

**ENSURING A GOOD EDUCATION
FOR CHILDREN AND YOUNG PEOPLE (CYP)
WITH LONG TERM MEDICAL NEEDS 5-16**

**The City of York Local Authority Policy on Access
to Education for Children and Young People who
are unable to attend school with Medical Needs**

(Updated September 2024)

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1. Introduction

This policy sets out what the City of York Council (CYC) will do to provide education for children and young people (CYP) of compulsory school age who, because of illness, or long-term medical condition, would otherwise not receive suitable education.

2. The underlying principles behind this policy

The City of York Council is committed to ensuring that all children and young people 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 CYP 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 potential within an educational context. This is particularly the case for those whose health needs prevent them from attending school for an extended period, or for those who are restricted by their health needs to attend school on a part-time or sporadic basis.

This policy aims to outline the support available that can be accessed for CYP with medical 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.

3. Roles and responsibilities of referring schools

Schools in York, (including maintained schools, maintained nursery schools, academies, alternative provision academies) are required by law to arrange a suitable education for supporting CYP at their school with medical conditions.

This duty is detailed in Section 100 of the Children and Families Act 2014¹ and in the statutory guidance entitled *Arranging Education for children who cannot attend school because of health needs*², which is produced by the Department

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

² [Arranging education for children who cannot attend school because of health needs \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/303112/Arranging_Education_for_children_who_cannot_attend_school_because_of_health_needs.pdf)

for Education in order to assist schools to understand and comply with this legislation.

Independent schools are under no legal obligation to follow the statutory guidance contained within the document ‘‘Arranging Education for children who cannot attend school because of health need².’ However, the non-statutory advice within this document is intended to assist and guide these schools in promoting the wellbeing and academic attainment of CYP with medical conditions.

The key points detailed in the statutory guidance indicate that:

- Governing bodies must ensure that arrangements are in place in schools to support CYP at school with medical conditions.
- Governing bodies should ensure that school leaders consult health and social care professionals, CYP and parents/carers to ensure that the needs of CYP with medical conditions are supported effectively.
- CYP at school with a medical condition should be properly supported so that they have full access to education, including school trips and physical education. Schools should develop a written policy for supporting CYP with medical conditions.
- There should be a named person who is responsible for the practical implementation of this policy within each school.

(CYC has a template document for schools to adapt for their setting – Appendix B and C)

4. Legal Framework for Local Authorities

Government guidance - the DfE published statutory guidance for local authorities entitled Arranging Education for children who cannot attend school because of health needs December 2023²

The Equality Act 2010¹ is also an important part of the legal framework around CYP and young people with significant medical needs.

5. Definitions

Full time – Full-time education is not defined in law, but it should equate to what the CYP would normally have in school, unless the CYP’s condition means that

full-time provision would not be in his/her best interests. The hours of face-face teaching could be fewer as the provision is more concentrated.

Physical and Health Needs Team (PHN)/Medical Needs Tuition Service (MNTS)

- a specialist team of teachers and teaching assistants (TAs) who, as part of the Specialist Teaching team, work with CYP with severe health needs who are unable to access mainstream education despite the support package provided by the school. The referral to the team must be accompanied by up-to-date medical evidence from a suitably qualified medical practitioner and evidence of implementing a Healthcare Plan and working through the Graduated Pathway to Support School Attendance³ by the referring school.

School – For the purposes of this policy, school is used to refer to any maintained school, academy, free school, independent school, or any education provision where a CYP is registered as their main education base.

Suitable – The Education Act 1996 defines a suitable education as one that is appropriate to a CYP’s age, ability, aptitude and any special educational needs he/she may have.

6. Role and responsibilities of the Local Authority

The statutory guidance is clear that there will be a wide range of circumstances where a CYP has a health need but will receive a suitable education that meets their needs without the intervention of the local authority. For example, where the CYP can still attend school with some support or where the school has made arrangements to deliver suitable education outside of school for the CYP.

A local authority is responsible for arranging suitable education for CYP of compulsory school age who, because of illness, would not receive a suitable education without such provision. The local authority does not need to become involved in such arrangements unless it has reason to believe that the education being provided by the school is unsuitable. The law does not define suitable full-time education but CYP with health needs should have provision that is equivalent to the education they would receive in school. As part of a package of support implemented upon receipt of an appropriate medical needs referral, the local authority may provide one-to-one or small group tuition, in which case

³ <https://www.yorksend.org/downloads/file/51/send-graduated-pathway-to-support-attendance-at-school>

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 CYP because of reasons relating to their physical or mental health, the local authority will endeavour to provide part-time education on a basis considered to be in the CYP best interests. This decision is made with reference to advice from relevant educational and medical professionals. In the case of a CYP who is looked after, the Local Authority is responsible for safeguarding the CYP's welfare and education. Both the Local Authority and primary carers (foster carers or residential social workers) would fulfil the parental role here and should be involved. CYP should also be part of the decisions from the start, using appropriate and creative ways to support their involvement.

The education provision will aim to achieve good academic attainment particularly in English, maths and science.

7. Named Person

It is a statutory requirement that local authorities have a named person responsible for the education of CYP with additional health needs. In York the named person is the Team Leader for the Specialist Teaching Team:

Lynne Johns

E-mail: lynne.johns@york.gov.uk

The STT Team Leader is responsible, in liaison with schools and professionals, for ensuring that the local authority's SEN team fulfils its statutory duties in relation to health needs provision for CYP.

Parents/carers can contact the STT Team Leader in order to discuss their CYP's specific circumstances relating to health needs provision.

Schools can contact the STT Team Leader in order to obtain support, advice and guidance in relation to health needs provision and their own responsibilities in supporting CYP with additional health needs, both generally and in relation to specific cases.

The STT Team Leader will also liaise with the Physical and Health Team Senior Practitioner, professionals and colleagues within both health and education as appropriate in order to ensure CYP with additional health needs are able to access a suitable education.

8. Provision in the City of York

The provision to meet the needs of Children and young people in the CYC aims to:

- Provide education for absences of **15 days or more**, consecutive or cumulative.
- Liaise with appropriate medical professionals to ensure minimal delay in arranging appropriate provision for the CYP.
- Ensure that the education CYP receive is of good quality, addresses the individual, and allows them to return successfully to a suitable educational offer in school as soon as possible.

8.1 Referrals to the Specialist Teaching Team; Physical and Health Needs Team

Schools should make appropriate referrals to the Physical and Health Needs Team for CYP with severe health needs who are unable to access a suitable education despite the support package provided by the school and where it is clear that the CYP will be away from school for 15 days or more, whether consecutive or cumulative. In these circumstances, parents/carers must provide medical evidence from a suitably qualified medical practitioner to the school and CYC that confirms:

- I. why the CYP is unable to attend school.
- II. this is likely to be for 15 days or longer, indicating an anticipated end or review date.

Statutory guidance states that a suitably qualified medical practitioner should provide this evidence. However, in order to avoid delays, the PHN Needs Team will accept evidence from a GP if the young person is under a consultant but evidence is delayed.⁴

For CYP with mental health issues there is an expectation that evidence is provided by the 'Children and Adolescent Mental Health Service' (CAMHS) (see 8.1.1). The PHN team can liaise with CAMHS in their regular meetings, schools can request an informal discussion through the PHN Senior Teacher

⁴ Evidence from a suitably qualified medical practitioner will still be required in this instance

after gaining parental consent, parents may also make a request to CAMHS to bring to the joint meetings.

For CYP who are receiving support through other Counselling Services, evidence is required from the relevant organisation.

Failure to provide the appropriate evidence will delay the referral process and the consideration of support.

Evidence must also include an expected 'end date'.

Evidence must be updated at regular intervals.

8.1.1 The CAMHS Pathway

Referral model for CAMHS to Home Tuition Statutory Service

Route A for CYP not currently working with CAMHS and not attending school for increasing periods – parents are concerned that this is due to deteriorating mental health

- Parents (and CYP) visit GP.
- If GP feels it is appropriate, the GP makes referral to SPA and completes letter for school/setting for information. The setting could use this letter as evidence for adjustments to provision if appropriate.
- If GP assess that the CYP may be unable to attend school for a short time, they will record this in a letter to setting and the setting can then use this letter as further evidence for in school adjustments and/or to support or referral to Physical and health needs teaching team (PHN).

If a referral to the PHN team is made:

- PHN team awaits outcome of triage phone call (via parents/setting) (approximately 3 weeks):
 - If triage call does not progress to Initial Comprehensive Assessment (ICA), PHN team cannot continue with the referral – there is no confirmation of mental health needs
 - If triage call does progress to ICA, the setting should send the letter of confirmation of appointment date to the PHN team. The PHN team will start work with the

CYP if it is agreed this is still the best way to support the CYP's needs.

- The PHN team will then await the outcome of the Initial Comprehensive Assessment (ICA) meeting:
 - If, following the ICA, the CYP is discharged, the PHN team will liaise with school to agree a plan for a reintegration to the setting – there is no confirmation of mental health needs
 - If, following the ICA, the CYP progresses to a CAMHS pathway, the PHN team will continue to work with the CYP if it is agreed by CAMHS that the CYP is unable to access school.
- There will be regular meetings in the setting to review progress (at least termly).
- In addition, a 'Next Steps meeting' is held at CAMHS with the PHN team (see below). This is used to discuss the best educational provision pathway and the medium-term plan for reintegration to school, given the new understanding of need.

Route B CYP currently on a CAMHS pathway (but waiting for a start date for intervention) or working with CAMHS. The CYP may have increasing periods of non-attendance to school and parents are concerned that this may be due to deteriorating mental health

- Parents, the CYP and/or setting contact CAMHS using the contact details on the outcomes letter, which followed the Initial Comprehensive Assessment, or using the contact details on current appointment letters.
- CAMHS, in liaison with professionals in setting and other agencies, offer advice regarding reasonable adjustments, which could be put in place to support need.
- If CAMHS assess that the CYP may be unfit to attend school for a short time, they will record this in a health referral form which can be found on the City of York Local Offer Page <https://www.yorks.org/learning-support-hub>

If a referral to the PHN Team is made:

- The PHN team will continue to work with the CYP in liaison with CAMHS and a multi-agency team. There will be regular meetings in the setting to review progress (at least termly).
- In addition, a 'Next Steps meeting' is held at CAMHS with the PHN team (see below) and is used to discuss the best educational provision pathway and the medium-term plan for reintegration to school, given the new understanding of need.

8.1.2 CYP with conditions such as Myalgic Encephalopathy (ME)/Chronic Fatigue Syndrome (CFS), Juvenile Arthritis, Sickle Cell, Crohns disease

For CYPs diagnosed with such or similar conditions, the provision put in place will be guided by the medical advice provided as part of the initial referral, or sought following the referral. This may include, for example, periods of school attendance, periods of rest and periods of tuition at home, in the community or the use of a Local Authority or school owned AV1 Robot <https://www.noisolation.com/uk/av1/about-av1>

8.2 Initiation of provision from the Physical and Health Needs Team

Once the referral form and evidence has been considered and a decision about the referral has been made, the Senior Practitioner will contact the school. An Initial meeting will be arranged by school to confirm the appropriate arrangements that will be put in place. The school should liaise with the parents and CYP. Parents/carers and CYPs will be invited to attend these meetings.

8.3 Ensuring CYP in the City of York with medical needs have a good education

Where support is agreed, teachers will oversee the provision for CYPs in small group or alternative community venues or, where medical advice outlines that leaving the home is a risk for the young person, in the CYP's home for a short period of time.

Before it is agreed that teaching can take place in the home, it will be necessary to carry out appropriate risk assessments. This would be

completed by a relevant professional(s) to be agreed between the parents/carers/school and CYC. Where a CYP is taught at home it is necessary for there to be a responsible adult in the house within line of sight and earshot of the lesson.

The use of electronic media – such as ‘virtual classrooms’, learning platforms, AV1 Robots and so on – can provide access to a broader curriculum, but this will generally be used to complement face-to-face education, rather than as sole provision (though in some cases, the child’s health needs may make it advisable to use only virtual education for a time).

Close liaison with the CYP’s school is essential and CYP should be kept informed about school activities and events. The CYP will remain on the school roll and the school will be expected to arrange review meetings⁵. **Up to date medical evidence will be required**⁶. It is important to link with other agencies in order to support the CYP’s educational opportunities.

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

8.4 Roles of respective parties in supporting CYP who are receiving provision from the PHN Needs Team

In all cases, effective collaboration between all relevant services is essential

8.4.1 The School’s role is to:

- inform the Specialist Teaching Team at the earliest opportunity if they are unable to provide a suitable education
- continue to be the key worker for the CYP; liaise regular with other agencies (EPs, Wellbeing service, CAMHS, SEND Services and where relevant school nurses)
- host and chair regular review meetings (at least every term), produce action plans and distribute notes of these meetings;

⁵ It is expected that these meetings would normally take place every half term

⁶ Updated medical evidence should be provided at least termly to confirm on-going need

- provide materials for an appropriate programme of work and work plans;
- provide the CYP with blocks of PSHCE work for them to work through independently
- make reasonable adjustments in order to facilitate the return to school including phased returns. For example, providing a suitable working area within the school, modified timetable etc where necessary
- maintain a plan, such as a health care plan, which records progress made towards a return to school;
- ensure all staff are kept informed appropriately;
- ensure appropriate arrangements, including entry and invigilation are made for all examinations;
- provide the CYP's academic attainment levels including any relevant examination requirements at the point of referral;
- make arrangements for SATs and GCSEs
- assess coursework;
- facilitate career interviews;
- arrange work experience placements;
- provide a named teacher with whom each party can liaise (usually the SENCO);
- be active in the monitoring of progress and the return to school, using key staff to facilitate this;
- ensure that CYP are kept informed about school social events and 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.

8.4.2 The CYP's role is to:

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

8.4.3 The parents'/carers' role is to:

- commit to an appropriate plan to return to school;

- provide up to date medical information;
- 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 CYP, the value of a return to school.
- ensure that, if sessions take place in the home, that there is an adult within eyesight and earshot of the lesson

8.4.4 The PHN Team Senior Practitioner's role is to ensure that an agreed member of the team;

- writes and has agreement to the Risk Assessment before any sessions can commence
- support reintegration to school as soon as possible;
- liaise with the named person in school;
- liaise, where appropriate, with outside agencies;
- be sensitive to the needs of the CYP and family;
- provide a flexible teaching programme;
- provide regular reports on the CYP's progress and achievements;
- provide an opportunity for the CYP to comment on their report;
- ensure appropriate course work and any other relevant material is returned to school;
- work with the mainstream school 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 CYP is able to return to school.
- provide advice and information to schools to assist with applications for access arrangements.

8.4.5 The Role of the Health professionals is to:

- ensure early identification of long-term health conditions which may result in absence from school for 15 days;

- ensure an appropriate plan is in place for the CYP to return to school;
- support schools to develop individual health care plans; training of school staff on specific interventions required; liaison with health professionals involved in supporting the CYP;
- liaise with the named person in the school and liaise with other relevant professionals;
- contribute professional advice to the CYP's My Success Plan, Health Care Plan or Education, Health and Care Plan as needed;
- provide ongoing support and advice to the school when a CYP has a life threatening or life limiting condition

8.4.6 The Role of all involved agencies 7 is to:

- work together to improve the outcomes of the CYP;
- engage with the CYP or young person and parents throughout as needed;
- attend review meetings if possible;
- provide written reports where necessary;
- give appropriate advice and support.

8.5 Return to school

The aim of the PHN Team is to support the CYP to remain in, or return to, school as soon as they are well enough. Any programme to support transition back to school is developed following discussion with the CYP, parent/carer, school, relevant health professional(s) and other involved agencies as appropriate.

In some cases, it may not be possible for the CYP to return to school on a full-time basis initially. An individual healthcare plan may be needed if the CYP has continuing medical issues, which need to be supported during school hours. Individual healthcare plans provide clarity about what needs to be done, when and by whom to support a CYP's medical condition.

⁷ Examples of other involved agencies could include Social Services, Early Help professionals, CYP and Adolescent Mental Health (CAMHS) practitioners etc.

9. CYPs who are not on a school roll

The Local Authority retains responsibility for supporting Local Authority CYP who are not on roll at a school where their health needs prevent them from accessing education. These may include CYP who are Electively Home Educated or CYP who are awaiting placement⁸.

10. CYPs who are not of compulsory school age

The Local Authority will not normally provide support for CYPs who are under or over compulsory school age. However, where CYPs 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, the Local Authority 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.

11. Hospital in-patients

Support can be provided for CYP who are in-patients at hospitals in the City of York and who are likely to remain on the Children's ward for 15 days or longer. Referrals in these cases can be made by the school or the hospital using the health referral form found on the Learning Support Hub website <https://www.yorksand.org/learning-support-hub>. With planned hospital admissions, schools should give the PHN team as much forewarning as possible, including the likely admission date and expected length of stay.

In certain instances, particularly in the case of severe mental health needs, CYP may be placed in specialist residential hospitals 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. If a CYP is placed in York (Mill Lodge) then they have access to an on-site education provision

⁸ For example, CYP who have recently arrived in the county but whose illness has prevented them from accessing school provision

where the education element is provided by CYC through the Physical and Health needs team.

CYC retain responsibility for the education of these CYP whilst they remain in hospital and upon their return to the Local authority 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 the CYP should contact either the SEN Team (for CYP with special educational needs) and/or the Specialist Teaching Team Leader. There can then be a discussion of future educational provision and plans made to ensure a smooth transition into the school/setting.

12. CYP with life limiting and terminal illness

The Local Authority will continue to provide education for as long as the CYP's parents and the medical staff wish it.

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

Appendix A

Model Policy for the Education of Children Absent due to Health needs PRIMARY SCHOOL

All Children and Young People (CYP) should continue to have access to as much education as their medical condition allows so that they are able to maintain the momentum of their education and to keep up with their studies.

The named person in school responsible for CYP unable to attend School is _____, {insert job title}.

To whom does the policy apply?

- School age children who are going to be absent from school for 15 school days or more as a result of ill health (including mental health), medical procedure or injury.
- Children who have recurring periods of absence as a result of ill health e.g.: cystic fibrosis.
- Children who are in hospital.

Provision of work

As soon as school is informed or becomes aware that a child of school age is to be absent through ill health for up to 15 school days, the class teacher will make some work available. This will usually be in core curriculum areas. The child will only be expected to complete the work if he/she is well enough. The work will be given as soon as possible after school becomes aware of the child's absence. This will be done in collaboration with parents/carers. This also applies to children who have recurring periods of absence due to ill health.

If the child is going to be absent for more than 15 days, consideration of whether school can provide a suitable education through packs of work, online work shared to the family, use of an AV1 Robot (there may be one to loan from the LA), if a suitable education cannot be provided a referral will need to be completed for teaching from the Physical and Health Needs team (PHN) and work provided will then need to be in more curriculum areas.

Monitoring Absences

The school will monitor absences due to ill health and takes all appropriate action to have all children in school.

Teaching away from school

If a child is to be away from school for a medical reason for more than 15 school days, the named person must first of all consider whether school can provide a suitable education through packs of work, online work shared with the family, or through the use of an AV1 Robot (there may be one to loan from the LA). If a suitable education cannot be provided initiate a referral for teaching through the Physical and Health Needs Teaching Team using the form on the Learning Support Hub website⁹. The parent/carer will need to be within eyesight and earshot of the lesson if a child is educated at home. In most cases, unless medical advice states that this would be a risk factor, the tuition will take place in a venue away from home e.g. a Children's Centre or library or at the small group provision. Access to this teaching is flexible, depending on the child's health and medical appointments. The SENCo should make a referral by completing the referral form. In these circumstances parents/carers must provide medical evidence to the school which confirms;

- (i) why the child is unable to attend school
- (ii) this is likely to be for 15 days or longer, preferably indicating an end date.

Statutory guidance states that evidence should be such as that provided by a suitably qualified medical practitioner. However, in order to avoid delays the PHN Needs Team will accept evidence from a GP if the young person is under a consultant but evidence is delayed

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

The class teacher and named person will;

⁹ [Learning support hub – York SEND Local Offer](#)

- Consider if a suitable education can be provided by school without the intervention of the Local Authority
- If a suitable education cannot be provided liaise with the PHN Team to enable them to draw up a plan to provide education for a child who is likely to be off school for more than 15 school days and for children with recurrent absence as a result of ill health.
- provide resources for the full curriculum via the parent/carer so that the CYP can follow the programmes of work as far as he or she is able.
- provide information about the child's capabilities and educational progress e.g. special educational needs (SEN) within 5 working days.
- ensure that children who are unable to attend school because of health needs are kept informed about school social events and extracurricular activities that may be appropriate for them to attend.
- encourage and facilitate liaison and communication with peers.
- liaise with the Teaching Team to formulate a plan for the child to return to school and ensure that peers are involved in supporting this return.

Partnership with parents/carers and children

The views of the child and families should be central to planning to meet the child's needs.

Parents/carers should liaise with the school so that the child can be provided with resources to support their learning as soon as they become able to cope with it for absences that are expected to last for 15 working days or are not part of a pattern of recurring illness.

Parents/carers will

- be consulted before teaching begins at home or in the community.
- Always be on the premises when a child is taught at home and be within eyesight and earshot of the sessions.
- Be key in supporting the continuum of educational provision and the links between home and school.
- be central to planning the education programme and information share about their child's performance.

Children in hospital

Support can be provided for children who are in-patients in hospitals in York and who are likely to remain on the Children's ward for 15 days or longer.

Examinations

If a Year 6 child is not in school during the SATs it is the responsibility of the school to make alternative arrangements if appropriate

If a Year 6 child is absent for less than 15 school days including SATs week, the decision regarding SATs will be made by the head teacher.

Appendix B

Model Policy for the Education of Children Absent due to Health Needs

SECONDARY SCHOOL

All Children and Young People (CYP) should continue to have access to as much education as their medical condition allows so that they are able to maintain the momentum of their education and to keep up with their studies.

The named person in school responsible for CYP unable to attend School is _____, {insert job title}.

To whom does the policy apply?

- School age CYP who are going to be absent from school for 15 school days or more as a result of ill health (including mental health), medical procedure or injury.
- CYP who have recurring periods of absence as a result of ill health e.g.: cystic fibrosis.
- CYP who are in hospital.

Provision of work

As soon as school is informed or becomes aware that a CYP of school age is to be absent through ill health for up to 15 school days, the named teacher will make appropriate work available. This will usually be in core curriculum areas. The CYP will only be expected to complete the work if he/she is well enough.

The work will be given as soon as possible after school becomes aware of the CYP's absence. This will be done in collaboration with parents/carers. This also applies to CYP who have recurring periods of absence due to ill health.

If the CYP is going to be absent for more than 15 days, consideration of whether school can provide a suitable education through packs of work, online work shared to the CYP, use of an AV1 Robot (there may be one to loan from the LA), if a suitable education cannot be provided then a referral form will need to be made for teaching from the Physical and Health Needs team (PHN) using the referral form on the Learning Support Hub webpage⁹ and work provided will then need to be in more curriculum areas.

Monitoring Absences

The school will monitor absences due to ill health and takes all appropriate action to have all children in school.

Teaching away from school

If a CYP is to be away from school for a medical reason for more than 15 school days, the named person must first consider whether school can provide a suitable education through packs of work, online work shared to the family, use of an AV1 Robot (there may be one to loan from the LA), if a suitable education cannot be provided initiate a referral for teaching through the Physical and Health Needs Teaching Team. The parent/carer will need to be within line of sight and earshot if a CYP is educated at home. In most instances, the tuition will take place in a venue away from home, unless medical advice outlines that this is a risk factor e.g. our small group provision, a Children's Centre or library. Access to this teaching is flexible, depending on the CYP's health and medical appointments. The named person should make a referral by completing the referral form. In these circumstances parents/carers must provide medical evidence from a consultant to the school and CYC which confirms;

(iii) why the CYP is unable to attend school

(iv) this is likely to be for 15 days or longer, preferably indicating an end date.

Statutory guidance states that evidence should be such as that provided by a suitably qualified medical practitioner. However, in order to avoid delays the PHN Needs Team will accept evidence from a GP if the young person is under a consultant but evidence is delayed⁴.

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

The SENCo and/or named person will;

- Consider if a suitable education can be provided by school without the intervention of the Local Authority
- If a suitable education cannot be provided liaise with the PHN Team to enable them to draw up a Plan to provide education for a CYP who is likely to be off school for more than 15 school days and for CYPs with recurrent absence as a result of ill health
- provide resources for the full curriculum via the parent/carer so that the CYP can follow the programmes of work as far as he or she is able
- provide information about the CYP's capabilities and educational progress e.g. special educational needs (SEN) within 5 working days
- ensure that children who are unable to attend school because of health needs are kept informed about school social events and extracurricular activities that may be appropriate for them to attend. They should also encourage and facilitate liaison and communication with peers
- liaise with the Teaching Team to formulate a plan for the child to return to school and ensure that peers are involved in supporting this return.

Partnership with parents/carers and CYP

The views of CYP and families should be central to planning to meet the CYP's needs.

Parents/carers should liaise with the school so that the CYP or young person can be provided with resources to support their learning as soon as they become able to cope with it for absences that are expected to last for 15 working days or are not part of a pattern of recurring illness.

Parents/carers will

- be consulted before teaching begins at home or in the community.
- be within eye line and earshot when a CYP is taught at home.

- be key in supporting the continuum of educational provision and the links between home and school.
- be central to planning the education programme and information share about their CYP's performance.

Children in hospital

Support can be provided for CYP who are in-patients in hospitals in York (who are likely to remain on the Children's ward for 15 days or longer).

Examinations

If a KS4 student is not in school during the GCSEs it is the responsibility of the school to make alternative arrangements where appropriate.