



TOWNLEY
— EST 1937 —
GRAMMAR SCHOOL

Students with Medical Needs Who Cannot Attend School Policy

1. Aims

This policy aims to ensure that:

- Suitable education is arranged for students on roll who cannot attend school due to health needs.
- Students, staff, parents and carers understand what the school is responsible for when this education is being provided by the local authority.
- The school identifies and supports barriers to attendance related to emotional factors (EBSA) using a strengths-based, inclusive approach.

2. Legislation and Guidance

This policy reflects the requirements of the *Education Act 1996* and has due regard to all relevant legislation and statutory guidance.

Primary Statutory Guidance:

- 'Ensuring a good education for children who cannot attend school because of health needs' (DfE, 2013).
- 'Supporting pupils at school with medical conditions' (updated DfE, 2017).
- SEND Code of Practice: 0 to 25 years (DfE, 2015) – specifically regarding the overlap between medical conditions and special educational needs (SEN).

Key Legislation:

- Mental Capacity Act 2005 – Providing the legal framework for acting and making decisions on behalf of individuals who lack the capacity to make particular decisions for themselves, particularly relevant for students aged 16 and over.
- Mental Health Act 2007 – Amending the Mental Health Act 1983, regarding the definition of mental disorder and the treatment of patients, ensuring the school works within legal frameworks when collaborating with mental health professionals.
- Data Protection Act 2018.
- Equality Act 2010.

3. The Responsibilities of the School

3.1 If the School Makes Arrangements

- Initially, the school will attempt to make arrangements to deliver suitable education for students with health needs who cannot attend school.
- Lead Person: The designated member of staff (Learning Manager in liaison with Attendance Team and Assistant Headteacher: SENDCo or Deputy SENDCo) will be responsible for making and monitoring these arrangements.
- Provision: Arrangements may include sending work home, online learning platforms (for example, Google Classroom), or hospital school liaisons. The school aims to keep the student connected to their learning and peers.

- **Reintegration:** The school will create a reintegration plan that accounts for the student's medical and emotional needs. If the medical or emotional needs require additional support and intervention(s) that are considered above quality first teaching, a Provision Plan may be needed. A student will then be placed on the SEND register.

3.2 If the Local Authority Makes Arrangements

- If the school cannot make suitable arrangements, or if the absence is expected to last for more than 15 days (consecutive or cumulative), the Local Authority (LA) will become responsible for arranging education.
- The school will work constructively with the LA, providing necessary information and ensuring the student is not removed from the school roll without proper authorisation.

4. Emotionally Based School Avoidance (EBSA)

The school recognises that some attendance difficulties are rooted in emotional distress, known as Emotionally Based School Avoidance (EBSA). We adopt a **strengths-based approach** to support students. In most cases, a multidisciplinary approach is necessary due to the complex nature of the special educational need.

4.1 Definition and Identification

EBSA is defined as difficulty in attending school due to emotional factors, often characterised by anxiety. It is distinct from truancy as the student typically wants to attend but feels unable to.

4.2 Strengths-Based Approach

In line with EBSA best practice, the school will:

- **Focus on Resilience:** We will assess "Push and Pull" factors—identifying what **pushes** a student towards the school (e.g., a specific lesson, relationships, special interest) and what **pulls** them towards home (e.g., separation anxiety, academic pressure, sensory overwhelm). Simultaneously, we identify the student's strengths and motivation factors (e.g., a trusted adult, a favourite subject) to build upon.
- **Student Voice:** We will actively seek the voice of the student to understand their specific barriers. Visual prompts and tools will be used to facilitate these conversations and ensure the student feels heard.
- **Partnership with Parents/Carers:** We recognise parents/carers as key partners in identifying the early signs of anxiety and will work collaboratively to create a consistent support plan.

5. Roles and Responsibilities

5.1 The Trustees

The Trustees is responsible for:

- Ensuring arrangements are in place to support students with medical conditions.
- Reviewing this policy annually to ensure it meets statutory requirements.
- The named trustee is Steven Cummins.

5.2 The Headteacher

The Headteacher is responsible for:

- Ensuring the policy is implemented effectively.
- Appointing a named member of staff to oversee the provision for students with health needs.
- Ensuring staff are suitably trained to support these students.

5.3 The Assistant Headteacher: SENDCo and Deputy SENDCo

- Ensuring that for students with SEND, the provision meets the objectives outlined in their EHC Plan or Provision Plan, in accordance with the SEND Code of Practice (DfE, 2015).
- Oversee the implementing the 'Assess, Plan, Do, Review' cycle for students exhibiting EBSA, ensuring interventions are evidence-based and monitored for impact with staff in the pastoral, attendance and safeguarding teams.

5.4 Teachers and Associate Staff

- Providing work for students who are absent due to health needs.
- Work and resources will be uploaded to Google Classroom.
- Maintaining contact with the student (for example, phone calls, virtual meetings, email, newsletters) to prevent feelings of isolation.
- Participating in training to understand medical conditions and EBSA strategies.

5.5 Parents and Carers

Communication and Notification

- **Prompt Reporting:** Parents and carers are responsible for notifying the school on the first day the child is unable to attend due to medical reasons.
- **Ongoing Updates:** They must keep the school informed about the expected duration of the absence and any changes in the child's medical condition or treatment.
- **Contact Information:** Parents and carers must ensure the school has up-to-date contact details for themselves and any relevant medical professionals (such as the GP or hospital consultant) involved in the child's care.

Providing Medical Evidence

To authorize absences and trigger support from the Local Authority (especially for absences exceeding 15 days), schools require specific documentation.

- **Substantiating Illness:** Parents and carers must provide sufficient and current medical evidence. This typically goes beyond a parental note and may include letters from a consultant, appointment cards, or prescriptions.
- **Sharing Information:** They are expected to share relevant medical information openly to allow the school to assess the impact of the condition on the child's ability to access education.

Collaboration on Care Plans

- **Individual Healthcare Plans (IHCP):** Parents and carers are expected to attend meetings to assist in drafting, reviewing, and agreeing upon the Individual Healthcare Plan (IHCP).

- Access to IHCP template and additional guidance on supporting children with medical needs: <https://sites.google.com/townleygrammar.org.uk/tgs-medical/medical>
- Sign-off: They must sign the IHCP to indicate their agreement with the outlined support.
- Medication and Equipment: It is the responsibility of parents and carers to provide any necessary medication or specialist equipment required by the school to support the child, ensuring it is in date, labeled correctly, and safe to use.

6. Managing Absences and Reintegration

6.1 Support During Absence

- The school will ensure the student can access the curriculum (e.g., through digital platforms or paper packs) so they do not fall behind.
- Regular contact will be maintained with the family to review the student's wellbeing.
- Students considered 'vulnerable' will be contacted every 5 working days during term time. Contact can be made by the school or professional working with the student and/or school.
- Any student where there is consecutive absence of 10 days or more will result in a 'check in' by the Education Welfare Officer (EWO) or Family Liaison Officer (FLO).
- Parents and Carers should ensure that medical appointments are made outside of school hours whenever possible to minimise disruption to learning.
- The reintegration plan will be agreed upon by the parent(s), carer(s), outside service providers (if involved), the student, the safeguarding team (if applicable), the Learning Manager and School Nurse. The Learning Manager is responsible for organising and managing the reintegration plan while the Assistant Headteacher: SENDCo/Deputy SENDCo would provide the necessary guidance when necessary.
- The reintegration plan will need to be reviewed at least once a fortnight with the parent(s), carer(s) and student. However, this timeframe needs to be adjusted to reflect the complexity or severity of the medical need.
- When there is an overlap between the medical need is associated with a safeguarding need,

6.2 Reintegration Strategy

- Tailored Plans: Reintegration plans will be individualised. For EBSA students, this may involve a gradual timetable, "soft starts" at the beginning of the day, or meet-and-greets with a trusted adult.
- Mental Capacity and Decision Making: For students aged 16 and over, the school will adhere to the principles of the Mental Capacity Act 2005, assuming capacity unless established otherwise, and supporting the young person to make their own decisions regarding their education and reintegration where possible.
- Medical Advice: We will follow the advice of healthcare professionals regarding the pace of return. All medical advice from professionals is documented and uploaded as a 'Medical Note' on the student's Arbor profile. The medical advice may initiate a Provision Plan if the support required is considered above quality first teaching by the school. The Medical Team can support parents and the rest of the school staff an IHCP needs to be written or updated. It is important to note the responsibility of the parent(s) and carer(s) to ensure that their child's IHCP reflects the risks and care needs associated with the medical condition. Please refer to the subheading 'Collaboration on Care Plans' for the website link to completing and updating IHCPs.

- Risk Assessments: Appropriate risk assessments will be conducted to ensure the student's safety and comfort upon return. The school will use its best endeavours to support students with social emotional and mental health problems that require supervised lunches.

7. Monitoring Arrangements

This policy will be reviewed annually. At every review, it will be approved by the full trustees' board.