



## **Supporting Children with Health Needs who Cannot Attend School Policy**

**For the following:**

**Cardinal Newman Catholic Primary School Holy  
Family Catholic Primary School  
St Alban's Catholic Primary School  
St Anne's Catholic Primary School  
St Augustine's Catholic Primary School  
St Charles Borromeo Catholic Primary School  
St Cuthbert Mayne Catholic Primary School  
St Hugh of Lincoln Catholic Primary School  
St John the Baptist Secondary Catholic School  
St Polycarp's Catholic Primary School  
St Thomas of Canterbury Catholic Primary School  
St Peter's Catholic School  
Salesian Catholic Secondary School  
The Marist Catholic Primary School  
St Edmund's Catholic Primary School  
Teach SouthEast**

**Author: Mat Operations Department**

**This Policy has been approved and adopted by the Xavier Catholic Education Trust in  
September 2021**

**Committee Responsible: Audit and Risk Committee  
To be reviewed in September 2022**

## **Xavier Catholic Education Trust Mission Statement**

Our mission is to provide an outstanding Catholic education for all the pupils in our schools. We will follow the example and teachings of Christ and everything we do will be inspired by gospel values. We will strive for excellence in all areas of our work and cherish every child in our care.

### **1. The underlying principles behind this guidance**

Xavier Catholic Education Trust (XCET) is committed to ensuring that all pupils and young people receive a good education in order to maximise the learning potential of each individual. A fundamental part of our offer aims to ensure that all pupils and young people are given the opportunity of an inclusive education that meets their specific needs.

Pupils and young people who have additional health needs are, by the nature of their difficulties, at risk of failing to reach their true potential within an educational context. This is particularly the case for those pupils and young people whose health needs prevent them from attending school for an extended period of time, or for those who are restricted by their health needs to attending school on a part-time or sporadic basis.

This guidance aims to outline the support available for pupils and young people with additional health needs. This includes details of when and how alternative provision will be arranged if required, and the respective roles and responsibilities of the local authority, the school, parents/carers, providers and other agencies.

### **2. Roles and responsibilities of XCET schools**

Schools are required by law to make arrangements for supporting pupils at their school with medical conditions.

This duty is detailed in [Section 100 of the Pupils and Families Act 2014](#) and statutory guidance entitled [Supporting pupils at school with medical conditions](#) has been produced by the Department for Education in order to assist schools in understanding and complying with this legislation.

The key points detailed in the guidance indicate that:

- Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- Local governing committees must ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- Local governing committees should ensure that school leaders consult health and social care professionals, pupils and parents/carers to ensure that the needs of pupils with medical conditions are effectively supported.

The statutory guidance also indicates that schools should develop a policy for supporting pupils with medical conditions and that there should be a named person who is responsible for the practical implementation of this policy within each school.

### **3. Legal Framework for local authorities**

The Local Authority has a duty set out in [Section 19 of the Education Act 1996](#) and in the statutory guidance, [ensuring a good education for pupils who cannot attend school because of health needs](#).

This policy meets the requirements under [Section 100 of the Children and Families Act 2014](#), which places a duty on governing boards to make arrangements for supporting pupils at their school with medical conditions.

It is also based on the Department for Education's statutory guidance: [Supporting pupils at school with medical conditions](#).

[The Equality Act 2010](#) is also an important part of the legal framework around pupils and young people with significant medical needs.

### **4. Role and responsibilities of the local authority**

The statutory guidance is clear that there will be a wide range of circumstances where a child has a health need but may 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 or where the school has made arrangements to deliver suitable education outside of school for the child.

The local authority is responsible for arranging suitable full-time education for pupils of compulsory school age who, because of illness, would not receive suitable education without such provision (unless the local authority considers that a pupil's condition means that full-time provision would not be in his or her best interests). This duty applies to all pupils and young people who live within the local authority boundaries, regardless of the type (inclusive of pupils attending academies, free schools, special schools, independent schools or maintained schools) or location (where a child is ordinarily resident in a local authority but attends school outside the county, the local authority of residence retains responsibility for arranging medical needs provision for that child) of the school they would normally attend and whether or not they are on the roll of a school.

The law does not define full-time education, but pupils with health needs should have provision which is equivalent to the education they would receive in school.

### **5. Named Person**

It is a statutory requirement that local authorities have a named person responsible for the education of pupils with additional health needs. Please see Surrey's guidance for further information, [Supporting children and young people with medical conditions](#).

The named person responsible for the education of pupils with additional health needs, in liaison with schools and professionals, ensures that Children's Services fulfils its statutory duties in relation to medical needs provision for pupils and young people who cannot attend school for medical reasons.

Parents/carers can contact the named person responsible for the education of pupils with additional health needs in order to discuss their pupil's specific circumstances relating to medical needs education provision. This may be particularly appropriate in instances where they feel their pupil's educational needs are not being addressed due to a medical condition or ill health.

Schools can contact the named person responsible for the education of pupils with additional health needs in order to obtain support, advice and guidance in relation to medical needs education provision and their own statutory responsibilities in supporting pupils with additional health needs, both in general terms and in relation to specific cases

The named person responsible for the education of pupils with additional health needs will also liaise with professionals and colleagues within both health and education as appropriate in order to ensure pupils with additional health needs are able to access a suitable education.

#### **6. Children who are not on a school roll**

The local authority retains responsibility for supporting pupils who are not on roll at a school (Children Missing Education) whose health needs prevent them from accessing education.

In these instances, parents/carers or professionals working with a child who falls into this category should contact either their Education, Health and Care Plan Coordinator (for pupils with an Education, Health and Care Plan) or alternatively the council's Specialist Teacher Adviser to discuss future educational provision.

#### **7. Early Years and Post-16**

Local authorities will normally provide support for pupils who are between the ages of 5 and 16 (Reception Year to Year 11). However, where pupils who would normally be in Year 12 are repeating Year 11 due to medical reasons, requests for support will be considered on an individual basis.

For post-16 students attending mainstream provision, the local authority would look to the host school, college or training provider to make any necessary reasonable adjustments for students who are unwell over a prolonged period.

#### **8. Hospital in-patients**

The local authority provides education for pupils and young people who are in-patients at in-county hospitals, as well as offering transitional support for pupils and young people being discharged from long stays in hospital or those who have repeat admissions.

In certain instances, particularly in the case of severe mental health needs, pupils may be placed in specialist residential hospitals outside of the county by the National Health Service (NHS). Many of these facilities have access to an on-site education provision or school that can offer education as part of the package of care. The council retains responsibility for the education of these pupils whilst they remain in hospital and upon their discharge. In advance of a proposed discharge, particularly in the instance that an alternative educational provision is being proposed, parents/carers or professionals working with a child who falls into this category should contact either their Education, Health and Care Plan Coordinator (for pupils with a Statement of Special Educational Needs or an Education, Health and Care Plan) or alternatively the council's named person responsible for the education of pupils with additional health needs to discuss future educational provision.

#### **9. Pupils with life limiting and terminal illness**

The local authority will continue to provide education for as long as the pupil's parents and the medical staff wish it.

#### **10. Medical Needs provision**

The local authority commissions its short stay schools to provide education for pupils that are unable to attend school because of health needs. Planning meetings will ordinarily take place within the school which submitted the referral or the pupil's home. Invitees should include: pupil, parent/carer, home school, representative from short stay school, local authority Specialist Teacher Adviser. An invite should also be sent to the health professional that provided the medical advice.

Before it is agreed that teaching can take place in the home, it will be necessary to carry out appropriate

risk assessments. Where a pupil is taught at home it is necessary for there to be a responsible adult in the house.

Schools can make a Medical Needs Referral for a pupil who cannot attend school because of health needs where it is clear that they will be away from school for 15 days or more, whether consecutive or cumulative.

### **11. Medical Needs Referral Criteria**

Medical needs referrals will ordinarily be made by the school at which the child is on roll. All referrals should be sent to the Local Authority Specialist Teacher Adviser. Referrals will be considered with the following documents:

- An appropriately completed medical needs referral form. Incomplete forms or those that do not contain sufficient detail will be returned.
- A letter from a medical consultant\* that clearly states that the young person is unable to attend school because of their health needs (medically unfit to attend school)

Note \* Where advice from a medical consultant is not yet available medical evidence will be expected from at least one of the following medical professionals:

- General Practitioner
- CAMHS professional (i.e. mental health nurse/mental health practitioner)
- The council's ME/CFS service (i.e. Specialist Physiotherapist)

Following the acceptance of a referral, the Specialist Teacher Adviser will contact the relevant short stay school to request that interim medical needs provision is implemented without delay. A planning meeting will then determine the structure of the provision for an initial period of 12 school weeks (or for the period that the student is absent from school, whichever is shorter). The provision will ordinarily consist of one-to-one sessions within the pupil's home. The number and length of the sessions will depend on each individual case and be agreed upon in the planning meeting. There is an expectation that the pupil's home school will plan and mark the work delivered in these sessions.

If after this initial period, the student is unable to return to school, further medical advice will be required in order for the provision to continue.

### **12. Reintegration**

The aim of the provision from the Medical Needs Service will be to reintegrate pupils back into school at the earliest opportunity as soon as they are well enough. A reintegration program will be put together following discussion with the pupil or young person, parent/carer, school, relevant health professional(s) and other involved agencies as appropriate.

In some cases, it may not be possible for the pupil to return to school on a full-time basis initially. Arrangements for reintegration (or any future education arrangements) will need to take into account any ongoing health problems or disabilities they may have.