

Children with Health Needs Who Cannot Attend School Policy Fairfax Multi-Academy Trust

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1. Introduction

- 1.1. Fairfax Multi-Academy Trust (FMAT) has a responsibility to ensure that all academies within the Trust are welcoming and supportive to students with medical conditions and those that may attend in the future.
- 1.2. This policy relates to:
 - 1.2.1. 'Supporting Students at School with Medical Conditions' DfE - April 2014
 - 1.2.2. The Children Act – 2004
 - 1.2.3. The Equality Act – 2010
 - 1.2.4. The Education Act 1996
 - 1.2.5. 'Working together to improve school attendance' DfE May 2022
- 1.3. FMAT is an inclusive community that aims to support and welcome students with medical conditions. Their right to an education is the same as any other student and therefore the attendance ambition for these students should be the same as they are for any other student.
- 1.4. It is the intention of the Trust that all should have the best possible start in life through high quality education, which allows them to achieve their full potential. A student who has health needs should have the same opportunities as their peer group, including a broad and balanced curriculum. As far as possible, children with health needs and who are unable to attend their academy should receive the same range and quality of education as they would have experienced at the academy.
- 1.5. Academies will work closely with the student, parent/ carers and health professionals to ensure the individual's needs are at the centre of all decision-making regarding education. Academies will make reasonable adjustments in line with the Equality Act.
- 1.6. Academies will ensure that students' health is not put at unnecessary risk. Therefore an academy does not have to accept a student in school where it would detrimental to the health of that individual or others to do so.
- 1.7. Academy staff will demonstrate understanding that some students face greater barriers to attendance than their peers. These can include students who suffer from long term medical conditions or who have special educational needs and disabilities. This should include:
 - 1.7.1. Having sensitive conversations and developing good support for students with physical or mental health conditions. For example, making reasonable adjustments where a student has a disability or putting in place an individual healthcare plan where needed. Considering whether additional support from external partners (including the local authority or health services) would be appropriate, making referrals in a timely manner and working together with those services to deliver any subsequent support.
 - 1.7.2. Working with parents to develop specific support approaches for attendance for students with special educational needs and disabilities, including where applicable ensuring the provision outlined in the student's education, health and care plan is accessed. In addition, schools should work with families to help support routines and work with other partners to encourage the scheduling of additional support interventions or medical appointments outside of the main school day.



- 1.7.3. Establish strategies for removing the in-school barriers these students face, including considering support or reasonable adjustments for uniform, transport, routines, access to support in school and lunchtime arrangements.

2. Identification and Intervention

- 2.1.** Academies will provide support to children who are absent because of illness or a short period of time. Where they are able to work, for example when a child is experiencing chicken pox or influenza the academy will support by working closely with the parents, for example, sending work home as required and supporting the student when they return by providing appropriate work for them to do at home to catch up.
- 2.2.** In some cases where a child is hospitalised, the hospital may provide education. In this case, academies will work closely with the hospital to ensure continuity of education.
- 2.3.** Where an absence is planned, for example for a stay in hospital, academies will work with parents/carers and the hospital to arrange suitable work for that absence.
- 2.4.** Academies will pay due regard to any medical advice given by the hospital when they discharge a child, as to how much education will be appropriate for them after discharge, when they might be ready to return to their academy and whether they should initially return on a part time basis only.
- 2.5.** Where a student is not well enough to attend the academy on a full-time basis, the academy will work with the hospital school to appropriately complement the child's education.

3. Long term medical conditions – provision at home or in hospital.

- 3.1.** Where a child has a complex or long-term health issue, the pattern of illness can be unpredictable. The academy will discuss the student's individual needs and how these may be best met within the academy with the parents/ carers and relevant health care professionals. This may be through reduced timetables, additional support from staff when returning to the academy after each absence, or other reasonable adjustments.
- 3.2.** Where a child has been in hospital for a longer period and returns home, if appropriate then James Brindley (Birmingham Hospital school) or Triple Crown (Solihull Hospital School) may make provision for education at home. This decision will be made with parents/ carers/ health care professionals / the child and the academy. The academy will work with all parties to ensure a smooth and appropriate transition back into full time education.
- 3.3.** The academy will, where necessary, work closely with the Local Authority to secure appropriate education for a student with a long term medical condition. The Local Authority should be ready to take responsibility for arranging provision as soon as it is clear that an absence will last more than 15 days.

4. Reintegration into an academy after a long-term illness.

- 4.1.** When reintegration into the academy is anticipated the academy will work with the hospital school, appropriate professionals, parents and the child to plan for



consistent provision during and after the period of education outside of the academy day.

- 4.2. While absent, as far as possible, the student should be able to access the curriculum and materials that they would have used in the academy. The academy will liaise with the Hospital School and send work as appropriate to support.
- 4.3. The academy will keep in touch with the student while they are away. This could be through In the Know, emails, invitations to school events, show my homework etc.
- 4.4. There should be regular updates on how the student is progressing with their learning from the Hospital school.
- 4.5. Where the absence is likely to be lengthy, the reintegration plan may only take shape nearer to the to the likely date of return to avoid putting unsuitable pressure on an ill child in the early stages of their absence. While most students will want to return to the normal academy routine, some will need a gradual reintegration over a longer period.

5 Roles and responsibilities

5.1 Parents/carers

5.1.1 Parents, as defined in the Education Act 1994, are a child's main carers. They are responsible for making sure that their child is well enough to attend the academy.

Parents/carers have a duty to:

- Provide the academy with sufficient information about their child's medical condition, medical treatment/special care needed at the academy (emergency contact numbers, names and contact details of GP, details of hospital consultants, medicine details, and allergies).
- Reach an agreement with the academy on the academy's role in assisting with their child's medical needs. In some cases, this will be the formation of an individual health care/management plan.
- Ensure that all medication is within use-by-date.
- Inform the academy if there are any changes to their child's condition.
- Inform the academy of any medication their child requires while taking part in offsite activities.
- Where parents/carers have difficulty understanding or supporting their child's medical condition themselves, the Local Health Authority can often provide additional assistance.
- Parents'/carers' religious and cultural views should always be respected.

5.2 .Students

5.2.1 All FMAT students have a responsibility to:

- Treat other students, including those subject to a medical condition, in line with Trust values, the academy ethos, and the behaviour policy.
- Tell their parent/carer, teacher or nearest staff member when they are not feeling well while in the academy.

5.3 The Academy Association

5.3.1 The Associates have a duty to:



- Ensure health and safety policies and risk assessments are inclusive of the needs of students with medical conditions.
- Ensure this Policy is effectively monitored and evaluated and regularly updated.

5.4 The Principal

5.4.1 The Principal is responsible for implementing this Policy in practice.

The Principal delegates, as appropriate, day to day decisions on individual cases.

The Principal is also responsible for:

- Making sure parents/carers are aware of this policy.
- Arranging appropriately trained cover when the member of staff responsible for students with medical needs is absent or unavailable.

5.5 Teachers and other academy staff

All Trust staff have a responsibility within their academy to:

- Understand the needs of children with health conditions who cannot attend the academy, including the social and emotional impact of their illness[es].
- Know which students have medical needs/Individual health care/management plans in their class; understand the nature of the condition and what to do should the student need extra attention.
- Ensure that students with medical conditions are not excluded unnecessarily from activities they wish to take part in.
- Be aware that student absence can affect their learning and therefore will provide appropriate extra support as necessary. For example, where appropriate and when instructed, teachers will provide work to be completed at home / hospital school.

5.6 Other health professionals

Academies will seek support and advice, as necessary, from the following, in conjunction with meeting the needs of students with medical needs:

- The Local Health Authority e.g. physiotherapists, occupational therapists.
- The School Nurse Service.
- The General Practitioner (GP), with the consent of the child's parents/carers.

6 Public Examinations

6.1 It is important to ensure reasonable adjustments in the form of access arrangements are in place when required for a student with a medical condition, in line with JCO guidelines. It is the SENDCo's responsibility to ensure that these are applied for in the appropriate time scale.

6.2 Where a student is not in attendance at the academy, it is the responsibility of the body providing the education to provide evidence and advice to assist with applications for access arrangements.

7 Removal from Academy Roll

7.1 Academies will only remove a student who is unable to attend the academy because of additional health needs where:



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

7.2 A student who is unable to attend their academy because of health needs must not be removed from the academy register without parental consent and certification from the academy medical officer, even if the LA has become responsible for the child's education. FMAT recognises the importance of continuity for children and their knowledge that they can return to their familiar surroundings and school friends can help their recovery and their educational progress.

8 Confidentiality

8.1 Academies will treat medical information confidentially. The Principal or staff with delegated responsibility will agree with parents/carers who will have access to records and information about a student (if information is withheld from staff they cannot be held responsible if they act incorrectly in giving medical assistance but otherwise in good faith).

9 Complaints

9.1 Should parents/carers or students be dissatisfied with the support provided by Fairfax Academy, they should discuss their concerns directly with the academy. If for whatever reason this does not resolve the issue, they may make a formal complaint via the Trust's Complaints Procedure.

10 Monitoring and review

10.1 FMAT's Children with Health Care Needs who cannot attend School Policy is reviewed, evaluated and updated every year. The views of students with various medical conditions are also actively sought and considered central to the evaluation process.

