

Children with Health Needs that Cannot Attend Policy

2025

Date agreed	January 2026
Review date	September 2027

Brington Church of England Primary School is a school where the Christian ethos is at the heart of all we do, so we ***Therefore encourage one another and build each other up, just as in fact you are doing.*** *(Thessalonians5:11)*

To this end, all of our work, our policies and our procedures seek to ensure that we uphold and embody our STAR values of Self Belief, Teamwork, Ambition and Respect, and our Christian ethos of Service, Courage, Forgiveness and Love.

1. Introduction

All children, regardless of circumstances, should expect to receive the same high standard of education. Brington CofE Primary School aims to support all of the Local Authorities (LA) to ensure that all children who are unable to attend school due to medical needs, and who would not receive suitable education without such provision, continue to have access to as much education as their medical condition allows, to enable them to reach their full potential.

Due to the nature of their health needs, some children may be admitted to hospital or placed in alternative forms of education provision.

We understand that we have a continuing role in a pupil's education whilst they are not attending the school and will work with the Local Authority, healthcare partners and families to ensure that all children with medical needs receive the right level of support to enable them to maintain links with their education.

Individual cases, which can be complex, will be discussed with Education Welfare Officers who can provide additional support and guidance. Alternative provision must be suitable to the child's age, ability and aptitude, and any special educational needs they have.

We recognise that, whenever possible, pupils should receive their education within their school and the aim of the provision will be to reintegrate pupils back into school with support as soon as they are well (where relevant)l

2. Legal Framework

This policy has due regard to all relevant legislation and statutory guidance including, but not

limited to, the following:

- Education Act 1996
- Equality Act 2010
- Data Protection Act 2018
- DfE (2013) 'Ensuring a good education for children who cannot attend school because of
- health needs'
- DfE (2015) 'Supporting pupils at school with medical conditions'
- DfE (2023) 'Arranging education for children who cannot attend school because of health needs'

If children will be receiving their full-time education by attending a different school, then proof of this must be provided to Brington CofE Primary School. Brington CofE Primary School must legally remove the child/ren from their roll in these circumstances, but will have discretion as below to re-enrol the child/ren on return.

3. Definitions

Children who are unable to attend school because of their medical needs may include those with:

• Physical health issues.

• Physical injuries.

• Mental health problems, including anxiety issues.

• Emotional difficulties or school refusal.

• Progressive conditions.

• Terminal illnesses.

• Chronic illnesses.

Children who are unable to attend mainstream education for health reasons may attend any of

the following:

• Hospital school: a special school within a hospital setting where education is provided to give continuity whilst the child is receiving treatment.

• Home tuition: a service that acts as a communication channel between schools and pupils on occasions where pupils are too ill to attend school and are receiving specialist medical treatment.

• Medical PRUs: these are LA establishments that provide education for children unable to attend their registered school due to their medical needs.

4. Local Authority Duties

There will be a wide range of circumstances where a child has a health need but will 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; where the school has decided with parents/carers to deliver suitable education outside of school for the child; or where arrangements have been made for the child to be educated in a hospital by an on-site hospital school. The Local Authority would not become involved in such arrangements unless it had reason to think that the education wellbeing provided to the child was not suitable or, while otherwise suitable, was not full-time or for the number of hours the child could benefit from without adversely affecting their health. This might be the case where, for example, the child can attend school but only intermittently.

Local Authorities are responsible for arranging suitable full-time education for pupils 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, which have been confirmed by an appropriate professional, and would not otherwise receive a suitable full-time education, the Local Authority is responsible for arranging provision.

Some complex or long-term health issues may be considered disabilities under equality legislation. This legislation means that that local authorities must:

• not discriminate against disabled children

• have due regard to the need to eliminate unlawful discrimination • have due regard to the need to advance equality of opportunity between disabled and non-disabled children

• have due regard to the need to foster good relations between disabled and non-disabled children

• make reasonable adjustments to alleviate disadvantages faced by disabled children.

Local authorities should also ensure disabled children have access to all school premises, including alternative provision premises and hospital schools.

The law does not define full time education but children with health needs should have provision which is equivalent to the education they would receive at school. Where full time education would not be in the best interests of a child because of reasons relating to their physical or mental health, local authorities should provide part time education on a basis they consider to be in the child best interests.

The Local Authority should:

• Provide such education as soon as it is clear that a pupil will be away from school for 15 days or more, whether consecutive or cumulative. They should liaise with the appropriate medical professionals to ensure minimal delay in arranging appropriate provision for the pupil.

• Ensure the education pupils receive is of good quality, allows them to take appropriate qualifications, prevents them from falling behind their peers in school, and allows them to reintegrate successfully back into school as soon as possible.

• Address the needs of individual pupils in arranging provision.

• Have a named officer responsible for the education of children with additional health needs and ensure parents know who this is.

• Have a written, publicly accessible policy statement on their arrangements to comply with their legal duty towards children with additional health needs.

• Review the provision offered regularly to ensure that it continues to be appropriate for the child and that it is providing suitable education.

• Give clear policies on the provision of education for children and young people under and over compulsory school age.

The Local Authority 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.

• 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).

• Unnecessarily demand continuing evidence once a parent has provided evidence from a consultant.

5. The role of the school in managing absence

The law does not specify the point during a child's illness when it becomes the Local Authority's responsibility to secure for the child suitable full-time education. Schools would usually provide support to children who are absent from school because of illness for a shorter period, for example when experiencing chickenpox or influenza.

More generally, local authorities 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 the school year, and where suitable education is not otherwise being arranged.

Where a pupil has a complex or long-term health issue, the pattern of illness can be unpredictable. The school will discuss the pupil's needs and how these may be best met with the Local Authority, relevant medical professionals, parents and, where appropriate, the pupil.

Flexibility and responsiveness may be needed.

The Local Authority expects the school to support pupils with health needs to attend full-time education wherever possible, or for the school to make reasonable adjustments to pupils' programmes of study where medical evidence supports the need for those adjustments.

The school will make reasonable adjustments under pupils' individual healthcare plans. Pupils admitted to hospital will receive education as determined appropriate by the medical professionals and hospital tuition team at the hospital concerned.

During a period of absence, the school will work with the provider of the pupil's education to establish and maintain regular communication and effective outcomes. As far as possible, the child will be able to access the curriculum and materials that they would have used in school.

Where appropriate, the school will provide the pupil's education provider with relevant information, curriculum materials and resources. It may be decided that a remote offer of education either via video or live lessons can be provided by the school. In those cases, the school will make use of the remote-learning platforms that have been successfully used previously including monitoring pupil engagement, and systems for marking and returning work. The duration of this arrangement will be agreed on a case-by-case basis and in partnership with families, the responsible Local Authority and relevant health and social care partners.

Digital technology should be used to complement face-to-face education, rather than be used as sole provision. In some cases, the child's health needs may make it advisable to only use digital learning for a limited period of time.

Whilst a pupil is away from school, the school will work with the Local Authority to ensure the pupil can successfully remain in touch with their school and may use the following methods:

- School news
- Emails
- Invitations to school events
- Platforms such as Google Classroom

Cambridgeshire County Council's Education Improvement Officer works with the school on attendance and we are guided by the following policies:

Cambridgeshire Medical Needs Policy:
cambslearntogether.co.uk/asset-library/Cambridgeshire-Medical-Needs-Policy-Oct-23.pdf

https://www.cambridgeshire.gov.uk/residents/children-and-families/schools-learning/education-system/access-to-education-for-children-with-health-needs

Ensuring a good education for children who cannot attend school because of health needs.

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

State of the nation 2022: children and young people's wellbeing - GOV.UK (www.gov.uk)

https://www.gov.uk/government/publications/state-of-the-nation-2022-children-and-young-peoples-wellbeing

Mental health issues affecting a pupil's attendance: guidance for schools - https://www.gov.uk/government/publications/mental-health-issues-affecting-a-pupils-attendance-guidance-for-schools

6. Reintegration

When a pupil is considered well enough to return to school, the school will develop a tailored reintegration plan in collaboration with the LA.

For longer absences, the reintegration plan will be developed near to the pupil's likely date of return, to avoid putting unnecessary pressure on an ill pupil or their parents in the early stages of their absence.

Local authorities should work with the school to set up an individually tailored reintegration plan for each child: this could take the form of an IHP. This should need to include extra support to help fill any gaps arising from the child's absence.

Under equalities legislation schools must consider whether they need to make any reasonable adjustments to provide suitable access for a child whose condition amounts to a disability.

The school is aware that some pupils will need gradual reintegration over a long period of time and will always consult with the pupil, their parents and key staff about concerns, medical issues, timing, and the preferred pace of return.

The reintegration plan will include:

• The date for planned reintegration, once known.

• Details of regular meetings to discuss reintegration.

• Details of the named member of staff who has responsibility for the pupil.

• Clearly stated responsibilities and the rights of all those involved.

• Details of social contacts, including the involvement of peers and mentors during the

transition period.

• A programme of small goals leading up to reintegration.

• Follow up procedures.

The school will consider whether any reasonable adjustments need to be made to provide suitable access to the school and the curriculum for the pupil. These may include the following adaptations:

• A personalised or part-time timetable, drafted in consultation with the named staff member

• Access to additional support in school

• Online access to some of the curriculum from home

• Movement of lessons to more accessible rooms

• Places to rest at school

• Special test arrangements to manage anxiety or fatigue

The school will ensure a welcoming environment is developed. and encourage pupils and staff to be positive and proactive during the reintegration period.

Following reintegration, the school will support the LA in seeking feedback from the pupil regarding the effectiveness of the process.

7. Training

Where necessary, staff will be trained in a timely manner to assist with a pupil's return to school.

Healthcare professionals should be involved in identifying and agreeing with the school the type and level of training required that may be required.

Training will be sufficient to ensure staff are confident in their ability to support pupils with additional health needs.

Parents of pupils with additional health needs may provide specific advice but will not be the sole trainer of staff.

Local authorities have policies and procedures linked to this policy. Schools and families are advised to contact their own responsible LA for further details.