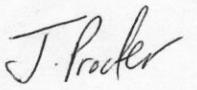


PIONEER

FEDERATION

Supporting children with
health needs who cannot
attend school policy

Review cycle	1 / 2 / 3 years	
Approved/Adopted by	Full Governing Body / Executive Headteacher	Date: December 2024
Changes made in this review cycle		
Linked policies	Attendance Policy Child Protection and Safeguarding Policy Health and Safety Policy Supporting Pupils with Medical Conditions SEND policy	
Signed		Date: December 2024
Position	Executive Headteacher	
Date of next Review	December 2027	

It is a primary aim of our Federation that every member of the schools' communities feels valued and respected, and that each person is treated fairly. This policy reflects the vision and aims of The Pioneer Federation by:

- Providing clear procedures for supporting pupils unable to attend school.
- Ensuring the inclusion of all pupils
- Encouraging staff, parents and children to maximise the learning experience in order that all children reach their full potential.

Click on each School's badge to see the Vision and Values of individual schools

Chiddingly Primary School 	East Hoathly CE Primary School and Nursery 
St Mary the Virgin CE Primary School 	Park Mead Primary School 

Introduction

Pioneer Federation works in partnership with pupils, parents/carers, East Sussex County, medical services, other professionals and education providers to enable children and young people with medical needs who are unable to attend school to receive education in a hospital setting or at home.

Our schools will be proactive in promoting the education entitlement of pupils on roll and in securing effective provision. This applies to pupils unable to attend school for reasons of sickness, injury or mental health needs where a medical practitioner considers that a child should or could not attend school.

This policy is based upon the statutory guidance for Local Authorities 'Ensuring a good education for children who cannot attend school because of health needs', January 2013. This comes under the category of 'educated off site' when the child remains on the school roll and is educated temporarily in a hospital setting or through home tuition.

The principles underlying this policy are:

- Pioneer Federation recognises that children absent for medical reasons are entitled to continuity of education as far as their condition permits and acknowledges that it has a central role to play in securing and ensuring the continuity of education.
- The education provided shall be of high quality and as broad and balanced as possible such that reintegration is achievable as smoothly as possible.

Schools' Responsibility

Where a child is absent from school for medical reasons, the school will provide education tasks and resources for use at home when the child is well enough to engage in education. When an absence is known to be more than 15 continual days or exceeds 15 continual days, then schools will seek advice from East Sussex Teaching and Learning Provision (TLP) to ensure the appropriate support/provision is in place.

The School will aim to ensure maximum continuity of education for the pupil by providing:

- Medium term planning
- Programmes of study/schemes of work
- Appropriate resources
- Information relating to the pupil's ability, progress to date, assessment data, SATs results and special educational needs.

Where practical, the School will host review meetings as the pupil remains on the school roll and is therefore the School's responsibility. Where pupils have recurrent admissions or have a planned admission to hospital, the School will aim to provide a pack of work for the pupil to take into hospital with them.

The School will foster communication and sharing of best practice between teaching staff at the school and the staff providing the education otherwise.

Reintegration into the School

The School will work with providers of education, doctors, educational psychologists, and any other relevant professionals, the parents/carers and the pupil themselves to plan a gradual and sensitively orchestrated reintegration into school. The School will ensure that the pupils and staff in the School who have maintained contact with the pupil who has been absent will play a significant role helping the pupil to settle back into school.

The School will accept part-time attendance where pupils are medically unable to cope with a full day, until the pupil is able to attend for full school days. The School will make arrangements for pupils with mobility problems to return to school, taking account of health and safety issues, organizing risk assessment and seeking advice on lifting and handling procedures where necessary.

The impact on staff will be taken into account and additional support may be required from the SEND devolved budget or via review and referral to the SEND panel. Throughout the absence, the School will maintain contact with both parents/carers and the pupil. This will include invitations to events and productions at the School as well as regular communication via letters, newsletters or e-mail. Both the school and the education providers will support and advise pupils and their parents/carers, as appropriate, during the absence.

The School should expect to receive regular reports and assessment of pupil progress from the service provider during the pupil's absence and a folder of work on return to school. The Head of School, usually through the liaison member of staff, will ensure that all relevant staff are aware of a pupil's absence and of their responsibility towards maintaining continuity of education for the child.

The Head of School will report to the Executive Headteacher on the educational provision which has been made for pupils absent for medical reasons.

References

- Access to Education for Children and Young People with Medical Needs, DfES 0025/2002.
- The Education of Children with Medical Needs, Ofsted HMI 1713, pub. 2003 5.

Monitoring The Inclusion Lead will provide staff with regular summaries of the impact of this policy on the practice of the school, and will be involved in supporting teachers who draw up intervention plans for children