



Courage Hope Inspiration

Selecting an Educational Setting – Tips and Advice

Choosing a setting for your child can be a scary time, whether that be a childminder, nursery, or even higher education establishment, even more so when your child lives with a medical condition. Some CHI children need intensive one to one help and some need less intrusion. Whatever the type of care needed, one thing we can be sure of is that help, care, and assistance is needed and is not always as forthcoming as it should be.

We aim to help provide you with some tips and advice to help the process less daunting. So where do we start? Well, it is all about managing. You are best placed to provide settings with some key tools as you already manage your child's Hyperinsulinism and any other issues they may have so well.

- Visit a range of schools at differing times to get a true picture. Seeing the class and the potential class teacher and the staff member allocated to your child if they are to receive 1-1 support will help to understand the environment your child will be in, and for staff, what potential risks there are and what possible adaptations need to be made.
- If possible, visit with someone who offers your family support such as another family member or Portage if they are involved, so that you can really listen.
- Speak with other families that attend the setting or the Health Visiting Team/Portage may be able to give school recommendations.
- Does your child/pupil need an EHC Plan? If so, contact your local SEND advisory team or Portage for support. They will help you through the process of applying for an EHCP. If your child does not require an EHCP, the educational setting **must** set up an IHP (Individual Healthcare Plan).
- Always ask to speak to the school SENCO.

Patron: Dr Pratik Shah - MBBS, DCH, MRCPCH, PhD
Consultant in Paediatric Endocrinology & Diabetes and Honorary Clinical Lecturer

The Children's Hyperinsulinism Charity - 7 Quarry Close, Corby, Northants, NN17 1FL
Tel: 07495 693361 - Email: enquiries@hyperinsulinism.co.uk - Web: www.hyperinsulinism.co.uk

UK Registered Charity: 1165562
Company Number: CE005407



- Whether the setting is mainstream or special needs, check they have policies for:
 - Managing a child with medical conditions in school
 - Administering medications
 - SEND and Inclusion
 - Health & Safety
 - Care, Toileting and Lunchtimes
- Questions to ask:
 - What will the school do to support your child?
 - How will they do this?
 - Are they flexible in their practices?
 - If it is a mainstream setting, do they have other children with a medical/SEND need?
 - How do they integrate SEND children with their peers?
 - How do they manage children with medical conditions on school outings?

Settings will need to know the following information to have a better idea of how they are best placed to support your child.

- How is your child managed at home?
- Is there an MDT in place?
- What additional support may the child require in and around school?
- Integration of the child within the classroom environment, around school and with their peers. Is there any specific information the setting will need to know?
- Signpost the setting to relevant websites or professionals.

Re visit settings and double check on what you need more clarification on.

Prior to starting school

Request a home visit; this will give you time to talk through everything around the needs of your child. Schools should allow as much time as reasonably possible as CHI children are often complex, and it is advisable to ensure they take away as much information as possible.

If your child is at another setting, then suggest school staff go and visit to see how the child's needs are managed within an educational and care context.

Ask to speak to the Head Teacher and SENCO again to check that you are all clear around expectations and roles. Check that there are systems in place for emergencies.

Prior to starting school - continued

Ensure that you have an up-to-date care plan in place for your child and liaise with the relevant professionals.

It is vital that school staff receive training around CHI prior to the start of school. This ideally should happen in June/July if your child is starting in September to allow the staff to have a full understanding of the requirements and to have time to practice and put systems in place. Local services such as School Nursing Teams or Community Nursing Teams should be able to liaise with schools to provide Blood Glucose training and the administering of medications/injections. Support from the Hyperinsulinism specialist teams is available also.

Make sure that the staff have a list of contact numbers/emails of professionals that they can go to for advice.

Ensure that staff know they can ask you any further questions – an open policy around ‘no question is a daft question’ is always the best! Provide the school with as many forms of contact for you as possible, email, phone number etc.

Exercise patience with school staff whilst they get to know your child. It is unreasonable to expect them to take over care and have a full understanding of your child within the first couple of weeks of starting school. They will make mistakes, we make mistakes, so try and be understanding and friendly so that you can build up a rapport with the staff looking after your child. It is always harder with someone else’s child and staff will be anxious that they get it right for you. Be a point of contact at any time throughout the day for reassurance for them.

Things to consider

Make sure that there is a pre-arranged system for the recording of information around blood glucose levels etc. How will the school record these? Home-link book, recording book etc.

Make sure that you have agreed what will happen to the equipment daily; will you take it in every day or at the start of the week and collect at the end, how will medication be stored, who will be administering?

Who will provide food/snacks etc.? Will you provide these or will school provide them for a small fee?

Have you considered activities or clubs such as PE or swimming? How might this impact on your child? How will the school manage blood glucose monitoring and feeds around these?

What will happen if your child/pupil has a 1-1 and they are absent? What systems are in place? Is there a team of people trained? It is usually best to ensure at least 2 or 3 people are trained to allow for staff illness/training etc. Check with the school their policy with regards to this.

How will the school ensure training remains current?

Signpost the school to further reading/training/support groups/other schools?

Have you considered scheduled appointments/admissions? Give school as much notice as possible for them to ensure that schoolwork is prepared for these times and to offer any other support needed.

Talk openly about the impact CHI has on your child and you as a family, from the daily regimes, managing CHI when you are out and about, the impact of medications on your child (excess body hair with Diazoxide for instance), social integration etc. Our book Chloe the rabbit has Hyperinsulinism is a great way to talk openly with your child and for schools to help your child's peers understand a little more.

Always be friendly to the school. Schools are far more receptive to calm and friendly requests and would rather work as a team which is important when it comes to managing your HI child.

Although your child may have a strict feeding regime, there may have to be a degree of flexibility to allow for when school breaks and lunchtimes are. Liaise with school to find out when these will take place and how best to manage these times. Children with CHI should not be segregated away from their peers.

In secondary school when your child is more independent it is a good idea for them to carry with them as part of their kit along with the test kit and hypo treatment, small (A5) laminated sheets held together to include their daily plan, information sheet with photo, PE plan, emergency hypo information, emergency contacts etc.

In secondary school, and possibly year 5 and 6 of primary school, having a Hyperinsulinism Alert card is a good idea to be able to hold in class, on school bags, seat belts, belt loops etc. These provide the signs and symptoms of Hypoglycaemia with an emergency contact number on the back.

For the older child, it might be an idea to liaise with the school to allow your child use of their mobile phone (if they have one) in emergencies with regards to managing their hyperinsulinism during hypoglycaemic episodes when they are in and around school.

If there are changes to the care plan, please ensure you update the school in writing as soon as possible. Ensure there is a paper trail with clear instructions from the medical teams who have changed the plan so that there is no room for misinterpretation or error.

For additional guidance on supporting pupils with medical conditions at school, please visit: <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

Communication

Some parents may have, or it is advised for parents to have, a Communication Passport. These are booklets designed to be carried about with the child and are particularly useful for hospital admissions, playgroups and starting school. They can be put together by the parents themselves or with the help of perhaps a Speech and Language therapist to incorporate a lot of information to know about the child such as how they communicate, their likes and dislikes, family members, their care plan, hypo treatments, emergency contacts etc. It is a foundation model that schools will find particularly useful in the beginning when getting to know the child and is also helpful when applying for an EHCP.

Hypo Bag/Box

It is also good to have a designated medical/hypo treatment box or bag that the child will attend school with. It is advisable to have a main bag/box held in the classroom and a smaller one which can be transported around school. Both schools and parents can use this checklist to ensure they have the correct items:

- Hypo plan
- Emergency contact details
- Blood glucose testing monitor
- Additional testing strips and lancets
- Cleaning wipes (alcohol free)
- Booklet for recording of blood glucose readings
- Feeding pump, feeds, giving sets and syringes (if your child uses one)
- Medications (must be labelled and in date with current NHS guidelines)
- Hypo treatments such as glucogel, SOS powders, glucotabs, glucojuice
- Snacks and juice
- Other medical equipment if your child uses any