



**Norfolk County Council
policy on supporting
children who are unable
to attend school
because of health
needs**

1. The underlying principles behind this policy

Norfolk County Council Children's Services are committed to ensuring that all children and young people in the County receive a good education in order to maximise the learning potential 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.

In September 2015, Norfolk County Council launched a new Education Inclusion Service. This service incorporates a broad range of professionals targeted at championing and supporting the children and young people that require additional support to access a suitable education, and supporting the schools that are charged with delivering their education.

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 policy aims to outline the support available within Norfolk that can be accessed for children and young people with additional health needs, including details of when and how alternative provision will be arranged if this is required and the respective roles and responsibilities of the local authority, schools, parents/carers, providers and other agencies.

2. Roles and responsibilities of Norfolk schools

Schools in Norfolk, as in the rest of the country, (including maintained schools, maintained nursery schools, academies, alternative provision academies and the Short Stay School for Norfolk) 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 2014¹ and statutory guidance entitled *Supporting pupils at school with medical conditions*² has been produced by the Department for Education in order to assist schools to understand and comply with this legislation³.

¹ <http://www.legislation.gov.uk/ukpga/2014/6/section/100/enacted>

² <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

³ Independent schools are under no legal obligation to follow the statutory guidance contained within the document *Supporting pupils at school with medical conditions*. 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.

The keys 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.

3. Legal Framework for local authorities

The Local Authority (i.e. Norfolk County Council) has a duty set out in Section 19 of the Education Act 1996⁴ and in the statutory guidance *Ensuring a good education for children who cannot attend school because of health needs*⁵.

The Equality Act 2010⁶ is also an important part of the legal framework around children and young people with significant medical needs.

4. Role and responsibilities of Norfolk County Council

The statutory guidance is clear that 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 or where the school has made arrangements to deliver suitable education outside of school for the child.

Norfolk County Council 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 the county of Norfolk, regardless of the type⁷ or location⁸ of the school they would normally attend and whether or not they are on the roll of a school.

⁴ <http://www.legislation.gov.uk/ukpga/1996/56/section/19>

⁵ <https://www.gov.uk/government/publications/education-for-children-with-health-needs-who-cannot-attend-school>

⁶ <http://www.legislation.gov.uk/ukpga/2010/15/contents>

⁷ Inclusive of pupils attending academies, free schools, special schools, independent schools or maintained schools.

⁸ Where a child is ordinarily resident in Norfolk but attend school outside the county, Norfolk retains responsibility for arranging medical needs provision for that child. Norfolk County

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. Norfolk County Council may provide one-to-one tuition, in which case the hours of face-to-face provision could be fewer as the provision is more concentrated.

Where full-time education would not be in the best interests of a child because of reasons relating to their physical or mental health, Norfolk County Council will endeavour to provide part-time education on a basis which is considered to be in the child's best interests. This decision will be made with reference to advice from relevant educational and medical professionals.

5. Named Person

It is a statutory requirement that local authorities have a named person responsible for the education of children with additional health needs. In Norfolk the named person is:

Sam Bartram, Medical Needs Coordinator
E-mail: sam.bartram@norfolk.gov.uk
Telephone: 01603 223609

The Medical Needs Coordinator is responsible, in liaison with schools and professionals, for ensuring that Norfolk County Council Children's Services fulfils its statutory duties in relation to medical needs provision for children and young people who cannot attend school for medical reasons and therefore require alternative educational provision.

Parents/carers can contact the Medical Needs Coordinator in order to discuss their child's specific circumstances relating to medical needs provision. This may be particularly appropriate in instances where they feel their child's medical needs are not currently being addressed.

Schools can contact the Medical Needs Coordinator in order to obtain support, advice and guidance in relation to medical needs provision, both generally and in relation to specific cases.

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

Council may seek to recoup costs incurred from the home authority in relation to medical needs provision for Looked After Children placed in Norfolk by a different local authority.

6. Provision in Norfolk

All Norfolk schools have access to support from the Medical Needs Service which is operated on behalf of Norfolk County Council by the Short Stay School for Norfolk.

6.1 Referrals to the Medical Needs Service

Schools should make appropriate referrals to the Short Stay School for Norfolk for pupils unable to attend school due to health reasons where it is clear that the pupil will be away from school for 15 days or more, whether consecutive or cumulative. In these circumstances parents/carers must take medical evidence in to the school which confirms why the pupil is unable to attend school and states how long this is likely to be the case. Statutory guidance states that evidence should be such as that provided by a consultant, however in order to avoid delays the Medical Needs Service will accept evidence from a GP if the young person is under a consultant but evidence is delayed⁹. The medical evidence should also confirm how much 1:1 tuition or group tuition the pupil is well enough to receive. Failure to provide the appropriate evidence could delay the referral process and the consideration of support.

6.1.1 Pupils with Myalgic Encephalopathy (ME)/Chronic Fatigue Syndrome (CFS)

For pupils diagnosed with Myalgic Encephalopathy (ME)/Chronic Fatigue Syndrome (CFS) the Consultant's letter should specify the programme the pupil should be following. This may include, for example, periods of school attendance, periods of rest, and periods of 1:1 tuition at home.

6.1.2 Pupils with mental health issues

For pupils with mental health issues there is an expectation that evidence is provided by the Child and Adolescent Mental Health Service (CAMHS). For pupils who are receiving support through other Counselling Services, evidence should be supplied from the relevant organisation.

6.1.3 Pupils who are pregnant

It is an expectation that pupils who are pregnant will continue to be educated at school whilst it is reasonably practical and it is in the interests of the pupil. Each case will be considered on an individual basis, but in accordance with current policy, support will generally be provided for six weeks prior to, and six weeks following, the birth of the baby. However, where there are extenuating circumstances, supported by appropriate evidence, it is possible to consider support outside the normal timeframe. The pupil will remain on roll of their school. If the pupil has not reached statutory school leaving age, it is expected that she will reintegrate into school. Evidence

⁹ Evidence from a consultant will still be required in this instance.

needs to be provided to the school to confirm when the baby is expected so that an appropriate referral can be made to Short Stay School for Norfolk.

6.2 Initiation of provision from the Medical Needs Service

Once the Referral Form and evidence has been considered and a decision about the referral has been made, the Lead Teacher for Medical Needs at the Short Stay School for Norfolk will notify the school accordingly. A planning meeting will be arranged to confirm the appropriate arrangements which will be put in place. The school should liaise with the parents and pupil. Parents/carers and pupils will normally be invited to attend these meetings.

6.3 Ensuring children in Norfolk with additional health needs have a good education

Where support is agreed, teachers from the Short Stay School for Norfolk will oversee the provision for pupils in alternative suitable venues, or, where appropriate, in the pupil's home. 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.

Close liaison with the pupil's school is essential and pupils should be kept informed about school activities and events. The pupil will remain on the School roll and the School will be expected to arrange review meetings¹⁰. Up to date medical evidence will be required¹¹. It is important to link with other agencies in order to support the pupil's educational opportunities.

Where support is agreed, there is an expectation that all parties will engage with and contribute to the agreed plan.

6.4 Roles of respective parties in supporting children who are receiving provision from the Medical Needs Service

6.4.1 The School's role is to:

- host and chair regular review meetings (normally every 6 weeks); produce action plans and distribute notes of these meetings;
- provide materials for an appropriate programme of work and work plans;
- maintain a plan, such as an Individual Education Plan, which records progress made towards a return to school;
- ensure all staff are kept informed;
- ensure appropriate arrangements, including entry and invigilation are made for all examinations;
- provide the pupil's academic attainment levels including any relevant examination requirements;

¹⁰ It is expected that these meetings would normally take place every six weeks

¹¹ Updated medical evidence should be provided at least termly

- make arrangements for SATs;
- assess coursework;
- facilitate career interviews;
- arrange work experience placements;
- provide a named teacher with whom each party can liaise (usually the SENCO);
- provide a suitable working area within the School, where necessary;
- be active in the monitoring of progress and the reintegration into school, using key staff to facilitate the reintegration into school;
- ensure that pupils who are unable to attend school, are kept informed about school social events, are able to participate, for example, in homework clubs, study support and other activities;
- encourage and facilitate liaison with peers, for example, through visits and videos.

6.4.2 The pupil's role is to:

- engage with the provider;
- be prepared to communicate their views;
- engage with other agencies as appropriate;
- prepare for reintegration as soon as possible.

6.4.3 The parents'/carers' role is to:

- commit to a plan of reintegration;
- be willing to work together with all concerned;
- 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.

6.4.4 The Short Stay School for Norfolk's role is to:

- liaise with the named person in school;
- liaise, where appropriate, with outside agencies;
- be sensitive to the needs of the child and family;
- 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;
- ensure appropriate course work and any other relevant material is returned to school;
- work with the mainstream school and the Attendance team where appropriate to ensure good attendance whilst with the provider;
- attend review meetings;
- help set up an appropriate reintegration programme at the earliest opportunity as soon as the pupil is ready to return to school.

6.4.5 Health Service's role is to:

- offer medical treatment and advice where appropriate.

6.4.6 Other involved agencies¹² role is to:

- work, with others, for the benefit of the pupil;
- attend review meetings if possible;
- provide written reports where necessary;
- give appropriate advice and support.

6.5 Reintegration

The aim of the provision from the Medical Needs Service 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.

7. Pupils who are not on a school roll

Norfolk County Council retain responsibility for supporting Norfolk children who are not on roll at a school whose health needs prevent them from accessing education. These may include children who are Electively Home Educated or children who are awaiting placement¹³.

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 Coordinator (for children with a Statement of Special Educational Needs or an Education, Health and Care Plan) or alternatively Norfolk County Council's Medical Needs Coordinator to discuss future educational provision. This may include interim provision through the Medical Needs Service, in which case medical evidence will be sought as described in section 6.1 of this policy.

8. Pupils who are not of compulsory school age

Norfolk County Council will not normally provide support for pupils who are under or over compulsory school age. However, where pupils who would normally be in Year 12 are repeating Year 11, due to medical reasons, requests for support can be considered on an individual basis.

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

¹² Examples of other involved agencies could include Social Services, Early Help professionals, Child and Adolescent Mental Health (CAMHS) practitioners etc

¹³ For example, children who have recently arrived in the county but whose illness has prevented them from accessing school provision

9. Hospital in-patients

Norfolk County Council provide support through the Medical Needs Service for children and young people who are in-patients at Norfolk 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 Norfolk 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. Norfolk County Council retain responsibility for the education of these children whilst they remain in hospital and upon their return to Norfolk 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 Coordinator (for children with a Statement of Special Educational Needs or an Education, Health and Care Plan) or alternatively Norfolk County Council's Medical Needs Coordinator to discuss future educational provision.

10. Children with life limiting and terminal illness

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

If the pupil and parents wish to withdraw from education their wishes will be respected if the decision is supported by medical advice.