



**Downsway
Primary
School**

Children with health needs who cannot attend school

Date policy reviewed by school	6th Nov 2023
Date of next review	Nov 2025
Policy owner	Headteacher
Policy on website Y/N	Y
Compliance tracker updated Y/N	Y

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.

It also based on guidance provided by our local authority, which can be found in appendix 1.

3. The responsibilities of the school

3.1 If the school makes arrangements

Initially, Downsway Primary School will attempt to make arrangements to deliver suitable education for children with health needs who cannot attend school.

- The Headteacher is responsible for making and monitoring these arrangements
- Downsway Primary School is responsible for providing education for children who are unable to attend school for health or other reasons for the first 15 days and it will involve sending work home or setting tasks on line.
- Whilst absent from school, Downsway Primary School will actively encourage the child to stay in touch with school life (e.g. through newsletters, emails or invitations to school events)
- Children will be reintegrated back into school through a reintegration plan, leading up to them attending school for full school days as soon as possible.

3.2 If the local authority makes arrangements

Where suitable arrangements cannot feasibly be delivered by Downsway Primary School, West Berkshire will become responsible for arranging suitable education for these children.

In cases where the local authority makes arrangements, the school will:

- Work constructively with the local authority, providers, relevant agencies and parents to ensure the best outcomes for the pupil
- Share information with the local authority and relevant health services as required
- Help make sure that the provision offered to the pupil is as effective as possible and that the child can be reintegrated back into school successfully
- When reintegration is anticipated, work with the local authority to:

- Plan for consistent provision during and after the period of education outside the school, allowing the pupil to access the same curriculum and materials that they would have used in school as far as possible
- Enable the pupil to stay in touch with school life (e.g. through newsletters, emails, invitations to school events or internet links to lessons from their school)
- Create individually tailored reintegration plans for each child returning to school
- Consider whether any reasonable adjustments need to be made

4. Monitoring arrangements

This policy will be reviewed annually by the Headteacher. At every review, it will be approved by the full governing board.

5. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Supporting pupils with medical conditions

Appendix 1

ENSURING A GOOD EDUCATION FOR CHILDREN WHO CANNOT ATTEND SCHOOL BECAUSE OF HEALTH NEEDS

West Berkshire Council Operational Guidance

October 2022

1.0 Introduction and statutory responsibilities

1.1 West Berkshire Council (the Local Authority) and schools are responsible for providing education for children who are not able to attend school due to health needs.

1.2 Legislation and Guidance

Key legislation and government guidance covering the duties and powers relating to this policy:

- Ensuring a good education for children who cannot attend school because of health needs (DfE statutory guidance) January 2013
<https://www.gov.uk/government/publications/education-for-children-with-health-needs-who-cannot-attend-school>
- Supporting Students at School with Medical Needs (DfE statutory guidance) Dec 2015
<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>
- Section 19 of the Education Act 1996
<https://www.legislation.gov.uk/ukpga/1996/56/section/19>
- Equality Act 2010
<https://www.legislation.gov.uk/ukpga/2010/15/contents>
<https://www.gov.uk/guidance/equality-act-2010-guidance>
- LGO Report, "Out of sight, out of mind", 2011
- LGO Focus Report, "Out of school, out of sight?", July 2022

1.3 Governing bodies should ensure that their school develops a policy for supporting pupils who are out of school for medical or other reasons that is reviewed regularly and is readily accessible to parents and school staff.

1.4 Schools have responsibility for providing education for children who are unable to attend school for health or other reasons for the first 15 days. They may choose to make this provision for more than 15 days.

1.5 The Local Authority must have regard to statutory guidance when carrying out its duties. Local Authorities' statutory duties are set out in the statutory guidance: *Ensuring a good education for children who cannot attend school because of health needs* (DFE; 2013).

<https://www.gov.uk/government/publications/education-for-children-with-health-needs-who-cannot-attend-school>

1.6 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 them. The Local Authority would not become involved in such arrangements unless it had reason to think that the education being provided for the child was unsuitable.

1.7 There are some students who cannot attend school due to health needs or other reasons for whom the Local Authority must arrange suitable full-time education (or as much as the student's health condition allows). This would be in cases where suitable education is not otherwise being arranged by the school. The law does not define full-time education.

1.8 The statutory guidance "Ensuring a good education for children who cannot attend school because of health needs" states that there is no absolute legal deadline by which the Local Authority must have started to

provide education for children with additional health needs. It should, however, arrange provision as soon as it is clear that an absence will last more than 15 days and it should do so at the latest by the sixth day of the absence, aiming to do so by the first day of absence. Where an absence is planned, for example for a stay or recurrent stays in hospital, the Local Authority should make arrangements in advance to allow provision to begin from day one.

2. Emotionally based school avoidance

2.1 Some children have difficulty attending school due to anxiety. This may be termed “Emotionally Based School Avoidance” (EBSA).

2.2 In cases where children are displaying emotionally based school avoidance, schools should be following the Local Authority’s EBSA guidance issued by the Educational Psychology Service.

<https://www.westberkseducation.co.uk/Page/24539>

2.3 Primary schools (and secondary schools which buy in to the Local Authority’s EBSA Service) can also seek support from the EBSA Forum. This may take the form of advice, funding and / or support from the EBSA Educational Psychologist, Emotional Health Academy worker or EBSA Coordinator.

2.4 Secondary schools which do not buy in to this service have funding allocated to support young people who are emotionally based school avoiders.

2.5 Where a child is an emotionally based school avoider, it is the responsibility of the school to put in a plan, in liaison with the family and other professionals, to support the child to return to school. If the child is not attending school at all or only on a very limited basis, the school should also be providing access to education, at least in the core subjects, which could include work being sent home, on line/ remote learning and/or use of tutors.

2.6 The school’s plan for the child’s learning should be discussed and agreed with the family and the school should be monitoring progress and carrying out reviews on a regular basis.

2.7 If the school is unable to get the child to engage with a package of support, they will need to make suitable arrangements for alternative full time educational provision. This could include tutoring, on line learning, access to alternative education providers, referral to a Pupil Referral Unit (subject to parental consent) or the Medical Tuition Service, as detailed below.

2.8 Schools may choose to make a referral to the Medical Tuition Service (with consent of parents/carers) to make arrangements on their behalf. The purpose of medical tuition will be to assist the process of reintegrating the child to their mainstream school wherever possible and the school will need to work closely with the tuition service to this end. See Section 4.

3. Circumstances in which the Local Authority will arrange alternative educational provision for children who are unable to attend school for health or other reasons

3.1 The Local Authority will make alternative educational provision for children who cannot attend school for health or other reasons, who have been or are likely to be absent for more than 15 days, and for whom suitable education is not otherwise being provided.

3.2 Lead responsibility for alternative educational provision for children who cannot attend school for health reasons will sit with the Local Authority’s **Medical Tuition Service (MTS)**, although the service will liaise closely with other teams including the SEN Assessment Team if the child has an Education, Health and Care Plan.

3.3 The statutory guidance recommends that Local Authorities should have a named officer with responsibility for education provision for children with health needs and that parents should know who that person is. The named officer for West Berkshire Council is the Medical Tuition Service Coordinator, who can be contacted by schools, professionals, or directly by parents. See Section 5 for details of the referral process and contact details.

4. Medical Tuition Service

4.1 The Local Authority's Medical Tuition Service will have lead responsibility for arranging and overseeing alternative educational provision for children who cannot attend school for health or other reasons.

4.2 The function and purpose of the Local Authority's Medical Tuition Service (MTS) is to provide continuity of educational provision for children of statutory school age who are **resident** in West Berkshire and who are temporarily absent from the school where they are on roll. due to their health needs. The service aims to provide high quality education and support for all children with health needs in a caring environment that promotes positive outcomes. The guiding principle of the MTS is that the pupil's needs are best met wherever possible and appropriate within a school environment, whether mainstream or special, with the aim of providing support which is personalised to the child and enables a transition back to education with minimal disruption

4.3 The MTS, as part of the Local Authority aims to:

- provide suitable continued education as normally as the pupil's medical condition allows
- promote self-esteem and educational achievement amongst pupils
- promote equal access to education for all
- liaise effectively with parents / carers, children, schools and/or other agencies
- ensure rapid response to need
- review the provision offered regularly to ensure that it continues to be appropriate for the pupil and that it is providing suitable education.

5. Referrals to MTS

5.1 The method of referral is via the child's school which will organise and submit a referral to the MTS using the MTS referral form along with other documentation, where relevant, as outlined below (this list is not exhaustive):

- Individual Health Care Plan
- Risk assessment
- Attendance data
- Assessment data
- Educational Psychologist reports and other relevant data/information for example, EHCP, Team around the Child (TAC) minutes.

Referrals should be sent to the MTS generic inbox, mts@westberks.gov.uk

5.2 Parents can contact the Medical Tuition Service Coordinator, using the e-mail address above. Following a discussion the coordinator will then liaise with the child's school if it is felt that alternative educational provision needs to be made by the Local Authority. It is helpful if parents provide the child's full name, DOB, school and any details of attendance when contacting the coordinator.

5.3 Children with a mental health and/or a complex need may also need a Team around the Child in place at the outset of the MTS support to ensure that a multi-professional approach is maintained.

5.4 Children who are resident in West Berkshire who have the following needs can be referred:

- Those with health needs who are or will be absent from school for more than 15 working days (consecutive or cumulative absence) and where suitable education is not otherwise being arranged.
- School aged parents* with additional health needs who are unable to remain in their home schools (* ie. young people who may become parents themselves whilst still at school).

6. Appropriate Medical/Other Evidence

6.1 Referrals should normally be supported by appropriate written medical evidence from a consultant. However, where specific medical evidence, such as that provided by a medical consultant, is not quickly available, the Local Authority will consider liaising with other medical professionals, such as the child's GP, and consider looking at other evidence from non- medical professionals to ensure minimal delay in arranging appropriate provision for the child.

6.2 Where GP evidence is provided, it must include evidence of a referral for specialist involvement from a consultant

6.3 The medical evidence should indicate:

- when the child was seen
- what onward referrals to consultants have been made
- the nature of the child's health condition
- to what extent the child's health condition is likely to impact on their school attendance
- a health care plan (ideally the care plan should be written by a health professional in consultation with the child's parents and other interested parties)
- when the child is due to be reviewed
- proposed treatment plan
- any other information which may be helpful to best support the child.

6.4 It is expected that health professionals will remain proactive in the child's case, providing ongoing advice and contributing to reviews as appropriate.

6.5 The Medical Tuition Service will ask parents if they are willing to give consent to the MTS having direct contact with the child's GP. Parents may choose not to give consent.

6.6 If it is not possible to obtain medical evidence in a timely way, the Local Authority may consider other evidence, for example from its own support services, such as the Educational Psychology Service, Emotional Health Academy, Therapeutic Thinking Service or Learning Support Services.

7. Provision of alternative education when a child is unable to attend school for health reasons.

7.1 A 'suitable education' will vary according to each child's specific needs, and therefore a personalised plan will be developed for each child by the Local Authority's named officer (the MTS coordinator), in consultation with the pupil, parents, school, and any other relevant professionals. Their education 'package' may take the form of one or more of the following:

- one to one tuition in the home or another venue, or group work in an alternative venue
- access to on line learning arranged either by the MTS, or where appropriate, through the school. (On line learning would generally be used to complement face to face provision, although in some cases the child's health needs may make it advisable to use only on line learning for a period of time)
- use of other electronic media to access the classroom such as robots
- access to other approved providers of alternative education

7.2 If the pupil has an Education, Health and Care Plan (EHCP), liaison will take place with the Local Authority's SEN Team in order to appropriately plan the child's education.

7.3 Support will be reviewed within every 6 week period as a minimum to ensure that the child is making good progress and to review whether alternative provision needs to continue or whether the child is ready to be reintegrated to school (either their previous school or an alternative school). See section 11 for circumstances in which alternative provision may cease.

7.4 All MTS teaching provision will be charged to the school where the child is on roll. The home school will be invoiced once every term using the published weekly rate.

8. MTS responsibilities

8.1 MTS is responsible for:

- personalised educational provision for individual pupils, ensuring continuity of education
- providing opportunities for a broad and balanced curriculum with a primary focus on the core subjects of Maths, English and Science
- direct teaching, learning and other opportunities for pupils taking in to account the child's curriculum and learning experiences at the school where they are on roll
- providing baseline assessment, reports and learning plans for longer term students
- support and mentoring to pupils with health needs to overcome barriers to access education
- advice and support to schools where children are on roll according to individual need
- liaison with parents/carers, the young person and other educational, health and social care professionals to ensure joint working in making decisions about educational and health care needs of the pupil, appropriate to their specific needs.
- supporting and possibly coordinating an appropriate school reintegration/transition plan
- ensuring the MTS staff receive appropriate training and support
- attending initial planning and review meeting (Team Around the Child, Child Protection Conferences, educational meetings etc)
- quality assurance related to the MTS staff

9. Responsibilities of schools where children are on roll

9.1 The school where the child is on roll is responsible for making the provision for the pupil for the first 15 days of absence. Schools can take on this responsibility/role longer term if they choose.

9.2 Children who are registered with the MTS remain on roll at their school. Although such pupils are taught by the MTS, at all times they remain the responsibility of the home school and should be recorded on their home school census records. The MTS supports inclusion and will work towards reintegrating children to suitable provision at the earliest opportunity, where this is appropriate. This may well involve a multi-professional approach.

9.3 In order for the MTS to keep accurate records and support children using the most relevant and up-to-date baseline assessment, schools where the child is on roll will be expected to send relevant data to the MTS as outlined in Section 5, the data is crucial in demonstrating pupil progress against the baseline while pupils are with the MTS and will be required for all pupils who are registered with the MTS. This baseline data needs to be sent immediately on referral. The MTS will make updated progress information available to schools where children are on roll and also to parents / carers, at appropriate, agreed intervals.

9.4 For liaison purposes, the Local Authority expects schools to identify a lead professional within their school who will take responsibility for pupils who are unable to attend school for health or other reasons

9.5 The lead professional should:

- ensure the school has in place a school policy for supporting pupils who are unable to attend school for health or other reasons
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/803956/supporting-pupils-at-school-with-medical-conditions.pdf
- be familiar with the relevant legislation and statutory guidance
- in liaison with the MTS, organise review meetings (six times a year as a minimum) which include the pupil, parent/carers, school and any other professionals

- chair and minute review meetings and complete and distribute the required meeting paperwork in a timely fashion; any pre-meeting paperwork to be issued at least one working day in advance of a meeting and any minutes to be circulated to all parties within 10 working days.
- retain overall responsibility for the pupil's educational provision and maintain the pupil on their school roll (although the MTS will have day to day management of the pupil's educational programme)
- liaise with the MTS to plan and implement individual learning plans, including the specific needs of any child with an EHCP.
- ensure that suitable and relevant work, plans, and resources necessary for the pupil are given to MTS tutors, taking in to account that some pupils may need to complete work at a slower pace than their classmates due to their medical / emotional needs)
- liaise with medical/other professionals as appropriate
- maintain close contact with parents/carers, working collaboratively with them about the educational provision being made for their child and feeding back to them on progress through review meetings
- ensure that general school information for pupils is sent home even if the pupil is not attending in order to include the pupil in the life of the school as much as possible, for example, information about school trips and other events
- make alternative arrangements and be flexible in supporting the MTS to arrange reintegration plans for returning students
- liaise with the MTS and parents/carers in relation to public examination entries, to ensure that suitable access arrangements are made in good time before the pupil's exam/s.

10. Parents'/Carers' responsibilities

10.1 Parents/ carers are responsible for ensuring that they fulfill their part of the MTS Parent / Carer Partnership Agreement and support their child to access the educational arrangements being made by the school or MTS and support the reintegration process, where applicable. (Appendix I: the MTS Parent/Carer Partnership Agreement) ***see appendix 1**

11. Withdrawal of support

11.1 There may be some instances where, after review and/or in collaboration with other professionals it may be appropriate for the MTS to withdraw support. In these circumstances it will be discussed with the school, parents/carers, the pupil and other professionals and a letter will be sent. The Local Authority will ensure that suitable alternative educational provision is made available if MTS is withdrawn (unless parents have chosen to make their own arrangements and do not wish the Local Authority to make provision for their child).

11.2 Possible circumstances for withdrawal (this list is not exhaustive):

- where updated medical evidence supports that the MTS is no longer needed as the child has been successfully reintegrated to an educational setting and is accessing a suitable full time education
- when parents do not wish to access provision from the Local Authority and have made other suitable educational arrangements, for example Elective Home Education
- when the child ceases to be of statutory school age (unless they have an EHCP)

12. Review of this policy

12.1 This policy will be reviewed after 12 months initially and thereafter every two years and/or in line with any changes made to statutory guidelines.