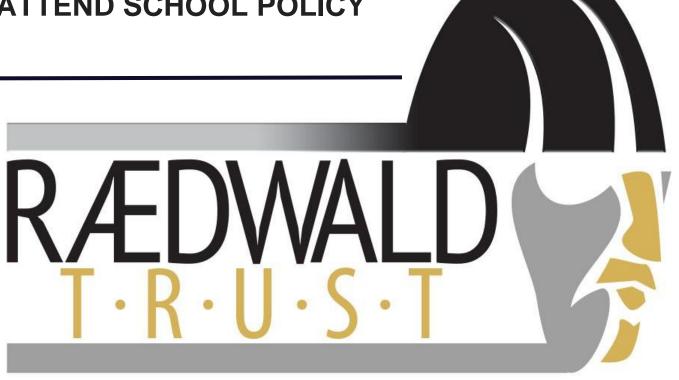
CHILDREN WITH HEALTH NEEDS WHO CANNOT ATTEND SCHOOL POLICY



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CHILDREN WITH HEALTH NEEDS WHO CANNOT ATTEND SCHOOL POLICY

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Policy author:	Angela Ransby
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CEO Signature:	Angela Ransby
Trust Board Signature:	
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Updates made:	Alan Whittaker Date:

Table of Contents

- 1. Aims 3
- 2. Legislation and guidance 3
- 4. The responsibilities of the school 4
- 6. Monitoring arrangements 8
- 7. Links to other policies 8

1. Aims

This policy aims to ensure that:

- Suitable education is arranged for pupils on roll who cannot attend school due to health needs
- Pupils, staff and parents understand what the school is responsible for when this education is being provided by the local authority

2. Legislation and guidance

This policy reflects the requirements of all relevant legislation and statutory guidance including but not limited to:

- Education Act 1996
- Equality Act 2010
- Data Protection Act 2018
- DfE (2013) 'Ensuring a good education for children who cannot attend school because of health needs'
- DfE (2015) 'Supporting pupils at school with medical conditions'

It is also based on guidance provided by our local authority.

This policy complies with our funding agreement and articles of association.

3. Definitions

Children who are unable to attend school because of their medical needs may include those with:

- Physical health issues.
- Physical injuries.
- Mental health problems, including anxiety issues.
- Emotional difficulties or school refusal.

- Progressive conditions.
- Terminal illnesses.
- Chronic illnesses.

Children who are unable to attend mainstream education for health reasons may attend any of the following:

Hospital school: a special school within a hospital setting where education is provided to give continuity whilst the child is receiving treatment.

Home tuition: a service that acts as a communication channel between schools and pupils on occasions where pupils are too ill to attend school and are receiving specialist medical treatment.

Medical PRUs: these are LA establishments that provide education for children unable to attend their registered school due to their medical needs.

4. The responsibilities of the school

The law does not specify the point during a child's illness when it becomes the Local Authorities responsibility to secure for the child suitable full-time education. Schools would usually provide support to children who are absent from school because of illness for a shorter period, for example when experiencing chicken pox or influenza.

More generally, local authorities should be ready to take responsibility for any child whose illness will prevent them from attending school for 15 or more school days, either in one absence or over the course of the school year, and where suitable education is not otherwise being arranged.

Where a pupil has a complex or long-term health issue, the pattern of illness can be unpredictable. The school will discuss the pupil's needs and how these may be best met with the Local Authority, relevant medical professionals, parents and, where appropriate, the pupil. Flexibility and responsiveness may be needed. The Local Authority expects the school to support pupils with health needs to attend full-time education wherever possible, or for the school to make reasonable adjustments to pupils' programmes of study where medical evidence supports the need for those adjustments. The school will make reasonable adjustments under pupils' individual healthcare plans.

Pupils admitted to hospital will receive education as determined appropriate by the medical professionals and hospital tuition team at the hospital concerned. During a period of absence, the

school will work with the provider of the pupil's education to establish and maintain regular communication and effective outcomes. As far as possible, the child will be able to access the curriculum and materials that they would have used in school. Where appropriate, the school will provide the pupil's education provider with relevant information, curriculum materials and resources. It may be decided that a remote offer of education either via video or live lessons can be provided by the school. In those cases the school will make use of the remote learning platforms that have been successfully used previously including monitoring pupil engagement and systems for marking and returning work.

The duration of this arrangement will be agreed on a case-by-case basis and in partnership with families, the responsible local authority and relevant health and social care partners. Whilst a pupil is away from school, the school will work with the Local Authority to ensure the pupil can successfully remain in touch with their school and may use the following methods:

- Emails
- Invitations to school events
- Platforms such as Student Hub, Class Dojo etc

4.1 Reintegration

When a pupil is considered well enough to return to school, the school will develop a tailored reintegration plan in collaboration with the LA. For longer absences, the reintegration plan will be developed near to the pupil's likely date of return, to avoid putting unnecessary pressure on an ill pupil or their parents in the early stages of their absence. The school is aware that some pupils will need gradual reintegration over a long period of time and will always consult with the pupil, their parents and key staff about concerns, medical issues, timing and the preferred pace of return.

The reintegration plan will include:

- The date for planned reintegration, once known.
- Details of regular meetings to discuss reintegration.
- Details of the named member of staff who has responsibility for the pupil.
- Clearly stated responsibilities and the rights of all those involved.
- Details of social contacts, including the involvement of peers and mentors during the transition period.
- A programme of small goals leading up to reintegration.
- Follow up procedures.

The school will consider whether any reasonable adjustments need to be made to provide suitable access to the school and the curriculum for the pupil. These may include the following adaptations:

- A personalised or part-time timetable, drafted in consultation with the Head of School
- Access to additional support in school
- Online access to some of the curriculum from home
- Movement of lessons to more accessible rooms
- Places to rest at school
- Special exam arrangements to manage anxiety or fatigue

The school will ensure a welcoming environment is developed and encourage pupils and staff to be positive and proactive during the reintegration period.

4.2 Training

Where necessary, staff will be trained in a timely manner to assist with a pupil's return to school. Healthcare professionals should be involved in identifying and agreeing with the school the type and level of training required that may be required. Training will be sufficient to ensure staff are confident in their ability to support pupils with additional health needs. Parents of pupils with additional health needs may provide specific advice but will not be the sole trainer of staff.

5. The responsibilities of the Local Authority

There will be a wide range of circumstances where a child has a health need but will receive suitable education that meets their needs without the intervention of the Local Authority – for example, where the child can still attend school with some support; where the school has decided to deliver suitable education outside of school for the child; or where arrangements have been made for the child to be educated in a hospital by an on-site hospital school. The Local Authority would not become involved in such arrangements unless it had reason to think that the education being provided to the child was not suitable or, while otherwise suitable, was not full-time or for the number of hours the child could benefit from without adversely affecting their health. This might be the case where, for example, the child can attend school but only intermittently.

Local Authorities are responsible for arranging suitable full-time education for pupils who – because of illness or other reasons – would not receive suitable education without such provision. This means that where a child cannot attend school because of health problems, which have been confirmed by an appropriate professional, and would not otherwise receive a suitable full-time education, the Local Authority is responsible for arranging provision. The law does not define full time education but children with health needs should have provision which is equivalent to the education they would receive at school. Where full time education would not be in the best interests of a child because of reasons relating to their physical or mental health, local authorities should provide part time education on a basis they consider to be in the best interests of the child.

The Local Authority should:

- Provide such education as soon as it is clear that a pupil will be away from school for 15 days or more, whether consecutive or cumulative. They should liaise with the appropriate medical professionals to ensure minimal delay in arranging appropriate provision for the pupil.
- Ensure the education pupils receive is of good quality, allows them to take appropriate qualifications, prevents them from falling behind their peers in school, and allows them to reintegrate successfully back into school as soon as possible.
- Address the needs of individual pupils in arranging provision.
- Have a named officer responsible for the education of children with additional health needs and ensure parents know who this is.
- Have a written, publicly accessible policy statement on their arrangements to comply with their legal duty towards children with additional health needs.
- Review the provision offered regularly to ensure that it continues to be appropriate for the child and that it is providing suitable education.
- Give clear policies on the provision of education for children and young people under and over compulsory school age.

The Local Authority should not:

- Have processes or policies in place which prevent a child from getting the right type of provision and a good education.
- Withhold or reduce the provision, or type of provision, for a child because of how much it will cost.
- Have policies based upon the percentage of time a child is able to attend school rather than whether the child is receiving a suitable education during that attendance. Have lists of health conditions which dictate whether or not they will arrange education for children or inflexible policies which result in children going without suitable full-time education (or as much education as their health condition allows them to participate in).
- Unnecessarily demand continuing evidence once a parent has provided evidence from a consultant In cases where the local authority makes arrangements, the school will:
 - Work constructively with the local authority, providers, relevant agencies and parents to ensure the best outcomes for the pupil
 - Share information with the local authority and relevant health services as required
 - Help make sure that the provision offered to the pupil is as effective as possible and that the child can be reintegrated back into school successfully
 - When reintegration is anticipated, work with the local authority to:

- Plan for consistent provision during and after the period of education outside the school, allowing the pupil to access the same curriculum and materials that they would have used in school as far as possible
- Enable the pupil to stay in touch with school life (e.g. through newsletters, emails, invitations to school events or internet links to lessons from their school)
- Create individually tailored reintegration plans for each child returning to school
- Consider whether any reasonable adjustments need to be made

6. Monitoring arrangements

This policy will be reviewed annually by the CEO. At every review, it will be approved by the Trust board.

7. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Supporting pupils with medical conditions