

Cynulliad Cenedlaethol Cymru | National Assembly for Wales

Y Pwyllgor Plant, Pobl Ifanc ac Addysg | Children, Young People and Education Committee

Bil Anghenion Dysgu Ychwanegol a'r Tribiwnlys Addysg (Cymru)| Additional Learning Needs and Education Tribunal (Wales) Bill

ALN 31

Ymateb gan: Coleg Brenhinol Pediatreg a Iechyd Plant

Response from: Royal College of Paediatrics and Child Health

The Royal College of Paediatrics and Child Health (RCPCH) works to transform child health through knowledge, innovation and expertise. We have over 500 members in Wales and over 17,000 worldwide. The RCPCH is responsible for training and examining paediatricians. We also advocate on behalf of members, represent their views and draw upon their expertise to inform policy development and the maintenance of professional standards.

RCPCH greatly welcomes the renewed focus on children with additional learning needs. We very much agree with the purpose of this legislation and its principles. We are grateful for the opportunity to give oral evidence on this issue and look forward to our representative Dr Justin Warner doing so.

We do, however, have long standing concerns about the support given to children with medical needs in Welsh schools. In our Vision 2016 document, published in 2015 ahead of the 2016 Assembly elections, we called for improved support for children with medical needs in education settings.

The Bill as it stands does not cover medical needs but the substantial overlap in support structures for medical and additional learning needs means that we believe this issue must be looked at in the context of this Bill.

Evidence submitted by Diabetes UK Cymru suggests that a possible unintended consequence of the Bill as it stands is that children with medical needs could find it more difficult to get the support they need or that such support could become increasingly unequal if confusion arises as to which

medical needs are considered disabilities and which are not; and if the current system is replaced by the new ALN provisions (which some children with medical needs will not be entitled to).

There is also the issue of children who have both additional learning needs and medical needs. The Bill does not appear to consider the needs of children in this situation. As the response from our colleagues at the British Association of Childhood Disability (BACD – which is RCPCH’s special interest group on childhood disability, as well as being an affiliate group of the British Association of Community Child Health and the UK branch of the European Academy of Childhood Disability) has argued, there is a need for children and young people with additional learning needs to be given a health assessment, which is not necessarily within the expertise of non-clinicians working within education. Failing to address this risks disrupting the education of affected children, leading to unequal outcomes.

Therefore, the Bill is likely to have an impact on children with medical needs even if it was not initially designed to do so. This must be considered.

In summary, we welcome this Bill and very much hope to see an amended version become law. Our key concerns are expanded upon in submissions from Diabetes UK and the British Association of Childhood Disability. We echo those concerns and add that feedback from clinicians and partner organisations suggests that these issues are being experienced by children (and their families) with a range of health needs including epilepsy, anaphylaxis, diabetes and coeliac disease. This is why we have long argued that the current guidance for schools around supporting children with medical needs should be underpinned by statute (which could be done as part of this legislation). We understand that organisations representing children with a number of these conditions and their families will respond to the consultation and we urge the Committee to pay close attention to the concerns they raise. We also urge the Committee to engage with the very detailed response from Diabetes UK which sets out a number of possible

unintended consequences of the proposed Bill and ways in which it could be strengthened to overcome these problems. We therefore recommend that the committee consider how the Bill can ensure that children with medical needs (and their families) benefit from legal protection, as will children with additional learning needs.