

CHILDREN WITH HEALTH NEEDS WHO CANNOT ATTEND SCHOOL POLICY

NEW DOCUMENT: Autumn 2024

COMMITTEE: Teaching Quality & Pastoral Care

DATE OF NEXT REVIEW: Autumn 2025

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CONTEXT

- 1.1 Under the provisions of the <u>Education Act 1996</u> (section 19) and the <u>Equality Act 2010</u>, local authorities (LAs) were given the duty to find suitable full-time education (or as much education as a child's condition allows) for children of compulsory school age who because of illness or injury would not otherwise receive 'suitable' education i.e. an education appropriate for the child's age, aptitude, ability and any special educational needs that s/he might have. Although there was no legal time span set after which the LA had to provide education for sick children, the expectation was that provision should be in place within 15 days of the child being unable to attend school.
- 1.2 In 2013, the DFE produced two pieces of statutory guidance. One, for LAs was entitled <u>'Ensuring a good education for children who cannot attend school because of health needs'</u> (DfE, 2013) and a second later in the year entitled <u>'Alternative provision'</u> (DfE, 2013) both of which insisted that the education children receive outside mainstream schooling would be of a good quality. LAs were charged with ensuring that such children were educated to a standard which allowed them to take appropriate qualifications and not fall behind their peers in school. Provision should also be made for these children to reintegrate successfully back into school wherever possible.
- 1.3 The <u>Children and Families Act 2014</u> brought with it a change in the law which now requires schools to make arrangements for children with medical conditions. This applies to pupils who can attend school and who have an identified medical condition.
- 1.4 It is also the responsibility of the school in partnership with the LA, hospital education or home education providers to provide educational support and resources to ensure the pupil with health needs who cannot attend school is able to access full-time education (or as much as the condition of the child allows) equivalent to that which would be provided to other pupils in the school.
- 1.5 The DFE published statutory guidance to accompany this change in 2015 entitled <u>'Supporting pupils at school with medical conditions'</u>.

INTRODUCTION

2.1 Westcliff High School for Boys is aware of our responsibility for children and young people on our roll who have health needs which prevent them coming into school for a period of time. We have the following arrangements in place to minimise as far as is possible, the disruption to their schooling by continuing to provide education as normally as the incapacity allows.

SCHOOL PROVISION

- 3.1 The Governing Board is legally responsible under section 100 of the <u>Children and Families Act</u> 2014 to make arrangements to support pupils with serious medical conditions. They ensure that policies, plans and procedures to support children with serious medical conditions are properly and effectively implemented.
- 3.2 This includes children who, by reason of illness may not for any period be in School to receive suitable education.
- 3.3 Governors ensure the policy identifies the roles and responsibilities of all those involved in supporting pupils with serious medical conditions.
- 3.4 The policy is reviewed regularly and is accessible to parents and school staff.
- 3.5 A designated member of staff in each division has overall responsibility for effective policy implementation. They are responsible for staff training so that sufficient staff are competent to take on responsibility to support pupils in School who have medical conditions. They also liaise with the Local Authority (LA) and other partners to ensure that pupils who are unable to come to School because of illness or injury receive suitable education.
- 3.6 Every child on roll who has a serious medical condition is given an individual healthcare plan (IHP) by their healthcare team, which is drawn up in partnership with parents, healthcare professionals and, whenever appropriate, the pupil. Where a pupil has a special educational need identified in an EHC plan, the IHP should be linked to or become part of that plan. If a pupil has SEN but does not have an EHC plan, that need is mentioned in their IHP.

PROVISION FOR CHILDREN WHO CANNOT ATTEND SCHOOL BECAUSE OF ILLNESS

- 4.1 In line with section 19 of the <u>Education Act 1996</u>, each LA has a duty to ensure that arrangements are in place for the provision of suitable education for those children of compulsory school age who by reason of illness may not for any period receive suitable education, unless such arrangements are made for them. This applies to children and young people:
 - Who are of statutory school age.
 - Who are not in school for 15 days or more, whether consecutive or cumulative, due to ill health.

- Who are permanently resident in their (the relevant Local Authority) catchment area.
- Where the health need and necessity for absence have been validated as necessary by a medical doctor or other appropriately qualified consultant.
- Who will not receive a suitable full-time education unless alternative arrangements are made for this by the School and the LA, working with other agencies such as the health professionals, social services, hospital school service etc.
- 4.2 It is the responsibility of the School to work with partners to ensure that the provision for a pupil unable to attend the School because of illness or injury will start as quickly as reasonable. Once assured that provision is in place, the LA will only intervene if it has reason to think that the educational provision being made is unsuitable or insufficient.
- 4.3 The education may be provided in a variety of ways:
 - Through part-time education at the School the child normally attends and supplemented by additional work to be done at home.
 - School to home liaison, using digital media, virtual classrooms or homework.
 - A hospital school if the child has to spend periods of time in hospital.
 - Attendance at an Alternative Provision centre.
 - Home tuition.

TRANSPORT

5.1 The provision of temporary transport for a pupil on medical grounds to and from School can sometimes enable a pupil to attend School who would not otherwise be able to do so, even if this can only be part-time. Parents should apply to the Local Authority in which they reside if transportation is required. Transport for pupils in wheelchairs can usually be arranged.

REINTEGRATION INTO SCHOOL

- 6.1 We are aware that returning to School after a period of illness or injury can be an emotional barrier for a minority of pupils.
- 6.2 While the pupil is away from School, we do encourage his/her peers to keep in touch via cards and letters and to visit where appropriate and subject to their parents' agreement.
- 6.3 The form tutor will also keep in touch with the pupil and his/her parents and the School website and social media channels are also available to the pupil to keep up-to-date with School news.

- 6.4 When a return to School is likely, we consult with the pupil and parents and key staff (including medical staff, teaching staff and support staff) about concerns, medical issues and the timing of return.
- 6.5 Where possible (and subject to medical advice), we encourage the pupil to come into School part-time during the period of ill health, as a useful half-way house to full re-integration.
- 6.6 Pupils with medical conditions may be entitled to variations with regard to the sitting of public examinations, subject to the JCQ regulations. We want our pupils' to have every opportunity to realise their academic prospects, so the School will discuss this with others involved (including the Special Educational Needs Coordinator, medical staff, teaching staff and external assessors) and see what can be arranged in the best interests of the pupil.
- 6.8 The pupil's case is reviewed every four to six weeks to see whether the situation has altered in any way, whether a continuation of the current arrangements is necessary or whether a process of re-integration can be started.
- 6.9 This policy is reviewed annually by the Governing Board.