



# **The Burgess Hill Academy**

## **Children with Health Needs who Cannot Attend School**

### **Policy**

|                          |                  |              |                       |
|--------------------------|------------------|--------------|-----------------------|
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## 1. Purpose

The Burgess Hill Academy is committed to ensuring that students who cannot attend the academy because of physical or mental-health needs continue to receive suitable education, remain connected to academy life and are supported to return as soon as this is medically appropriate.

This policy sets out how the academy will:

- identify students whose health needs are affecting attendance;
- make reasonable adjustments and use its best endeavours to support attendance;
- provide appropriate short-term education where the student is well enough to learn;
- work with the relevant local authority where its section 19 duty may apply;
- maintain safeguarding, curriculum, SEND and pastoral oversight;
- monitor the implementation and impact of provision;
- plan a safe, supported and timely reintegration;
- ensure that unauthorised absence is addressed through the Attendance Policy rather than treated as medical absence.

The response will be proportionate to the individual student. The academy will not tie provision to one named provider, digital platform or fixed review interval where local arrangements or the student's needs may change.

## 2. Principles

- Attendance at the academy is the default and is normally the best way for students to access education, relationships and support.
- Physical and mental-health needs will be considered with equal seriousness.
- The academy will not wait for a formal diagnosis before making reasonable classroom or attendance adjustments where a clear need is evident.
- Remote education may support continuity but is not automatically suitable, sufficient or equivalent to attending in person.
- Provision will be ambitious, appropriately paced and informed by the student's health, age, ability and curriculum stage.
- Students will remain on roll unless a lawful ground for deletion applies.
- Plans will identify intended outcomes, named responsibilities and review points.
- Support will be directed towards full-time attendance wherever this is safe and appropriate.
- Safeguarding, SEND, equality, workload and financial implications will be considered.

## 3. Legal and statutory framework

This policy has regard to:

- section 19 of the Education Act 1996;
- section 100 of the Children and Families Act 2014;
- the Equality Act 2010;
- the Special Educational Needs and Disability Code of Practice: 0 to 25 years;
- Education for children with health needs who cannot attend school: statutory guidance for local authorities;
- Supporting pupils at school with medical conditions: statutory guidance;
- Working together to improve school attendance, updated July 2026;



- Keeping Children Safe in Education 2026;
- the School Attendance (Pupil Registration) (England) Regulations 2024;
- current West Sussex procedures for children unable to attend because of health needs.

Under section 19 of the Education Act 1996, the local authority must arrange suitable education for compulsory-school-age children who, because of illness or other reasons, would not otherwise receive it. Statutory guidance states that provision should be arranged as soon as it is clear that a child will be away from school for 15 school days or more, whether consecutive or cumulative, and where suitable education would not otherwise be available.

The academy's role is not displaced when the local authority arranges education. The academy remains responsible for cooperation, information sharing, curriculum liaison, safeguarding contact, SEND coordination, monitoring and reintegration.

#### **4. Scope**

This policy applies to students on roll who cannot attend, or can attend only partially, because of a verified physical or mental-health need. It may include students who are:

- receiving treatment in hospital;
- recovering from significant illness, injury or surgery;
- living with a long-term or fluctuating condition;
- experiencing a clinically significant mental-health difficulty;
- unable to access the site temporarily despite reasonable adjustments;
- receiving education through a local-authority or commissioned provider.

It does not create an entitlement to work during unauthorised absence, family holidays, ordinary short-term illness or absence where the academy has not accepted the reason provided. These matters will be managed under the Attendance Policy.

#### **5. Definitions**

##### **5.1 Suitable education**

Suitable education is efficient education suitable to the student's age, ability, aptitude and any special educational needs. It should normally be full-time unless the student's health means that full-time provision would not be in their best interests.

##### **5.2 Health needs**

Health needs may include physical illness, injury and clinically recognised mental-health needs. The presenting difficulty, its functional impact and the education the student can manage are more important than a diagnostic label alone.

##### **5.3 Medical evidence**

The academy and local authority may require appropriate evidence from a relevant health professional. Evidence should, where possible, explain the condition, likely duration, impact on attendance and learning, treatment or



management plan, and recommendations about education or reintegration. The academy will not insist on one specific form of evidence where equivalent reliable information is available.

## **6. Identifying a case**

A case may be identified through attendance monitoring, information from parents, medical or mental-health professionals, safeguarding or SEND work, hospital communication, or a pattern of repeated health-related absence.

Where absence is likely to become prolonged or cumulative, the relevant leaders will establish:

- what is known and what remains unclear;
- whether the student is medically able to learn;
- the reasonable adjustments already tried;
- whether attendance can be maintained safely in full or in part;
- the likely duration and pattern of absence;
- the student's curriculum, examination, SEND and safeguarding needs;
- whether the local authority should be notified or a referral considered;
- the immediate education and contact arrangements;
- one lead for coordination and the first review point.

## **7. Initial academy response**

The academy will initially use its best endeavours to maintain access to education and support attendance. Depending on the case, this may include:

- reasonable adjustments to lessons, routines, movement or the physical environment;
- an Individual Healthcare Plan;
- temporary changes to rooming or lesson access;
- pastoral or SEND support;
- access to a quiet or supervised base;
- adjusted start, finish or transition arrangements;
- short-term remote or printed learning where the absence is authorised and the student is well enough;
- liaison with health professionals;
- a temporary part-time timetable in exceptional circumstances;
- early reintegration planning.

A temporary part-time timetable will only be used where it is necessary, agreed with parents, time-limited, reviewed regularly and directed towards full-time attendance. It will not be used as an informal means of excluding a student or managing behaviour.

## **8. When the local-authority duty may apply**

The academy will contact or refer to the relevant local-authority service promptly where it appears that a compulsory-school-age student:

- cannot attend because of health needs;
- is likely to miss 15 school days or more, whether consecutive or cumulative;
- is medically able to engage with some education; and



- would not otherwise receive suitable education.

The academy will not delay contact until the fifteenth day where the likely duration is already clear. Local-authority decisions and referral requirements will be followed as they apply at the time.

The West Sussex policy provided for reference confirms the 15-day threshold and the expectation that schools, the local authority, health services and providers work together. It also emphasises continued curriculum access, contact with school life and tailored reintegration. The academy adopts those principles without naming an individual officer or provider whose role may change.

## **9. Responsibilities of the academy**

The academy will:

- maintain the student on roll unless a lawful ground for removal applies;
- maintain accurate attendance records using the correct statutory codes;
- remain in regular contact with the student and family;
- share relevant information lawfully with the local authority, provider and health professionals;
- provide curriculum plans, resources and assessment information;
- identify priority learning, including examination courses;
- consider SEND provision, reasonable adjustments and access arrangements;
- monitor attendance at and engagement with commissioned provision;
- respond promptly where provision is not taking place or is not suitable;
- keep the student connected to academy life where appropriate;
- coordinate reintegration;
- review the impact of arrangements through established academy systems.

## **10. Responsibilities of the local authority**

Where the statutory duty applies, the local authority is responsible for arranging suitable education. The local authority will determine the form, location, amount and provider of education in accordance with the law, statutory guidance and the student's needs.

The academy will cooperate constructively but will not state that responsibility has permanently "transferred" away from the academy. Education, safeguarding and reintegration require continued joint working.

## **11. Education arranged by the academy**

For an authorised health absence, where the student is well enough to learn and before or alongside local-authority provision, the academy may provide:

- work linked to the planned curriculum;
- digital or printed resources;
- recorded explanations or approved online materials;
- teacher feedback at an appropriate frequency;
- targeted contact with subject staff;
- Learning Support Assistant input where agreed;
- reading, revision or examination preparation;
- access to Microsoft Teams or, following the academy's planned transition, Google Classroom.



The exact offer will depend on the duration, student need, staffing capacity and what is educationally effective. Teachers will not normally be expected to deliver a separate live timetable alongside a full in-person timetable. Work will not be provided where absence is unauthorised. Catch-up and reintegration support may be provided when the student returns.

## **12. Curriculum and assessment**

The academy will seek to maintain continuity with the curriculum studied in school. Priority will be given to:

- essential knowledge and skills;
- English, mathematics and science;
- courses leading to public examinations;
- subjects required for the student's intended pathway;
- reading and literacy;
- preparation for transition or post-16 destinations.

The amount and pace of work will reflect medical advice and what the student can reasonably manage. A reduced programme because of health need(s) will not be confused with low expectations.

Teachers and providers will share information about work completed, understanding, assessment and gaps. Where appropriate, the academy will consider examination access arrangements, special consideration and liaison with awarding bodies.

## **13. Attendance and engagement**

The reason for absence and the student's engagement with education are separate matters. The academy will use the appropriate statutory attendance code and record participation in alternative or remote education separately.

The academy will monitor:

- attendance at commissioned sessions;
- completion of agreed work;
- contact with the student and family;
- barriers to engagement;
- changes in health or capacity;
- whether provision remains suitable;
- progress towards reintegration.

Non-engagement will be explored sensitively. It may indicate worsening health, unmet SEND, unsuitable provision, safeguarding concerns, technical barriers or unauthorised absence.

## **14. Safeguarding**

The academy's Safeguarding and Child Protection Policy continues to apply. Students absent because of health needs may become less visible and more vulnerable.

The academy will:

- maintain planned welfare contact;
- identify one clear route for safeguarding concerns;



- share information with providers on a need-to-know basis;
- follow up unexplained non-contact or non-attendance;
- undertake or coordinate welfare visits where appropriate;
- liaise with Children's Social Care, health professionals or police where required;
- ensure that online contact follows professional and data-protection expectations.

Any immediate safeguarding concern must be referred to the Designated Safeguarding Lead without delay.

### **15. SEND, disability and Education, Health and Care Plans**

The academy will consider whether the health difficulty overlaps with SEND or disability and whether reasonable adjustments could enable attendance or access to education.

For a student with an Education, Health and Care Plan, the academy will:

- consider how specified provision can continue;
- liaise with the local authority and relevant professionals;
- provide information to the education provider;
- monitor whether provision is delivered;
- consider whether an early annual review is required;
- ensure that health-related absence does not result in SEND provision being overlooked;
- plan transition and reintegration carefully.

### **16. Mental-health needs**

Mental-health difficulties will be treated with the same seriousness as physical health needs, while maintaining high expectations for attendance and recovery.

The academy will avoid:

- requiring a diagnosis before offering reasonable support;
- assuming that absence is always clinically necessary;
- using remote education as the default response to anxiety;
- creating indefinite arrangements without review;
- placing responsibility for treatment on teaching staff.

Plans will distinguish between medical treatment, pastoral support, reasonable adjustments and education.

Where appropriate, the academy will work with health professionals to support a gradual and sustainable return.

### **17. Inclusion Panel**

Where appropriate, cases will be reviewed through the academy's fortnightly Inclusion Panel. The panel will bring together relevant evidence from attendance, safeguarding, SEND, curriculum, behaviour, medical and pastoral systems.

The panel may:

- confirm the problem being addressed;
- review whether agreed provision has occurred;
- identify gaps in evidence or support;
- allocate actions to one named owner;



- set a review point;
- consider local-authority referral or escalation;
- coordinate alternative provision and reintegration;
- monitor risks and impact.

The panel will not replace urgent safeguarding action, medical decision-making or statutory local-authority processes.

## **18. Keeping in touch with academy life**

Where appropriate and consistent with the student's health and wishes, the academy will help the student remain connected through:

- regular contact with a named adult;
- newsletters and academy information;
- appropriate invitations to events;
- contact with tutors or peers where safe and agreed;
- careers, options and post-16 information;
- recognition and celebration;
- transition information.

Contact will be purposeful and supportive rather than placing pressure on a student who is acutely unwell.

## **19. Reintegration**

Reintegration planning will begin early and will be reviewed as health and circumstances change.

A reintegration plan may include:

- the intended return date and pattern;
- medical and risk-management arrangements;
- reasonable adjustments;
- a temporary phased return where necessary;
- priority curriculum content and catch-up;
- a named key adult;
- rooming, movement or social-time arrangements;
- support for anxiety, relationships or confidence;
- communication with staff;
- review dates and success measures.

A phased return must be the shortest necessary arrangement and move towards full-time attendance. The plan will be changed where evidence shows that it is not working.

## **20. Roles and responsibilities**

### **20.1 Headteacher**

- ensure that the academy meets its duties;
- allocate clear senior responsibility;
- ensure cooperation with the Trust and local authority;



- ensure appropriate resources and oversight;
- address prolonged or unsuitable arrangements.

## **20.2 Assistant Principal responsible for Safeguarding and Attendance**

- provide strategic oversight;
- ensure attendance, safeguarding and health information are joined up;
- ensure cases are identified and escalated promptly;
- oversee contact with the relevant local-authority service;
- monitor reintegration and report risks to the Headteacher.

## **20.3 Vice Principal responsible for Inclusion and Personal Development and SENDCo**

- advise on SEND, disability and reasonable adjustments;
- coordinate EHCP considerations;
- support provision planning and reintegration;
- contribute to the Inclusion Panel review.

## **20.4 Curriculum and subject leaders**

- identify appropriate curriculum priorities;
- coordinate resources and teacher communication;
- monitor quality and workload;
- support examination and transition planning.

## **20.5 Pastoral and attendance staff**

- maintain contact and records;
- monitor attendance and engagement;
- coordinate meetings and agreed actions;
- escalate welfare concerns;
- support reintegration.

## **20.6 Teachers**

- provide appropriate curriculum information and work where agreed;
- maintain reasonable contact and feedback;
- make agreed adjustments;
- report concerns about engagement, workload or wellbeing;
- support return to classroom learning.

## **20.7 Parents and carers**

- provide timely and accurate information;
- share relevant medical evidence;
- keep contact details current;
- support engagement with agreed education where the student is able;
- attend reviews;
- support the reintegration plan;



- inform the academy of material changes.

## **20.8 Students**

- engage with education to the extent they are medically able;
- communicate when work or arrangements are not manageable;
- participate in planning and review;
- follow safeguarding and online expectations;
- work towards return to attendance.

## **21. Information sharing and data protection**

Information will be shared lawfully, proportionately and on a need-to-know basis. The academy may share relevant educational, safeguarding, SEND and medical information with the local authority, provider and professionals where this is necessary to arrange suitable education or protect the student.

Records will distinguish between confirmed evidence, professional judgement, proposed action and intended impact.

## **22. Complaints and disagreement**

Concerns about academy arrangements should normally be raised with the relevant pastoral or attendance leader, then the senior leader responsible for safeguarding and attendance. Formal complaints will be considered under the Sussex Learning Trust Concerns and Complaints Policy.

Complaints about education arranged by the local authority should be raised through the local authority's published process. EHCP decisions may be subject to separate disagreement-resolution, mediation or tribunal arrangements.

## **23. Related policies**

- Attendance Policy;
- Remote Education Policy;
- SEND Policy and SEND Information Report;
- Supporting Students with Medical Conditions Policy;
- Safeguarding and Child Protection Policy;
- Alternative Provision procedures;
- Accessibility Policy and Plan;
- Curriculum Policy;
- Teaching, Learning and Assessment Policy;
- Examinations procedures;
- Concerns and Complaints Policy.

## **24. Monitoring and review**

The academy will review individual arrangements at intervals appropriate to the student's circumstances. Reviews will consider:

- whether the provision was delivered;
- whether the student could access it;



- progress and curriculum continuity;
- attendance and welfare;
- student and parent views;
- health and professional advice;
- SEND and reasonable adjustments;
- whether the local-authority response remains suitable;
- the next step towards reintegration.

This policy will be reviewed annually and sooner where legislation, statutory guidance, local-authority procedures or academy arrangements change.

### Appendix 1: Case-planning framework

| Element                    | Required information                                               |
|----------------------------|--------------------------------------------------------------------|
| Reason and evidence        | Health need, impact and information source                         |
| Current attendance         | Sessions missed and expected duration                              |
| Student capacity           | What education the student is medically able to manage             |
| Adjustments                | What has been tried and what is proposed                           |
| Education                  | Curriculum, provider, amount, platform or materials                |
| Safeguarding and welfare   | Contact and escalation arrangements                                |
| SEND and medical           | EHCP, healthcare plan, reasonable adjustments and specialist input |
| Lead                       | One named academy coordinator                                      |
| Review                     | Date or trigger for review                                         |
| Reintegration              | Intended route back to full-time attendance                        |
| Evidence of implementation | How leaders will know the plan happened                            |
| Impact                     | What improved for the student                                      |



### Document Version Control

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