SUPPORTING CHILDREN WITH MEDICAL CONDITIONS POLICY

HARTFORD
CHURCH OF ENGLAND
HIGH SCHOOL

Ratified by Governing Board:	October 2025
Next Due for Review:	Autumn Term 2026

Mission Statement:

Our mission at Hartford Church of England High School is to provide an outstanding, inclusive and ambitious education for all. Children develop and thrive both within and beyond the classroom. They are known, with their talents embraced and promoted. They develop into young people who will make a substantial contribution to the world. They enjoy an education rooted in a shared set of Christian values that radiate the love and truth of Jesus Christ.

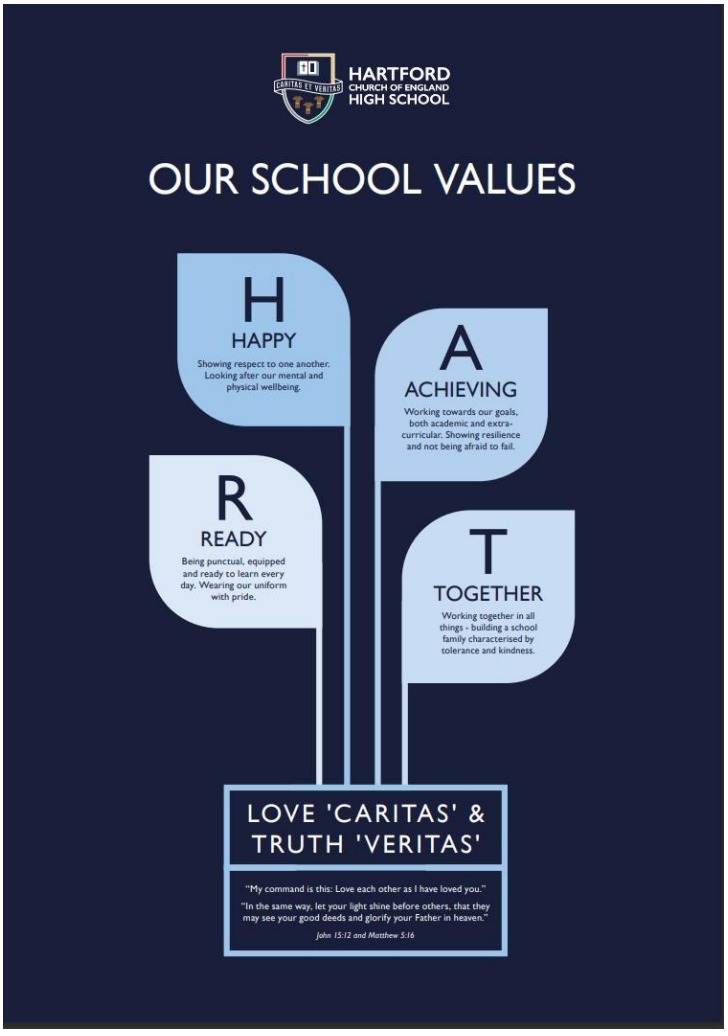
Everything we do at Hartford Church of England High School as students, staff, Governors and wider stakeholders, centres on the core values of our school:

Happy: Showing respect to one another. Looking after our mental and physical wellbeing.

Achieving: Working towards our goals, both academic and extra-curricular. Showing resilience and not being afraid to fail.

Ready: Being punctual, equipped and ready to learn every day. Wearing our uniform with pride.

Together: Working together in all things - building a school family characterised by tolerance and kindness.



"My command is this: Love each other as I have loved you."
"In the same way, let your light shine before others, that they may see your good deeds and glorify your Father in heaven."
John 15:12 and Matthew 5:16

Equally, the educational offer at Hartford Church of England High School is based on the Church of England's four key principles for education:

- Educating for wisdom, knowledge and skills
- Educating for hope and aspiration
- Educating for community and living well together
- Educating for dignity and respect

The Supporting Children with Medical Conditions Policy for Hartford Church of England High School fully embodies our values, our mission statement and the key principles for education set out by the Church of England.

Contents

1. Aims

The Governing Board of Hartford Church of England High School has a duty to ensure arrangements are in place to support students with medical conditions. The aim of this policy is to ensure that all students with medical conditions, in terms of both physical and mental health, receive appropriate support to allow them to play a full and active role in school life, remain healthy, have full access to education (including school trips and PE), and achieve their academic potential.

At Hartford Church of England High School it is important that parents and carers of students with medical conditions feel confident that the school provides effective support for their children's medical conditions. Equally students must feel safe in the school environment.

Some students with medical conditions may be classed as disabled under the definition set out in the Equality Act 2010. Hartford Church of England High School has a duty to comply with the Act in all such cases.

In addition, some students with medical conditions may also have Special Educational needs and/or Disabilities (SEND) and have an Education Health Care Plan (EHC) collating their health, social and SEND provision. For these students, the school's compliance with the DfE's 'Special educational needs and disability code of practice: 0 to 25 years' and the school's Special Educational Needs and Disabilities (SEND) Policy will ensure compliance with legal duties.

To ensure that the needs of our students with medical conditions are fully understood and effectively supported, we work closely with health and social care professionals and consult regularly with students and their parents/carers.

2. Legal Framework

This policy has due regard to all relevant legislation and guidance including, but not limited to, the following:

- The Children and Families Act 2014
- The Education Act 2002
- The Education Act 1996 (as amended)
- The Children Act 1989
- The National Health Service Act 2006 (as amended)
- The Equality Act 2010
- The Health and Safety at Work etc. Act 1974
- The Misuse of Drugs Act 1971
- The Medicines Act 1968
- The School Premises (England) Regulations 2012 (as amended)
- The Special Educational Needs and Disability Regulations 2014 (as amended)
- The Human Medicines (Amendment) Regulations 2017
- The Food Information (Amendment) (England) Regulations 2019 (Natasha's Law)
- DfE (2015) 'Special educational needs and disability code of practice: 0-25 years'
- DfE (2021) 'School Admissions Code'
- DfE (2015) 'Supporting students at school with medical conditions'
- DfE (2022) 'First aid in schools, early years and further education'
- Department of Health (2017) 'Guidance on the use of adrenaline auto-injectors in schools'

This policy operates in conjunction with the following school policies and procedures:

- Admissions Policy
- Behaviour and Attitudes Policy
- Child Protection and Safeguarding Policy
- First Aid Policy

- Educational Trips and Visits Policy
- Local Area Visits Policy
- SEND Policy
- Attendance Policy
- Complaints Policy

3. Roles and Responsibilities

The Governing Board will be responsible for:

- Fulfilling its statutory duties under legislation.
- Ensuring that arrangements are in place to support students with medical conditions.
- Ensuring that students with medical conditions can access and enjoy the same opportunities as any other student at the school.
- Ensuring that, following long-term or frequent absence, students with medical conditions are reintegrated effectively.
- Ensuring that the focus is on the needs of each student and what support is required to support their individual needs.
- Instilling confidence in parents/carers and students in the school's ability to provide effective support.
- Ensuring that all members of staff are properly trained to provide the necessary support and are able to access information and other teaching support materials as needed.
- Ensuring that no prospective students are denied admission to the school because arrangements for their medical conditions have not been made.
- Ensuring that students' health is not put at unnecessary risk. As a result, the board holds the right to not accept a student into school at times where it would be detrimental to the health of that student or others to do so, such as where the child has an infectious disease.
- Ensuring that policies, plans, procedures and systems are properly and effectively implemented.

The Headteacher / Senior Assistant Headteacher- Inclusion will be responsible for:

- The overall implementation of this policy.
- Ensuring that this policy is effectively implemented with stakeholders.
- Working with the LA, health professionals, commissioners and support services to ensure that students with medical conditions receive a full education.
- Ensuring that all staff are aware of this policy and understand their role in its implementation.
- Ensuring that a sufficient number of staff are trained and available to implement this policy and deliver against all Individual Health Plans (IHPs), including in emergency situations.
- Considering recruitment needs for the specific purpose of ensuring students with medical conditions are properly supported.
- Having overall responsibility for the development of IHPs.
- Ensuring that staff are appropriately insured and aware of the insurance arrangements.
- Contacting the school nurse where a student with a medical condition requires support that has not yet been identified.
- Providing support to students with medical conditions, where required, this may include the administering of medicines by designated staff members

Parents and Carers will be responsible for:

- Notifying the school if their child has a medical condition.
- Providing the school with sufficient and up-to-date information about their child's medical needs.
- Being involved in the development and review of their child's IHP.
- Carrying out any agreed actions contained in the IHP.
- Ensuring that they, or another nominated adult, are contactable at all times.

Students will be responsible for:

- Being fully involved in discussions about their medical support needs, where applicable.
- Contributing to the development of their IHP, if they have one.
- Being sensitive to the needs of students with medical conditions.

Medical Professionals will be responsible for:

- Notifying the school at the earliest opportunity when a student has been identified as having a medical condition which requires support in school.
- Supporting staff to implement IHPs and providing advice and training.
- Liaising with lead clinicians locally on appropriate support for students with medical conditions.

Providers of health services are responsible for cooperating with the school, including ensuring communication takes place, liaising with the school nurse and other healthcare professionals, and participating in local outreach training.

The LA will be responsible for:

- Commissioning school nurses for local schools.
- Promoting cooperation between relevant partners.
- Making joint commissioning arrangements for EHC provision for students with SEND.
- Providing support, advice, guidance, and suitable training for school staff, ensuring that IHPs can be effectively delivered.
- Working with the school to ensure that students with medical conditions can attend school full-time.

Where a student cannot attend school due to medical needs the LA has a duty to make alternative arrangements, as the student is unlikely to receive a suitable education in a mainstream school.

4. Admissions

Admissions will be managed in line with the school's Admissions Policy.

No child will be denied admission to the school or prevented from taking up a school place because arrangements for their medical condition have not been made; a child may only be refused admission if it would be detrimental to the health of the child to admit them into the school setting.

The school will not ask, or use any supplementary forms that ask, for details about a child's medical condition during the admission process.

5. Notification Procedure

When the school is notified that a student has a medical condition that requires support in school, the school nurse will inform the Senior Assistant Head- Inclusion and/or Admissions officer. Following this, the school will arrange a meeting with parents/carers, healthcare professionals and the student, with a view to discussing the necessity of an IHP, outlined in detail in the IHPs section of this policy.

The school will not wait for a formal diagnosis before providing support to students. Where a student's medical condition, such as neurodiverse status is unclear, or where there is a difference of opinion concerning what support is required, a judgement will be made by the Headteacher based on all available evidence, including medical evidence and consultation with parents/carers.

For a student starting at the school in September uptake of year 7, arrangements will be put in place prior to their introduction and informed by their primary school. Where a student joins the school and a new diagnosis is

received, arrangements will be put in place to best meet the needs of the student in the form of a care planning meeting and/or student passport completion.

6. Staff Training and Support

Any staff member providing support to a student with medical conditions will receive suitable training. Staff will not undertake healthcare procedures or administer medication without appropriate training. Training needs will be assessed by the SENDCO through the development and review of IHPs.

A first-aid certificate alone will not constitute appropriate training for supporting students with medical conditions. For example, first aiders and Associate staff members have additionally been trained in the use of Insulin pumps to support the needs of pupils using this equipment to manage their diabetes and also whole school training has been delivered concerning Anaphylaxis and Allergies.

Through training, a combination of teaching staff and associate staff will have the requisite competency and confidence to support students with medical conditions and fulfil the requirements set out in IHPs. Staff will understand the medical conditions they are asked to support, their implications, and any preventative measures that must be taken.

The Senior Assistant Head- Inclusion will identify suitable training opportunities that ensure all medical conditions affecting students in the school are fully understood, and that staff can recognise difficulties and act quickly in emergency situations.

The parents/carers of students with medical conditions will be consulted for specific advice and their views are sought where necessary, but they will not be asked to provide training in school.

Supply and/or temporary staff:

- Provided with access to this policy.
- Informed of all relevant medical conditions of students they are providing for.
- Covered under the school's insurance arrangements.

7. Self-Management

Following discussion with parents/carers, students who are competent to manage their own health needs and medicines will be encouraged to take responsibility for self-managing their medicines and procedures. For example, Diabetic students. This will be reflected in their IHP.

Where appropriate, students will be allowed to carry their own medicines and relevant devices. Where it is not possible for students to carry their own medicines or devices, they will be held in the Medical Room that can be accessed quickly and easily. If a student refuses to take medicine or carry out a necessary procedure, staff will not force them to do so. Instead, the procedure agreed in the student's IHP will be followed. Following such an event, parents/carers will be informed so that alternative options can be considered.

If a student with a controlled drug passes it to another child for use, this is an offence and appropriate sanctions will be put in place in accordance with our Behaviour and Attitudes Policy.

8. IHPs

The school, healthcare professionals and parents/carers agree, based on evidence, whether an IHP will be required for a student, or whether it would be inappropriate or disproportionate to their level of need. If no consensus can be reached, the Headteacher will make the final decision.

The school, parents/carers and a relevant healthcare professional will work in partnership to create and review IHPs. This will be led by the SAHT- Inclusion and/or Senior Pastoral Lead- SEND. Where appropriate, the student will also be involved in the process.

IHPs will include the following information:

- The medical condition, along with its triggers, symptoms, signs and treatments.
- The student's needs, including medication (dosages, side effects and storage), other treatments, facilities, equipment, access to food and drink (where this is used to manage a condition), dietary requirements, and environmental issues.
- The support needed for the student's educational, social and emotional needs.
- The level of support needed, including in emergencies.
- Whether a child can self-manage their medication.
- Who needs to be made aware of the student's condition and the support required.
- Arrangements for obtaining written permission from parents/carers and the Headteacher for medicine to be administered by school staff or self-administered by the student.
- Separate arrangements or procedures required during school trips and activities.
- Where confidentiality issues are raised by the parents/carers or student, the designated individual to be entrusted with information about the student's medical condition.
- What to do in an emergency, including contact details and contingency arrangements.

Where a student has an emergency healthcare plan prepared by their lead clinician, this will be used to inform the IHP.

IHPs will be easily accessible to those who need to refer to them, but confidentiality will be preserved. IHPs will be reviewed on at least an annual basis, or when a child's medical circumstances change, whichever is sooner.

Where a student has an EHC plan, the IHP will be linked to it or become part of it. Where a child has SEND but does not have an EHC plan, their SEND will be mentioned in their IHP.

Where a child is returning from a period of hospital education, alternative provision or home tuition, the school will work with the LA and education provider to ensure that their IHP identifies the support the child will need to reintegrate.

9. Managing Medicines

Medicines will only be administered, under supervision, at school when it would be detrimental to a student's health or school attendance not to do so.

The school acknowledges that medication may be administered due to IHP or EHCP plans but may also be required on a casual basis for example, a course of antibiotics or pain relief.

Students will not carry medication on their person and all medications must be submitted to the student office for official recording and monitoring of administration.

Students under 16 years old will not be given prescription or non-prescription medicines without their parents/carers' written consent, except where the medicine has been prescribed to the student without the parents/carers' knowledge. In such cases, the school will encourage the student to involve their parents/carers, while respecting their right to confidentially.

Non-prescription medicines may be administered in the following situations:

- When it would be detrimental to the student's health not to do so.
- When instructed by a medical professional.

No student under the age of 16 will be given medicine containing aspirin unless prescribed by a doctor. Pain relief medicines will not be administered without first checking when the previous dose was taken, and the maximum dosage allowed.

Parents/carers will be informed any time medication is administered that is not agreed in an IHP.

The school will only accept medicines that are in-date, labelled, in their original container, and contain instructions for administration, dosage and storage. The only exception to this is insulin, which must still be in-date, but is available in an insulin pen or pump, rather than its original container.

All medicines will be stored safely. Students will be informed where their medicines are at all times and will be able to access them immediately, whether in school or attending a school trip or residential visit. Where relevant, students will be informed of who holds the key to the relevant storage facility. When medicines are no longer required, they will be returned to parents/carers for safe disposal.

Sharps boxes will be used for the disposal of needles and other sharps.

Controlled drugs will be stored in a non-portable container and only named staff members from the student office and SEND team will have access; however, these drugs can be easily accessed in an emergency. A record will be kept of the amount of controlled drugs held and any doses administered. Staff may administer a controlled drug to a student for whom it has been prescribed, in accordance with the prescriber's instructions.

The school will hold asthma inhalers for emergency use. The inhalers will be stored in the medical room and their use will be recorded.

Records will be kept of all medicines administered to individual students, stating what, how and how much medicine was administered, when, and by whom. A record of side effects presented will also be held.

10. Allergens, Anaphylaxis and Adrenaline Auto-Injectors (AAIs)

It is the responsibility of parents/carers to provide the school with up-to-date information relating to their children's allergies, as well as the necessary action to be taken in the event of an allergic reaction, such as any medication required.

The Headteacher and catering provider will ensure that all pre-packed foods for direct sale (PPDS) made on the school site meet the requirements of Natasha's Law, i.e. the product displays the name of the food and a full, up-to-date ingredients list with allergens emphasised, e.g. in bold, italics or a different colour.

Staff members receive appropriate training and support relevant to their level of responsibility, in order to assist students with managing their allergies.

Students who have prescribed AAI devices can keep their device in their possession.

Designated staff members will be trained on how to administer an AAI, and the sequence of events to follow when doing so. AAIs will only be administered by these staff members.

In the event of anaphylaxis, a designated staff member will be contacted. Where there is any delay in contacting designated staff members, or where delay could cause a fatality, the nearest staff member will administer the AAI. If necessary, other staff members may assist the designated staff members with administering AAIs, e.g. if the student needs restraining.

The school will keep a spare AAI for use in the event of an emergency, which will be checked on a monthly basis to ensure that it remains in date, and which will be replaced before the expiry date. The spare AAI will be stored in the medical room, ensuring that it is protected from direct sunlight and extreme temperatures. The spare AAI will only be administered to students at risk of anaphylaxis and where parental consent has been gained. Where a student's prescribed AAI cannot be administered correctly and without delay, the spare will be used. Where a

student who does not have a prescribed AAI appears to be having a severe allergic reaction, an ambulance will be contacted and advice sought as to whether administration of the spare AAI is appropriate.

Where a student is, or appears to be, having a severe allergic reaction, the emergency services will be contacted even if an AAI device has already been administered.

In the event that an AAI is used, the student's parents/carers will be notified that an AAI has been administered and informed whether this was the student's or the school's device. Where any AAIs are used, the following information will be recorded:

- Where and when the reaction took place.
- How much medication was given and by whom.

AAIs will not be reused and will be disposed of according to manufacturer's guidelines following use.
In the event of a school trip, students at risk of anaphylaxis will have their own AAI with them and the school will give consideration to taking the spare AAI in case of an emergency.

11. Record Keeping

Written records will be kept of all medicines administered to students. Proper record keeping will protect both staff and students, and provide evidence that agreed procedures have been followed.

12. Emergency Procedures

Medical emergencies will be dealt with under the school's emergency procedures.

Where an IHP is in place, it should detail:

- What constitutes an emergency.
- What to do in an emergency.

Students will be informed in general terms of what to do in an emergency, e.g. telling a member of staff.

If a student needs to be taken to hospital, their parents/carers will be contacted, and a member of staff will remain with the student until their parents/carers arrive. If parents/carers do not arrive by the time that an ambulance needs to take the student to hospital, a member of staff will accompany the student in the ambulance.

13. Day Trips, Residential Visits and Sporting Activities

Students with medical conditions will be supported to participate in school trips, sporting activities and residential visits.

Prior to an activity taking place, the school will conduct a risk assessment to identify what reasonable adjustments should be taken to enable students with medical conditions to participate. In addition to a risk assessment, advice will be sought from students, parents/carers and relevant medical professionals. The school will arrange for adjustments to be made for all students to participate, except where evidence from a clinician, e.g. a GP, indicates that this is not possible. Where this is the case for a rewards incentive, an alternative opportunity will be offered and planned.

14. Unacceptable Practice

The school will not:

- Assume that students with the same condition require the same treatment.
- Prevent students from easily accessing their inhalers and medication.
- Ignore medical evidence or opinion.
- Send students home frequently for reasons associated with their medical condition, or prevent them from taking part in activities at school, including lunch times, unless this is specified in their IHP.
- Penalise students with medical conditions for their attendance record, where the absences relate to their condition.
- Make parents/carers feel obliged or forced to visit the school to administer medication or provide medical support, including for toilet issues. The school will ensure that no parent is made to feel that they have to give up working because the school is unable to support their child's needs.
- Create barriers to students participating in school life, including school trips.
- Refuse to allow students to eat, drink or use the toilet when they need to in order to manage their condition.

15. Liability and Indemnity

The Governing Board will ensure that appropriate insurance is in place to cover staff providing support to students with medical conditions.

Parents/carers or students wishing to make a complaint concerning the support provided to students with medical conditions are required to follow the steps outlined in the school's Complaints Policy.

16. Home-to-School Transport

Arranging home-to-school transport for students with medical conditions is the responsibility of the LA. Where appropriate, the school will share relevant information to allow the LA to develop appropriate transport plans for students with life-threatening conditions.

17. Defibrillators

The school has 3 Mediana HeartOn A15 automated external defibrillator (AED). The AED can be found in the front office of the school, in the PE department foyer in the Science block and within the THRIVE building.

All staff members and students will be made aware of the AED's location and what to do in an emergency.

No training will be needed to use the AED, as voice and/or visual prompts guide the rescuer through the entire process from when the device is first switched on or opened; however, staff members will be trained in cardiopulmonary resuscitation (CPR), as this is an essential part of first-aid and AED use.

The emergency services will always be called where an AED is used or requires using.

Maintenance checks will be undertaken on AEDs on a weekly basis by the school nurse, who will also keep an up-to-date record of all checks and maintenance work.

17. Monitoring and Review

This policy is reviewed on an annual basis by the governing board and Headteacher. Any changes to this policy will be communicated to all staff, parents/carers and relevant stakeholders.

Date approved by Governing Board: 06/10/2025
Applicable from: 06/10/2025
Signed by

Headteacher:  **Date:** 06/10/2025

Chair of Governors:  **Date:** 06/10/2025