

Specific Areas of Need

Medical Needs

Overview description

Every child, without any exception whatsoever, is entitled to receive education (UN Declaration, 1959).

A child or young person with a medical need (CYPMN) is defined as any child with a physical and/or mental health need.

In 2014, a duty to support students with medical conditions (Section 100 of the Children and Families Act 2014) was introduced for all maintained and academy schools, to govern the way schools teach and care for children and young people with additional health needs. This was followed by the statutory guidance “**Supporting pupils at school with medical conditions**” (DfE, 2015).

Children with medical needs include renal patients, those children living with cancer, children with epilepsy, those with chronic conditions e.g. asthma etc. A second group include children who are ill due to injury or accident, e.g. children with acquired brain injury, children with serious fractures etc. This category also includes children who are unable to attend school due to their mental health needs.

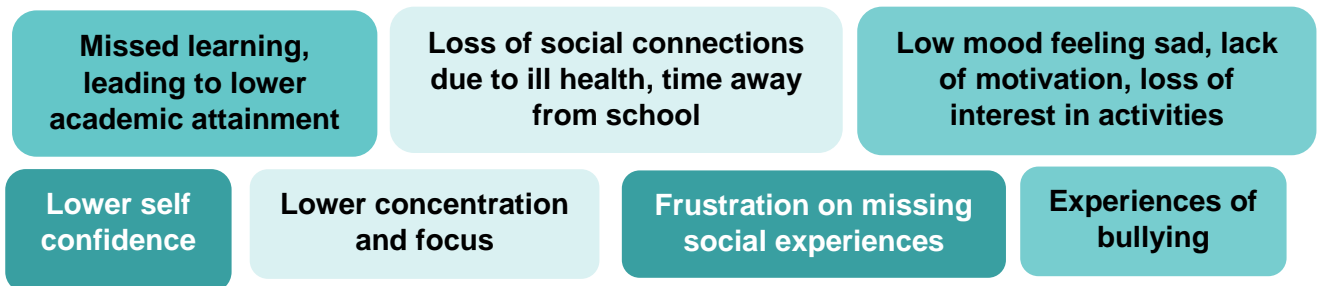
All schools will have a number of students who have either temporary or ongoing medical needs. The most recent published national statistics (2018-19) report that “illness” (absence due to reported medical needs) accounts for 8.1% of students with persistent absence (defined as absence rates of over 10% throughout the year). It is noted that children with special educational needs (SEN) are twice as likely to be persistently absent than those with no identified SEN.

Key points from Supporting Pupils at School with Medical Needs Guidance

- Pupils at school with medical conditions need to be supported so that they have full access to education, including school trips and physical education.
- Governing bodies must ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- An individual health care plan must be produced for those students that need it (see resources for link to examples of individual care plans)
- Schools must work together with parents/carers and all relevant health professionals to ensure that the needs of children with medical conditions are properly understood and effectively supported.
- Children and young people should not be at home without access to education for more than 15 working days and should receive and offer of education of similar quality to that which is available in school, including a broad and balanced curriculum and a minimum of 5 hours teaching per week.

The possible impacts for children and young people with medical needs CYPMN

“Children who miss schooling for medical reasons can be at double jeopardy - suffering not only of their illness or injury, but also the consequences of educational deprivation” (Mintz, Palaiologou and Carroll, 2018). Research states that the impact for CYPMN includes



In a number of research papers CYPMN state that they need

- Their school to understand and meet the immediate needs of their medical condition on a day to day basis, with involvement from appropriate health professionals
- The opportunity for the fullest participation, finding creative ways to remove barriers.
- Acceptance of any barriers and limitations to access the full curriculum
- Support to keep them free of bullying or other discrimination
- A safe space to go to in school
- Close cooperation with home and health professionals (Llourido et al, 2020)

How professionals can support CYPMN

International research suggests that the following is needed to support children with medical needs

- Providing support for CYPMN **not to discontinue** engagement with their education, including providing education that is accessible for the CYPMN
- Providing support with children’s well-being, their emotional and social development
- To create normalcy around their lives when they are hospitalised or unwell
- To provide learning in core subjects, when not at school, alongside other subjects such as arts and music that benefit the CYPMN’s well-being
- To provide ongoing links with and support for the re-entry to home school/mainstream school
- To create meaningful and supportive collaborations with parents/guardians and specialist health services, particularly connecting with staff who can provide advice about the CYPMN’s needs as they reintegrate to school
- Networking with other agencies to ensure wrap around support for the child and their family. Martinez and Ercikan (2009), Georgiadi and Kourkoutas (2010).

Supporting the reintegration of children and young people with medical needs (CYPMN)

Successful school reintegration for CYPMN is best facilitated by a coordinated effort between and within home, school, and hospital ecosystems.

- The reintegration needs to be personalised and, as far as possible, involve the student in their reintegration plan.
- Schools should evaluate if the child's educational and psychosocial needs are being met and supportive systems should be available to help educators in handle the child's reintegration and any barriers

Stages within the Reintegration Process	Actions to be taken
To understand the CYP medical needs	To contact key health professionals (specialist doctors, paediatrician, physiotherapist, lead nurse, occupational therapist etc)
To make adaptations to the school environment if required	Consider applications for additional funding or outreach support
To train staff to support the child's needs	Consider access support from Specialist Outreach services
To create/amend an individual healthcare plan (IHP)	Work with relevant professionals to complete individual health plan IEP (template link)
To work closely with family and other professionals as required	Support from early help/social care where needed (see Manchester Early help hub)

Manchester Procedures for Children and Young People with Medical Needs

Manchester City Council are due to update their medical needs policy, in light of the national SEND review. This information relates to the current position



Manchester Hospital School provides short-term education for children and young people who cannot attend their usual school because of their medical or mental health needs. The aim is that children return to their own school within two terms, if possible.

Manchester Hospital School operates across a number of sites, teaching children of all ages and abilities. They also work with schools across Manchester and beyond, offering advice and practical assistance on how they can best support any of their students who can no longer attend school for health reasons.

Manchester Hospital School have created a support pack for schools who are supporting children with medical needs. This can be downloaded from their website.

<https://www.manchesterhospitalschool.co.uk/advice-and-guidance/>

AV1 Robots

AV1 is a robot avatar that acts as a child's eyes, ears and voice in the classroom when illness, disability or mental health conditions prevent them from being there in person.

AV1 is an app-linked device fitted with a camera, speaker and microphone, that opens up a two-way audio and one-way visual channel between the student and their classmates, allowing them to learn alongside their peers, and maintain social contact with their friends, without having to appear on camera themselves – which can often be a source of concern and/or discomfort.



Standing 30cm tall and weighing 1.5kg, AV1 sits neatly on a desk, or can be easily carried by friends in the playground. Two motors enable AV1 to raise and lower its head or revolve up to 360°, enabling the student to see and hear everything going on in the classroom; and 4G and WiFi connectivity ensure it can function both indoors and out. Manchester Hospital School can provide AV1 robots to enable students to continue to access their education as part of our learning pathways.

Hospital Education

Where a CYPMN is in hospital for more than 5 days in Manchester they will be able to access Hospital Education. When a patient is discharged, they may be discharged back to their school. School's may access outreach support to help to ensure a positive reintegration for CYPMN when they return to school. Where the CYPMN is not yet well enough to go back to their school a referral can be made for home education by the school where the CYPMN is on roll.

Top
Tips!

For Early
Years

Find creative ways of staying in touch, and making children feel part of the school community if they are experiencing prolonged periods out of school. You might send letters, share photos or exchange video messages as a class to remind children that you are thinking of them and remain connected.

In the early years, it is of great importance that we provide children with resources to develop their awareness, understanding and inclusivity. Ensure your role play, home and reading areas reflect the diversity of children's worlds and harness children's inquisitive nature to create an open dialogue about our differences and similarities.

Age-appropriate books to share:



Relevant Supporting Information and links

Manchester's Emotional Barriers to Attendance Guidance (see Chapter in this toolkit)

Acquired brain injury support <https://childbraininjurytrust.org.uk/> and www.headway.org.uk

Mental health Charities <https://youngminds.org.uk/>

Rare diseases support <https://www.raredisease.org.uk/>

Charity for sick children <https://www.wellchild.org.uk/>

For children with a terminal illness <https://www.rainbowtrust.org.uk/>

Epilepsy <https://www.epilepsy.org.uk/>

Cystic Fibrosis <https://www.cysticfibrosis.org.uk/>

Cerebral Palsy <https://www.cerebralpalsyguide.com/community/>

Muscular Dystrophy <https://www.muscular dystrophyuk.org/>

Diabetes <https://www.diabetes.org.uk/>

Attention deficit hyperactivity disorder <https://adhd.foundation.org.uk/>

Autism <https://www.autism.org.uk/>

Example individual health care plans
<http://medicalconditionsatschool.org.uk/>

Other related documents are The Equality Act (2010), the Academies Act (2010), Ofsted Common Inspection Framework (2019), 'Alternative Provision: Statutory Guidance for local authorities (2013) School and Early Years Finance Regulations (2012).

Research Base/References

Easer, C., (2000). The psychological impact of chronic illness on children's development. In A.Closs (Ed.), *The education of children with medical conditions* (pp. 27–38). London: David Fulton.

Fowler, M.G., Johnson, M.P., and Atkinson, S.S., (1985). School achievement and absence in children with chronic health conditions. *The Journal of Paediatrics*, 106(4), 683–687.

Georgiadi, M., and Kourkoutas., E. E., (2010). Supporting pupils with cancer on the return to school: A case study report of a reintegration program. *Procedia – Social and Behavioural Sciences* 5: 1278–82

Lahteenmaki, P. M., Huostila, J., Hinkka, S., and Salmi, T. T., (2002). Childhood cancer patients at school. *European Journal of Cancer*, 38, 1227–1240.

Martinez, Y.J., and Ercikan, K., (2009). Chronic illnesses in Canadian children: What is the effect of illness on academic achievement, and anxiety and emotional disorders? *Child: Care, health and development* 35, no. 3: 391–401.

McKay, M. T., Jon C. Cole. J. C., and Perry, L., (2017) An examination of adolescent mental and physical well-being in Scottish school children: A cross-sectional study, in *Clinical Case Reports and Reviews*, 3:7, 1-6

Mintz, J, Palaiologou, I, Carroll, C (2018) A review of educational provision for children unable to attend school for medical reasons, University College London, Institute of Education <https://www.hhe.nottingham.sch.uk/wp-content/uploads/2019/10/A-review-of-educational-provision-hospital-and-home-education-services-UCL-2018.pdf>

Paz-Lourido, B., Negre, F., de la Iglesia, B. *et al.* Influence of schooling on the health-related quality of life of children with rare diseases. *Health Quality Life Outcomes* **18**, 109 (2020). <https://doi.org/10.1186/s12955-020-01351-x>

Manchester Schoolshub

Pathway for info: Vulnerable learners (LAC and SEND)/Special Educational Needs and Disability/Support to schools/Supporting Children with Medical Needs

This includes the current Medical Needs Policy (shortly to be updated) and also useful templates for schools in relation to administration of medication. Overleaf is also a flowchart which describes a suggested planning pathway schools can follow on notification of a pupil's medical needs. Please note; These documents are in the process of being updated but remain current at this time

Sample Procedure following Notification of a Pupil's Medical Needs

