Eldersfield Lawn C.E. Primary School

LIFE

Living and Inspiring Futures for Everyone

"Start children off on the way they should go and even when they are old, they will not turn from it."

Proverbs: 22:6

Children with health needs who cannot attend school policy

Eldersfield Lawn have adopted the DfE Statutory guidance

Policy Review: April 2023
Next Review: April 2024

Aims

Eldersfield Lawn C.E. Primary School follows the statutory guidance from the DfE which is also used by Local authorities. The aim is to arrange suitable full-time education (or part-time when appropriate) for children who are unable to attend a mainstream school or special school because of their health. It applies to all children who would usually attend school.

Ensuring children have a good education

The Government's policy intention is that all children, regardless of circumstances or setting should receive a good education to enable them to shape their own futures.

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 LA – for example, where the child can still attend school with some support; where the school has made arrangements 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. It might be the case where the child can attend school but only intermittently.

This guidance replaces the previous *Access to Education for Children and Young People with Medical Needs* (2001) and links to the Education Act 1996 under section 19 and the Equality Act 2010. It also operates in conjunction with the Attendance Guidance, Data Protection. Medical Conditions and Safeguarding.

Local authorities must:

- Arrange suitable full-time education (or as much education as the child's health condition allows) for children of compulsory school age who, because of illness, would otherwise not receive suitable education.

Local authorities should:

- Provide such education as soon as it is clear that the child will be away from school for 15 days or more, whether consecutive or cumulative. They should liaise with appropriate medical professionals to ensure minimal delay in arranging appropriate provision for the child.

- Ensure that the education children receive is of good quality, as defined in the statutory guidance *Alternative Provision* (2013) to prevent them from slipping behind their peers in school and allows them to reintegrate successfully back into school as soon as possible.

- Address the needs of individual children in arranging provision to access education with the right level with support.

Local authorities 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 (meeting the child's needs and providing a good education must be the determining factors).

- 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).

Roles and Responsibilities

The Governing Body will:

- Ensure arrangements for children who cannot attend school as a result of their medical needs are in place, working with the Local authority, staff and parents for effective implementation.
- Ensure the termly reviews of arrangements are made for children who cannot attend school due to their medical needs.
- Ensure staff with responsibility for supporting pupils with health needs area appropriately trained.

The school staff (which may include the Designated Safeguarding Lead, Teachers and support staff) will:

- Make reasonable adjustments for the needs of the pupils on returning to school.
- Design lessons and activities in a way that allows the pupil with health needs to participate as fully as possible and are not excluded from activities.
- Put arrangements in place to meet the pupil's health needs.
- Attend any relevant training which may be necessary to support the child's health needs.
- Liaise with the parents and professions to provide progress and reintegration updates.
- Keep the governing body updated to ensure compliance with the relevant statutory duties when supporting pupils with health needs.
- Keep the pupil and their family informed about school events.

Parents/Carers will:

- Ensure the regular and punctual attendance of their child at the school where possible.
- Work in partnership with the school to ensure the best possible outcome for the child.
- Notify the school promptly of the reasons for any absences.
- Attend meetings to discuss how the support for their child should be planned and any follow up progress meetings.

Managing 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 pupils whoa re absent for less than 15 school days by liaising with parents to arrange school work, if the child is able to cope with it. Aspects of the curriculum will be prioritised for the pupil through consultation with the child, family and relevant members of staff.

Patterns of attendance are monitored within school and advice maybe sought by the Local authority if this is above 15 school days, either consecutively, or over the course of the school year.

Where absence is anticipated due to the nature of the child's heath needs, arrangements with the family and Local authority will be considered.

For hospital admissions, an appointed named member of staff will liaise with the hospital school regarding an appropriate learning programme.

Pupil attendance will be marked and monitored by the school to see if the child with health needs should be receiving education otherwise than at school.

A pupil who is not able to attend school due to their health needs will not be removed from the school register without parental consent, in liaison with the Local authority and with certification from the Medical Officer.

Identification and intervention

Children with a range of medical needs who are unable to attend school may include those with, physical health or injuries. Mental health or emotional difficulties, progressive conditions, terminal or chronic illnesses.

Long-term medical conditions – provision at home or hospital

Where children have complex or long-term health issues, the pattern of illness can be unpredictable. The school will hold discussions with the Local authority about the best way to meet the child's needs and involve the relevant clinician and the parents, and where appropriate the child. That may be through individual support or by them remaining at school and being supported back into school after each absence. How long the child is likely to be out of school will be important in deciding this.

Long-term medical conditions -provision continued
Where a child has been in hospital for a longer period and returns home, if appropriate, the aim will be to provide education at home or otherwise as quickly as possible. The child's education may well have been disrupted by their time in hospital, so further discontinuity should be avoided if at all possible.

Working together – with parents, children, health services and schools

The Local authority and/or the school delivering the education should consult parents before teaching begins. Parents have an important role to play, whether their child is at home or in hospital. Parents and carers can provide useful information that can inform the teaching approach. Children should also be involved in decisions from the start, with the ways in which they are engaged reflecting their age and maturity. This will help ensure that the right provision is offered and encourage the child's commitment to it.

Effective collaboration between all relevant services (LAs, CAMHS, NHS, schools and, where relevant, school nurses) is essential to delivering effective education for children with additional health needs. When a child is in hospital, liaison between hospital teaching staff, the LA's alternative provision/home tuition service and the child's school can ensure continuity of provision and consistency of curriculum. It can ensure that the school can make information available about the curriculum and work the child may miss, helping the child to keep up, rather than having to catch up.

Written records of all medicines which are administered to support a child's health need will be kept in school linked to the Medicine's Policy. Parents will be asked to complete a Medicine form stating clearly the dosing and administration arrangements required for their child.

Reintegration

When reintegration to school is anticipated, the school and LA will work together with the hospital school/other services 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. If any arrangements for exams are required, discussions will be held with the child's parents and the Local authority to look at the most appropriate ways this could be supported for the child.

Provision for siblings

When treatment of a child's condition means that his or her family have to move nearer to a hospital, and there is a sibling of compulsory school age, the local authority into whose area the family has moved should seek to ensure that the sibling is offered a place, where provision is available, for example, in a local mainstream school or other appropriate setting.