Pupils with medical needs

Briefing for section 5 inspection

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| This briefing provides information relating to pupils with medical needs.  |

Age group: All

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# Introduction

1. The needs of pupils with chronic or long-term medical conditions may be considered alongside other vulnerable groups. Inspectors are not expected to be knowledgeable about different medical needs, but can nonetheless ask questions of staff and pupils to prompt schools to ensure they are doing all they can to safeguard and support this potentially vulnerable group of pupils. The outcomes for this group are usually reported under the judgement relating to the achievement of all pupils including those with disabilities and those with special educational needs. However, where relevant inspectors may also report on how well the needs of this group of pupils are being met within the other judgement areas. In mainstream schools, medical needs do not automatically equate to a disability or special educational needs.
2. The public sector Equality Duty, as set out in section 149 of the Equality Act, came into force on 5 April 2011, and replaced the Disability Equality Duty. The public sector Equality Duty requires public bodies to have due regard in the exercise of their functions to the need to:
* eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act
* advance equality of opportunity between people who share a protected characteristic and those who do not
* foster good relations between people who share a protected characteristic and those who do not.
1. Disability is a protected characteristic under section 6 of the Equality Act.

# Background

1. Potentially vulnerable groups of pupils, or those most at risk of underachieving, include those with a chronic illness or long-term health condition; for example, musculoskeletal problems, cancer, asthma, epilepsy, diabetes, Crohn’s disease, heart problems and pupils with mental health problems, such as anxieties, depression and/or school phobia.
2. If chronic illnesses are not managed well by pupils and those who help care for them, including schools, this can have a detrimental effect on pupils’ emotional development as well as their health and safety, physical and mental well-being and their ability to participate and achieve well academically.
3. The Equality Act, at section 6, sets out that a person has a disability if they have a physical or mental impairment, and the impairment has a substantial and long-term adverse effect on that person’s ability to carry out normal day-to-day activities.
4. Therefore pupils with a chronic illness or long-term health condition may be covered by the Equality Act. Schools are expected to make reasonable adjustments to help meet the needs of pupils with chronic and long-term health conditions.

**Expectations of schools**

1. Schools may identify what they are doing to support pupils with chronic or long-term medical needs in their self-evaluation (if available). If they do not, but **it is clear that such pupils are on the roll of the school**, inspectors should investigate the school’s work in this area. This is especially the case where issues are also highlighted in the views provided by parents and carers.
2. The school should have a policy dealing with medical needs and the administration of medication and should adhere to guidance provided by the local authority.
3. The interrogation of attendance data can be a good starting point for establishing the effectiveness of a school’s support for this vulnerable group of pupils where they are on the school’s roll. Where pupils have long and persistent absences from school due to their chronic or long-term medical needs, schools should work with parents and other organisations including hospitals/hospital schools, to help to continue to support pupils’ education and personal development and well-being.
4. Where relevant and appropriate, inspectors will ensure that pupils with medical needs are represented in discussions. Any discussion with pupils, especially those with chronic or long-term conditions is approached with sensitivity and inspectors do not ask pupils directly about their condition. Nevertheless, a pupil may wish to speak openly about their condition and this is neither encouraged nor discouraged.
5. Pupils with particular medical needs may be vulnerable with regards to their achievement, their behaviour and safety and their spiritual, moral, social and cultural development. Inspectors may consider pupils with medical needs for a case study to evaluate their achievement and experience of the school. Inspectors make note that:
* Teaching, the curriculum and/or the use of resources should be amended to help meet the needs of pupils with chronic or long-term medical needs.

Teachers should be aware of when it is and is not advisable for pupils to participate in different activities.

* The school should minimise the disruption to pupils’ education, including managing any transition between phases and schools, to ensure pupils are able to continue with their education with the least amount of disruption.
* There should be staff within the school who have enough knowledge and expertise to help manage a pupils’ medical needs so that they are fully included in school activities.
* Staff should be aware of the potential risks of a pupils' condition not being well managed in school (For example, staff should be alert to what would constitute an emergency and know how to respond).

There should be effective liaison between the school and hospital/hospital school when a pupil is receiving treatment.

The school and governing body should monitor and evaluate policies for supporting, guiding and caring for pupils with chronic or long-term medical needs. The school should have a named person responsible for dealing with pupils who are unable to attend school because of medical needs.

School leaders should know how many pupils at the school have chronic or long-term medical needs and track the progress made by these pupils as a separate group.

The school should know if parents are satisfied with the quality of support, guidance and care provided by staff at the school. This includes the level of satisfaction of how well the school liaises with a hospital/hospital school while a pupil is receiving treatment.

The school should work with other providers, organisations and services to support the well-being and education of pupils with chronic or long-term medical needs.

# Further information

1. The links below provide further information about legal requirements, specific conditions and guidance for schools and governors.
* Link to **NHS** site: this site can be helpful to research different conditions. [www.nhsdirect.nhs.uk/en](http://www.nhsdirect.nhs.uk/en).

Link to information for school governors about supporting pupils with medical needs and managing medicines in schools and in the early years. <https://www.education.gov.uk/publications/standard/publicationdetail/page1/DFES-1448-2005>.