# Trinity Academy Richmond

***RESPECT PERSEVERANCE TRUST***

***'Though it is the smallest seed, yet when it grows, it is the biggest of all plants and becomes a tree, so that the birds come and make their nests in its branches.'***
***Matthew 13: 31-32***

# Children with Health Needs who cannot attend school Policy

**Published: September 2026**
**Review date: September 2027**

**Aims**

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

**Legislation and guidance**

This policy reflects the requirements of the Education Act 1996.

It also based on guidance provided by our local authority.

**The responsibilities of the school**

**The School's role is to:**

Have a named person (The SENCO) for each child/young person open to the MES who is responsible for liaising with the MES Coordinator & returning any information/data that is required;

Remain responsible for keeping in contact with the CYP and their parents/carers even though they may not be attending school;

Maintain safeguarding responsibility and confirm the Designated Safeguarding Lead;

Organise regular Pupil Reintegration Education Plan (PREP) meetings with health, parents/carers, child/young person (if appropriate), MES;

Organise for the child/young person's class teachers to contact the MES teacher or tutor to provide schemes of work, lesson plans and resources so the child/young person can follow what their peers are doing in lessons. These teachers will be required to standardise and moderate a minimum of one piece of work each term;

Provide appropriate resources for the CYP to engage in the offer of education which may include a laptop, tablet, access to the schools online platform or any other resources needed;

Identify whether an Individual Health Care Plan (IHCP) is needed and if so follow the guidance set out in this procedural document regarding it;

Ensure appropriate exam arrangements are made, including entry, invigilation and access arrangements for all examinations;

Make arrangements for EHCARs and EHCP Reviews where appropriate;

Provide a suitable working area within the School, where necessary;

Be active in the monitoring of progress and the reintegration into school, using key staff to facilitate the reintegration into school.

**If the school makes arrangements**

Initially, the school will attempt to make arrangements to deliver suitable education for children with health needs who cannot attend school.

Where a child is absent from school for medical reasons, the school can provide education tasks and resources for use at home when the child is well enough to engage in education.

Where a child is admitted to hospital, the school will liaise with the teaching service to inform them of the curriculum areas the pupil should be covering during their absence.

**If the local authority makes arrangements**

If the school can't make suitable arrangements, North Yorkshire Council will become responsible for arranging suitable education for these pupils.

LAs are commissioners of school nurses for maintained schools and academies. Under Section 10 of the Children Act 2004, they have a duty to promote co-operation between relevant partners – such as governing bodies of maintained schools, proprietors of academies, clinical commissioning groups and NHS England – with a view to improving the wellbeing of children with regard to their physical and mental health, and their education, training and recreation. Local authorities and clinical commissioning groups (CCGs) must make joint commissioning arrangements for education, health and care provision for children and young people with SEN or disabilities (Section 26 of the Children and Families Act 2014).

Schools, local authorities, health professionals, commissioners and other support services should work together to ensure that children with medical conditions receive a full education. In some cases, this will require flexibility and involve, for example, programmes of study that rely on parttime attendance at school in combination with alternative provision arranged by the local authority. Consideration may also be given to how children will be reintegrated back into school after periods of absence.

School may decide that they are unable to make the arrangements necessary for a child to have full access to education, based on the best interests of the child's health needs, they can make a request to the MES.

The MES provide short-term education to help schools and settings to provide continuity in education when a child or young people has been absent from school for 15 days or more due to a physical or mental health need. Schools must notify the MES if a child/young person has 15 days of absence, consecutive or accumulative, due to a medical need and school are unable to offer an education the child/young person can access.

The roles and responsibilities when a child/young person is open to the MES, the Medical Education Service's role is to:

• liaise with the named person in school;

• liaise, where appropriate, with outside agencies;

• be sensitive to the needs of the child and family;

• provide an education provision with school that the child can access based on information from health;

• provide regular reports on the child/young person's progress and achievements;

• provide an opportunity for the child/young person to comment on their report;

• ensure appropriate course work and any other relevant material is returned to school;

• work with the school and other services where appropriate to ensure good attendance with the education provision ;

• attend PREP meetings;

• help set up an appropriate reintegration programme at the earliest opportunity as soon as the pupil is ready to return to school.

**In cases where the local authority makes arrangements, the school will:**

• Work constructively with the local authority, providers, relevant agencies and parents to ensure the best outcomes for the pupil

• Share information with the local authority and relevant health services as required

• Help make sure that the provision offered to the pupil is as effective as possible and that the child can be reintegrated back into school successfully

**When reintegration is anticipated, the school will work with the local authority to:**

• Plan for consistent provision during and after the period of education outside the school, allowing the pupil to access the same curriculum and materials that they would have used in school as far as possible

• Enable the pupil to stay in touch with school life (e.g. through newsletters, emails, invitations to school events or internet links to lessons from their school)

• Create individually tailored reintegration plans for each child returning to school

• Consider whether any reasonable adjustments need to be made

**Monitoring arrangements**

This policy will be reviewed annually by the SENCO and the Headteacher.

At every review, it will be approved by the full governing board.

**Links to other policies**

This policy links to the following policies:

Accessibility plan

Supporting pupils with medical conditions

Procedures for Supporting Children & Young People with Medical Conditions