



**National Children and Young People's
Diabetes Network
National Delivery Plan - Aim 1
Schools and Social Care Subgroup Meeting Minutes
27 June 2022
Via Microsoft Teams**



Found that the process takes about a year to put in place, and most are initially rejected. About 80% are accepted in the appeals process.

The criteria are does the child have special educational needs (SEN). This took lots of work to prove that type 1 was a disability and required SEN.

The case was initially rejected. Offered mediation which RA rejected as not worthwhile and submitted the appeal. Following this LA stepped in and offered funding full time 1 to 1. Half funded by healthcare and half by the school. RA rejected this since this would not have moved with her child if they were to move for example.

The report from the appeal came back that he must be assessed. Now doing very well in school following EHCP being put in place.

As part of RA parent rep role, she had put her name out for parents to contact her who were having the same issues. Had many parents contact her so decided to start a project to get the information out there.

Developing a flow chart that will take you through the different stages, giving you examples of evidence and guide you through each process. The idea is it will contain pop up videos guides.

Worked with SENDIASS to ensure all legalities are all right and the project is time proof and relevant depending on where in the UK you are.

Hoping to have the website up and running by the end of the 2022. The information will be hosted on the DigiBete website.

Questions around family expenses during appeals etc. RA stated that can all be done by the family if all the information is at hand.

BN – SEND reforms and Children and families act 2014, currently a green paper and consultation out looking at changes.

Discussion around expectations of legal standards and competencies of schools and school staff with regards to children with long term conditions – Charlotte Austin (CA)

CA – DUK working with RS on the above project to support the underpinning and the policy. Survey held showing 25% of CYP in education setting do not have an IHCP in place.

Don't feel like the SEND review Green Paper is addressing the needs of children with medical conditions as much as it needs to, and they focus quite a lot on hospital schools. Workshop with department of education recently with aim of alliance members getting this to the DOE, SEND and alternative provision teams that there are so many CYP living with medical conditions in mainstream schooling. Think the next step is white paper which will be a recommendation of what the policy will look like.

Study done last year showed only 29% of schools had medical conditions policies. Raised with DoE who were keen to help. Our ask for them is that this is pushed forward in terms of our Ofsted reviewing that schools have medical conditions policies in place and acted on.

Similar done in Wales last year on alternative learning needs bill. Spoke about scenarios where type 1 can lead to educational needs which was fully taken on board.

Education and data workshops held with 13–24-year-olds, based on Rob French's research around educational attainment and type 1 diabetes. Basically, there isn't a



**National Children and Young People's
 Diabetes Network
 National Delivery Plan - Aim 1
 Schools and Social Care Subgroup Meeting Minutes
 27 June 2022
 Via Microsoft Teams**



difference in educational attainment on in robs research, despite children with Type 1 having a lot more absences, the attainment is pretty much level, which with children who don't have diabetes.

Concerning that it looks like that in a graph but there's big parts of this that are missing and that's what we need to put across to people like DoE.

Questions around the 25% not having an IHCP in place. CA stated the survey was for parents so wondered whether communication and the family unaware of the IHCP.

Questions around school staff competencies and how we take that forward. KS – Has looked into this and not really found anyone who can answer this question. Stated that in Yorkshire & Humber they are looking to standardise their school teaching and competencies and have an online portal where people can go back to.

Mobile phone use for diabetes management in schools:

JS – Write in IHCP when a CYP is required to use phones in school for diabetes care.

Highlighted those consequences where CYP may abuse this privilege.

RS – Previous discussion around whether hospitals can provide devices for low-income families. The responsibility could potentially lie with the trust to restrict the devices uses in terms of safeguarding.

KA – Could we have a national document, similar to the SW network document, endorsed by the network around using phones in schools to manage medical needs

MFA – Maybe use DLA to get phones

KW – Unit in East of England managed to get some charity funded devices

AOB

- AS - Discussion around carb counting school meals. AS has tried to liaise with companies providing food in her area and face difficulties and asked whether any work being done on this. CA stated work being done in Wales and could link these teams with AS. AS asked whether these teams could speak on this group to tell us what work they have done.
- Can we add carb counting to the competencies?

Actions	❖
Date and time of next Meeting	Time: 1000-1130 hours Date: Wednesday 5 th October 2022 Venue: Virtually - via MStTeams Minutes kindly taken by Jonathan Maiden Only one representative from each Network/organisation