

Education Services

Medical Absence from School - Guidance for Schools

September 2020

1. The underlying principles behind this guidance

Peterborough City Council (PCC) are committed to ensuring that all children and young people in the city receive a good education in order to maximise the learning and contribution of each individual. A fundamental part of our local offer aims to ensure that all children and young people are given the opportunity of an inclusive education that meets their specific needs.

Children and young people who have additional health needs are, by the nature of their difficulties, at risk of failing to reach their true potential within an educational context. This is particularly the case for those children and young people whose health needs prevent them from attending school for an extended period of time, or for those who are restricted by their health needs to attending school on a part-time or sporadic basis.

This guidance aims to outline the process available within Peterborough for children and young people with additional health needs. This includes details of when and how alternative provision will be arranged if required, and the respective roles and responsibilities of the local authority, schools, parents/carers, providers and other agencies.

2. Roles and responsibilities of Peterborough schools

Schools in Peterborough, as in the rest of the country, (including maintained schools, maintained nursery schools, academies, and alternative provision academies) are required by law to make arrangements for supporting pupils at their school with medical conditions.

This duty is detailed in Section 100 of the Children and Families Act 2014 and statutory guidance entitled "Supporting pupils at school with medical conditions" has been produced by the Department for Education in order to assist schools in understanding and complying with this legislation.

Independent schools are under no legal obligation to follow the statutory guidance contained within the document. However, the non-statutory advice within this document is intended to assist and guide these schools in promoting the wellbeing and academic attainment of children with medical conditions.

http://www.legislation.gov.uk/ukpga/2014/6/section/100/enacted

https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3

The key points detailed in the guidance indicate that:

- Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- Governing bodies must ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- Governing bodies should ensure that school leaders consult health and social care professionals, pupils
 and parents/carers to ensure that the needs of children with medical conditions are effectively
 supported.

The statutory guidance also indicates that schools should develop a policy for supporting pupils with medical conditions and that there should be a named person who is responsible for the practical implementation of this policy within each school.

The **School's** role is to:

- Host and chair regular review meetings when a child is accepted onto medical tuition (normally every 6 weeks); produce action plans and distribute notes of these meetings and ensure that the tuition support provided is of suitable quality;
- Provide a named teacher with whom each party can liaise;

- Provide a suitable working area within the school for the pupil / education provider where necessary;
- Be proactive in supporting the reintegration of the pupil back into school as soon as they are well enough;
- Ensure that pupils who are unable to attend school, are kept informed about school social events and are encouraged to maintain contact with their peers

3. Legal Framework for local authorities

The Local Authority has a duty set out in Section 19 of the Education Act 1996 and in the statutory guidance, "Ensuring a good education for children who cannot attend school because of health needs".

The Equality Act 2015 is also an important part of the legal framework around children and young people with significant medical needs.

4. Role and responsibilities of Peterborough City Council

The 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 the child.

PCC are responsible for arranging suitable full-time education for children of compulsory school age who, because of illness, would not receive suitable education without such provision. This duty applies to all children and young people who live in Peterborough, regardless of the type or location of the school they would normally attend and whether or not they are on the roll of a school.

- http://www.legislation.gov.uk/ukpga/1996/56/section/19
- https://www.gov.uk/government/publications/education-for-children-with-health-needs-whocannot- attend-school
- http://www.legislation.gov.uk/ukpga/2010/15/contents
- Unless the local authority considers that a pupil's condition means that full-time provision would not be in his or her best interests.
- Inclusive of pupils attending academies, free schools, special schools, independent schools or maintained schools.
- Where a child is ordinarily resident in Peterborough but attends school outside the city, PCC
 retains responsibility for arranging medical needs provision for that child. PCC may seek to
 recoup costs incurred from the home authority in relation to medical needs provision for Looked
 After Children placed in Peterborough by a different local authority.

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 in school. PCC's medical needs provision takes the form of one-to-one support within the home environment. Therefore as a consequence, the hours of face- to-face provision could be fewer than a "normal" school day as the provision is more concentrated. This would be agreed between the parent, school and the Local Authority and be reviewed on a six weekly basis.

5. Named Person

It is a statutory requirement that local authorities have a named person responsible for co-ordinating and managing the education of children with additional health needs. In PCC, the named person is:

Dee Glover - Headteacher of Peterborough Virtual School for Children in Care

The Medical Needs Co-ordinator is responsible, in liaison with schools and other professionals, for ensuring that PCC fulfils its statutory duties in relation to medical needs provision for children and young people who cannot attend school for medical reasons, and where this reason is confirmed by health professionals to the satisfaction of the Council. Evidence from a GP alone is not sufficient.

Parents/carers can contact the Medical Needs Co-ordinator in order to discuss their child's specific circumstances relating to medical needs education provision once evidence from health professionals has been received and agreed by the Council. Evidence from a GP alone is not sufficient. This may be particularly appropriate in instances where they feel that their child's educational needs are not being addressed due to a medical condition or ill health.

Schools can contact the Medical Needs Co-ordinator in order to obtain support, advice and guidance in relation to medical needs education provision and their own statutory responsibilities in supporting children with additional health needs, both in general terms and in relation to specific cases.

The Medical Needs Co-ordinator will liaise with professionals and colleagues within both health and education services as appropriate in order to ensure that children with additional health needs are able to access a suitable education.

Where the Medical Needs Co-ordinator does not consider the threshold for medical tuition has been met, the case will be referred back to the school who may wish to continue to support the child's education at home or seek to proceed with the attendance policy for non-attendance.

6. Role and responsibilities of the tuition provide

- Liaise with the named person in school;
- Liaise, where appropriate, with outside agencies;
- Provide a flexible teaching programme;
- Provide regular reports on the pupil's progress and achievements;
- Provide an opportunity for the pupil to comment on their report;
- Attend review meetings;
- Help set up an appropriate reintegration programme as soon as the pupil is ready

7. Role and Responsibilities of Health and other support services

- Offer medical treatment and advice and support where appropriate.
- Attend or provide advice to review meetings
- Provide written reports where necessary
- Work collaboratively with the School, Parent and the Local Authority to reintegrate the pupil back into school as soon as is possible;

8. Role and Responsibilities of the parents / carers

- Provide current medical guidance when requested
- Provide early communication if a problem arises or help is needed;
- Attend necessary meetings;
- Reinforce with their child, the value of a return to school.
- Take responsibility for safeguarding their child when they are not receiving education

9. Role and Responsibility of the Pupil

- Be ready to work with the provider;
- Be prepared to communicate their views;
- Engage with other agencies as appropriate;
- Prepare for reintegration as soon as they are able

10. Pupils who are not on a school roll

PCC retain responsibility for supporting Peterborough children who are not on roll at a school (Children Missing Education) whose health needs prevent them from accessing education.

In these instances, parents/carers or professionals working with a child who falls into this category should contact either their Education, Health and Care Plan Co-ordinator (for children with an Education, Health and Care Plan) or alternatively PCC's Medical Needs Co-ordinator to discuss future educational provision.

Please also refer to the document 'Peterborough City Council Children Missing Education Policy' for further guidance on CME processes

11. Early Years and Post-16

PCC will normally provide support for pupils who are between the ages of 4 and 16 (Reception Year to Year 11). However, where pupils who would normally be in Year 12 are repeating Year 11 due to medical reasons, requests for support will be considered on an individual basis.

For post-16 students attending mainstream provision, PCC would expect the host school, college or training provider to make any necessary reasonable adjustments for students who are unwell over a prolonged period.

12. Pupils with an EHCP, SEND or undergoing an EHC needs assessment

Where a school is seeking support on medical grounds for a pupil with SEND, whether they have an Education, Health and Care (EHC) plan or not but who are on roll at a mainstream or special school, the school should first discuss the situation with the SEN & Inclusion Services (SENI) to determine the most appropriate route to follow.

The school may wish to advise the parents / carers to contact the Parent Partnership team.

13. Hospital in-patients

PCC provides education for children and young people who are in- patients at Peterborough hospitals, as well as offering transitional support for children and young people being discharged from long stays in hospital or those who have repeat admissions.

In certain instances, particularly in the case of severe mental health needs, children may be placed in specialist residential hospitals outside of Peterborough by the National Health Service (NHS).

Many of these facilities have access to an on-site education provision or school that can offer education as part of the package of care. PCC retain responsibility for the education of these children whilst they remain in hospital and upon their return to Peterborough following discharge.

In advance of a proposed discharge, particularly in the instance that an alternative educational provision is being proposed, parents/carers or professionals working with a child who falls into this category should contact either their Education, Health and Care Plan Co-ordinator (for children with a Statement of Special Educational Needs or an Education, Health and Care Plan) or alternatively PCC's Medical Needs Co-ordinator to discuss future educational provision.

14. Children with life limiting and terminal illness

PCC will continue to provide education for as long as the child's parents and the medical staff wish it.

15. Pregnant Students

It is an expectation that students who are pregnant will continue to be educated at school whilst it is reasonably practical and it is in the interests of the student.

Medical Needs Referrals for pregnant students will be considered on a case by case basis and any support will be limited to the six weeks prior to, and six weeks following, the birth of the baby.

The pupil will remain on the roll of their school. If the pupil has not reached statutory school leaving age, it is expected that she will reintegrate into school. Evidence needs to be provided to the school to confirm when the baby is expected so that an appropriate Medical Needs referral can be made.

Medical Needs Referral Criteria

Medical Needs referrals will ordinarily be made by the school at which the child is on roll.

All referrals should be sent to PCC's Medical Needs Co-ordinator via email. Referrals will be considered with the following documents:

- An appropriately completed medical needs referral form. Incomplete forms or those that do not contain sufficient detail will be returned.
- A letter from a medical professional/clinician (but not a GP alone) that clearly states that the young person is unable to attend school because of their health needs (medically unfit to attend school)
- Where advice from a medical consultant is not yet available medical evidence will be expected from at least one of the following medical professionals:
 - General Practitioner
 - CAMHS professional (i.e. mental health nurse/mental health practitioner)

(Please note that medical evidence from a GP alone is not sufficient for the local authority to accept that the child is medically unfit to attend school).

Following the acceptance of a referral, the Medical Needs Co-ordinator will request that interim medical needs provision is implemented without delay.

A planning meeting will then determine the structure of the provision for an initial period of 6 school weeks (or for the period that the student is absent from school, whichever is shorter).

The provision will ordinarily consist of one-to-one sessions within the child's home. The number and length of the sessions will depend on each individual case and be agreed upon in the planning meeting. There is an expectation that the child's home school will plan the work delivered in these sessions in collaboration with a tutor, in order to ensure consistency of learning.

Planning meetings will ordinarily take place within the school which submitted the referral or the child's home. Invitees should include: child, parent/carer, home school, Local Authority Medical Needs Coordinator. An invite should also be sent to the health professional that provided the medical advice.

Before it is agreed that teaching can take place in the home, it will be necessary to carry out appropriate risk assessments. Where a pupil is taught at home it is necessary for there to be a responsible adult in the house.

If after this initial period, the student is unable to return to school, further medical advice will be required in order for the provision to continue.

Reintegration

The aim of the will be to reintegrate pupils back into school at the earliest opportunity as soon as they are well enough.

A reintegration programme will be put together following discussion with the child or young person, parent/carer, school, relevant health professional(s) and other involved agencies as appropriate.

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 any future education arrangements) will need to take into account any ongoing health problems of disabilities they may have.

Medical Needs Provision Process

Child's school completes Medical Needs referral and submits this to the Medical Needs Coordinator (Dee Glover)
Medical Needs Co-ordinator makes contact with the school to indicate whether or not the referral has been approved
3. Medical Needs Co-ordinator makes initial home visit to discuss Medical Needs provision
4. Planning meeting takes place to discuss and agree level of medical needs support
5. Medical Needs Co-ordinator arranges for home tuition to commence for an initial period of 6 school weeks, unless agreed otherwise
6. 6 week plan in place. Copy emailed to all relevant stakeholders
7. Meeting to review and update the plan. Any updates emailed to all relevant stakeholders
8. Agree end of plan and plan to reintegrate back into school. Alternatively, agree continuation of plan upon receipt and agreement of updated medical advice (for a further 6 weeks)

Medic	al Na	ehec	Refe	rral	Form
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modical resource resource of the second resou								
		Perso	nal Details	of Child Rec	quiring Supp	ort		
Full Nan	ne:		DoB:					
Name of	Parent/Carer	:						
Address	::							
Postcod	le:							
Telepho	ne Contact:							
Email A	ddress:							
UPN:			Year Gro	oup:				
Gender:			Ethnicity	/ :				
EAL: Y / N Pupil		Premium:		FSM: Y/N				
EHCP ?	EHCP Assessment ?	SEN Support?	LAC?	Previously LAC?	Adopted?	CP Plan?	CIN Plan?	CP Concern?
Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N

	?							
Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N	Y / N
			School / F	Referrer Info	rmation			
School I	Name:							
Named (Contact (refer	rer):						
Designa	tion:							
Contact	Number:							
Email ac	ldress:							

Reasons for Referral					
What are your concerns?					
What do you have to goin					
What do you hope to gain from this referral					
- ideal outcome?					
- ideal outcome :					
Context - Education					
Context - Health					
Context - Health					
Context - Other Agencies					
	I.				
Context - Parents/Carers					
	ts/carers have consented to this referral)				
What are the views of the					
parents/carers?					
pur onto, our or or					
Does the school have					
written agreement from the parents / carers to					
make this referral for					
medical tuition?					

Other Useful Information
Please include any information which it is felt will be helpful eg curriculum coverage, levels
attained, online resources used, interests/hobbies, attitude to learning etc
3
If nunit is in V11, what plans are in place for post-162
If pupil is in Y11, what plans are in place for post-16?
If pupil is in Y6 which will be the next school and has a place been secured?
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Baseline Information Please highlight the relevant description in bold text:								
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Attendance in last 6 school weeks	81%+	51% - 80%	26-50%	10-25%	Below 10%			
Timetable	Timetabled for all subjects	Timetabled for most subjects	Timetabled for less than 4 subject classes	Timetabled for 1 or 2 classes	Not expected to attend classes			
Independence in lessons	Is independent in class	Some accommodations by teacher but largely independent	Some adult support in class	Has adult support at all times	Is not able to attend classes even with support			
Social times	Mixes well with other pupils, without support	Manages social times without support	Manages social times in supported environment	Is supported by staff at social times	Avoids social times at school			
Accessing lessons	Goes into classroom without support	Accesses classroom with support	Accesses small group teaching	Accesses 1:1 teaching	Does not access teaching at school			
Friendships	Has a number of good friendships	Has more than one good relationship with other pupils	Has one good relationship	Has acquaintances	Socially isolated			
Navigates the school	Can move around school and follow timetable independently	With small accommodations can manage timetable independently	Support required such as meeting and greeting or prompting throughout the day	Substantial support required eg accompanied in parts of the school	Does not move around school			
Co-operation	Always co- operative and follows rules	Small infrequent problems with co-operation	Some problems cannot/will not co-operate especially when under stress	General issues with behaviour /compliance /co-operation	Significant behavioural difficulties			
Communication	Communicates well, is articulate and polite	Some difficulties communicating	Often cannot or will not communicate eg in class or discussions with staff	Sometimes inappropriate communication	Is often rude and inappropriate			

Please make sure that all sections are completed in full. If incomplete forms are submitted this may result in a delay whilst we wait for additional information.

Completed referral forms and supporting documents should be sent via email to:

dee.glover@peterborough.gov.uk

If you wish to discuss any aspect of the process please either email using the above email address.