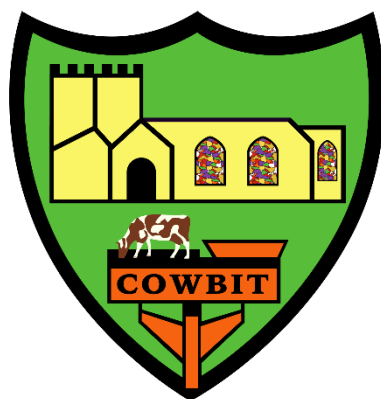


# Cowbit St Mary's Church of England Primary School



## Children with Health Needs who Cannot Attend School Policy 2024-2025

Created:	16th September 2024
Approved:	
Next review due	16 <sup>th</sup> September 2025
Published on website:	

Signed by:

\_\_\_\_\_ Headteacher

Date: \_\_\_\_\_

\_\_\_\_\_ Chair of Governors

Date: \_\_\_\_\_

## **1. Statement of Intent**

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 education is being provided by the Local Authority.

Cowbiot St Mary's School believes that every child should have the best possible start in life through a high-quality education, which allows them to achieve their full potential. A child who has health needs should have the same opportunities as their peer group, including a broad and balanced curriculum. As far as possible, children with health needs and who are unable to attend school should receive the same range and quality of education as they would have experienced at their home school.

Due to the nature of their health needs, some children may be admitted to hospital or placed in alternative forms of educational provision. We recognise that, whenever possible, pupils should receive their education within their own school and the aim of any alternative provision will be to reintegrate pupils back into school as soon as they are well enough.

We understand that we have a continuing role in a child's education whilst they are not in school and will work with the Local Authority, healthcare partners and families to ensure that all children with medical needs receive the right level of support to enable them to maintain their education.

This should also include social and emotional needs, for example ensuring that pupils feel fully part of our school community, are able to stay in contact with classmates, and have access to the opportunities enjoyed by their peers. Alternative provision, and the support framework which surrounds it, should enable a child to maintain academic progression and attainment, and allow them to thrive and prosper in the education system. This support framework should work cohesively across organisational boundaries and include a structured understanding and assessment of the needs of a child, and appropriate referral and re-integration that focuses on the child's interest and appropriate outcomes rather than processes. Local authorities, schools, providers, relevant agencies and parents should work together constructively in order to ensure the best outcomes for each child.

## **2. Definition**

Whilst there is not a legal definition of a healthcare need, in general terms it can be said that such a need is one related to the treatment, control or prevention of a disease, illness, injury or disability, and the care or aftercare of a person with these needs.

## **3. Legislation and Guidance**

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- The Education Act 1996

- The Equality Act 2010
- The Data Protection Act 2018
- Ensuring a good education for children who cannot attend school because of health needs; DfE 2013
- Supporting pupils at school with medical conditions; DfE 2015
- Working Together to Safeguard Children (2018)
- The Special Educational Needs and Disability (SEND) Code of Practice 0-25 (January 2015)
- Children and Families Act (2014)
- The Special Educational Needs and Disability Regulations (2014)

#### **4. Links to other School Policies**

- Accessibility Plan
- Supporting pupils with medical conditions
- Attendance policy
- Child protection and safeguarding policy
- Special educational needs and disabilities (SEND) policy
- Equality policy
- Mental health and well-being policy

#### **5. Roles and Responsibilities**

##### **The School**

Wherever possible, we will attempt to deliver a suitable education for children with significant health needs in school. If this is not possible then we will provide the following:

- Where a child is absent from school for medical reasons, the school will provide education tasks and resources for use at home when the child is well enough to engage with them.
- When an absence is known to be more than 15 days, the school will request that home tuition is provided to the child through the Local Authority.
- Where a child is admitted to hospital, the school will liaise with the teaching service to inform them of the curriculum areas that the pupil should be covering during their absence. Where possible, school will plan the educational programme of the pupil with the service provider, taking account (as appropriate) of the medical condition, treatment, effects of medication, therapeutic programmes provided and the duration of absence from school.

Where a child may be absent from school for an extended period of time, our schools will liaise with the educational provider (home tuition or hospital tuition) in order to provide as

much information as possible, so that the disruption to the child's education is as little as possible. We may provide the following information:

- Medium term planning, programmes of study/schemes of work
- Information relating to the pupil's ability, progress to date, assessment data
- Information relating to any special educational needs and/or disabilities
- Resources and materials

Where practical, our schools will host review meetings with the alternative providers, healthcare professionals, parent/carers and where appropriate the child.

Where children have recurrent admissions or have a planned admission to hospital, the school will aim to provide a pack of work for the pupil to take into hospital with them.

## **The Local Authority**

If for any reason the school can't make suitable arrangements for the child, Lincolnshire Local Authority will become responsible for arranging a suitable education for the child. The Local Authority is responsible for the following:

- Arranging suitable full-time education for children of compulsory school age who, because of illness, would not receive suitable education without such provision;
- Provision which is equivalent to the education they would receive in school. If they receive one-to-one tuition, for example, the hours of face-to-face provision could be fewer as the provision is more concentrated.
- Where full-time education would not be in the best interests of a particular 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 child's best interests. Full and part-time education should still aim to achieve good academic attainment particularly in English, Maths and Science.
- With planned hospital admissions, Local Authorities should give the teacher who will be teaching the child as much forewarning as possible, including the likely admission date and expected length of stay. This allows them to liaise with the child's school and, where applicable, with the Local Authority about the programme to be followed while the child is in hospital. Local Authorities should set up a personal education plan, which should ensure that the child's school, the Local Authority and the hospital school or other provider can work together.
- Reviewing the provision offered regularly, to ensure that it continues to be appropriate for the child and that it is providing suitable education.

In cases where the Local Authority makes arrangements, the school will:

- Work constructively with the Local Authority, alternative providers, healthcare professionals and parents/carers to ensure the best outcomes for the child;
- Share information with the Local Authority and relevant health services as required;
- Help to make sure that the provision offered to the child is as effective as possible and that the child can be reintegrated back into school successfully.

When reintegration is anticipated, our schools will work with the Local Authority to:

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

## **The Governing Body and Head Teacher**

The Governing Board and head teacher at each school are responsible for the following:

- Ensuring arrangements for children who cannot attend school as a result of their medical needs are in place and are effectively implemented;
- Ensuring a termly review of the arrangements made for children who cannot attend school due to their medical needs;
- Ensuring the roles and responsibilities of those involved in the arrangements to support the needs of the child are clear and understood by all (this policy);
- Notifying the Local Authority when a child is likely to be away from the school for a significant period of time due to their health needs.

## **The SENCo**

The SENCo is responsible for the following:

- Overseeing the arrangements for children who are unable to attend school because of medical needs (this policy);

- Actively monitoring pupil progress and reintegration into school;
- Supplying any necessary information about the child's capabilities, progress and outcomes and any special educational needs and/or disabilities with the alternative education provider;
- Supplying any necessary information about the child's curriculum with the alternative education provider e.g. Medium term planning, programmes of study/schemes of work and any resources and materials (mentioned earlier);
- Liaising with the head teacher and staff members, to ensure a joined-up approach and smooth transition;
- Ensuring that teachers who provide education for children with health needs receive suitable training and support and are kept aware of curriculum developments. They should also be given suitable information relating to the child's health condition, and the possible effect the condition and/or medication taken has on the child;
- Liaising with the parents/carers and children to ensure a sense of belonging and ensure continuity;
- Liaising with any Outside Agencies and organising any necessary review meetings

## **Teachers and Support Staff**

Teachers and support staff are responsible for the following:

- Understanding confidentiality in respect of children's health needs;
- Designing lessons and activities in a way that allows those with health needs to participate fully and ensuring children are not excluded from activities that they wish to take part in, without a clear evidence-based reason;
- Understanding their role in supporting children with health needs and ensuring they attend the required training (in line with the 'Supporting Pupils with Medical Conditions Policy');
- Ensuring that they have read and are following the child's individual health care plan (in line with the 'Supporting Pupils with Medical Conditions Policy');
- Keeping parents informed of how their child's health needs are affecting them whilst in the school.

## **6. Absences**

Parents are advised to contact the school on the first day their child is unable to attend due to illness.

Absences due to illness will be authorised unless the school has genuine cause for concern about the authenticity of the illness.

The school will provide support to children who are absent from school because of illness for a period of less than 15 school days, by liaising with the child's parents to arrange schoolwork as soon as they are able to cope with it or part-time education at school. The school will give due consideration to which aspects of the curriculum are prioritised in consultation with the child, their family and relevant members of staff.

For periods of absence that are expected to last for 15 or more school days, either in one absence or over the course of a school year, the school SENCo or head teacher will notify the Local Authority, who will take responsibility for the child and their education.

The school will continue to monitor pupil attendance and mark registers to ensure it is clear whether a child is, or should be, receiving education otherwise than at school.

A child unable to attend school because of health needs will not be removed from the school register without parental consent and certification from the relevant healthcare professionals, even if the Local Authority has become responsible for the child's education. Continuity is important for children and knowing that they can return to their familiar surroundings and school friends can help their recovery and their educational progress.

## **7. Reintegration into the School**

### **The Local Authority**

When reintegration into school is anticipated, Local Authorities should work with the school (and hospital school, PRU/home tuition services if appropriate) to plan for consistent provision during and after the period of education outside school. As far as possible, the child should be able to access the curriculum and materials that he or she would have used in school. The Local Authority should work with our schools to ensure that children can successfully remain in touch with the school while they are away.

Local Authorities should work with schools to set up an individually tailored reintegration plan for each child. This may have to include extra support to help fill any gaps arising from the child's absence. It may be appropriate to involve Lincolnshire's Children's Health Service at this stage as they may be able to offer valuable advice. Those healthcare professionals involved, may also want to be aware that the child is returning to school, so that they can be prepared to offer any appropriate support.

Where the absence is likely to be lengthy, the reintegration plan may only take shape nearer to the likely date of return, to avoid putting unsuitable pressure on an ill child in the early

stages of their absence. While most children will want to return to their previous school routine at once, some will need gradual reintegration over a longer period.

## **The School**

Our schools will work with the alternative providers, healthcare professionals, parent/carers and where appropriate the child, in order to plan a gradual and sensitive reintegration back into school.

We will ensure that the children and staff in school who have maintained contact with the child will play a significant role helping them to settle back into school.

It may be appropriate to plan part-time attendance where the child is medically unable to cope with a full day. This will be kept under review until the child is able to attend for full school days.

It may also be necessary to make reasonable adjustments for children with mobility issues returning to school by taking into account any health and safety issues, organising a risk assessment and seeking advice on lifting and handling procedures where necessary from any healthcare professionals.

Throughout the absence, we will maintain contact with both parents/carers and the child to maintain a sense of belonging. This will include invitations to events and productions at the school as well as regular communication via letters, newsletters or e-mail. We will continue to offer any advice and support as appropriate, during the absence.

We will work closely with the alternative provider, to ensure that any reports and assessments made by them, are shared with the school to ensure a smooth transition upon reintegration.

## **8. Support for Pupils**

Our schools will make any necessary reasonable adjustments needed, within either the child's individual healthcare plan and/or individual support plan (where there are special educational needs and/or a disability), in accordance with the 'Supporting Pupils with Medical Conditions Policy' and 'Special Educational Needs Policy'.

To help to ensure that a child with additional health needs is able to attend school following an extended period of absence, the following adaptations will be considered:

- A personalised or part-time timetable, drafted in consultation with the head teacher, SENCo, class teacher and parent/carer;
- Access to additional support in school;
- Online access to the curriculum from home;
- Movement of lessons to more accessible rooms;
- Places to rest at school;
- Special arrangements for school tests and assessments to manage anxiety or fatigue.



## **9. Monitoring Arrangements**

This policy will be reviewed by the SENCo and SEND Governor annually and in consultation with staff. It will also be updated if any changes to the information are made during the year. It will be approved by the governing board.

## **10. Complaints**

The school works, wherever possible, in full partnership with parents/carers to ensure a collaborative approach to meeting children's needs. All complaints are taken seriously and will be heard through the school's complaints procedure. In most instances, complaints can be resolved at a class teacher level. However, if this is not possible, complaints relating to SEND should be addressed to the SENCo and/or head teacher.

If the situation remains unresolved, then a letter outlining your concern should be sent formally to the Chair of Governors at the school address.