



Children with health needs who cannot attend school policy

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1. Aims

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 this education is being provided by the local authority

2. Legislation and guidance

This policy reflects the requirements of the [Education Act 1996](#). *All information contained in this policy is taken from <https://archive.hillingdon.gov.uk/article/30387/The-education-of-children-and-young-people-unable-to-attend-school-because-of-additional-health-needs>*

Children and young people may miss school due to health reasons. This may be illness (physical or mental health), injury or a planned admission to hospital. The health problem may be time-limited or a child may have a long-term condition.

Most absences from school will be for minor, short-term health problems and absences from school will be short and infrequent. The child's school would arrange any educational support relating to such absences.

However, some children may miss school for longer periods due to health reasons. Below is the London Borough of Hillingdon policy for the alternative education arrangements of those children.

The Borough sets out when and how alternative education provision will be arranged. The local authority, schools, parents/primary carer, providers and other agencies will need to work together to plan and provide suitable alternative provision. Therefore, this policy also sets out their respective roles and responsibilities.

Legal framework

Local authorities have a duty to make arrangements for children of compulsory school age who, due to illness or for other reasons, may not receive a suitable full-time education unless alternative education is arranged. The Department for Education (DfE) has published [statutory guidance for Local Authorities](#), which has been taken into account in preparing this policy.

Circumstances in which alternative education will be commissioned by the local authority

This policy applies to children and young people:

- who are of statutory school age **and**
- who are permanently resident in Hillingdon (including children who attend schools outside the borough) **and**
- who are not in school for 15 days or more, whether consecutive or cumulative due to ill health **and**
- where the health need and necessity for absence has been validated as necessary by a medical doctor **and**
- will not receive a suitable full-time education unless the local authority makes arrangements for this

Health problems include physical illnesses, injuries and clinically defined mental health problems. Suitable medical evidence will be required. This would include details of the health problem, how long the condition is expected to last and the likely outcome, and a treatment plan. This must be provided by a suitable medical professional, normally a hospital consultant. However, where specific medical evidence is not available quickly, the local authority will liaise with other medical professionals (eg the child's GP), so that provision of education is not delayed. Normally, the medical professional cannot be privately commissioned and must be UK based.

This policy applies to pupils at schools of all types (maintained schools, Academies, Free schools, special schools, independent schools). It also applies to children attending alternative provision and children who are not on a school roll. It applies whether a child cannot attend school at all or can only attend intermittently. Arrangements for alternative education will not normally be made for children and young people below or above compulsory school age.

Arrangements for alternative provision will be made as soon as it is known that a child has not attended school for 15 days for health reasons or as soon as it is clear that a health-related absence from school will be 15 days or longer, verified by a medical doctor. The 15 days may be consecutive or cumulative. The provision will commence as quickly as possible.

Prior to the 15 days absence the school will make provision for the children to receive work as needed, this could be through liaising with hospital schools if this is what is needed or arranging for work to be sent home. There will may also be opportunities for the child to join their class lessons remotely, via online Google Meet lessons.

There may be circumstances in which suitable alternative education is already in place eg if the school has made arrangements for a pupil or the child is receiving education at a hospital school. In such circumstances, the local authority will intervene only if it has reason to think that the education provision being made is unsuitable or insufficient.

If a child is in hospital in a different borough for a long period, education provision would usually be arranged through the local education service, with the cost being met by the borough in which the child lives.

Named officer

Local authorities are responsible for ensuring that there is a named senior officer with responsibility for educational provision for children with health needs. The named officer for Hillingdon is Daniel Kennedy, Director of Housing, Environment, Education, Performance, Health & Wellbeing.

Alternative education provider

In Hillingdon, arrangements for alternative education are made by the Pupil Support Team. This team is based at The Skills Hub, Providence Road, Yiewsley UB7 8HJ 01895 447102.

This team can also be commissioned by individual schools to meet the needs of pupils who have shorter health-related absences.

Alternative education to be provided

The education provided will be full-time, unless this is not in the best interests of the child. 'Full-time' education means the equivalent amount of education that a pupil would expect to receive if they were in school eg 25 hours for pupils in Key Stage 4. Full time education will not always mean providing the same amount of hours of face-to-face provision. For example, a provision equivalent to full time education could be achieved with fewer hours if a pupil is receiving one to one tuition as the provision is more concentrated. Where a child is not well enough for full-time education, arrangements can be made for fewer hours.

The education provided will be tailored to the child's age, aptitude and ability (including any special educational needs) and any other individual needs (such as health, behaviour, social and emotional needs and any disability).

The aim of the provision will be to ensure, as far is possible in the context of the child's health needs that:

- pupils make good progress in their education and do not fall behind their peers, especially in the key subjects of English, Maths and Science
- disruption to learning is minimised and that there is continuity of education provision with their school curriculum
- the quality of education provided is good and meets the child's individual learning and other needs
- pupils have access to a broad and balanced curriculum and continue with subject options
- pupils are able to obtain qualifications (as appropriate to their age and abilities)
- pupils are able to reintegrate successfully back into school and that this takes place as soon as their health permits
- pupils keep in touch with their school

Therefore, the arrangements made will combine educational and reintegration support.

Children will have different needs, to which their provision will be tailored. However, as a guideline, the education provision will include at least 5 hours of one-to-one tuition. It will take place in an appropriate location eg at home, in hospital, or in a local community facility. The education provided may include setting of work and the use of electronic media (including e-learning).

Process of setting up alternative education

As soon as a need for educational support has been agreed by Hillingdon's named officer, the Pupil Support team will request baseline assessment information and curriculum plans from the child's school to inform the planning of educational provision. This information, together with advice from medical professionals, will ensure that the education provided is effectively matched to the child's needs.

The pupil's programme will be prepared by Pupil Support team in consultation with the school, the parent/carers, and with the pupil (depending on their age). The team will also liaise with related services as necessary, such as the Special Educational Needs and Disability Services (SEND), Child and Adolescent Mental Health Services (CAMHS), Participation Team, and health services.

Monitoring and review of education provision

Pupil progress will be reviewed at least every six weeks by the Pupil Support team in consultation with the parent/carer, the school, the pupil (as appropriate). It is recognised that a child's educational needs and ability to access education may change depending on their health and that the programme may need to be flexible to accommodate this.

The Pupil Support team will meet with relevant services on a three-weekly basis to track and plan for all Hillingdon children who are out of school.

3. Responsibilities of the child's school

Whilst the local authority is responsible for ensuring that alternative education arrangements are made, pupils (except in very limited circumstances that must be agreed by the local authority and the school) remain on the roll of their school throughout their absence. Prior to the 15 days absence the school will make provision for the children to receive work as needed, this could be through liaising with hospital schools if this is what is needed or arranging for work to be sent home. There will may also be opportunities for the child to join their class lessons remotely, via online Google Meet lessons.

The prime responsibility for their education remains with their school.

Among other things, schools are responsible for:

- referring pupils to the Pupil Support team via the local authority named officer
- working with the local authority to identify the education provision needed, the review of provision, monitoring of pupil progress, arrangements for reintegration into school
- ensuring that the pupil still feels part of the school community and maintains contact (eg providing information about school news and facilitating contact with other pupils).
- supporting their education (eg by providing access to e-learning sites, learning materials, assessment information) whilst the pupil is off school.
- providing a named contact at the school, who will have responsibility for coordinating links between the school, pupil, parents and the Pupil Support team
- making arrangements for pupils to sit Key Stage tests and public examinations
- successful reintegration back into school

Under the Children and Families Bill 2013, a new duty on governing bodies to support pupils at school with medical needs came into force in September 2014. Statutory guidance is available [here](#). This duty applies to schools, academies and pupil referral units.

Reintegration to school

The aim of the pupil support provision will be to reintegrate pupils back into mainstream education at the earliest opportunity as soon as they are well enough. Arrangements for reintegration will be discussed with school staff and each child or young person will have a reintegration plan.

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

4. Monitoring arrangements

This policy will be reviewed annually by Dr Martin Young, CEO. At every review, it will be approved by the full governing board.

The DfE advises that we as a school review this policy annually, in its [list of statutory policies.](#))

5. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Supporting pupils with medical conditions
- Attendance Policy
- Child Protection Policy