



# Cherrywood Federation

## Supporting pupils with medical conditions policy

Article 23: A child with a disability has the right to live a full and decent life with dignity and independence, and to play an active part in the community. Governments must do all they can to provide support to disabled children.

Article 24: Every child has the right to the best possible health. Governments must provide good quality health care, clean water, nutritious food and a clean environment so that children can stay healthy. Richer countries must help poorer countries achieve this.

<b>Last reviewed on:</b>	December 2025
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<b>Next review due by:</b>	December 2027
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### 1. Policy Statement

Both schools in the Cherrywood Federation are inclusive communities that aim to support and welcome pupils with medical conditions and support all children to achieve their full potential.

Both Hatfeild and Joseph Hood Primary Schools aim to provide all pupils with all medical conditions the same opportunities as others at school.

We will help to ensure that all staff can:

Understand their duty of care to children and young people in the event of an emergency.

Feel confident in knowing what to do in an emergency.

Understand that medical conditions should not be a barrier to learning

### 2. Aims

At both Hatfeild Primary School and Joseph Hood Primary School we understand that medical conditions requiring support at school can affect quality of life and may be life-threatening.

Our school will support pupils with medical conditions to feel welcomed and supported so that they have full access to education, including school trips and physical education.

This policy aims to:

- › Make sure that pupils, staff and parents/carers understand how our school will support pupils with medical conditions

- › Set out the roles and responsibilities for everyone in the school community in regard to pupils with medical conditions
- › Set out the procedure for creating, reviewing and managing individual healthcare plans (IHPs)
- › Set out how we will manage medicines in school
- › Reassure parents/carers that the school will help their child feel safe, supported and included

**The people with responsibility for implementing this policy are Anita Saville, The Executive Headteacher and the Heads of School, Libby Wright at Joseph Hood and Leanne Parkinson and Alice Waterman at Hatfeild Primary School.**

### **3. Legislation and statutory responsibilities**

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the statutory guidance on [supporting pupils with medical conditions at school](#) and the Early Years Foundation Stage statutory framework from the Department for Education (DfE).

### **4. Roles and Responsibilities**

#### **4.1 The governing board**

The governing board has ultimate responsibility for making arrangements to support pupils with medical conditions.

"Governing Bodies - must make arrangements to support pupils with medical conditions in school, including making sure that a policy for supporting pupils with medical conditions in school is developed and implemented. They should ensure that a pupil with medical conditions is supported to enable the fullest participation possible in all aspects of school life. Governing bodies should ensure that sufficient staff have received suitable training and are competent before they take on responsibility to support children with medical conditions". Supporting Pupils with Medical Conditions April 2014.

The governing board will:

- › Review this policy in a timely manner, in line with the relevant legislation and requirements
- › Make sure that the policy sets out the procedures to be followed whenever the school is notified that a pupil has a medical condition
- › Monitor practice, and staff training, in regards to pupils with medical conditions, in line with this policy

The governing board delegates the day-to-day implementation of this policy to The Executive Headteacher and the Heads of School.

#### **4.2 The Executive Headteacher and Heads of School**

The Executive Headteacher and Heads of School will:

- › Ensure the school is inclusive and welcoming and that the medical condition policy is in line with national and local guidance and policy frameworks.

- › 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 school staff are appropriately insured and aware that they are insured to support pupils in this way
- › Manage cover arrangements in the case of staff absence or turnover, to make sure a suitable staff member is always available, and supply staff are briefed appropriately about pupils' medical needs
- › Approve risk assessments for school visits and school activities outside the normal school timetable that involve provision for pupils with medical conditions
- › Contact the school nursing service in the case of any pupil who has a medical condition that may require support at school, but who has not yet been brought to the attention of the school nurse
- › 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
- › Monitor and review the policy at least every 2 years according to review recommendations and changes in local and national guidance and legislation.

### **4.3 Staff**

Supporting pupils with medical conditions during school hours is not the sole responsibility of 1 person. Any member of staff may be asked to provide support to pupils with medical conditions. This includes the administration of medicines.

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

Teachers will take into account the needs of pupils with medical conditions that they teach and be aware that medical conditions can affect a pupil's learning. Teachers should liaise with parents, healthcare professionals and the school SENCO if a child is falling behind due to their medical needs/condition.

All staff will know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help.

All staff have a responsibility to:

- be aware of the potential triggers, signs and symptoms of common medical conditions and know what to do in an emergency
- understand the school's medical conditions policy
- know which pupils in their care have a medical condition and be familiar with the content of the pupil's Health Care Plan
- allow all pupils to have immediate access to their emergency medication

- maintain effective communication with parents, including informing them if their child has been unwell at school
- ensure pupils who carry their medication with them (such as a diabetic pump) have it when they go on a school visit or out of the classroom
- be aware of pupils with medical conditions who may be experiencing bullying or need extra social support
- understand the common medical conditions and the impact it can have on pupils (pupils should not be forced to take part in any activity if they feel unwell)
- ensure all pupils with medical conditions are not excluded unavoidably from activities they wish to take part in
- ensure pupils have the appropriate medication or food with them during any exercise and are allowed to take it when needed

#### **4.4 Parents/carers**

Parents/carers will:

- › Provide the school with sufficient and up-to-date information about their child's medical needs, notifying school of any changes
- › 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
- › Inform the school of any medication their child requires while taking part in visits, outings, school residential trips and other out of school activities.
- › Ensure their child's medication and medical devices are labelled with their child's full name and class
- › Provide the school with appropriate spare medication labelled with their child's name
- › Ensure that their child's medication is within expiry dates
- › Keep their child at home if they are not well enough to attend school
- › Ensure their child has regular reviews about their condition with their doctor or specialist healthcare professional
- › Ensure their child has a written care/self-management plan from their doctor or specialist healthcare professional to help their child manage their condition.
- › 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

#### **4.5 Pupils**

Pupils with medical conditions will often be best placed to provide information about how their condition affects them. Pupils 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.

Pupils have a responsibility to:

- › Treat other pupils with and without a medical condition with respect
- › Tell their parents, teacher or nearest staff member when they are not feeling well
- › Let a member of staff know if another pupil is feeling unwell
- › Treat all medication with respect
- › Know how to gain access to their medication in an emergency
- › If mature and old enough, know how to take their own medication and to take it when they need it
- › Ensure a member of staff is called in an emergency situation.

#### **4.6 School nurses and other healthcare professionals**

School Nursing will not necessarily be aware of all pupils' medical conditions, but there is a clear expectation from the school that school nursing services are involved in the care plan process, as appropriate, including the following:

- › They will seek consent from the parent
- › Initiate and update health care plans regularly
- › Inform the school of pupils in need of a Health Care Plan
- › Help update the school's medical conditions policy, including recommending training
- › Help provide regular training for school staff in managing the most common medical conditions at school and advising training on less common conditions
- › Collate relevant health information to support pupil, family and school to inform the health care plan
- › Provide information about where the school can access other specialist training
- › Ensure Health Care Plans are designed to maximise attendance at school and engagement with learning, including effective reintegration to schools after absences.

#### **4.7 First Aiders at school**

First aiders have a responsibility to:

- › give immediate help to casualties with common injuries or illnesses and those arising from specific hazards with the school
- › when necessary, ensure that an ambulance or other professional medical help is called, when needed.

#### **4.8 Inclusion teams in the Federation**

The Inclusion Teams within the schools have the responsibility to:

- › help update the school's medical condition policy
- › know which pupils have a medical condition and which have special educational needs because of their condition
- › ensure teachers make the necessary arrangements if a pupil needs special consideration or access arrangements in exams or course work.

## **5. Equal opportunities**

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

The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

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

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

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

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

### **6.1 Obtaining information about medicines-applicable to all new starters in EYFS and across the school**

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

We will:

- For new starters, send a form to all parent/carers of pupils after their place at the school has been confirmed, but before their first school year starts, to confirm any health conditions/health issues and medicine(s) their child needs. Where a pupil has a new diagnosis and/or a pupil has moved to the school 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 in a newsletter, 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 or an email if their child's medical needs change during the school year.

Contact details-

Hatfeild Primary School- 0208 337 1332 Email- [admissions@hatfeild.merton.sch.uk](mailto:admissions@hatfeild.merton.sch.uk)

Joseph Hood Primary School-0208 542 2471 Email- [josephhoodprimary@josephhood.merton.sch.uk](mailto:josephhoodprimary@josephhood.merton.sch.uk)

## 7. Individual healthcare plans (HCPs)

The Executive headteacher/Heads of School have overall responsibility for the development of HCPs for pupils with medical conditions.

The day-to-day responsibility has been delegated to the sencos in both schools.

Viki Tucker at Hatfeild Primary School

Wendy Shepard at Joseph Hood Primary School

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

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

- > What needs to be done
- > When
- > By whom

Not all pupils with a medical condition will require an HCP. 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 Executive headteacher will make the final decision.

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

HCPs will be linked to, or become part of, any education, health and care plan (EHCP), where there is one in place. If a pupil has special educational needs (SEN) but does not have an EHCP, the SEN will be mentioned in the HCP.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed. The governing board, the Executive Headteacher/heads of School and the school sencos will consider the following when deciding what information to record on HCPs:

- > The medical condition, its triggers, signs, symptoms and treatments
- > The pupil'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 pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods, additional support in catching up with lessons, counselling sessions
- > The level of support needed, including in emergencies. If a pupil 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 pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- > Who in the school needs to be aware of the pupil's condition and the support required
- > Arrangements for written permission from parents/carers and the headteacher for medication to be administered by a member of staff, or self-administered by the pupil, during school hours

- › Separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the pupil can participate, e.g. risk assessments
- › Where confidentiality issues are raised by the parent/carer or pupil, the designated individuals to be entrusted with information about the pupil's condition
- › What to do in an emergency, including who to contact and contingency arrangements

Parents are provided with a copy of their child's current agreed HCP.

Health Care Plans are kept in a secure central location at each school-the school office.

Apart from the central copy, specified members of staff (agreed by the pupil and parents) securely hold copies of pupils' Health Care Plans. These copies are updated at the same time as the central copy.

All members of staff who work with groups of pupils have access to the Health Care Plans of pupils in their care.

When a member of staff is new to a pupil group, for example due to staff absence, we make sure that they are made aware of (and have access to) the Health Care Plans of pupils in their care.

We ensure that all staff protect pupil confidentiality.

We seek permission from parents to allow the Health Care Plan to be sent ahead to emergency care staff, should an emergency happen during school hours or at a school activity outside the normal school day.

This permission is included with the Health Care Plan.

## **7.1 Review of IHCP**

Parents are regularly reminded to update their child's Health Care Plan especially if their child has a medical emergency, or if there have been changes to their symptoms (getting better or worse) or their medication and treatments change.

Staff use opportunities such as teacher–parent interviews and home–school diaries to check that information held by the school on a pupil's condition is accurate and up to date.

Every pupil with a Health Care Plan has their plan discussed and reviewed at least once a year.

## **8. Managing and administering medicines**

If a pupil requires regular prescribed at school, parents are asked to provide consent on their child's Health Care Plan giving the pupil or staff permission to administer medication on a regular/daily basis, if required. A separate form is used with parents for pupils taking short courses of medication, such as antibiotics.

Prescription medicines will only be administered at school:

- › When it would be detrimental to the pupil's health or school attendance not to do so, **and**
- › Where we have parents/carers' written consent

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

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

The school will only accept prescribed medicines that are:

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

The school 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. Pupils 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 pupils and not locked away.

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

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.

## **8.1 Safe Storage of medication in school**

### **Safe storage – emergency medication**

Emergency medication is readily available to pupils who require it at all times during the school day or at off-site activities. On site, emergency medication is kept in the medical room, behind the school office at Hatfeild Primary School and in the school office at Joseph Hood Primary. On an off-site visit, emergency medication is kept with the group leader.

Pupils at both Joseph Hood Primary School and Hatfeild Primary School know where to access their emergency medication.

### **Safe storage – non-emergency medication**

All non-emergency medication is kept in a secure place, in the school office in a cool dry place. Pupils with medical conditions know where their medication is stored and how to access it. This is situated in the medical room, behind the school office at Hatfeild Primary School and in the school office at Joseph Hood Primary School.

Staff ensure that medication is only accessible to those for whom it is prescribed.

### **Safe storage – general**

There is an identified member of staff who ensures the correct storage of medication at school. All controlled drugs are kept in a cupboard in the office and only named staff have access.

The expiry dates for all medication stored at school are checked by staff at the end of each term and sent home at the end of the school year.

The identified member of staff, along with the parents of pupils with medical conditions, ensures that all emergency and non-emergency medication brought in to school is clearly labelled with the pupil's name and class, the name and dose of the medication and the frequency of dose.

All medication must be supplied and stored in its original containers. All medication is labelled with the pupil's name, the name of the medication, expiry date and the prescriber's instructions for administration, including dose and frequency.

Medication is stored in accordance with instructions, paying particular note to temperature.

Some medication for pupils may need to be refrigerated. All refrigerated medication is stored in an airtight container and is clearly labeled. Refrigerators used for the storage of medication are in a secure area, inaccessible to unsupervised pupils.

All medication is sent home with pupils at the end of the school year. Medication is not stored in summer holidays.

It is the parent's responsibility to ensure new and in date medication comes into school on the first day of the new academic year.

## **8.2 Record-Keeping**

We keep an accurate record of each occasion an individual pupil is given or supervised taking medication. Details of the supervising staff member, pupil, dose, date and time are recorded. If a pupil refuses to have medication administered, this is also recorded and parents are informed as soon as possible.

We hold training on common medical conditions. A log of the medical condition training is kept by the school and reviewed every 12 months to ensure staff are suitably trained. All school staff who volunteer or who are contracted to administer medication are provided with training by a healthcare professional.

The school keeps a register of staff who have had the relevant training. We keep an up-to-date list of members of staff who have agreed to administer medication and have received the relevant training

## **8.3. 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 school 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.

## **8.4 Safe Disposal**

Parents are asked to collect out-of-date medication.

If parents do not pick up out-of-date medication, at the end of the school year it is taken to a local pharmacy for safe disposal.

A named member of staff is responsible for checking the dates of medication and arranging for the disposal of any that have expired.

This check is done at least three times a year.

Sharps boxes are used for the disposal of needles.

Parents obtain sharps boxes from the child's GP or paediatrician on prescription. All sharps boxes in are stored safely in the school offices, unless alternative safe and secure arrangements are put in place on a case-by-case basis.

If a sharps box is needed on an off-site or residential visit, a named member of staff is responsible for its safe storage and return to a local pharmacy or to school or the pupil's parent.

Collection and disposal of sharps boxes is dealt with appropriately.

### **8.5 Pupils managing their own needs**

Pupils who are competent will be encouraged to take responsibility for managing their own medicines and procedures. This will be discussed with parents/carers and it will be reflected in their IHPs.

IHPs will include procedure for staff to follow if a pupil refuses to carry out a necessary procedure or take medicine.

## **9. Unacceptable practice**

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

- › Prevent pupils from easily accessing their inhalers and medication, and administering their medication when and where necessary
- › Assume that every pupil with the same condition requires the same treatment
- › Ignore the views of the pupil or their 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 school activities, including lunch, unless this is specified in their IHPs
- › Send an ill pupil to the school office or medical room unaccompanied or with someone unsuitable (e.g. a fellow pupil who is not old or responsible enough)
- › Penalise pupils for their attendance record if their absences are related to their medical condition-hospital appointments
- › Prevent pupils 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 school to administer medication or provide medical support to their pupil, including with toileting issues. No parent/carer should have to give up working because the school is failing to support their child's medical needs

- › Prevent pupils from participating, or create unnecessary barriers to pupils participating in any aspect of school life, including school trips, e.g. by requiring parents/carers to accompany their child
- › Administer, or ask pupils to administer, medicine in school toilets

## **10. Emergency procedures**

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

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

## **11. Training**

Staff who are responsible for supporting pupils 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 pupils 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 Head of School/SENCO. 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 pupils
- › 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.

## **12. Record keeping**

The governing board will ensure that written records are kept of all medicine administered to pupils for as long as these pupils are at the school. Parents/carers will be informed if their child has been unwell at school.

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

### **12.1 EYFS settings-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 information up to date.

We will:

- › Enter each pupil's medicine need in the school's system
- › Update our records when parents/carers of pupils 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 pupils' medical needs
- › Securely hold this information digitally 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)

### **13. Residential visits**

Risk assessments are carried out by school staff prior to any out-of-school visit and medical conditions are considered during this process. Factors we consider include: how all pupils will be able to access the activities proposed, how routine and emergency medication will be stored and administered, and where help can be obtained in an emergency. We understand that there may be additional medication, equipment or other factors to consider when planning residential visits and parents are involved in the planning process to ensure that all aspects are considered.

### **14. Liability and indemnity**

The governing board will ensure that the appropriate level of insurance is in place and appropriately reflects the school's level of risk.

Both Schools in the Federation hold insurance with the London Borough of Merton and Zurich.

### **15. Complaints**

Parents/carers with a complaint about the school's actions in regard to their child's medical condition should discuss these directly with the Head of School in the first instance. If the Head of School cannot resolve the matter, they will direct parents/carers to the school's complaints procedure.

### **16. Monitoring arrangements**

This policy will be monitored by the Executive Headteacher and the Inclusion team. It will be reviewed and approved by the governing board every 2 years.

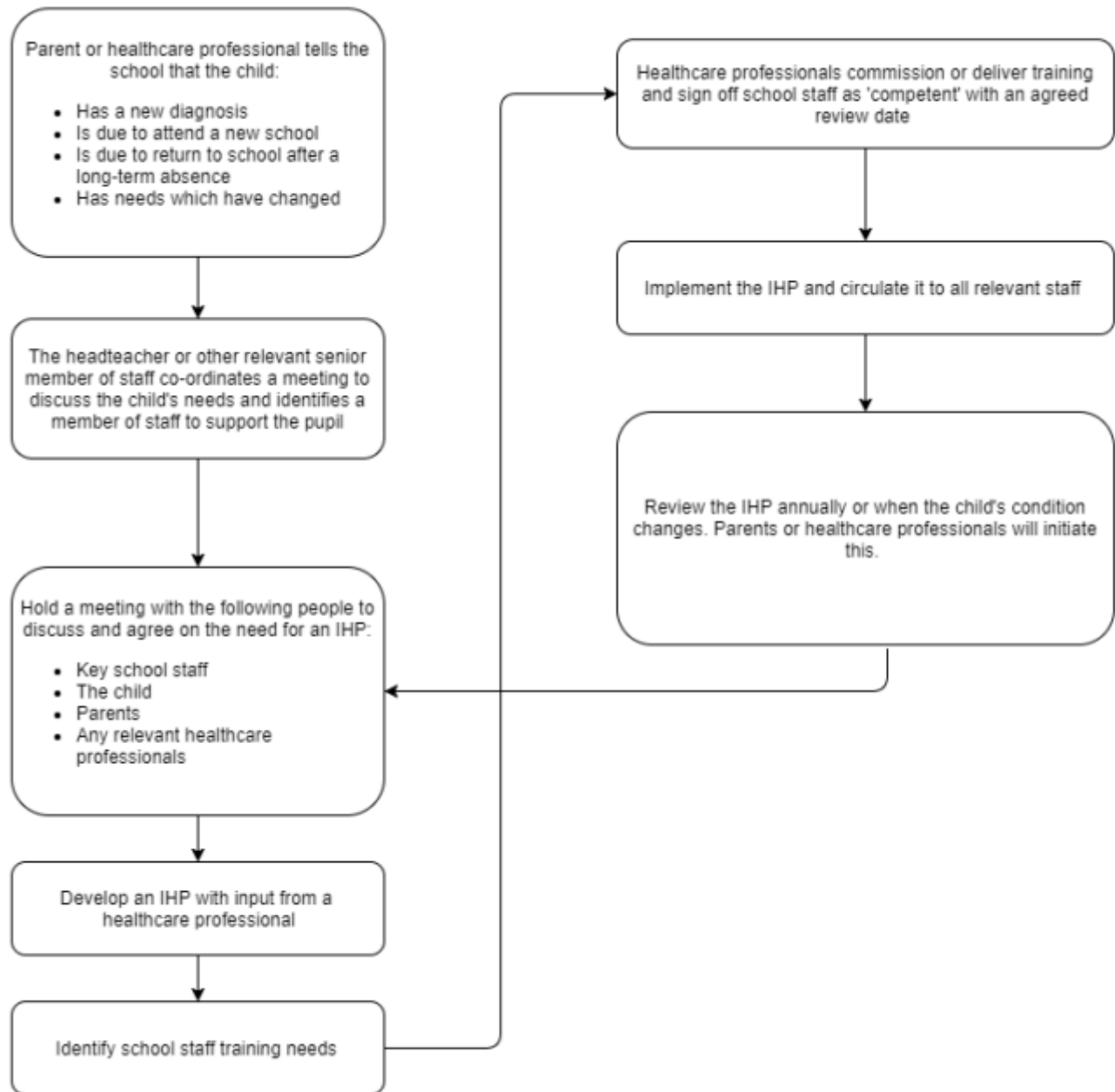
### **17. Links to other policies**

This policy links to the following policies:

- › Accessibility plan
- › Complaints
- › Equality information and objectives
- › First aid

- > Health and safety
- > Safeguarding
- > Special educational needs information report and policy
- > Is my child too ill for school factsheet

## Appendix 1: Being notified a child has a medical condition



## **Appendix 2: Procedures for children who are sick or infectious**

- > Pupils who have an infectious disease shouldn't attend school/nursery
- > Parents should notify the school if their child has an infectious disease
- > If a pupil 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 school/nursery while they are sick. Depending on the sickness, staff may ask parents to take their child to the doctor before they return to school
- > Staff will notify parents if a risk to other pupils exists

Children with specific infectious diseases set out in the [UK Health Security Agency's exclusion table](#) will not be allowed to return to school/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 pupils on the importance of immunisation as a tool against infection (while recognising the individual's right to choose)
- > Establishing a daily cleaning routine for:
  - > Nappy changing facilities
  - > Play areas
  - > Toys, activities and equipment