



Children with health needs who cannot attend school

Approved by	C. Snowden		
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Summary of Changes

Version	Date	Summary of Changes	Approved By
	September 2026	Staff names	C. Snowden

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Section 1: 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

Section 2: Legislation & Guidance

This policy reflects the requirements of the Education Act 1996 and the Equality Act 2010. It also based on guidance provided by Slough Borough Council under their *Medical Needs Policy, Children Who Cannot Attend School*. It complies with the statutory guidance

<https://www.gov.uk/government/publications/education-for-children-with-health-needs-who-cannot-attend-school>

This policy complies with our funding agreement and Articles of Association.

Section 3: The responsibilities if the school

The Local Authority is responsible for arranging suitable full-time education for children who because of illness or other reasons would not receive suitable education without such provision. There will however, be a wide range of circumstances where a child has a health need but will receive suitable education from their normal school that meets their needs without the intervention of the Local Authority, for example, where a child can still attend school with some support.

3.1 If the school makes arrangements

For the first 15 days of absence the school will attempt to make arrangements to deliver suitable education for children with health needs who cannot attend school.

- Should a child require it, the SENDCo and Welfare Manager will write an Individual Health Care Plan in conjunction with the family, medical provider and the child.
- The relevant Vice Principal and SENDCo will liaise with the family and any medical providers to discuss the best way for the child to receive appropriate work while they are unable to attend school. This could include sending paper-based work for completion at home, ensuring the child has access to Google Classroom and uploading work onto it or liaison with the relevant hospital school to ensure that work is transferred to them for completion.
- The class teacher will ensure that work is available on Google Classroom or paper-based packs are created to send home. They will also offer live check ins using Google Meet at least weekly.
- The SENDCo and relevant Vice Principal will arrange a reintegration package once the student's

doctors tell us that this is the right thing to happen. The reintegration package will be planned in conjunction with medical professionals, the student and the family. The package will be bespoke to the needs of the individual and could include allocation of a Key Worker to facilitate ease of transition back to school, a part-time timetable, use of the lift to access upper floors and the support of the Child and Family Support Officer.

3.2 If the Local Authority makes arrangements

Where an absence is likely to be longer than 15 days the Local Authority will be involved in arranging provision, the expectation from the school is that the Local Authority will:

- Arrange suitable full-time 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.
- Provide such education as soon as it is clear that the child will be absent 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 the child receives is of good quality and allows them to take appropriate external tests, 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 the individual children in arranging provision.
- Where full-time education would not be in the best interests of a particular child because of reasons relating to their physical or mental health, provide part-time education on a basis they consider to be in the child's best interests. Full and part-time education should still aim to achieve good academic attainment. The nature of the provision must be responsive to the demands of what may be a changing health status.
- Where appropriate, use electronic media such as 'virtual classrooms', 'Interactive Classroom' to provide access to a broader curriculum, but this should generally be used to complement face-to-face education, rather than as sole provision.
- Ensure that teachers who provide education for children with health needs receive suitable training and support and are kept aware of curriculum developments. They should also be given suitable information relating to a child's health condition, and the possible effect the condition and/or medication taken has on the child.
- Set up a Personal Education Plan, which should ensure that the school, the Local Authority, hospital school and other provider can work together.
- Ensure effective collaboration between all relevant services (for example, Hospital School, CAMHS, NHS, schools and, where relevant, school nurses) in delivering effective education for children with additional health needs.

Section 4: Monitoring Arrangements

This policy will be reviewed annually by the SENDCo, Jessica Costelloe. At every review, it will be approved by the Academy Council.

