeping this information up to date

3.3 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.

3.4 Parents/carers

Parents/carers will:

- Provide the nursery with sufficient and up-to-date information about their child's medical needs
- Provide evidence of appropriate prescription and written permission for medicines to be administered by staff
- 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

3.5 Healthcare professionals

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

4. Equal opportunities

The nurseries will adhere to the legal responsibilities under the Equality Act 2010 and will not unlawfully discriminate against any children. Our nurseries are clear about the need to actively support children with medical conditions to participate in nursery trips and visits, or in outdoor activities, and not prevent them from doing so.

The nurseries will consider what reasonable adjustments need to be made to enable these children to participate fully and safely on nursery trips, visits and outdoor activities.

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.

5. Being notified that a child has a medical condition

When the nurseries are notified that a child has a medical condition, the process outlined in Appendix 1 will be followed to decide whether the child requires an IHP.

The nurseries 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 nurseries.

5.1 Obtaining Information about Medicines

The EYFS framework states that settings must include how they obtain information about a child's need for medicine and a system for keeping this up to date (see section 10 of this policy).

We will:

- For new starters, send a form to all parent/carers of children after their place at the nurseries has been confirmed, but before they start , to confirm any medicine(s) their child needs. Where a child has a new diagnosis and/or a child has moved to the nurseries mid-term, we will send a form and put arrangements in place within 2 weeks
- Send a reminder to parents/carers at the start of each year, as well as a form to complete, if their child requires certain medicine(s)

We ask that parents/carers proactively inform us by either phone call to the school 0207 243 3331 (PGT1) or 0207 243 6548 (PGT2) or an email to Ramona Cristea (manager) at ramona@lws.org.uk if their child's medical needs change during the school year.

6. Individual healthcare plans (IHPs)

The SLT has overall responsibility for the development of IHPs for children with medical conditions.

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/carers when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the SLT will make the final decision.

Plans will be drawn up in partnership with the nurseries, parents/carers and a relevant healthcare professional, such as a specialist or paediatrician, who can best advise on the child's specific needs.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan. If a pupil has special educational needs (SEND) but does not have an EHC plan, the SEND 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 SLT 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. busy periods of the day such as drop-off.
- Specific support for the child's educational, social and emotional needs. For example, how absences will be managed and use of rest periods.
- The level of support needed, including in emergencies.
- 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 nurseries need to be aware of the child's condition and the support required
- Arrangements for written permission from parents/carers and the SLT for medication to be administered by a member of staff during nursery hours.
- Separate arrangements or procedures required for nursery trips or other 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/carer 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

7. 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/carers' written consent

The person administering the medicine will keep a written record. Parents/carers will always be informed on the same day the medicine has been administered, or as soon as reasonably possible.

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

Anyone giving a child any medication will first check recommended and maximum dosages for the pupil's age, and when the previous dosage was taken.

The nurseries 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. Medicines and devices such as asthma inhalers, blood glucose testing meters and adrenaline pens will always be readily available and not locked away.

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

7.1 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.

7.2 Unacceptable practice

Although nursery staff will use their discretion and judge each case on its merits with reference to the child's IHP, they will keep in mind that it is not generally acceptable practice to:

- Assume that every child with the same condition requires the same treatment
- Ignore the views of the child's parents/carers
- Ignore medical evidence or opinion
- 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
- Penalise 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/carers, or otherwise make them feel obliged, to attend the nurseries to administer medication or provide medical support to theirchild , including with toileting issues. No parent/carer 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 trips, e.g. by requiring parents/carers to accompany their child
- Administer medicine in nursery toilets

8. 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/carer arrives, or accompany the child to hospital by ambulance.

9. Training

Staff who are responsible for supporting any child 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 SLT. 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 child
- Fulfil the requirements in the IHPs
- Help staff to have an understanding of the specific medical conditions they are being asked to support 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 that they can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction if we have a child with an IHP.

10. Record keeping

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

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

EYFS settings 10.1 Recording information about medicines

The EYFS framework states that settings must include how they obtain information about a child's need for medicine (see section 5 of this policy), and a system for keeping this up to date.

AT Lloyd Williamson Nurseries we have the following procedure for keeping a record of children's medicines…

We will:

- Enter each child's medicine need in the nursery's system
- Update our records when parents/carers of children inform us of changes to their child's needs
- Keep a record of changes, labelling the most recent record for each child
- Make sure that all staff have access to records so that they are informed about a child's medical needs
- Securely hold this information in accordance with the UK GDPR
- Inform parents/carers about how they can access their child's information (provided no relevant exemptions apply to their disclosure under the Data Protection Act 2018)

11. Liability and indemnity

The details of the school's insurance policy are displayed in the nurseries and an electronic copy can be sent by request to Ramona Cristea at ramona@lws.org.uk

12. Complaints

Parents/carers with a complaint about the nursery's actions in regard to their child's medical condition should discuss these directly with the manager, Ramona Cristea. If the manager cannot resolve the matter, they will direct parents/carers to the nursery's complaints procedure.

13. Monitoring arrangements

This policy will be monitored and reviewed by the SLT annually or when a child with medical needs starts at the nursery.

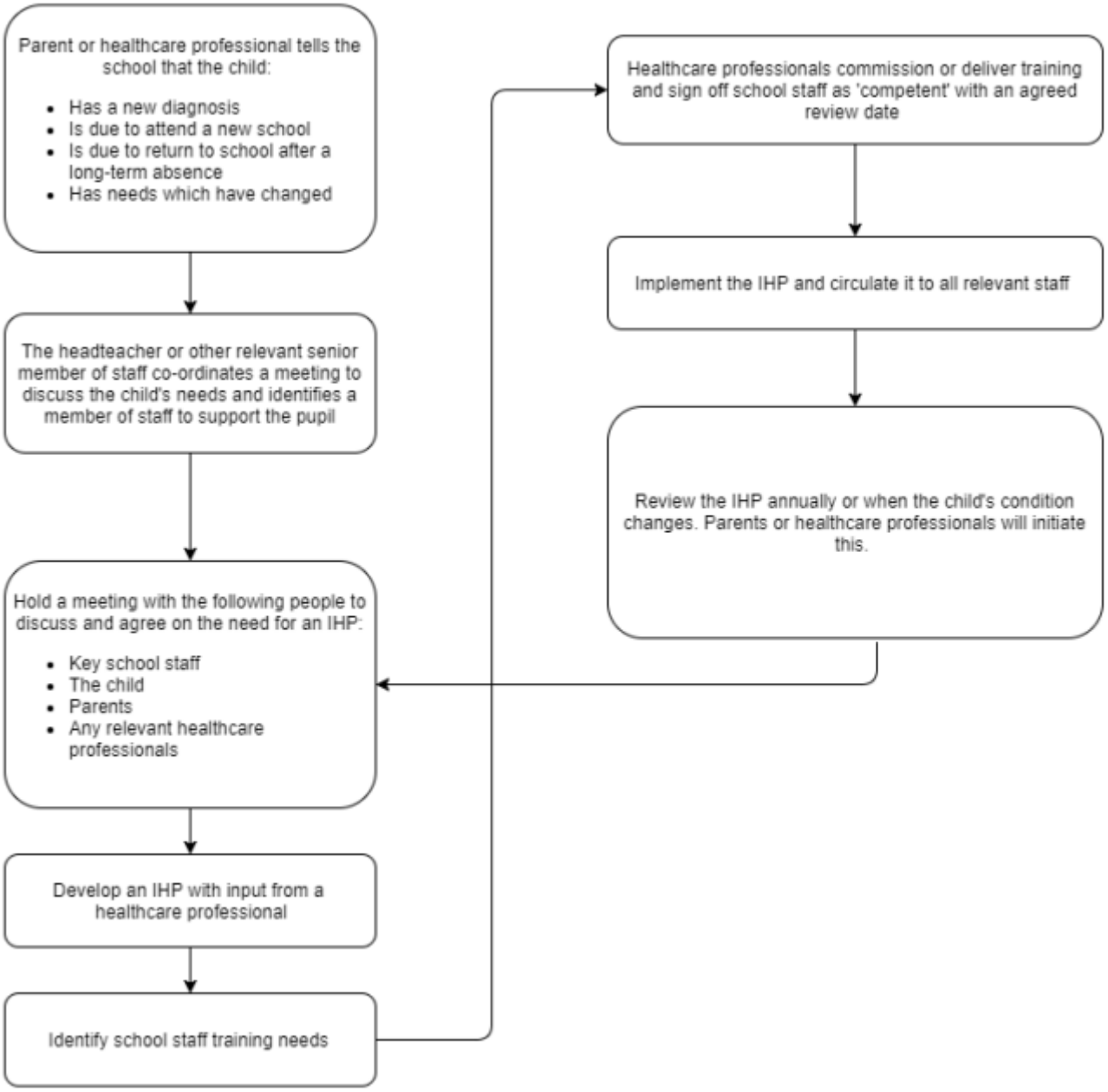
14. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality and Diversity
- First aid
- Health and safety
- Safeguarding
- Special educational needs policy
- Procedure to prevent the spread of infection
- Administration of Medicine

Appendix 1: Being notified a child has a medical condition

Please note 'school' is interchangeable for 'nursery' in the following flow chart



Appendix 2: Procedures for children who are sick or infectious

- Pupils who have an infectious disease should not attend nursery

- Parents should notify the nursery if their child has an infectious disease
- If a child becomes unwell during the day – for example, they have a temperature, sickness, diarrhoea or stomach pains – the parents or carers will be contacted to collect their child
- Pupils with a temperature, sickness, diarrhoea or an infectious disease should not attend nursery while they are sick. Depending on the sickness, staff may ask parents to take their child to the doctor before they return to nursery
- Staff will notify parents if a risk to other children exists

Children with specific infectious diseases set out in the UK Health Security Agency's exclusion table will not be allowed to return to nursery until the appropriate exclusion period has passed.

We will take the following steps to prevent the spread of infection:

- Reducing or eliminating sources of infection through good hygiene practices
- Good handwashing practice
- Encouraging and facilitating healthy eating
- Ensuring that regulated food hygiene standard requirements in the maintenance of food preparation areas and preparation of food are followed
- Championing and educating staff, parents, carers and children on the importance of immunisation as a tool against infection (while recognising the individual's right to choose)
- Establish a cleaning routine for:
    - Nappy changing facilities
    - Play areas
    - Toys, activities and equipment

Lucy Meyer

14.10.2026