

Newham Community Learning - Children with health needs who cannot come to school

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Applies to: Newham Community Learning

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1. Overview of the Policy Management Process

1.1. Document history

Date	Revision	Version number (substantive revisions are allocated a new whole number; minor revisions are designated by the addition of a consecutive decimal point)
Dec 2022	Reviewed in line with current guidance and for use across primaries and secondaries at Newham Community Learning This policy follows the DfE's 2013 guidance regarding provision for children with additional health needs	v.1.0
Feb 2023	Taken to the Standards and Community Cttee for review prior to presentation to the Trust Board in March 2023	v.1.0

1.2. Review and approval

The Policy applies to the primary schools in the Trust. It is reviewed by the Executive Team (and/or their delegates) and is then presented to the Trust Board for approval (via a relevant board committee if appropriate).

It is reviewed in line with the Trust Policy Review Schedule.



2. Newham Community Learning - Children with health needs who cannot come to school

2.1. Introduction and purpose

The Trust Board of Newham Community Learning has agreed this policy, which is applicable to all schools within the Trust. It ensures that as a collective, we work together to provide an education to all children on our school rolls.

As a Newham based Trust, we have a close working relationship with the local authority, and work in partnership with local authority colleagues to ensure that children have access to suitable education.

This policy aims to ensure that:

- Suitable education is arranged for pupils on roll who cannot attend school due to health needs
- Pupils, staff and parents understand what the school is responsible for when this education is being provided by the local authority.

It is written to articulate how the Trust aims to effect:

The Government's policy intention is that all children, regardless of circumstance or setting should receive a good education to enable them to shape their own futures. Therefore alternative provision and the framework surrounding it should offer good quality education on par with that of mainstream schooling, along with the support pupils need to overcome barriers to attainment. This support should meet a pupil's individual needs, including social and emotional needs, and enable them to thrive and prosper in the education system.

The policy takes into account that health needs of children may change over time, and that that a flexible and responsive approach is key.

2.2. Legislation and guidance

This policy reflects the requirements of the [Education Act 1996](#). It also reflects the DfE's 2013 guidance [Ensuring a good education for children who cannot attend school because of health needs](#)

This policy also reflects the requirements of the Equality Act 2010.



It is also based on guidance provided by our local authority. This policy complies with our funding agreement and articles of association.

2.3. Roles and responsibilities of our schools and working with the LA

The Trust provides for the education of all children and young people on roll at its schools. However, the local authority has specific duties and responsibilities where children are not able to attend school due to health conditions.

The law does not specify the point during a child's illness when it becomes the LA's responsibility to secure for the child suitable full-time education. More generally, as stated in the DfE guidance: *'the LA should be ready to take responsibility for any child whose illness will prevent them from attending school for 15 or more school days, either in one absence or over the course of a school year, and where suitable education is not otherwise being arranged'*. (p. 8)

The guidance goes on to state that *'there is no absolute legal deadline by which LAs must have started to provide education for children with additional health needs (unlike for excluded children, where provision must begin by the sixth day of the exclusion). LAs should, however, arrange provision as soon as it is clear that an absence will last more than 15 days, and it should also do so at the latest by the sixth day of the absence, aiming to do so by the first day of the absence. Where an absence is planned, for example, for a stay or recurrent stays in hospital, LAs should make arrangements in advance to allow provision to begin from day one'*.

The guidance provides more detail regarding the roles and responsibilities of the school and the LA where the child has complex or long term needs, which may necessitate prolonged stays in hospital.

At all times, our schools ensure that they work closely with the local authority, to ensure that any transition to education provided by the local authority is as smooth as possible. This includes the provision of information about the child's progress and attainment, and, where applicable, information about any specific needs of the child. Learning materials relevant to the child will also be provided to the local authority by the school.

The school will maintain contact with the child wherever possible, to ensure safe and appropriate access to school events and clubs wherever this is feasible as well as facilitating and maintaining contact with peers. This could take the form of letter writing, remote collaboration in activities using google classroom for instance and online video conferencing.



The school will continue to liaise closely with other providers during a child's absence in order that health needs can be met and work with other providers to manage the transition back into a school setting once those needs can be met in a school setting.

2.4. Roles and responsibilities of the local authority

The roles and responsibilities of the local authority are clearly articulated in the [DfE's 2013 guidance](#). Key points have been copied and pasted below:

Local authorities must:

- Arrange suitable¹ full-time^{2 3} education (or as much education as the child's health condition allows) for children of compulsory school age who, because of illness, would otherwise not receive suitable education.

Local authorities should:

- Provide such education as soon as it is clear that the child will be away from school for 15 days or more, whether consecutive or cumulative. They should liaise with appropriate medical professionals to ensure minimal delay in arranging appropriate provision for the child.
- Ensure that the education children receive is of good quality, as defined in the statutory guidance *Alternative Provision* (2013), allows them to take appropriate qualifications, prevents them from slipping behind their peers in school and allows them to reintegrate successfully back into school as soon as possible.
- Address the needs of individual children in arranging provision. 'Hard and fast' rules are inappropriate: they may limit the offer of education to children with a given condition and prevent their access to the right level of educational support which they are well enough to receive. Strict rules that limit the offer of education a child receives may also breach statutory requirements.

The guidance goes on to state that as per Section 19 of the Education Act 1996, local authorities '*are responsible for arranging suitable full-time education (or part-time when appropriate for the child's needs) 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 would normally attend mainstream schools, including Academies, Free Schools, independent schools and special schools, or where a child is not on the roll of a school. It applies equally whether a child cannot attend school at all or can only attend intermittently*' p. 6.



The guidance goes on to state that *'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. If they receive one-to-one tuition the hours of face-to-face provision could be fewer as the provision is more concentrated'*.

2.5. Provision in Newham

As per the circumstances described above, Trust schools work closely with local authority colleagues in order to provide every child with the best possible education. This includes:

- Liaising with the LA's attendance management team as soon as possible;
- Providing a programme of work for the child to follow (this may include access to various online learning resources);
- Providing as much information as possible about the child's needs and circumstances;
- Working with the LA and other professionals involved in the child's care;
- Ensuring that the child continues to feel part of the school community - including with friends and the broader peer group; and
- Keeping channels of communication open at all times.

The local authority ensures that suitable arrangements are put in place so that the child's education can continue. This could include some or all of the following:

- Outreach 1:1 teaching in your home or the community
- Virtual learning (if your child is at Key Stage 3 and Key Stage 4)
- Access to small supported teaching groups
- Access to teaching and learning throughout a hospital stay
- A mix of both based on your child's needs.

The local authority is also responsible for ensuring that the child:

- Has access to education as if they have been absent from school for 15 days or more
- Has access to a good quality education similar to that in school so they can
- Keeps up with children of the same age
- Can easily return to school
- Doesn't miss out on taking any exams.

Further details of Newham's current arrangements can be found on the [Newham webpage - illness and your child's education](#).



2.6. Identification and intervention

Where children have complex or long-term health issues, the Trust recognises that the pattern of illness can be unpredictable. In such circumstances, the LA will discuss how best to meet the child's needs, in consultation with parents, clinicians, school staff and, where appropriate, with the child.

Further information is provided in the DfE guidance - p.9.

2.7. Public examinations

Arrangements will be made for the child to sit public examinations, where this is considered by the child's support team to be in his/her best interests. Where the child's circumstances are such that awarding bodies may make special arrangements to support the taking of a public examination, the school and the LA will work together to make any necessary arrangements.

2.8. Working together – with parents/carers, children, health services and schools

The role of parents and carers is crucial in the provision of suitable education for their child. Parents and carers should be involved in decisions relating to their child's education, and are able to provide important information that will help inform the best course of action. Where appropriate, the child's involvement should also be sought. In the case of looked after children, the LA is responsible for safeguarding the child's welfare and education.

In all cases, effective collaboration between all relevant parties is essential to delivering effective education for children with additional health needs. This applies whether the child is in hospital or at home.

The local authority and the school are aware of the need to ensure that the child remains on the school's roll, unless specific conditions apply (these are laid out in p. 9 of the DfE guidance).

2.9. Reintegration into school

When reintegration into school is anticipated, the LA's attendance management team will work with the school to ensure that pupils receive the necessary support they need to facilitate this process. A member of the team will hold a meeting with the appropriate teacher from the school and the pupil's parent. In many cases a gradual reintegration will take place with a reduced timetable - but these arrangements will be based on the particular needs of each child.



Members of the attendance management team may work alongside a pupil when they are returning to school so a good handover takes place and the pupil feels confident in their return.

2.10. Provision for siblings where a child has to remain in a hospital outside of Newham

When treatment of a child's condition means that his or her family have to move nearer to a hospital, and there is a sibling of compulsory school age, the local authority into whose area the family has moved will ensure that the sibling is offered a place, where provision is available, for example, in a local mainstream school or other appropriate setting.

