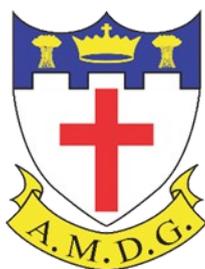


# **Policy for Children with health needs who cannot attend college**

**Blessed Edward Oldcorne Catholic College**



**Approved by:  
Governing  
Body**

**Date: November 2021**

**Last reviewed on:  
November 2021**

**Next review due by:  
November 2022**

## Aims

This policy aims to ensure that:

- Suitable education is arranged for students on roll who cannot attend college due to health needs
- Students, staff and parents understand what the college 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 Worcestershire Children First.

## The responsibilities of the college

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

If the student is in KS3 Miss Mason and relevant HOY will oversee provision and Mrs Corbin and relevant HOY will do the same for students in KS4. They will decide which member of staff will be the point of contact here in the college. If there is a safeguarding concern then Miss Mason will be involved regardless of the Keystage the student is in.

Arrangements which the college could make include

- Sending work home
- Making a MET referral
- Liaising with hospital colleges and other agencies such as CAMHS, Early Help and Social Care
- Agreeing a time limited reduced timetable, following the college's agreed protocols.

In the first instance parents will be invited in to meet key staff and an Individual Health Care Plan drawn up in accordance with the college's "Supporting students with medical conditions policy". Where possible the student will be involved in this process. At this meeting a plan for reintegration back into college will be discussed with agreed review times.

Issues around ensuring the child is being safeguarded will be discussed at this meeting. Parents are advised to contact the college on the first day their child is unable to attend due to illness.

- Absences due to illness will be authorised unless the college has genuine cause for concern about the authenticity of the illness.
- The college will provide support to students who are absent from college because of illness for a period of less than 15 college days by liaising with the student's parents to arrange school work as soon as the student is able to cope with it or part-time education at college. The college will give due consideration to which aspects of the curriculum are prioritised in consultation with the student, their family and relevant members of staff.
- For periods of absence that are expected to last for 15 or more college days, either in one absence or over the course of a college year, the college will notify the LA, who will take responsibility for the student and their education.
- Where absences are anticipated or known in advance, the college will liaise with the LA to enable education provision to be provided from the start of the student's absence.
- For hospital admissions, the appointed named member of staff will liaise with the LA regarding the programme that should be followed while the student is in hospital.

- The college will monitor student attendance and mark registers to ensure it is clear whether a student is, or should be, receiving education otherwise than at college.
- The college will only remove a student who is unable to attend college because of additional health needs from the college roll where: The student has been certified by a Medical Professional as unlikely to be in a fit state of health to attend college, before ceasing to be of compulsory college age; and neither the student nor their parent has indicated to the college the intention to continue to attend the college, after ceasing to be of compulsory college age.
- A student unable to attend college because of their health needs will not be removed from the college register without parental consent and certification from a Medical Professional, even if the LA has become responsible for the student's education

### **Alternative Provision**

In order to ensure children access their entitlement to full time education, sometimes it is helpful or necessary to make alternative provision for the child. Alternative provision often allows for a more bespoke and flexible approach to education. This can work well for children whose medical difficulties mean for example that their energy levels fluctuate and therefore full time attendance within a busy college environment is very challenging.

Alternative provision can be defined as education for students who, because of exclusion, illness or other reasons, would not otherwise receive suitable education (DfE, 2013). Alternative provision for children with medical difficulties can be arranged by the college or by the Local Authority. In cases where the child's medical difficulties are likely to be short term (typically less than 15 days) or result in only small amounts of college being missed, it is often simpler for the college to make these arrangements. In cases where the child is not able to attend college for long periods it may be more appropriate for the Local Authority to make arrangements through the Medical Education Team.

### **Medical Education Team**

In Worcestershire the statutory duties for children unable to attend the college because of medical difficulties are discharged by the Medical Education Team. The Medical Education Team ensure that arrangements are in place for children and young people who are unable to attend college because of their medical needs so that they have appropriate and ongoing access to education. The Team consists of qualified teachers and teaching assistants who are skilled in teaching children /young people of statutory school age with a wide range of physical, emotional and psychological health needs.

The Medical Education Team service level agreement and referral form are available online:

[Medical education team](#)

Where it is not appropriate or possible for the needs of children with medical difficulties to be met by the Medical Education Team and the school has not made alternative arrangements, Worcestershire Children First will work with schools and families to agree provision. This may involve securing provision at a Pupil Referral Unit, at an Alternative Provision Free School or home tuition and/or access to a Virtual Learning Platform.

### **Special Educational Needs and Disabilities**

A child or young person has special educational needs (SEND) if they have learning difficulties or disabilities that make it harder for them to learn than most other children and young people of about the same age.

Children and young people with medical conditions don't necessarily have SEN, but there are significant overlaps between children with disabilities and medical conditions and those with SEN.

Children with SEN require special educational provision to be made for them. Special educational provision is any educational or training provision that is additional to, or different from, that made generally for other

children or young people of the same age.

Some children or young people with medical difficulties may need additional support which is not special educational provision; for example, they might need certain treatments or medicines administered at school. In order to be classed as having SEN, they must require support with education or training which is different from that given to other children or young people of the same age.

The Children and Families Act 2014 places a duty on maintained schools and academies to make arrangements to support children / young people with medical conditions. Individual healthcare plans will normally specify the type and level of support required to meet the medical needs of such children / young people. Where children and young people also have SEN, their provision should be planned and delivered in a co-ordinated way with the healthcare plan.

Worcestershire's Graduated Response guidance sets out schools' responsibilities for children and young people with SEND as described in the 2015 SEND Code of Practice.

[SEND education provision](#)

## **Health, Early Help and Social Care**

### **The role of health services**

In addition to providing evidence where a child's medical difficulties mean they are unable to attend school, health services have a key role in helping schools and families to understand and meet children's needs.

### **Community Children's Nursing (Orchard Service)**

The Orchard Service is a Children's Community Nursing and Palliative Care Team. It is a multidisciplinary team that provides holistic care to patients with a nursing need, this may be an acute illness or a long-term complex health need. Children and young people must be registered with a Worcestershire GP to access this service.

[Orchard service](#)

### **Community paediatrics**

The Community Paediatric Team are medical staff and advanced clinical practitioners who have experience in child health between 0 to 18 years. They see children in a community setting and provide ongoing care if there is a clinical need. They do clinical assessments for children and young people with long term disability, developmental delay, neurodevelopmental conditions for example, Attention Deficit Hyperactivity Disorder and Autism.

Community Paediatricians work closely with schools, teachers, school nurses and educational psychologists to ensure that a child is looked after in a joined-up way in every environment they experience.

Community paediatricians have close links with doctors in general practice and in hospital. They refer to and liaise with a wide variety of health professionals with specialist expertise. [Paediatric team](#)

### **Occupational Therapy**

Paediatric Occupational Therapy enables children or young people to take part in daily life which is made up of many activities which they may be finding more difficult to participate in. These activities include self-care, being productive (going to nursery or school) and leisure activities like playtime. [Paediatric occupational therapy](#)

### **Physiotherapy**

The paediatric physiotherapy team work with children who have neurological, developmental, and orthopaedic conditions who may also have complex long-term medical, social and learning needs. The focus is on maximising a child or young person's physical ability, self-management and independence within their everyday activities at home, in education and in their community.

Treatment sessions vary greatly depending on children's individual needs and include:

- Regular reviews to identify change of need and treatment plan, specific to individual needs
- Demonstration and guidance to other people involved in children's care on how to carry out treatment advice
- Assessment and advice to identify any specialist equipment need that will help children to improve their functional ability and mobility
- Provision of a Physiotherapy report for Educational Health and Care Plans for children who are already receiving support from the service

The team work with children and young people between 0-18 years, or 19 years if a child is in full time education within a Worcestershire special school.

### [Paediatric physiotherapy team](#)

#### **School health nursing**

School Health Nurses provide opportunities for children and young people in secondary schools and Pupil Referral Units to access confidential advice and support via a weekly nurse led Time 4 U clinic. This can include health concerns such as emotional worries and stress to alcohol and drug dependency. In mainstream schools the School Health Nurse can provide sexual health advice which includes, emergency contraception, condom supply, pregnancy testing, and signposting to other agencies.

Additionally, School Health Nurses work with young people who may have issues such as weight concerns mental and emotional health, accident prevention; attendance at A&E, domestic violence concerns, substance misuse. The safeguarding of children and young people is paramount.

In mainstream schools the Health Care Support Workers also weigh and measure all reception and year 6 children on an annual basis and each parent/carer receives the results and a contact number, if they wish to discuss their child's results with the School Health Nurse.

Certain children within school are prescribed auto injectors due to having had a severe allergic reaction. The School Health Nurses train the teaching staff on an annual basis on how to administer auto injectors when required.

### [School health nurses](#)

#### **Specialist CAMHS**

Specialist CAMHS is a multi-disciplinary team made up of Psychiatrists, Nurses, Social Workers, Psychologists all with specialist training of working in mental health with children and young people. The aim of the team is to assess and treat those with significant mental ill health in order to promote recovery.

### [Specialist CAMHS](#)

#### **Special school nursing**

The Special School Nursing service provides support to Special Schools to enable the school to meet the holistic care needs of children and young people when attending school. Although this is primarily through training and supporting school staff, all children can access direct support and advice from the Special School Nurse if they choose. This can be alone or with a parent/carer present. Each school has a linked named Special School Nurse; however, the nurse is not always on site.

The Special School Nurse will assess the health care needs of children and young people on school entry. They will provide training to school staff to ensure school staff can provide care needs safely within the school setting. This will support the child or young person to achieve their full potential in both education and wellbeing. The team also provides Health Education to promote healthy lifestyles.

### [Special school nursing](#)

#### **Speech and Language Therapy Service**

Speech and language therapists work in partnership with children, their families and other professionals in a variety of friendly settings. Every mainstream school has a named speech and language therapist who visits on

a regular basis.

### [Speech and language therapy service](#)

The Worcestershire Speech, Language and Communication Needs (SLCN) Pathway has been developed to support anyone who has an interest in children's speech, language and communication development. It includes guidance and information to help ensure that all children at risk of, or presenting with SLCN will be:

- Supported to development their speech, language and communication skills to ensure they can access learning, social interactions and to make a positive contribution to the world around them
- Able to benefit from timely and integrated support and services that can best meet their needs

### [Speech, language and communication needs pathway](#)

#### **Early Help and Social care**

Where there are emerging welfare or well-being concerns about a child with medical difficulties, parental consent should be gained to carry out an assessment using the Early Help Framework. This assessment may in some cases identify the need for a family plan.

#### [Early help assessment](#)

Whilst not all children will need an early help assessment, it is important to recognise the additional pressures that medical conditions may create for family members, including siblings, parent/carers and other close relatives. Open and honest communication with parent/carers is crucial to making good provision in schools and ensuring that children's needs are met and that the needs of the family as a whole are recognised.

#### **Escalating welfare concerns**

If an Early Help assessment has been undertaken and there are needs that can't be met by the early help arrangements in school or any other early help agency and there is a role for family support, then a referral to Level 2 or 3 services may be appropriate. Worcestershire's Levels of Need Guidance (2019) describes the indicators which may suggest that a child needs additional or targeted support from services providing intervention at these levels.

#### [Worcestershire level of needs guidance](#)

As with all children if there is a risk of significant harm to a child with medical difficulties, an immediate referral should be made to the Family Front Door

9.00am-5.00pm – Monday to Thursday

9.00am-4.30pm – Friday

01905 822666

Out of hours or at weekends: 01905 768020

#### **Fabricated and/or induced illness**

In a very small number of cases there may be concerns that a child's medical difficulties may be fabricated or induced.

Parents/carers may fabricate or induce illness in a number of ways:

- Fabrication of signs and symptoms. This may include fabrication of past medical history
- Fabrication of signs and symptoms and falsification of hospital charts and records, and specimens of bodily fluids, including falsification of letters and documents
- Induction of illness by a variety of means

As with any other form of abuse, where schools are concerned that a child may be experiencing or be at risk of harm, advice should be sought from the Family Front Door. In cases where Fabricated and/or induced illness is a consideration, evidence of medical difficulties such as medical appointment letters and multiagency working as part of the child's IHP will be key.

Further advice regarding this area of safeguarding is available as a supplement to Working Together to Safeguard Children:

[Safeguarding children in whom illness is fabricated or induced](#)

### **Children with Disabilities team**

The Children with Disabilities (CwD) Social Work Team provide services designed to meet the needs of children and young people who have complex disabilities.

The CwD team offer services to those children and young people requiring additional resources in respect of their disability, where the disability has a profound impact on the child or young person's life.

An assessment will be offered where the child has a condition which is substantial, long lasting or permanent, is a physical and/or learning disability or a life limiting, life threatening condition. These may include:

- Severe learning disabilities
- Severe physical disabilities
- Severe developmental delay in motor and or cognitive functioning
- Profound multiple disabilities
- Severe sensory impairment (registered blind and/or profoundly deaf)
- Complex and severe health problems that arise from the disability, that are life threatening, degenerative illness or organic disorder resulting in severe disability
- A diagnosis of Autistic Spectrum Condition with an associated learning disability and where the condition severely affects day to day functioning

The Children with Disabilities website contains more information about the team, including a list of diagnoses such as controlled epilepsy where the team does *not* offer an assessment.

[Social care support for children with disabilities](#)

### **If the local authority makes arrangements**

If the college can't make suitable arrangements Worcestershire Children First will become responsible for arranging suitable education for these children.

In cases where the local authority makes arrangements, the college will:

- Work constructively with the local authority, providers, relevant agencies and parents to ensure the best outcomes for the student
- Share information with the local authority and relevant health services as required
- Help make sure that the provision offered to the student is as effective as possible and that the child can be reintegrated back into college successfully

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

- Plan for consistent provision during and after the period of education outside the college, allowing the student to access the same curriculum and materials that they would have used in college as far as possible
- Enable the student to stay in touch with college life (e.g. through newsletters, emails, invitations to college events or internet links to lessons from their college)

- Create individually tailored reintegration plans for each child returning to college
- Consider whether any reasonable adjustments need to be made

### **Monitoring arrangements**

This policy will be reviewed annually by the Headteacher and Assistant Headteachers with responsibility for personal development. 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 students with medical conditions
- Alternative Provision Policy
- Reduced timetable protocol
- Attendance Policy