



**Newall Green
Primary School**

Aiming High To Reach Our Goals

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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](#).

It also based on guidance provided by our local authority.
https://secure.manchester.gov.uk/download/downloads/id/28113/section_19_policy_september_2021.pdf

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/941900/health_needs_guidance_accessible.pdf.

This policy complies with our funding agreement and articles of association.

3. The responsibilities of the school

- Shorter term illnesses or chronic conditions are best met by school support and resources. Such conditions that might meet this definition include short term postoperative support and periods of reduced immunity. Resources to support schools in how to carry this out can be found on the Manchester Hospital School website <https://www.manchesterhospitalschool.co.uk/>
- Schools will use the graduated response to assess, meet and review the needs of their pupils. The SENDCo would create a 'Team around the child' (TAC) meeting to agree how best to meet the pupils needs. When the pupil's medical condition becomes too complex, or the risks are too great to manage, the school should make a referral to the Hospital School for additional support.

3.1 If the school makes arrangements:

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

- The child's class teacher, with support from the SENDCo is responsible for delivering education
- The education may be via online learning or work packs sent home. The teacher will consult with parents online or by phone to organise this, and with other professionals in the team around the child (TAC) meetings
- Pupils will be integrated back into school as soon as possible in a planned way, starting with a short time in school and building up to full days. Each individual child's needs will be taken into consideration.

- The school will inform the local authority of any reduced timetables by completing the necessary paperwork.

3.2 If the local authority makes arrangements:

If the school can't make suitable arrangements, or the pupil doesn't engage with the school arrangements for a sustained period (15 days +), Manchester Local Authority will become responsible for arranging suitable education for these children.

- In line with the Section 19 duty, Manchester City Council will arrange suitable fulltime 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.
- Manchester City Council commissions a continuum of provision for children and young people with medical needs from Manchester Hospital School. This includes outreach support to schools, home tuition, tuition in community venues close to the pupil's home, AVI telepresence 'robot' supported learning and provision at the Hospital School. The provision and referral process are described in Appendix 1.
- Where children are unable to attend school but are not in the Hospital School, the local authority will address their individual needs when arranging suitable education. This may include the provision of virtual home learning. The Manchester City Council School Admissions team are responsible for the education of children with additional health needs - school.admissions@manchester.gov.uk

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 Kirstie McKenzie, SENDCo, alongside Sarah Rudd, Executive 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
- Equality Policy

Appendix 1

As soon as it is clear that the child will be away from school for 15 days or more or is too unwell to access education at their home school/normal place of education, the school should hold a Team Around the Child meeting with the family and relevant professionals before making a referral, which includes medical evidence, to Manchester Hospital School (MHS). The fortnightly multi-agency panel, consisting of representatives from health, education and Manchester City Council, will then determine if the referral is part of the Local Authority Section 19 Duty or whether the school should be required to meet the child's need with support. The panel will agree the service that is required to meet the pupil's individual needs and circumstances.

Staff will liaise with the school, family and appropriate medical professionals to ensure minimal delay in arranging appropriate provision for the child. Every effort will be made to minimise disruption to the child's education.

Where an absence is planned e.g. hospital admission or recurrent stay in hospital, educational provision should begin as soon as the child is well enough. Teachers in the hospital settings will liaise with the child's home school and work with them to minimise any disruption to their education.

Pupils receiving support will have their provision set out in a co-produced personalised plan, which makes clear the nature of the intervention, the objectives, the expected outcomes and timeline to achieve the objectives. The plan should also link to other relevant plans the child has to ensure a holistic approach.

Effective multi-agency collaboration is essential in devising appropriate personalised learning plans.

The provision will be reviewed regularly, with the family and all professionals concerned, to ensure that it continues to be appropriate for the child and that it is providing suitable education.

Children with long term health problems will not be required to provide continuing medical evidence. However regular liaison with health colleagues is important and the level of support will be discussed through Team Around the Child meetings. MHS will liaise with the child's home school until the pupil is well enough to return.

Manchester City Council, through its commission with Manchester Hospital School, seeks to provide the same opportunities for children and young people with additional health needs as their peers, including a broad and balanced curriculum, which is of good quality. The education will be flexible and appropriate to pupils' health needs, and regularly reviewed to reflect their changing health status. It will aim to prevent them from slipping behind their peers in school and allow them to reintegrate successfully back into school as soon as possible. It will allow them to take external qualifications if appropriate.

MHS may use electronic media to provide access to a broader curriculum and to increase the numbers of hours of provision. However, this will be used in association with face to face contact and never in isolation. The telepresence robot, AV1, may also be used.

MHS will maintain good links with all schools, academies and free schools in their area through effective communication and clear processes of assessment and referral. MHS will also ensure that schools are aware of their key role and reminded of their responsibilities in supporting their pupils with additional health and medical needs, so the child can be reintegrated back to school as smoothly as possible.

Schools will be encouraged to maintain their links with parents/carers who also have a vital role to play e.g. keeping in touch through school newsletters, emails, invites to school events etc.

When a child is approaching public examinations, MHS teachers will focus on the most appropriate curriculum in order to minimise the impact of the time lost while the child is unable to attend school.

Reintegration- The plans for the longer-term outcome and the next steps in a pupil's education will be

agreed at the start of the commissioned support, intervention or provision, according to the statutory guidance for Alternative Provision (2013). The expectation is that the majority of pupils will be reintegrated into their home school. Progress towards this will be discussed at reviews. Where reintegration to school is the objective, staff from the local authority, Manchester Hospital School, health and the school will work together with the family to assess when the child is ready to return to school and to assist reintegration.

On return to their school each child should have an individual healthcare plan and/or individual provision plan which specifies the arrangements for the reintegration and may include the reasonable adjustments and extra support the school and/or other services will provide