**Physical and Neurological Impairment (PNI) – a case study on medical needs.**

Secondary schools are most often organised in ways that makes very individualised and personalised learning plans difficult to incorporate in a truly inclusive manner. So, when faced with the challenge of offering inclusive learning and development opportunities to a high achieving pupil with complex medical needs, it has been inspiring to work collaboratively with one school to achieve a flexible approach to timetabling and provision that meets the medical, academic, social and developmental needs equally.

Case Study: Adapting to meet medical needs alongside personalised learning

In this case the pupil has a diagnosis of Ehlers Danlos Type III, with a wide ranging impact on health and well-being.

Elhers Danlos Syndrome (EDS) is a condition that affects the soft tissues of the body. There are different types of EDS that affect individuals in different ways and in some cases can be relatively mild while in others it can present severe symptoms that can be life changing and disabling.

Type III EDS is also known as hypermobile type and most often presents with hypermobility of the joints that are loose, dislocate easily and are often painful. The skin bruises easily, and extreme fatigue and malaise can occur suddenly and be difficult to manage. In some cases the soft tissue around body organs is also affected resulting in digestive difficulties of severe reflux and poor motility of the bowel. Where nutrition and health becomes compromised additional medical intervention may be required. Surgery is never taken lightly so diet control to eliminate foods that irritate the condition and use of medication is usually the next step and can often be enough to get through a period of growth to a more settled and working system. However, a few cases do not achieve sufficient nutrition and health this way and surgical intervention becomes more critical.

In this case the pupil has been fitted with a Hickman Line, a Gastronomy Peg and a Jejunostomy Peg feeding system for artificial nutrition. They also experience high levels of pain, nausea and extreme fatigue on a daily basis. The loose ligaments result in frequent dislocations and mobility should be taken slowly with the use of a wheelchair for longer distances and when tired or unwell. Such management of fatigue, pain and artificial feeds means that they manage to attend school on a part-time basis for around three hours per day when well.

Involvement of the Specialist Teacher for PNI

The key role of the Specialist Teacher for PNI is to assist schools to support pupils with additional needs. This often involves working in collaboration with other professionals and in this case Specialist Nurses, Occupational Therapist and Physiotherapist. Supporting a pupil with such medical needs can be very daunting to a school that has never encountered this before and the Specialist Teacher can bring reassurance and support as the relevant professionals set up and carry out the necessary training.

It was vital that all necessary arrangements should be organised and ready so that this pupil could attend from the first day of the new school year in their new secondary school. To ensure this, preparation and planning work took place as soon as the school placement was confirmed during the preceding summer term. This included attending a professionals meeting to liaise and ensure a good understanding of the pupil’s needs with key staff at the new school. In this meeting needs were clearly identified and a clear plan was constructed.

Actions taken

The Specialist Teacher carried out an access visit with the school and discussed reasonable adaptations. The general access is good with no need for any building work but we did discuss aspects of organisation and the curriculum. The following matters were discussed: the management of medical needs; staff training and awareness; timetabling into rooms with ease of access and reducing travel distances around school; safe movement around school; classroom seating and developing a personalised learning plan.

Training for managing Hickman line emergencies was provided by the specialist nursing team to a core team of staff, so that there is always someone available should this be required. Medication needs to be administered at three points during a typical school day and one of these requires sterile conditions. A busy medical room is not ideal for this so an alternative and dedicated space was sought and allocated. Medication training was also provided for a number of staff so that if one person is off school for any reason there are others available.

Adult support is not needed for academic purposes but is required for safety and practical assistance. The teaching assistant working with this pupil over the last year had already received specific and specialised training and was employed to continue that support. Additional training has been provided to raise awareness in all school staff and particularly those who will work directly with this pupil.

The Specialist Teacher worked with the SENCO to discuss opportunities to create a full learning programme for this pupil alongside managing medical needs and part time attendance. The result is a very flexible approach that covers the full academic curriculum. Once the timetable was drawn up this pupil was floated in and out of different learning groups rather than being fixed to the timetable of just one group. Thus, they may be with one learning group for History but another for Maths. Three hours a day attendance has been organised to fit in to allow full coverage of chosen subjects and school have provided enrolment to a package of online learning for other subjects to be carried out when at home.

Movement around school is managed with passes to leave lessons a few minutes early to move around in quiet corridors. A lift key has been provided and two lockers are used to reduce travel distances and remove the need to carry a heavy bag around.

Opportunities for socialisation have also been considered so that the hours of school attendance include some break times. In addition, a handful of this pupils close friends have now been given the emergency Hickman line training so that they can walk to and from school together, without an adult, on occasions. Where academic support is not required but the designated adult needs to be in the classroom, they are available to assist the teacher and other pupils learning while remaining vigilant and ready to respond if needed.

Future Support

This plan is currently working very well but with growing independence and frequent changes in needs, the Specialist Teacher visits school around once every half term and responds to school requests for any additional support.

Situations such as this are relatively rare for individual schools, whereas a Specialist Teacher is likely to be more familiar and well placed to support the planning and management required. The Specialist Teacher brings knowledge and understanding of the pupil’s health, medical, social, developmental and learning needs alongside familiarity with local provision and services to share good practice and facilitate thinking and planning for individual and personalised learning.

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