



Students with Medical Needs Attendance Policy

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Statement of intent

Apex Collaborative Trust aims to support the relevant Local Authority (LA) and ensure that all students 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 students may be admitted to hospital or placed in alternative forms of education provision. We recognise that, whenever possible, students should receive their education within their school, and the aim will be to reintegrate students back into school as soon as they are well enough.

We have a continuing role in a student's education whilst they are not attending the school and will work with the LA, healthcare partners and families to ensure all students with medical needs receive support to enable them to maintain links with their education.

1. 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
- The UK GDPR
- Data Protection Act 2018
- DfE (2023) 'Keeping children safe in education 2023'
- DfE (2023) 'Arranging education for children who cannot attend school because of health needs'
- DfE (2015) 'Supporting students at school with medical conditions'
- DfE (2022) 'Working together to improve school attendance'

This policy operates in conjunction with the following school policies:

- Attendance Policy
- Child Protection and Safeguarding Policy
- Data Protection Policy
- Special Educational Needs and Disabilities (SEND) Policy
- Supporting Students with Medical Conditions Policy

2. Responsibilities of the School and the School and the Local Authority

If the school makes arrangements:

Where possible, the child's health needs should be managed by the home school so that they can continue to be educated there with support, and without the need for the intervention of the local authority. However, as soon as it is clear that the home school can no longer support the child's health needs and provide suitable education, the school should speak to the local authority about putting alternative provision in place.

Apex Collaborative Trust aims 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 recognise that, whenever possible, students should receive their education within their school and the aim of the provision will be to reintegrate students back into school as soon as they are well enough.

Local Authority duties:

For the purpose of this policy, the LA's duties when students are unable to attend school due to health needs are outlined below. These duties have been included so as to differentiate the responsibilities that lie with the school and those that will be carried out by the LA. The school is not responsible for ensuring that the LA meets its responsibilities – the school's responsibilities are outlined in the 'Roles and responsibilities' section of this policy.

The LA must arrange suitable full-time education for children of compulsory school age who, because of illness, would not receive suitable education without such provision. The school will fulfil its duty to effectively collaborate and communicate with the LA as required.

In line with statutory guidance, the LA should:

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

- Ensure the education students 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 students in arranging provision.
- Have a named officer responsible for the education of students 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 each student and that it provides suitable education.
- Have clear policies on the provision of education for children and young people under and over compulsory school age.
- Maintain good links with the schools in its area and put systems in place to promote co-operation between them when children cannot attend due to ill health.

To comply with statutory guidance, the LA 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 student is able to attend school rather than whether the student 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).

The trust understands that we have a continuing role in a student's education whilst they are not in school and will work with the LA, 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.

3. Definitions

“Children with health needs” are children of compulsory school age who are unable to attend school as a result of their medical needs. These medical needs include:

- 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:** many LAs have home tuition services that act as a communication channel between schools and students on occasions where students 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.

For the purpose of this policy, “**school-based support**” in relation to supporting students with additional health needs may include:

- Day-to-day support offered at school where the student is able to attend as normal.
- Support given to students who are absent from school because of illness for a period of less than 15 school days, whether consecutive or cumulative.
- Any educational or extra-curricular provision as requested by the LA as part of its arrangements for students who cannot attend school full-time, e.g. where the student attends school part-time as an arranged part of their full-time education provision.
- As part of their reintegration into normal school attendance following a period of absence or part-time attendance due to health needs.

“**LA-arranged education**”, for the purpose of this policy, is defined as education provision arranged by the LA where the student cannot attend school full time due to medical reasons for a period of 15 school days or more, whether consecutive or cumulative.

4. Roles and responsibilities

The trustees and CEO are responsible for:

- Ensuring the roles and responsibilities of those involved in any school-based arrangements to support the needs of students are clear and understood by all.
- Ensuring robust systems are in place for dealing with health emergencies and critical incidents where a student with health needs is able to, or partially able to, attend school and/or extra-curricular activities.
- Approving and reviewing this policy on an annual basis.

The headteachers in each school are responsible for:

- Working with the CEO and other key staff to ensure compliance with the relevant statutory duties when supporting students with additional health needs.
- Ensuring a suitably trained member of staff is assigned responsibility for the education of students with additional health needs to be a point of contact for the LA and parents.
- Working collaboratively with the LA, parents and other professionals, as necessary, to develop arrangements to meet the needs of students.

- Ensuring any school-based arrangements put in place to meet students' health needs are fully understood by all those involved and acted upon.
- Appointing a named member of staff who is responsible for students with additional health needs and liaises with parents, students, the LA, key workers and others involved in the student's care.
- Providing teachers who support students with additional health needs with suitable information relating to a student's health condition and the possible effect the condition and/or medication taken has on the student.
- Notifying the LA when a student is likely to be away from the school for a significant period of time due to their health needs.

The named member of staff is responsible for:

- The management of any students registered at the school who are unable to fully attend school because of their health needs.
- Actively monitoring student progress and reintegration into school.
- Supplying any LA-arranged education providers with information about students' capabilities, progress and outcomes.
- Liaising with the headteacher, LA-arranged education providers, and parents to help determine students' programmes of study whilst they are absent from school, where necessary.
- Keeping students who are being educated by LA-arranged education providers informed about school events and encouraging communication with their peers.

All staff are responsible for:

- Designing school-based activities, including lessons, in a way that allows students with additional health needs to participate fully and ensuring students are not excluded from activities that they wish to take part in without a clear evidence-based reason.
- Understanding their role in any school-based support for students with additional health needs and ensuring they attend the required training.
- Ensuring they are aware of the needs of their students through the appropriate and lawful sharing of individual students' health needs.
- Keeping parents informed of how their child's health needs are affecting them whilst in school-based education.

Parents will be expected to:

- Ensure, where school-based provision is in place, the regular and punctual attendance of their child at the school where possible and notifying the school, or the relevant provider, of the reason for any of their child's absences without delay.
- Work in partnership with the school, LA and any LA-arranged provision and provide them with sufficient and up-to-date information about their child's medical needs.
- Attend meetings to discuss how any school-based support, including reintegration, for their child should be planned.

5. Managing absence

Parents must contact the school on the first day their child is unable to attend due to illness.

Absences due to illness will be authorised unless the school has genuine cause for concern about the authenticity of the illness.

The school will provide support to students who are absent from school because of illness for a period of less than 15 school days, whether consecutive or cumulative, by liaising with the student's parents to arrange schoolwork, as soon as the student is able to cope with it, or part-time education at school. The school will give due consideration to which aspects of the curriculum are prioritised in consultation with the student, their parents and relevant members of staff.

For periods of absence that are expected to last for 15 or more school days, either in one absence or over the course of a school year, the named member of staff with responsibility for students with additional health needs will notify the LA, who will take responsibility for the student and their education.

Where absences are anticipated or known in advance, the school will liaise with the LA to enable education provision to be provided from the start of the student's absence.

For planned hospital admissions, the appointed named member of staff will liaise with the LA and the hospital education provider as early as possible to discuss the likely admission date and expected length. Plans will be made, where possible, for the educational programme to be followed while the student is in hospital.

The LA will set up a personal education plan (PEP) for the student which will allow the school, the LA and the provider of the student's education to work together.

The school will monitor student attendance and mark registers to ensure it is clear whether a student is, or should be, receiving education other than at school.

The school will only remove a student who is unable to attend school because of additional health needs from the school roll where:

- The student has been certified by the school medical officer as unlikely to be in a fit state of health to attend school, before ceasing to be of compulsory school age; and
- Neither the student nor their parent has indicated to the school the intention to continue to attend the school, after ceasing to be of compulsory school age

A student unable to attend school because of their health needs will not be removed from the school register without parental consent and certification from the GP, even if the LA has become responsible for the student's education.

6. Support for students

Where a student has a complex or long-term health issue, the school will discuss the student's needs and how these may be best met with the LA, relevant medical professionals, parents and, where appropriate, the student.

Students with continuing health needs will need an IHP which will be subject to regular review and assessment. Where the student's needs amount to ongoing SEND, an EHC plan may be more appropriate to meet their long-term needs. Where a student has an EHC plan and an IHP, both plans must be reviewed alongside each other, at the same time.

Medical evidence will be used where available to best understand a student's needs and identify the most suitable provision. Where specific medical evidence is not readily available, the school will consider liaising with other medical practitioners and other sources of evidence to ensure appropriate provision can be arranged as soon as possible.

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

The school will make reasonable adjustments under students' IHPs, in accordance with the Supporting Students with Medical Conditions Policy.

Students 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 student's education to establish and maintain regular communication and effective outcomes.

Whilst a student is away from school, the school will work with the LA to ensure the student can successfully remain in touch with their school.

Where appropriate, the school will provide the student's education provider with relevant information, curriculum materials and resources. The school will work collaboratively between relevant services to ensure continuity of provision and consistency of curriculum.

To help ensure a student with additional health needs can attend school following an extended period of absence, the following adaptations will be considered:

- A personalised or part-time timetable, drafted in consultation with the named staff member
- Access to additional support in school
- Online access to the curriculum from home
- Movement of lessons to more accessible rooms
- Places to rest at school
- Special exam arrangements to manage anxiety or fatigue

To help ensure that the right provision is offered and encouraged, the school will ensure that students are involved in decision-making as much as possible, in accordance with the student's age and maturity.

Alongside the LA, the provision offered to a student will be regularly reviewed by the school to ensure it continues to be appropriate for the student's needs and that suitable education is being provided. The review process will seek input from the student, parents, relevant agencies, the LA SEND team where relevant.

7. Reintegration

When a student is considered well enough to return to school, the school will develop a tailored reintegration plan in collaboration with the LA. During a lengthy absence, this plan will be developed near to the likely date of return to avoid putting unsuitable pressure on an ill student in the early stages of their absence.

The school will work with the LA when reintegration into school is anticipated to plan for consistent provision during and after the period of education outside school.

As far as possible, the student will be able to access the curriculum and materials that they would have used in school.

The school will consider whether any reasonable adjustments need to be made to provide suitable access to the school and the curriculum for the student.

The school is aware that some students will need gradual reintegration over a long period of time and will always consult with the student, 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 student.
- 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 ensure a welcoming environment is developed and encourage students and staff to be positive and proactive during the reintegration period.

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

8. Information sharing

It is essential that all information about students with additional health needs is kept up to date.

To protect confidentiality, information-sharing techniques will be agreed with the student and their parent in advance of being used.

All teachers, TAs, supply and support staff will be provided with access to relevant information, including high-risk health needs, first aiders and emergency procedures, via email.

Parents will be made aware of their own rights and responsibilities regarding confidentiality and information sharing. To help achieve this, the school will:

- Ensure this policy and other relevant policies are easily available and accessible.
- Provide the student and their parents with a copy of the policy on information sharing.
- Ask parents to sign a consent form which clearly details the organisations and individuals that their child's health information will be shared with, and which methods of sharing will be used.
- Consider how friendship groups and peers may be able to assist students with additional health needs.

When a student is discharged from hospital or is returning from other education provision, the school will ensure the appropriate information is received to allow for a smooth return to the school. The named member of staff will liaise with the hospital or other tuition service as appropriate.

9. Record keeping

In accordance with the Supporting Students with Medical Conditions Policy, written records will be kept of all medicines administered to students.

Proper record keeping will protect both staff and students and provide evidence that agreed procedures have been followed.

All records will be maintained in line with the Data Protection Policy.

10. Training

Healthcare professionals should be involved in identifying and agreeing with the school the type and level of training required. Training will be sufficient to ensure staff are confident in their ability to support students with additional health needs.

Once a student's return date has been confirmed, staff will be provided with relevant training, ideally one week before the student's anticipated return.

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

11. Examinations and assessments

The named member of staff will liaise with the alternative provision provider over planning and examination course requirements where appropriate and relevant assessment information will be provided to the alternative provision provider if required.

Awarding bodies may make special arrangements for students with permanent or long-term disabilities and learning difficulties, or temporary disabilities and illnesses. Applications for such arrangements will be submitted by the school, or LA as early as possible.

12. Monitoring and review

This policy will be reviewed by the CEO on an annual basis.

Any changes to the policy will be clearly communicated to staff and to other stakeholders via the website.

Appendix 1: Scenarios

The following are typical scenarios which schools may face. Suggestions are provided for steps which can be taken by school staff. The scenarios are not exhaustive, and you may find some situations which do not fit a typical pattern.

1. Significant absence – no medical evidence is available to support the absences

The student has had significant periods of absence from school. Parent(s) say he/she is too ill to attend but no evidence to support this claim has been provided by parents. The reasons provided could be varied, or all along similar lines.

You may need to bear in mind that mental health conditions are often undiagnosed in children and young people, or there may be a significant delay whilst the child awaits an appointment with a mental health practitioner. In these circumstances, evidence of diagnosis may not be available, but parents should be able to demonstrate that they are actively seeking support for the young person.

2. Significant absence – parent(s) say child is too unwell to attend, some evidence has been provided but is inconsistent in relation to the amount of school which has been missed

In this scenario, parents will have provided some evidence of illness to the school which supports their claim that their child has been ill. However, the evidence provided does not fully explain or cover the amount of time which the student has missed from school. School will have questions regarding amount of time missed from school and will require additional information to inform their next steps.

- Follow strategies as scenario 1, but with greater involvement of the School Nurse or Healthy Child Service in meetings and communication with parents as this medical expertise will help to make decisions regarding appropriateness of absence levels.
- Ensure involvement of a Primary Mental Health Worker if it is apparent that mental health needs are affecting attendance.
- Refer to [DfE guidance on supporting students with medical conditions](#) and consider if an individual healthcare plan is required.

3. Significant absence from school – appropriate evidence has been provided which confirms that the child is unwell and absence is reasonable

In this scenario, the time missed from school is reasonable considering the nature of the illness. School is satisfied with the evidence provided by parents and/or other agencies. Or, in the case of mental health needs, if no evidence is available from medical professionals, school may feel satisfied that there is an acceptable reason for absence (school may have carried out the ATTEND assessment, as part of the EBSA support). In either case, school will need to put a plan in place to ensure the student receives an appropriate education in view of their medical needs. Consider the following strategies and interventions:

- Meetings – Draw up an individual healthcare plan as per DfE guidance on supporting students with medical conditions.
- Involve School Nurse or Healthy Child Service, Primary Mental Health Worker (PMHW) and other specialists, as appropriate.
- Consider Early Help Assessment.
- Involve external agencies as appropriate.
- Make reasonable adjustments at school, e.g. amendments to timetable and/or provision, reduction in timetable.
- If anxiety related, then could school support with resources? Has school used the EBSA strategy or ATTEND framework for assessment?
- School could contact the PMHW for their area or consider whether the Early Help Assessment process would be appropriate.
- Consider whether school can manage situation within their own resources – e.g. by offering some support within the home if the child is absent for a prolonged period.
- Consider whether there may be a need for external support from the LA in the form of Section 19 provision (contact SAC if unsure).

4. The child is not attending school due to illness – school is unable to provide appropriate educational provision without additional support

In this scenario, sufficient evidence will be available regarding the nature of the illness and the reasons why it is impacting on school attendance. It is likely that medical specialists, other involved professionals and school staff, are stating that the school is unable to meet the needs of the child within school and school does not have the resources to provide a bespoke curriculum for the student. Consider:

- Meetings (If you have not already done so, draw up an individual healthcare plan as per DfE guidance on supporting students with medical conditions).
- Involvement of School Nurse or Healthy Child Service and other specialists to provide evidence and opinion regarding what may be appropriate provision.
- Make enquiries to the LA regarding Section 19 provision on medical grounds (email sssmedicalreferrals@lancashire.gov.uk in the first instance).

Appendix 2 – Students with additional health needs attendance flowchart

The school will provide support to students who are absent from school because of illness for a period of less than 15 school days, whether consecutive or cumulative (within an academic year), by liaising with the student's parent to arrange schoolwork as soon as the student is able to cope with it, or part-time education at school.



For periods of absence expected to last for 15 or more school days, (in one absence or over the course of a school year), the named member of staff for students with additional health needs notifies the LA, who take responsibility for the student and their education.



Any appropriate referrals to support services or notifications to key workers, such as the student's social worker, should also be considered.



The LA will set up a personal education plan (PEP) for the student, which will allow the school, the LA and the provider of the student's education to work together.



The school will monitor the student's attendance and mark registers to ensure it is clear whether the student is, or should be, receiving education other than at school.



The school will only remove students who are unable to attend school because of additional health needs from the school roll where two specific criteria are both met:

- The student has been certified by the school's medical officer as unlikely to be in a fit state of health to attend school, before ceasing to be of compulsory school age.
- Neither the student nor their parent has indicated to the school the intention to continue to attend the school, after ceasing to be of compulsory school age.



When the student 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 student's likely return date, avoiding unnecessary pressure on an ill student or their parent in the early stages of their absence.



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