



SUPPORTING CHILDREN WHO CANNOT ATTEND SCHOOL BECAUSE OF HEALTH NEEDS (CORNWALL)

Policy Reference No	SG008c
Review Frequency	Annual
Reviewed	Summer 2025
Next Review Date	Summer 2026
Approved by	Full Board

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Change Log

Date	Changes to Policy
June 2025	Accessibility and Language Support added.
June 2024	Update to reflect DFE 'Arranging Education for children who cannot attend school because of health needs 2023'. Section 3: Greater clarity to arrange education for pupils missing 15 school days or more. Section 9: IHP plans included with reference to other DFE guidance on these.
Autumn 2023	Update to Section 5 reference funding. Addition of annex 3 funding form
Autumn 2022	New policy for Cornwall schools

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The **Ofsted** inspection framework places a clear emphasis on meeting the needs of disabled children and pupils with SEN and considering the quality of teaching and the progress made by these pupils. Inspectors are already briefed to consider the needs of pupils with chronic or long-term medical conditions alongside these groups and to report on how well their needs are being met. Schools are expected to have a policy dealing with medical needs and to be able to demonstrate that it is being implemented effectively.

This policy is written in line with the requirements of:

- Children and Families Act, 2014 - section 100
- 'Arranging Education for children who cannot attend school because of health needs 2023'.
- Supporting pupils at school with medical conditions, DfE 2015
- 0-25 SEND Code of Practice, DfE 2015
- Equalities Act, 2010

This policy should be read in conjunction with the following school policies:

- SEND Disability and Inclusion Policy
- Safeguarding Policy
- First Aid Policy
- Supporting Pupils with Medical Conditions

Accessibility and Language Support

If you require this policy in an alternative format or language, please contact the Academy Office. We are committed to ensuring that all colleagues have access to our policies and can fully understand and engage with them and will work with you to provide the necessary support and resources

1. Aims

This policy and practice document aims to ensure that all pupils on roll aged 5 – 11 who are unable to attend school because of medical needs and would not receive suitable education without such provision, continue to have access to as much education as their medical condition allows, so that they are able to maintain the momentum of their education and to keep up with their studies. It should be read alongside the statutory guidance produced by the DfE. 'Arranging Education for children who cannot attend school because of health needs 2023'.

Educational provision for children who are not in hospitals and unable to attend school because of their medical needs is provided by Community and Hospital Education Service (CHES) <https://www.wavemat.org/our-academies/ches-academy-truro>. The medical provisions provide personalised education through a combination of center teaching, individual teaching and online learning. CHES has three teaching centers in Cornwall; Glynn House our school base in Truro; our Hospital School room in the Royal Cornwall Hospital and our Education Unit within Sowenna, the adolescent Tier 4 unit in Bodmin.

Children and young people who are unable to attend school because of their medical needs will include those with:

- Physical health issues
- Physical injuries
- Mental health problems, including anxiety issues
- Emotional difficulties/school refusal
- Progressive conditions
- Terminal illness
- Chronic illnesses

2. General Principles

- Schools will continue to support and provide a suitable Education for children with health needs whenever possible.
- Schools will work in partnership with CHES to ensure the child's academic needs are met. Schools will have a named member of staff who will work with the CHES Headteacher to agree a timetable and to support their reintegration back into their originating school.
- The primary aim of the Local Authority's policy and practice is to minimise, as far as possible, who are unable to attend school, the disruption to normal schooling that can be experienced by children and young people with medical needs by continuing education as normally as their needs allow.
- A timetable will be drafted in consultation with the schools named link worker.

- Where a pupil is educated by CHES, the aim will be for full time education as quickly as possible. However, the number of hours offered will be dependent upon the individual child's needs. It is expected that the originating school will continue to offer some hours of education whenever possible to facilitate the child's full-time return.
- Children and young people admitted to hospital will receive education in hospital as determined appropriate by the medical professionals and hospital school/tuition team for the hospital concerned.
- We will work with parents/carers, schools, and Community Paediatricians to establish and maintain regular communication and effective outcomes.
- A school may refer a student to the CHES and should include all relevant medical evidence from medical professionals and supporting agencies to support the application to the service.

3. The role of the Local Authority

Local Authority must ensure that:

- A pupil who is unable to attend school because of medical needs is not at home without access to education for 15 school days, or more.
- Pupils who have a chronic condition or illness which is likely to result in prolonged or recurring periods of absence from school, whether at home or in hospital, should have access to education from day one of the absence as far as is possible.
- Pupils who are unable to attend school because of medical needs receive a suitable full-time education.
- The education provided should be of a similar quality to that available in school, including a broad and balanced curriculum.

4. The role of the academy

All schools are required to establish written policies and procedures for dealing with the education of pupils with medical needs, (including the completion of Health Care Plans as appropriate):

- The policy should include information such as how the school will make educational provision for pupils, what strategies will be used to ensure support for pupils with long-term absences and how pupils will access curriculum materials and public examinations.
- The school will be expected to nominate a teacher to act as the named contact for each child who will facilitate communication between the pupil and the school, arrange reviews and keep records.
- The school will monitor pupil attendance and mark registers so that they show if a pupil is, or ought to be, receiving education otherwise than at school. Children will not be removed from school registers unless medical evidence states that the child will be unable to attend school for the rest of their compulsory schooling.
- In the case of a pupil who is expected to be absent for 15 working days or less, and where this is not part of a pattern of absence related to a chronic or recurring illness, make arrangements in liaison with the pupil's parents to provide the pupil with homework as soon as they become able to cope with it.
- Ensure that pupils who are not attending school because of medical needs where the absence is expected to last for more than 15 days are referred promptly so that alternative education can be provided in a timely way.
- Work closely with the staff in the hospital school and/or tuition service and in particular:
 - Ensure that information about the pupil's curriculum, their achievements, and any special educational needs that they may have, is provided promptly.
 - Provide appropriate work and materials promptly and regularly.
 - Be active in the monitoring of progress and in the smooth reintegration into school, liaising with other agencies as necessary.
 - Ensure that pupils who are unable to attend school because of medical needs are kept informed about school social events, and can participate in homework clubs, study support and other activities as appropriate.
 - Encourage and facilitate liaison with peers, for example through visits and videos.
 - Schools should promote cooperation between them when children cannot attend school because of ill health.

5. Referrals route

For a pupil to be considered at the CHES panel they will need a referral form (see Annex 1) from a relevant medical professional as well as a funding and assessment referral (see Annex 2) from the registered mainstream school. It should be noted that CHES Academy provision is charged at 80% of the AWPU. Funding Form (Annex 3) should also be completed by the school. CHES is an interim provision for children who are unable to attend school for medical reasons. We aim to reintegrate all pupils at the earliest opportunity.

Relevant medical Professionals include:

- Member of Community Paediatrician Team
- Hospital Consultant
- Clinical Psychologist
- Consultant Child & Adolescent Psychiatrist
- CAMHS Senior Practitioner

6. Monitoring and Evaluation

The progress of pupils receiving tuition because they are unable to attend school due to their medical needs will be monitored by the staff at MTS and/or the staff of the hospital school in conjunction with the named member of the school staff.

7. Public Examinations

- The Hospital tuition, CHES or home tuition teachers should be able to arrange a suitable focus on the child's education at this stage to minimise the impact of the time lost while the child is unable to attend school.
- Awarding bodies will make special arrangements for children with permanent or long-term disabilities or learning difficulties, and with temporary disabilities, illnesses, and indispositions, when they are taking public examinations. The LA (or the school where applicable) should submit applications for special arrangements to awarding bodies as early as possible. Those providing education to a child out of school should provide advice and information to the school to assist it with such applications.

8. SEN

- Children with Special Education Needs (SEN) may have an Individual Support Plan (ISP) or Individual Support Plan (ISP) and should continue to receive termly reviews organised by the school. Those with an Education, Health and Care Plan (EHCP) should continue to receive yearly reviews (Annual Review) and termly targets updated in their Implementation Plan. The schools Special Educational Needs Co-ordinator should be regularly involved in liaison with the school and the SEN team.

9. Review and reintegration

- Decisions about when and how a pupil should return to school following illness need to take account of a wide range of views, including those of the pupil, their parents/carers, the staff at CHES and the pupil's school, the Community Paediatrician, and the Child and Adolescent Mental Health Service.
- It is essential that each pupil receiving tuition because they are unable to attend school due to their medical needs is reviewed between 3 and 6 times per year. This should involve staff at CHES liaising with the relevant Community Paediatrician and/or Child and Adolescent Mental Health Service/or GP to determine:
 - Referrals are accepted on the understanding that the referrer or named contact maintains an overview of each child's situation. The named contact will arrange the date/time/venue of review and invite relevant professionals and parent/carer.
 - Whether the pupil continues to need tuition (unless the advice received previously has indicated a need for longer term tuition, for example in the case of a pupil who is terminally ill)
 - Whether plans need to be made to reintegrate the pupil into mainstream school, and if so, whether there are factors that need to be considered.
- When the pupil is considered well enough to return to school, staff at CHES will develop an individually tailored reintegration plan in liaison with the pupil, their parents/carers, the school and other agencies who are actively involved. This could take the form of an Individual Health Care Plan (IHP)- see Annex A of Supporting Pupils at school with medical conditions. <https://assets.publishing.service.gov.uk/media/5ce6a72e40f0b620a103bd53/supporting-pupils-at-school-with-medical-conditions.pdf>
- Where the pupil might benefit from a phased return to school the staff at CHES may plan to reduce their own input by the number of hours that the pupil is expected to attend school.

Annex 1: Medical Referral Form

Community and Hospital Education Academy

MEDICAL REFERRAL FORM

TO BE COMPLETED BY:

- Member of Community Paediatrician Team
- Hospital Consultant
- Clinical Psychologist
- Consultant Child & Adolescent Psychiatrist
- CAMHS Senior Practitioner

The information you provide informs the CHES Panel as to whether or not this is an appropriate referral. Therefore, please complete ALL sections as comprehensively as possible.

I have sought parental permission to share the following information and I am aware that this information may be shared with other professionals working in the Education, Health and Social Care Directorate.

Student School contacted: Yes ☐ No ☐ (please tick)

Section 1

Referrer's Name:	Position:
Contact Address:	
Organisation:	
Phone Number:	Date:
Email:	

Section 2

Name of Student:	D.O.B:
School:	National Curriculum Year:
Name of Parent/Carer:	
Student Home Address:	
Telephone Number:	

Section 3

Is there a safeguarding concern? Yes ☐ No ☐ (please tick one)

(If YES please give details)

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Section 4:

Medical Diagnosis:	
Date the medical diagnosis was formally identified:	
By Whom:	

Please attach the care plan.

How does the medical condition impact on the student's ability to access education? e.g. energy levels, engagement etc.

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What on-going support or action is your organisation providing, prescribing or putting in place for this student?
Please list:

e.g. CAF
Ongoing therapeutic intervention
Medication (please specify)

Please list all people/agencies that have been involved to date:

Please add any other information you feel which may impact upon this student's recovery and eventual re-integration into School:

Next Medical Assessment due date:

Termly review meetings will be held. Please give a name & contact details for a termly medical update:

Name:
Contact details (phone/email):

If medical advice on managing this illness is given to the parents, please attach a copy to this referral.

Completed by:	Position:
Signed:	Date:

Where referrals are completed by a Clinical Associate Psychologist, they are required to be signed by their supervisor:

Name:	Position:
Signed:	Date:

Annex 2: Referral Form

Community and Hospital Education Academy Assessment Form for Schools

Student Details:

Student Legal Name:	Student DoB:
Student Preferred Name:	
Year Group:	Key Stage:
Student UPN: (must be completed)	Student ULN:
Parent/Carer Name:	
Student Address:	
Student parents/guardian contact number(s):	
Email address:	

Gender:	Receives Free School Meals:	Pupil Premium?:	Ethnicity:
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Key Contact Details:

This will be the main point of contact for CHES and would normally be the key member of staff for review purposes.

Print name of school contact:	Print position held:
School name & address:	
Email address of school contact	
Telephone number/extension:	

Is there a safeguarding concern? If YES, please complete the box below:

Is there, or has there ever been a CAF in place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Proposed and refused?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Lead Professional	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If CAF in place, please attach last TAC minutes	
Date of next meeting (required)	

Please circle relevant stage etc.

Code of Practice Stage		Child in Care	
SEN SUPPORT	EHCP	Yes	No
Date of EHCP Annual Review (required)			
Main SEN Type			

If the student has no TAC or EHCP in place please provide a provisional date for a CHES review (required):

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Student Reading Age	
Chronological age at date of test	

Key Stage 1 – 3 information

Please complete the following record of assessments (use P levels if appropriate)

NC English Level: (or equivalent)	Date:
NC Science Level: (or equivalent)	Date:
NC Maths Level: (or equivalent)	Date:
If THRIVE Profile available, please include a copy	
Reason for any gaps in given information:	
IMPORTANT: we are unable to start tuition until all assessment levels are in place, so please include all information available regarding any assessments.	

GCSE Information for Key Stage 4 (or from Year 9 if relevant)

Please provide the following

SUBJECT	GRADES		EXAM BOARD
GCSE	Current	Predicted	
ENGLISH LANGUAGE			
ENGLISH LITERATURE			
MATHS			
SCIENCE			
ENGLISH SPOKEN LANGUAGE ASSESSMENT	Completed (Y/N)	Grade	
OPTION SUBJECTS AND CURRENT GRADES:			
If not following GCSE please give details of alternative:			

School Contact Details:

Please provide a school contact for the following

Key contact (for reports)	Name: Email: Telephone/extension:
English	Name: Email: Telephone/extension:

Maths	Name: Email: Telephone/extension:
Science	Name: Email: Telephone/extension:
SEND/CO	Name: Email: Telephone/extension:
Exam Officer	Name: Email: Telephone/extension:

Please provide details of **ALL** professionals currently involved with the student

	Name	Contact number/email
Ed. Psych		
S A L T		
E W O		
C A M H S		
Social Worker		
Consultant		
Other		
If 'other' please give details:		

Please include any other information to help us address his/her emotional, behavioural and learning needs.

INCOMPLETE FORMS MAY BE RETURNED. ALL REQUESTED DOCUMENTS MUST BE ENCLOSED.

Please ensure the following documents are enclosed, please tick what you have enclosed:

EHCP	
CURRENT I E P	
LAST TWO TERMS ATTENDANCE	
EDUCATION PSYCHOLOGIST REPORT	
S A L T REPORT	
TAC MINUTES	
REPORTS FROM SEND STAFF	

Completed by:	Position:
Signed:	Date:
School stamp/details:	

Annex 3: Funding Form

Community and Hospital Education Academy

Funding Form

From (name):	School:
Student Name:	Student DoB:
Year Group:	Key Stage:
Student Address:	
Student parents/guardian contact number(s):	

I agree that tuition may begin, and understand that we will be invoiced in due course (80% AWPUP)

Signed:	Date:
Print Name:	Print Position held:
School name & Address:	
Email Address:	

Please note Invoices will be issued termly.