Children with Health Needs that Cannot Attend School Policy

Date effective	September 2025
Review Cycle	2 Yearly
Review Date	September 2027
Date of Approval by Governors	July 2025
Committee approved by	Foxford Local Governing Body
Author	Rachel Norton

Date	Notes

Statement of intent

Foxford School aims to support the LA and ensure that all children who are unable to attend school due to medical needs, and who would not receive suitable education without such provision, continue to have access to as much education as their medical condition allows, to enable them to reach their full potential. Due to the nature of their health needs, some children may be admitted to hospital or placed in alternative forms of education provision. We recognise that, whenever possible, students should receive their education within their school and the aim of the provision will be to reintegrate students back into school as soon as they are well enough. We understand that we have a continuing role in a student's education whilst they are not the school and will work with the LA, healthcare partners and families to ensure that all children with medical needs receive the right level of support to enable them to maintain links with their education.

Legal framework 1

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

- 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 students at school with medical conditions' 1.2. This policy operates in conjunction with the following school policies
- Alternative Provision Policy
- Attendance and Truancy Policy
- Child Protection and Safeguarding Policy
- Children Missing Education Policy
- Confidentiality Policy
- Data Protection Policy Records Management Policy Special Educational Needs and Disabilities (SEND) Policy Supporting Students with Medical Conditions Policy

1. LA duties

1.3. The LA must arrange suitable full-time education for children of compulsory school age who, because of illness, would not receive suitable education without such provision. The school has a duty to support the LA in doing so.

1.4. The LA should:

- Provide such education as soon as it is clear that a student 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 student. Ensure the education students 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 students 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.

1.5. The LA 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).

2. Definitions

2.1. Children who are unable to attend school as a result 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.

2.2. 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: many LAs have home tuition services that act as a communication channel between schools and students on occasions where students 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.

3. Roles and responsibilities

3.1. The governing board is responsible for:

- Ensuring arrangements for students who cannot attend school as a result of their medical needs are in place and are effectively implemented.
- Ensuring the termly review of the arrangements made for students 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 students are clear and understood by all.
- Ensuring robust systems are in place for dealing with health emergencies and critical incidents, for both on- and off-site activities.
- Ensuring staff with responsibility for supporting students with health needs are appropriately trained.

3.2. The headteacher and SENCO are responsible for:

- Working with the governing board to ensure compliance with the relevant statutory duties when supporting students with health needs.
- Working collaboratively with parents and other professionals to develop arrangements to meet the best interests of children.
- Ensuring the arrangements put in place to meet students' health needs are fully understood by all those involved and acted upon.
- Appointing a named member of staff who is responsible for students with healthcare needs and liaises with parents, students, the LA, key workers and others involved in the student's care.
- Ensuring the support put in place focusses on and meets the needs of individual students.
- Arranging appropriate training for staff with responsibility for supporting students with health needs.
- Providing teachers who support students with health needs with suitable information relating to a student's health condition and the possible effect the condition and/or medication taken has on the student.

- Providing annual reports to the governing board on the effectiveness of the arrangements in place to meet the health needs of students.
- Notifying the LA when a student is likely to be away from the school for a significant period of time due to their health needs.

3.3. The Assistant Headteacher/SENCO is responsible for:

- Dealing with students who are unable to attend school because of medical needs.
- Actively monitoring student progress and reintegration into school.
- Supplying students' education providers with information about the child's capabilities, progress and outcomes.
- Liaising with the headteacher, education providers and parents to determine students' programmes of study whilst they are absent from school.
- Keeping students informed about school events and encouraging communication with their peers.
- Providing a link between students and their parents, and the LA.

3.4. Teachers and support staff are responsible for:

- Understanding confidentiality in respect of students' health needs.
- Designing lessons and activities in a way that allows those with health needs to participate fully and ensuring students are not excluded from activities that they wish to take part in without a clear evidence-based reason.
- Understanding their role in supporting students with health needs and ensuring they attend the required training.
- Ensuring they are aware of the needs of their students through the appropriate and lawful sharing of the individual student's health needs.
- Ensuring they are aware of the signs, symptoms and triggers of common life-threatening medical conditions and know what to do in an emergency. Keeping parents informed of how their child's health needs are affecting them whilst in the school.

3.5. Parents are expected to:

- 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 outcomes for their child.
- Notify the school of the reason for any of their child's absences without delay.
- Provide the school with sufficient and up-to-date information about their child's medical needs.
- Attend meetings to discuss how support for their child should be planned.

Managing absences

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

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

3.8. The school will provide support to students who are absent from school because of illness for a period of less than 15 school days by liaising with the student's parents to arrange schoolwork as soon as the student is 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 student, their family and relevant members of staff.

3.9. 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 named person with responsibility for students with health needs will notify the LA, who will take responsibility for the student and their education.

3.10. Where absences are anticipated or known in advance, the school will liaise with the LA to enable education provision to be provided from the start of the student's absence.

3.11. For hospital admissions, the appointed named member of staff will liaise with the LA regarding the programme that should be followed while the student is in hospital.

3.12. The LA will set up a personal education plan (PEP) for the student which will allow the school, the LA and the provider of the student's education together.

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

3.14. The school will only remove a student who is unable to attend school because of additional health needs from the school roll where: The student has been certified by the school's medical officer as unlikely to be in a fit state of health to attend school, before ceasing to be of compulsory school age; and Neither the student nor their parent has indicated to the school the intention to continue to attend the school, after ceasing to be of compulsory school age.

3.15. A student unable to attend school because of their health needs will not be removed from the school register without parental consent and certification from the school's medical officer, even if the LA has become responsible for the student's education. 3. Support for students

3.16. Where a student has a complex or long-term health issue, the school will discuss the student's needs and how these may be best met with the LA, relevant medical professionals, parents and, where appropriate, the student.

3.17. The LA expects the school to support students with health needs to attend full-time education wherever possible, or for the school to make reasonable adjustments to students' programmes of study where medical evidence supports the need for those adjustments.

3.18. The school will make reasonable adjustments under students' individual healthcare plans (IHCPs), in accordance with the Supporting Students with Medical Conditions Policy.

3.19. Students admitted to hospital will receive education as determined appropriate by the medical professionals and hospital tuition team at the hospital concerned.

3.20. During a period of absence, the school will work with the provider of the student's education to establish and maintain regular communication and effective outcomes.

3.21. Whilst a student is away from school, the school will work with the LA to ensure the student can successfully remain in touch with their school using the following methods:

- School newsletters
- Emails Invitations to school events
- Cards or letters from peers and staff

3.22. Where appropriate, the school will provide the student's education provider with relevant information, curriculum materials and resources. 3.23. To help ensure a student 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 named staff member
- 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 exam arrangements to manage anxiety or fatigue

4. Reintegration

4.1. When a student is considered well enough to return to school, the school will develop a tailored reintegration plan in collaboration with the LA.

4.2. The school will work with the LA when reintegration into school is anticipated to plan for consistent provision during and after the period of education outside school.

4.3. As far as possible, the child will be able to access the curriculum and materials that they would have used in school.
4.4. If appropriate, the school nurse will be involved in the development of the student's reintegration plan and informed of the timeline of the plan by the appointed named member of staff, to ensure they can prepare to offer any appropriate support to the student.

4.5. The school will consider whether any reasonable adjustments need to be made to provide suitable access to the school and the curriculum for the student.

4.6. For longer absences, the reintegration plan will be developed near to the student's likely date of return, to avoid putting unnecessary pressure on an ill student or their parents in the early stages of their absence.

4.7. The school is aware that some students will need gradual reintegration over a long period of time and will always consult with the student, their parents and key staff about concerns, medical issues, timing and the preferred pace of return.

4.8. 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 student. 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.

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

4.10. Following reintegration, the school will support the LA in seeking feedback from the student regarding the effectiveness of the process.

4.11. It is essential that all information about students with health needs is kept up-to-date.

4.12. To protect confidentiality, all information-sharing techniques, e.g. staff notice boards, will be agreed with the student and their parents in advance of being used, in accordance with the Confidentiality Policy.

4.13. All teachers, TAS, supply and support staff will be provided with access to relevant information, including high-risk health needs, first aiders and emergency procedures, via a noticeboard in the staffroom.

4.14. Parents will be made aware of their own rights and responsibilities regarding confidentiality and information sharing. To help achieve this, the school will: Ensure this policy and other relevant policies are easily available and accessible. Provide the student and their parents with a copy of the policy on information sharing. Ask parents to sign a consent form which clearly details the organisations and individuals that their child's health information will be shared with and which methods of sharing will be used. Consider how friendship groups and peers may be able to assist students with health needs.

4.15. When a student is discharged from hospital or is returning from other education provision, the school will ensure the appropriate information is received to allow for a smooth return to the school. The named member of staff will liaise with the hospital or other tuition service as appropriate.

5. Record keeping

5.1. In accordance with the Supporting Students with Medical Conditions Policy, written records will be kept of all medicines administered to students

5.2. Proper record keeping protects both staff and students and provides evidence that agreed procedures have been followed.

5.3. All records will be maintained in line with the Records Management Policy.

6. Training

6.1. Staff will be trained in a timely manner to assist with a student's return to school.

6.2. Once a student's return date has been confirmed, staff will be provided with relevant training one week before the student's anticipated return.

6.3. Healthcare professionals should be involved in identifying and agree the school the type and level of training required.

6.4. Training will be sufficient to ensure staff are confident in their ability to support students with additional health needs.

6.5. Parents of students with additional health needs may provide specific advice but will not be the sole trainer of staff.

7. Examinations and assessments

7.1. The named member of staff will liaise with the alternative provision provider over planning and examination course requirements where appropriate.

7.2. Relevant assessment information will be provided to the alternative provision provider if required.

7.3. Awarding bodies may make special arrangements for students with permanent or long-term disabilities and learning difficulties, or temporary disabilities and illnesses. Applications for such arrangements will be submitted by the school, or LA if more appropriate, as early as possible.

8. Monitoring and review

8.1. This policy will be reviewed by the governing board on an annual basis.

8.2. Any changes to the policy will be clearly communicated to all members of staff involved in supporting students with additional health needs, and to parents and students themselves.