

# Eaves Primary School

## *'Excellence in Everything'*



## Children with health needs who cannot attend school

November 2023

Status	<b>Statutory</b>
Responsible Governors' Committee	<b>Resources</b>
Responsible Person	<b>Mrs N Kearney</b>
Review Date	<b>November 2024</b>

## **Legislative context**

- Section 19 of the Education Act 1996
- Equality Act 2010

## **Statutory Guidance**

Ensuring a good education for children who cannot attend school because of health needs - Statutory guidance for local authorities January 2013

This is statutory guidance from the Department for Education. Local authorities (LAs) must have regard to it when carrying out their duty to arrange suitable full-time education (or part-time when appropriate for the child's needs) for children who are unable to attend a mainstream or special school because of their health. This duty applies to all children and young people who would normally attend mainstream schools, including Academies, Free Schools, independent schools and special schools, or where a child is not on the roll of a school. It applies equally whether a child cannot attend school at all or can only attend intermittently.

## **Responsibilities:**

### **Local Authority**

LAs are responsible for arranging suitable full-time education for permanently excluded pupils, and for other children who – because of illness or other reasons – would not receive suitable education without such provision. This means that where a child cannot attend school because of health problems, and would not otherwise receive a suitable full-time education, the LA is responsible for arranging provision and must have regard to this guidance.

#### **1. 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.

#### **2. 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), allows them to take appropriate qualifications, prevents 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. ‘Hard and fast’ rules are inappropriate: they may limit the offer of education to children with a given condition and prevent their access to the right level of educational support which they are well enough to receive. Strict rules that limit the offer of education a child receives may also breach statutory requirements.

### **3. 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).

### **4. Local authorities should:**

- Have a **named officer** responsible for the education of children with additional health needs, and parents should know who that person is.
- **Have a written, publicly accessible policy statement** on their arrangements to comply with their legal duty towards children with additional health needs. The policy should make links with related services in the area - for example, Special Educational Needs and Disability Services (SEND), Child and Adolescent Mental Health Services (CAMHS), Education Welfare/Attendance Improvement Services, educational psychologists, and, where relevant, school nurses.
- Review the provision offered regularly to ensure that it continues to be appropriate for the child and that it is providing suitable education.
- Have clear policies on the provision of education for children and young people under and over compulsory school age.
- This legislation provides that LAs must not discriminate against disabled children and are under a duty to eliminate discrimination, foster equality of opportunity for disabled children and foster good relations between disabled and non-disabled children.
- LAs should make every effort to minimise the disruption to a child’s education. For example, where specific medical evidence, such as that provided by a medical consultant, is not quickly available, LAs should consider liaising with other medical

professionals, such as the child's GP, and consider looking at other evidence to ensure minimal delay in arranging appropriate provision for the child.

- More generally, LAs should be ready to take responsibility for any child whose illness will prevent them from attending school for 15 or more school days, either in one absence or over the course of a school year, and where suitable education is not otherwise being arranged.
- LAs should work with schools to complement the education a child receives if they cannot attend school full-time but are well enough to have education in other ways.

### **School Responsibilities:**

- To undertake their best endeavours to ensure that all children, regardless of their personal circumstance or education setting receive a good education.
- As far as possible ensure, in cooperation with all relevant partners, that alternative provision, and the support framework which surrounds it, should enable a pupil to maintain academic progression and attainment, and allow them to thrive and prosper in the education system.
- Local authorities, schools, providers, relevant agencies and parents should work together constructively in order to ensure the best outcomes for a pupil.
- Children unable to attend school because of health needs should be able to access suitable and flexible education appropriate to their needs. The nature of the provision must be responsive to the demands of what may be a changing health status.
- Schools can also play a big part in making sure that the provision offered to the child is as effective as possible and that the child can be reintegrated back into school successfully.
- A child unable to attend school because of health needs must not be removed from the school register without parental consent and certification from the school medical officer, even if the LA has become responsible for the child's education.

### **Reintegration**

When reintegration into school is anticipated, LAs should work with the school (and hospital school, PRU/home tuition services if appropriate) to plan for consistent provision during and after the period of education outside school.

LAs should work with schools to set up an individually tailored reintegration plan for each child. This may have to include extra support to help fill any gaps arising from the child's absence. It may be appropriate to involve the school nurse at this stage as they may be able to offer valuable advice. The school nurse will also want to be aware that the child is

returning to school, so that they can be prepared to offer any appropriate support. Under equalities legislation, schools must consider whether they need to make any reasonable adjustments to provide suitable access for the child.

Where the absence is likely to be lengthy, the reintegration plan may only take shape nearer to the likely date of return, to avoid putting unsuitable pressure on an ill child in the early stages of their absence. While most children will want to return to their previous school routine at once, some will need gradual reintegration over a longer period.

### **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.

**Eaves Primary School** will make all reasonable efforts to meet its responsibilities by working with the Local Authority, parents and other appropriate parties to ensure each child is able to access a good education to enable each child to shape their own futures.

### **Contact Information**

The named contact in regard to this policy is Nicola Kearney (Head Teacher) who can be contacted on 01744 812700.

The **Local Authority** named person is Sarah Rogers who can be contacted on 01744 676210.

### **Complaints and concerns**

Any concerns should in the first instance be raised with the school's named contact.

This policy will be reviewed annually or in the event of changes to statutory guidance or relevant legislation.