Norwood Green Junior School

Supporting Children with Medical Conditions

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Aims

This policy aims to ensure that:

- Pupils, staff and parents/carers understand how our school will support pupils with medical conditions
- Pupils with medical conditions are properly supported to allow them to access the same education as other pupils, including school trips and sporting activities
- Pupils with medical conditions have the same rights of admission to school as other children. This means that no child with a medical condition should be denied admission (see School Admissions Code 2012) or prevented from taking up a place in school because arrangements for their medical condition have not been made.

The governing board will implement this policy by:

- Making sure sufficient staff are suitably trained
- Making staff aware of pupils' conditions, where appropriate
- Making sure there are cover arrangements to ensure someone is always available to support pupils with medical conditions
- Providing supply teachers with appropriate information about the policy and relevant pupils
- Developing and monitoring individual healthcare plans (IHPs)
- pupils at school with medical conditions, in terms of both physical and mental health, are properly supported so they can play a full and active role in school life, enjoy the same opportunities at school as any other child, remain healthy and achieve their academic potential.
- the needs of children with medical conditions are effectively supported in consultation with health and social care professionals, their parents and the pupils themselves.

Legislation and statutory responsibilities

This policy meets the requirements under Section 100 of the Children and Families Act 2014 which places a duty on governing bodies to make arrangements for supporting pupils at their school with medical conditions. It is also based on the Department for Education's statutory guidance on supporting pupils with medical conditions at school.

General Guidelines

When school is notified that a child has a medical condition, procedures are in place to cover any transitional arrangements and for any staff training or support. School does not have to wait for a formal diagnosis before providing support to a pupil. In cases where a pupil's medical condition is unclear, judgements will be needed about what support to provide based on the available evidence.

Procedure

The School's SENDCO and School Business Manager are responsible for ensuring that whenever the school is notified that a pupil has a medical condition:

- sufficient staff are suitably trained
- all relevant staff are made aware of a child's condition

- summer term handover of records includes the sharing of the medical overview for the relevant class
- cover arrangements in case of staff absence is always available
- supply teachers are briefed
- risk assessments for visits and activities out of the normal timetable are carried out
- individual healthcare plans are monitored (at least annually)
- relevant class teachers access and Care plans, termly
- transitional arrangements between schools are carried out
- if a child's needs change, the above measures are adjusted accordingly

Where children are joining Norwood Green Junior School at the start of a new academic year, these arrangements should be in place for the start of term. Where a child joins mid-term or a new diagnosis is given, arrangements should be in place as soon as possible. The SENDCO is made aware of all new pupils' medical conditions, and organises training and the dissemination of information, as appropriate

Not all pupils with a medical condition will require an IHP. It will be agreed with a healthcare professional and the parents when an IHP would be inappropriate or disproportionate. This will be based on evidence. If there is no consensus, the headteacher will make the final decision.

Plans will be drawn up in partnership with the school, parents and a relevant healthcare professional, such as the school nurse, specialist or pediatrician, who can best advise on the pupil's specific needs. The pupil will be involved wherever appropriate.

IHPs will be linked to, or become part of, any education, health and care (EHC) plan.

If a pupil has SEN but does not have an EHC plan, the SEN will be mentioned in the IHP. A record of the child's medical condition and any implications for the child will be kept in the school's medical record and the child's individual record.

The level of detail in the plan will depend on the complexity of the child's condition and how much support is needed.

Individual Health Care Plans

The Headteacher has overall responsibility for the development of IHPs for pupils with medical conditions.

Plans will be developed with the pupil's best interests in mind and will set out:

- What needs to be done
- When
- By Whom

Plans will be reviewed at least annually, or earlier if there is evidence that the pupil's needs have changed.

The following information should be considered when writing an individual healthcare plan:

- the medical condition, its triggers, signs, symptoms and treatments
- the pupil's resulting needs, including medication (dose, side effects and storage) and other treatments, times, facilities, equipment, testing, access to food and drink where this is used

to manage their condition, dietary requirements and environmental issues e.g. crowded corridors, travel time between lessons

- specific support for the pupil's educational, social and emotional needs. For example, how absences will be managed, requirements for extra time to complete exams, use of rest periods or additional support in catching up with lessons, counselling sessions
- the level of support needed including in emergencies. If a pupil is self-managing their medication, this will be clearly stated with appropriate arrangements for monitoring
- who will provide support, their training needs, expectation of their role, confirmation of their proficiency to provide support for the pupil's medical condition from a healthcare professional, and cover arrangements for when they are unavailable
- who in school needs to be aware of the child's condition and the support required
- arrangements for written permission from parents and the Headteacher for medication to be administered by a member of staff or self-administered by the pupil during school hours (children who are competent should be encouraged to take responsibility for managing their own medicines and procedures, with an appropriate level of supervision)
- separate arrangements or procedures required for school trips or other school activities outside of the normal school timetable that will ensure the child can participate e.g. risk assessments
- confidentiality
- what to do if a child refuses to take medicine or carry out a necessary procedure
- what to do in an emergency, who to contact and contingency arrangements

Temporary exclusion on medical grounds

There are occasions when children are temporarily excluded on medical grounds. These generally are:

- Where the child's condition is infectious to others
- Where the safety or well being of the child or other children cannot be adequately undertaken

The school follows Public Health England guidance regarding infectious conditions and excludes children for the appropriate periods.

With reference to the safety/well being of children, the Headteacher will seek appropriate advice and the parents/carer will be fully consulted and informed.

Short term medical conditions

Most children will at some time have a medical condition that may affect their attendance at school. The Administrative staff have the responsibility for speaking to parents and ensuring that an explanation is received, they will then enter the appropriate absence code into the register. Any child giving rise to concern about the frequency of absence due to medical conditions (or any other reason) should be referred to the Headteacher, who will in turn communicate these concerns directly with the parent and/or liaise with the Education Welfare Officer.

If a child is fit enough to attend school but needs to complete a course of treatment, such as antibiotics, the school is able to organise and supervise the taking of medication, using the signed consent form which should outline the type of medication and the dosage.

If a child has a short-term medical need that requires specific measures to be undertaken but not the administration of medication, an individual health plan should still be completed by the parent/carer.

Long term medical conditions

A few children may have medical conditions that will warrant them having an individual health care plan, which may or may not include them taking medication at school. In the case of prospective pupils this would be put in place prior to the child starting school.

Roles and Responsibilities

Supporting a child with a medical condition during school hours is not the sole responsibility of one person. The school will work collaboratively with relevant persons or agencies to provide effective support for the child.

The Governing Body

The Governing Body has ultimate responsibility to:

- make arrangements to support pupils with medical conditions and ensure this policy is developed and implemented
- ensure sufficient staff receive suitable training and are competent to support children with medical conditions
- ensure the appropriate level of insurance is in place and appropriately reflects the level of risk

The Head Teacher

- should ensure all staff are aware of this policy and understand their role in its implementation
- should ensure all staff who need to know are informed of a child's condition
- should ensure sufficient numbers of staff are trained to implement the policy and deliver IHPs, including in emergency and contingency situations, and they are appropriately insured
- Takes overall responsibility for the development of IHPs
- should contact the school nursing service in the case of any child with a medical condition who has not been brought to the attention of the school nurse
- Ensure that systems are in place for obtaining information about a child's medical needs and that this information is kept up to date

School Staff

- any staff member may be asked to provide support to pupils with medical conditions, including the administering of medicines, although they cannot be required to do so
- should receive sufficient and suitable training and achieve the necessary level of competency before taking on the responsibility of supporting children with medical conditions
- Teachers will take into account the needs of pupils with medical conditions they teach. Any staff member should know what to do and respond accordingly when they become aware that a pupil with a medical condition needs help

School Nurses

- are responsible for notifying the school when a child has been identified as having a medical condition which will require support in school. This will be before the pupil starts school, wherever possible.
- may support staff on implementing a child's IHP and provide advice and liaison

Other healthcare professionals such as GPs and paediatricians

- should notify the school nurse when a child has been identified as having a medical condition that will require support at school
- may provide advice on developing healthcare plans
- specialist local teams may be able to provide support for particular conditions (e.g. Asthma, diabetes)

Pupils

- should, wherever possible, be fully involved in discussions about their medical support needs and contribute to, and comply with, their IHP

Parents

- must provide the school with sufficient and up-to-date information about their child's medical needs
- are the key partners and should be involved in the development and review of their child's IHP
- should carry out any action they have agreed to as part of the IHP implementation e.g. provide medicines and equipment and ensure they or another nominated adult are contactable at all times.

Local Authority

- The Local Authority should provide support, advice and guidance to support children with medical conditions to attend school. Where children would not receive a suitable education at Norwood Green Junior School because of their health care needs the Local Authority has a duty to make other arrangements

Staff Training and Support

- The relevant healthcare professional will normally lead on identifying and agreeing with the school, the type and level of training required and how this can be obtained. However school may wish to choose to arrange training and ensure this remains up to date
- Training will be sufficient to ensure that staff are competent and have confidence in their ability to support children. This includes an understanding of the specific medical conditions they are being asked to deal with, their implications and preventative measures and fulfil the requirements in the IHP. A record of the staff training will be kept.
- A first-aid certificate does not constitute appropriate training in supporting children with medical needs
- School will have arrangements in place for whole school awareness training regarding supporting children with medical conditions (e.g. non-pupil day, induction arrangements) to help ensure that all medical conditions affecting pupils in the school are understood fully, this includes preventative and emergency measures so that staff can recognise and act quickly when a problem occurs. This will be provided for new staff during their induction.

Managing Medicines on School Premises

- Medicines should only be administered at school when it would be detrimental to a child's health or school attendance not to do so
- No child will be given prescription or non-prescription medicines without their parent's written consent. Forms are available from the office.

- No child will be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, will never be administered without first checking maximum doses and when the previous dose was taken. Parents will be informed when the dose was given.
- School will only accept prescribed medicines that are in date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage (exception to this is insulin, which must still be in date but may be available inside an insulin pen or a pump, rather than in its original container)
- All medicines will be stored safely. Children will be informed where their medicines are and be able to access them immediately. Medicines and devices such as asthma inhalers, blood glucose testing kits and adrenaline pens will always be readily available to children both in their class and in the medical room (consideration of this will be taken when off school premises e.g. school trips)
- School will keep controlled drugs that have been prescribed for a pupil securely stored and only named staff will have access. Controlled drugs will be easily accessible in an emergency. A record will be kept of any dosage used and the amount of the controlled drug held in school
- School staff may administer a controlled drug to whom it has been prescribed in accordance with the prescriber's instructions. School will keep a record of all medicines administered to individual children stating what, how and how much was administered, when and by whom. Any side effects will be noted.
- When no longer required, medicines will be returned to the parent to arrange for safe disposal.

Record Keeping

- Written records will be kept of all medicines administered to children for as long as these children are at the school.
- Parents will be informed if their child has been unwell in school
- IHPs are kept in a readily accessible place which all staff are aware of

Emergency Procedures

- Where a child has an IHP this will clearly define what constitutes an emergency and explain what to do including ensuring that all relevant staff are aware of emergency symptoms and procedures. Other children in the school should know what to do in general terms such as informing a teacher immediately if they think help is needed
- If a child needs to be taken to hospital, staff should stay with the child until the parent arrives or accompany a child to hospital in an ambulance
- The school has a defibrillator. Several staff have been trained in the use of this.

Day Trips, Residential Visits and Sporting Activities

The Governing body will ensure that arrangements are clear and unambiguous about the need to support actively children with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so. The school will make arrangements for the inclusion of children in such activities with any reasonable adjustments as required unless evidence states that this is not possible.

A risk assessment will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included.

Notes

The school does not have to accept a child identified as having a medical condition at times when it would be detrimental to the health of that child or others to do so.

The following practice is considered not acceptable:

- preventing children from easily accessing their medication and administering it when and where necessary
- assuming children with the same condition require the same treatment
- ignoring the views of the child, their parents; ignoring medical advice or opinion
- sending children with medical conditions home frequently for reasons associated with their medical condition or prevent them from staying for normal school activities (unless specified in IHP)
- If the pupil becomes ill, send them to the school office or medical room unaccompanied or with someone unsuitable
- penalising children for their attendance record if their absences are related to their medical condition that is recognised under this policy e.g. hospital appointments
- preventing children from drinking, eating or taking toilet or other breaks whenever they need to in order to manage their medical condition effectively
- to require parents or otherwise make them feel obliged to attend school to administer medication or provide medical support to their child, including toileting issues (no parent should have to give up working because the school is failing to support their child's medical needs)
- preventing children from participating, or create unnecessary barriers to children participating in any aspect of school life, including school trips (such as requiring parents to accompany the child)

Liability and Indemnity

The Governing Body of Norwood Green Junior School will ensure that the appropriate level of insurance is in place that appropriately reflects the level of risk for managing medication on the premises. The Department for Education's guidance for "Supporting Pupils at School with Medical Conditions 2015" refers to the appropriate level of insurance being in place, or that the Academy is a member of the Department for Education's Risk Protection Arrangements (RPA). RPA is a scheme provided specifically for academies.

https://www.gov.uk/guidance/the-risk-protection-arrangement-rpa-for-schools

Currently, Norwood Green Junior School is a member of the RPA. This will cover staff providing support to pupils with medication conditions. Insurance policies should be accessible to staff providing such support.

Any parents of pupils dissatisfied with the support provided should discuss their concerns directly with the school. If this cannot be resolved parents may make a formal complaint via the school's complaints procedure.

The Headteacher will have overall responsibility that this Policy is implemented and that risk assessments for school visits are undertaken.

The SENDCO and School Business Manager will ensure that sufficient staff are suitably trained, cover arrangements are in place, supply teachers are briefed and IHP's are monitored.

Equal opportunities

Our school is clear about the need to actively support pupils with medical conditions to participate in school trips and visits, or in sporting activities, and not prevent them from doing so.
The school will consider what reasonable adjustments need to be made to enable these pupils to participate fully and safely on school trips, visits and sporting activities.

Risk assessments will be carried out so that planning arrangements take account of any steps needed to ensure that pupils with medical conditions are included. In doing so, pupils, their parents and any relevant healthcare professionals will be consulted.

Links to other policies

This policy links to the following policies:

- Accessibility plan
- Complaints
- Equality information and objectives
- First aid
- Health and safety
- Safeguarding
- Special educational needs policy

Appendices

Annex A - Forms

Form 1 Contacting Emergency Services

Form 2 Individual Healthcare Plan

Form 3 Parental agreement for school/setting to administer medicines

Form 4: Record of medicine administered to an individual

Form 5: Record of medicines administered to all children

Form 6: Request for child to carry his/her own medicine

Form 7: Staff training record - administration of medicines

Form 1 – Contacting Emergency Services

Request for an Ambulance

Dial 999, ask for ambulance and be ready with the following information

1. Your telephone number: _____

2. Called by: Name: _____ Position: _____

3. Call given as: _____ Age: _____ Sex: _____

4. A brief description of child's symptoms:

   _____

   _____

5. Give your location as follows: (insert school/setting address). Ensure open and will be met

   _____

   _____

6. State that the postcode is: _____

7. Give exact location in the school/setting: (insert brief description)

   _____

8. Inform Ambulance Control of the best entrance and state that the crew will be met and taken to:
   _____

9. **Patient Details**
   Name of Child: _____

   D.O.B.: _____ Age: _____

10. **GP Details**
    GP Name: _____

    Surgery Name: _____

    GP Address: _____

11. **Next of Kin:** _____

    Contact No: _____

    Name of School/Nursery:_____

Speak clearly and slowly and be ready to repeat information if asked

Put a completed copy of this form by the telephone

Form 2 – Individual Healthcare Plan

Name of School/Setting	
Child's name	
Group/Class/Form	
Date of Birth	
Child's Address	
Medical Diagnosis or Condition	
Date	
Review date	

CONTACT INFORMATION

Family contact 1					
Name					
Phone No. (work)		Home		Mobile	

Family contact 2					
Name					
Phone No. (work)		Home		Mobile	

Clinic/Hospital contact

Name	
Phone No.	

GP Contact

GP Name	
GP Phone No:	

FORM 2 (Continued) - Healthcare Plan

Describe medical needs and give details of child's symptoms:

Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision:

Daily Care Requirements:

Specific Support for pupil's Educational, Social and Emotional Needs:

Arrangements for school visits/trips etc

Other Information:

Describe what constitutes an emergency, and the action to take if this occurs:

Who is responsible in an Emergency: (State if different for off-site activities)

Follow Up Care:

Plan developed with:

Staff training needed/undertaken – who, what, when:

Form copied to:

Form 3 – Parental Agreement for School/Setting to Administer Medicine

The school/setting will not give your child medicine unless you complete and sign this form, and the school or setting has a policy that staff can administer medicine

Name of School/Setting	
Name of Child:	
Date of Birth:	/ /
Group/Class/Form:	
Medical condition/illness:	

Medicine

Name/Type of Medicine (as described on the container):	
Date dispensed:	/ /
Expiry date:	/ /
Agreed review date to be initiated by *[name of member of staff]*:	
Dosage and method:	
Timing:	
Special Precautions:	
Are there any side effects that the school/setting needs to know about?	

Self Administration: Yes/No (*delete as appropriate*)

Procedures to take in an Emergency:	

Form 3 (Continued) - Contact Details

Name:	
Daytime Telephone No:	
Relationship to Child:	
Address:	

The above information is, to the best of my knowledge, accurate at the time of writing and I give consent to school/setting staff administering medicine in accordance with the school/setting policy. I will inform the school/setting immediately, in writing, if there is any change in dosage or frequency of the medication or if the medicine is stopped.

Signature(s) _____ Date _____

Form 4 – Record of medicine administered to an individual child

Name of School/Setting	
Name of Child	
Date medicine provided by parent	
Group/class/ form	
Quantity received	
Name and strength of medicine	
Expiry date	/ /
Quantity returned	
Dose and frequency of medicine	
Staff signature	
Parent signature	

Date	/ /		/ /		/ /
Time Given					
Dose Given					
Name of member of staff					
Staff initials					

Date	/ /		/ /		/ /
Time Given					
Dose Given					
Name of member of staff					
Staff initials					

Date	/ /		/ /		/ /
Time Given					
Dose Given					
Name of member of staff					
Staff initials					

Date	/ /		/ /		/ /
Time Given					
Dose Given					
Name of member of staff					
Staff initials					

Date	/ /		/ /		/ /
Time Given					
Dose Given					
Name of member of staff					
Staff initials					

Form 5 – Record of medicines administered in school/setting to all children

Name of School/Setting _____

Date	Child's Name	Time	Name of Medicine	Dose given	Any Reactions	Signature of Staff	Print Name

Form 6 – Request for Child to Carry His/Her Medicine

THIS FORM MUST BE COMPLETED BY PARENTS/GUARDIAN

If staff have any concerns discuss request with school healthcare professionals

Name of School/Setting:	
Child's Name:	
Group/Class/Form:	
Address:	
Name of Medicine:	
Procedures to be taken in an emergency:	

Contact Information

Name:	
Daytime Phone No:	
Relationship to child:	

I would like my son/daughter to keep his/her medicine on him/her for use as necessary.

Signed: _____ Date: _____

If more than one medicine is to be given a separate form should be completed for each one.

Form 7 – Staff Training Record – Administration of Medicines

Name of School/Setting:	
Name:	
Type of training received:	
Date of training completed:	
Training provided by:	
Profession and title:	

I confirm that _____ *[name of member of staff]* has received the training detailed above and is competent to carry out any necessary treatment. I recommend that the training is updated (please state how often)

Trainer's signature:	
Date:	

I confirm that I have received the training detailed above.

Staff signature:	
Date:	
Suggested Review Date:	

ANNEX B: Supporting Pupils with Medical Conditions: links to other useful resources

DFE Guidance & Advice

- Special educational needs and disability code of practice 0 to 25
- The early years foundation stage - sets out specific requirements on early years settings in managing medicines for children under 5 years of age
- Working together to safeguard children - statutory guidance on inter-agency working
- Safeguarding children: keeping children safe in education - statutory guidance for schools and colleges
- Ensuring a good education for children who cannot attend school because of health needs - statutory guidance for local authorities
- Drug advice for schools - published by DfE/Association of Chief Police Officers, this document provides advice on controlled drugs
- Home to school transport - statutory guidance for local authorities
- Equality Act 2010: advice for schools - to help schools understand how the Act affects them
- School Admissions Code 2012 - statutory guidance that schools must follow when carrying out duties relating to school admissions
- Health and safety - advice for schools covering activities that take place on or off school premises, including school trips
- Alternative provision - statutory guidance for local authorities and headteachers and governing bodies of all educational settings providing alternative provision
- First aid - departmental advice on first aid provision in schools
- Automated external defibrillators (AEDs) - how schools can buy, install and maintain an automated external defibrillator
- School exclusion - statutory guidance for maintained schools, academies and pupil referral units (PRUs)
- School premises - departmental advice to help schools and local authorities understand their obligations in relation to the School Premises Regulations 2012
- Mental health and behaviour in schools - departmental advice to help schools identify and support those pupils whose behaviour suggests they may have unmet mental health needs
- Department for Education - contact details

Associated Resources & Organisations – wider government

- NHS Choices - provides an A to Z of health conditions and medicines
- Getting it right for children, young people and families - provides information on the Department of Health vision for the role of the school nurse
- Health and Safety Executive - this website covers schools (state-funded and independent), further education establishments and higher education institutions.
- School trips and outdoor learning activities: dealing with the health and safety myths - provides information for managers and staff in local authorities and schools
- Standards for medicines management (2010) - produced by the Nursing and Midwifery Council this document sets standards for nurses, including over delegation of the administration of medicinal products
- Healthy child programme 5 to 19 - this good practice guidance sets out the recommended framework of universal and progressive services for children and young people to promote health and wellbeing
- Directors of children's services: roles and responsibilities - statutory guidance for local authorities with responsibility for education and children's social services functions
- Commissioning regional and local HIV sexual and reproductive health services - guidance for commissioners of HIV, sexual and reproductive health services: includes prevention, treatment, information, advice and support
- Protocol for emergency asthma inhalers in schools
- Department of Health - contact details

Associated Resources & Organisations - external

- Advice about emergency healthcare plans
- The School and Public Health Nurses Association (SAPHNA) is dedicated to the health of children and young people in their communities
- HeadMeds - provides information about mental health medication for young people and to answer the difficult questions that young people may have about their medication but may not feel comfortable asking an adult or professional about
- Medical conditions at school partnership - includes an example school policy, a form for a healthcare plan, other forms for record keeping, and information on specific health conditions
- The Council for Disabled Children (2014) has published 2 practical handbooks to help local authorities, schools, early years settings and health providers develop policies and procedures to ensure that children with complex health and behavioural needs can access education, healthcare and childcare:
- Dignity and Inclusion: making it work for children with complex health care needs
- Dignity and Inclusion: making it work for children with behaviour that challenges

- Mencap provides support to people with learning disabilities, their families and carers
- Contact a Family provides support to the families of disabled children whatever their condition or disability
- UNISON - offers advice, support and help for school support staff at work, as well as providing training opportunities and welfare services
- Medicines for Children provides information about a wide range of medicines prescribed to children. It is run by the Royal College of Paediatrics and Child Health (RCPCH), the Neonatal and Paediatric Pharmacists Group (NPPG) and WellChild

Associated Resources & Organisations – medical conditions

- Diabetes UK – supports and campaigns for those affected by or at risk of diabetes
- Children's Heart Federation - a children's heart charity dedicated to helping children with congenital or acquired heart disease and their families in Great Britain and Northern Ireland
- Education and Resources for Improving Childhood Continence (ERIC) supports children with bladder and bowel problems and campaigns for better childhood continence care
- Anaphylaxis Campaign - supports people at risk from severe allergic reactions (anaphylaxis)
- British Heart Foundation - supporting those suffering from heart conditions
- Little Hearts Matter - offers support and information to children, and their families, with complex, non-correctable congenital heart conditions
- CLIC Sargent - a cancer charity for children and young people, and their families, which provides clinical, practical and emotional support to help them cope with cancer
- Sickle cell and Young Stroke Survivors - supports children and young people who have suffered a stroke or at risk of stroke as a result of sickle cell anaemia
- Coeliac UK - supports those with coeliac disease for which the only treatment is a gluten-free diet for life. The Coeliac UK website offers guidance and advice to everyone involved with supporting a child with coeliac disease in school, including training and tips for caterers as well as parents
- The Association of Young People with ME - supports and informs children and young people with ME (myalgic encephalomyelitis)/CFS (chronic fatigue syndrome), as well as their families, and professionals in health, education and social care
- The Migraine Trust - a health and medical research charity which supports people living with migraine
- Migraine Action - an advisory and support charity for children and adults with migraine and their families
- Stroke Association - supports families and young people affected by stroke in childhood
- Young Epilepsy - supports young people with epilepsy and associated conditions

- Asthma UK - supports the health and wellbeing of those affected by asthma
- Epilepsy Action - seeks to improve the lives of everyone affected by epilepsy
- East of England Children and Young People Diabetes Network - provide diabetes guidelines for schools, colleges and early years settings