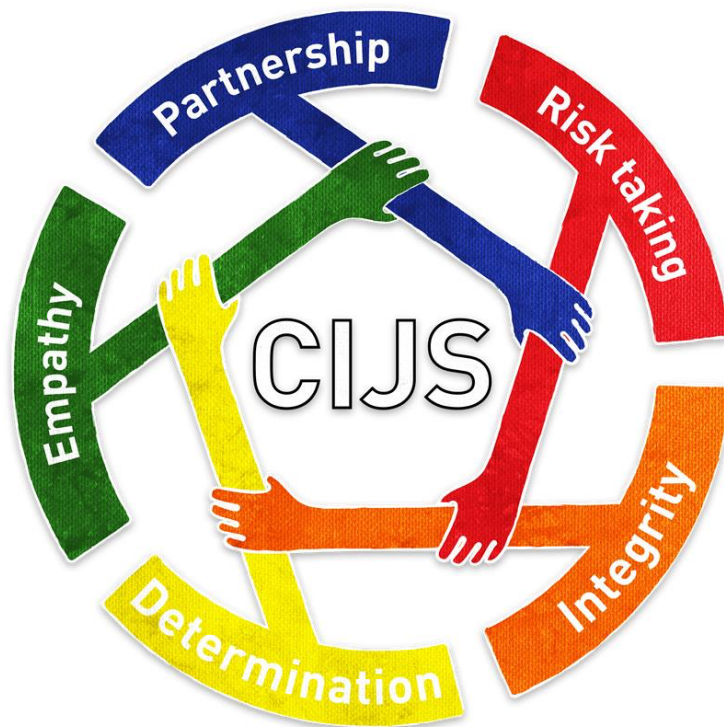


Children with Health Needs who cannot attend school 2025-26



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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 our school is responsible for when education is being provided by the local authority

2. Legislation and guidance

This policy is based on the following legislation:

[The Education Act 1996](#)

[The Education \(Pupil Registration\) \(England\) Regulations 2006](#)

It is also based on the following statutory guidance from the Department for Education (DfE):

[Alternative provision](#)

[Arranging education for children who cannot attend school because of health needs](#)

This policy also follows guidance provided by our local authority Derby City Council [Click here](#)

This policy complies with our funding agreement and articles of association.

3. The responsibilities of the school

The section below, highlighted in italic is taken from Derby City Council “Policy for supporting the education of Children and Young People with Health Needs”

NB This policy covers pupils who are residents of Derby City, if the pupil in question lives outside the city, we will liaise with the relevant authority.

3.0 Provision for pupils with health needs/medical conditions in Derby

3.1 Pupils may not be well enough to attend school as a result of,

- Physical illness
- Physical injuries
- Recovery from hospitalisation or treatments
- Mental health, including anxiety issues
- Emotional difficulties or school refusal
- Terminal illnesses

3.2 Where pupils have complex and/or long-term health conditions and do not meet the criteria for an education, health and care plan, support for schools and for young people to manage their health conditions can be accessed via school nurses, children’s community nursing team and specialist clinical teams. If a request is for support for funding aligned to medical needs, this should have been described through advice and guidance from the NHS clinician who is supporting the child (for example a Children's Community Nurse). Dependant on the level of need, and if required, that clinician should be aware of the process for assessment and referral to the school based services already in place in the local area. If needs are beyond what can be supported by existing services the NHS clinician should be aware of the process to contact the NHS CYP Commissioners to consider next steps. This process is new, the NHS CYP commissioners can be contacted via ddicb.childrenscommissioning@nhs.net

3.3 It is expected that schools will make arrangements for most children who are not well enough to attend school full-time by providing individualised arrangements in line with the statutory guidance for schools. This could include, for example, online provision, tuition in the home (from school staff or suitable agency staff) and/or support to attend school in line with their health needs. All schools should have policies that set out the details of the support provided to children with medical needs including arrangements for the loan of IT devices.

At Chellaston Infant and Junior Schools, Lisa Turner-Rowe (Headteacher and DSL) and Ceri Holmes (SENCO) will be responsible for coordinating any individualised arrangements.

This will work in conjunction with the EMET policy of Supporting Children with Medical Conditions.

Approved by: Governing Board

Autumn 2025

Next review: Autumn 2026

3.4 There is a need for expectations to be proportionate in relation to engagement in education:

- there will be cases where children are not well enough to engage in any education due to their ill health and authorised absence (I code) will be appropriate.
- In some cases, children will be well enough to attend school part-time or via a blended learning programme, in line with medical advice but without the need for additional education to be provided outside of school.

3.5 Pupils remain on roll at their school with overall responsibility for their education retained by the school. Schools must not remove a pupil from the school roll, even during a long period of ill health, unless an appropriately qualified medical professional certifies that s/he will be unlikely to be well enough to attend their mainstream school before ceasing to be of compulsory school age. Pupils remain on their school roll unless another permanent arrangement is agreed and put in place through an EHC Plan or otherwise.

3.6 In some cases, children might not be able to attend school due to their emotional wellbeing and mental health. According to research, the percentage of children and young people who are not able to attend school or have extreme difficulties attending school due to emotional factors, is between approximately 1% and 5% of the school population, with slightly higher prevalence amongst secondary school students (Elliot, 1999; Guilliford & Miller, 2015). When children and young people are experiencing anxieties or emotional difficulties that are preventing them from attending school, this is referred to as Emotionally Based School Non Attendance (EBSNA).

3.7 Schools have a responsibility to make reasonable adjustments to support children and young people experiencing EBSNA to ensure full access to a suitable education within school. Derby City Council is committed to supporting schools to identify EBSNA and to put support in place for children and young people experiencing EBSNA, based on the most recent research into effective practice. An EBSNA pathway has been created which includes a Good practice Guidance document, Graduated Approach and Toolkits to support schools and families in their understanding of EBSNA. These resources provide a bank of evidence-informed strategies and resources to put into practice in school and at home. In cases where the EBSNA is deeply entrenched and after significant steps have been taken for the school to engage a child or young person they are not able to attend school, Derby City Council will support the arrangement of a suitable education through other means.

LINK TO EBSNA resources [HERE](#)

3.8 Schools should consider providing remote education to help pupils stay on track with the education they would normally receive. Any remote education should only be considered if the pupil is well enough and able to learn and should be given in line with the guidance providing remote education.

3.9 Any part-time timetable arrangements should be designed with the specific barrier to attendance in mind, have a time limit by which point the pupil is expected to attend fulltime, (either at school or at an alternative provision setting), and have formal arrangements in place for regularly reviewing the timetable with the pupil and their parents/carers. The February 2023 DfE Attendance Guidance¹ points to a range of effective practice examples demonstrating how the utilisation of a temporary part-time timetable can help to improve attendance over time for pupils with health needs. In agreeing to a part-time timetable, the school, parents/carers and pupil have agreed to the pupil being absent from school for part of the week or day, and therefore must treat absence as “absence with leave” (a type of authorised absence). In all cases, the school remains responsible for safeguarding and the quality assurance of education provided. Schools should utilise the notional budget and pupil premium to ensure that wherever possible pupils re-engage in mainstream education. For more information, see the Derby City Part-time Timetables protocol. [here](#)

3.10 Schools should inform the local authority, through their allocated Education Welfare Officer, where pupils are likely to miss more than 15 days due to their health needs. The school must work with the family to provide educational provision whilst determining with the local authority whether additional interventions including alternative provision should be provided under section 19 of the Education Act 1996, as outlined in statutory guidance. The school should discuss children with their assigned EWO in line with [Working together to improve school attendance \(applies from 19 August 2024\) \(publishing.service.gov.uk\)](#). Local authorities must look at the

¹ [Summary of responsibilities where a mental health issue is affecting attendance \(publishing.service.gov.uk\)](#)

evidence for each individual case, even when there is no medical evidence, and make their own decision about alternative education². To meet this principle the Derby City multi-agency Health Needs Education Panel reviews all submissions for alternative provision based on health needs. In all cases schools will need to demonstrate the steps they have taken to ensure a child or young person receives a full time or appropriate education and/or relevant specialist or targeted interventions to support improved engagement and attendance.

3.11 If school staff identify that anxiety about attending is being driven by another medical need, then they should work with the relevant health professionals and parents/carers to review the support and consider putting in place or updating an Individual Healthcare plan.

3.12 Where support offered is not engaged with, or where all other options have been exhausted or deemed inappropriate, schools should work with the Education Welfare Service to consider whether to formalise support or to enforce attendance through legal intervention in the usual way under the existing powers.

4. The responsibilities of the Local Authority

The section below, highlighted in italic is taken from Derby City Council "Policy for supporting the education of Children and Young People with Health Needs"

Pupils who meet the local authority's duty to provide education may usually fall within one of the following categories:

- children with an illness/diagnosis which indicates a minimum 15- day period at home because of illness
- children whose illness necessitates recurrent hospital admissions and subsequent home stays (for a minimum of 15 days)
- children who are unable to attend mainstream school (for a minimum of 15 days) due to mental health reasons, where early interventions and support have been provided by the school and where the referral is supported by medical professionals.
- where children require assistance or support to manage their medical condition and / or support them in activities of daily living due to their level of development or due to the restrictions of their disability, but where this is not yet arranged e.g. where staff are waiting for training which is necessary before the child can safely attend school.

Where a pupil falls into one or more of the above categories a Health Need Education Panel referral form (appendix 1) should be completed.

Health Needs Education Panel

4.1 Requests for support from the local authority will be made via the Health Needs Education Panel referral form by the school. Coordination of the panel is undertaken by In Year Fair Access, and the panel will meet every three weeks during term time (twice every half term)

4.2 The panel will review the referral and consider what package of support will need to be put into place that is above that already provided through the healthcare plan and/or interventions and support already provided by the school. These packages will be time limited. Where the panel has advised education other than at school including alternative provision, these will be reviewed half termly, to ensure that young people are moving back into mainstream provision. This support will not be a replacement for elective home education

4.3 There may be occasions where the evidence presented at referral stage is deemed to be sufficient to trigger an education, health and care assessment. A referral to the decision-making panel for education, health and care assessments will be made. The panel will consider the interim arrangement support package whilst the assessment is underway. However, this is not a confirmation that the assessment will result in an education, health, and care plan.

² This also applies to Derby City residents educated in other local authority areas.

The Derby City Education Welfare Service should be contacted prior to any referral.

4.4 The panel will be chaired by a manager from the In Year Fair Access Team and members will include:

- School (where child is on roll)
- Education Psychology Service
- Education Welfare Service
- Health – (Specialist Community Advisor)
- Health – (Mental Health Support Team)
- Health – Public Health Nursing
- Early Help
- SEND
- RESPECT Collaboration of Schools

Where already involved:

- Other key professionals who are involved in supporting the child e.g. Virtual School Specialist Education Officer, Social Worker or NCAT.

5.0 Provision and support available from Derby City Council

5.1 Royal Derby Children's Hospital

Educational provision for pupils who are resident on one of the children's wards is commissioned by the local authority and delivered by Respect Collaboration of Schools. This work is led by a HLTA with responsibility for coordinating the pupil's education in collaboration with their home school.

Pupils who are registered on one of the children's wards, are on the roll of Respect Collaboration of Schools. They also remain on the roll of their home school (i.e., under a dual registration arrangement). The coding arrangements are as per the DfE School Attendance Guidance. Any concerns regarding irregular attendance should be reported to the home school who remain responsible for monitoring the child's attendance with Respect Collaboration of Schools. The aim will be for the child to return to their main school when it is appropriate for them to do so.

In all cases, where evidence confirms that a child's medical or health needs warrants education provision out of school or out of hospital, provision will continue until the child has recovered sufficiently to return to his/her home school. This will need approval via the Health Needs Education Panel with provision through the Health Needs PRU (Castle School) remote education programme.

5.2 Provision by Castle School – RESPECT Collaboration of Schools

The Health Needs Education Panel will determine if a referral to Castle School is appropriate in respect of alternative provision, tuition and meeting the wider support needs of each child. The purpose of this will be to ensure that each child is receiving the support they need to enhance their recovery and to enable them to return to school as quickly as possible.

Referrals for provision at Castle School are sent to IYFA@derby.gov.uk using the Health Needs Education Panel referral form, along with appropriate medical evidence which supports the need for alternative provision.

Castle School provides education for pupils with:

- Emotional wellbeing and mental health needs requiring short term placements based on dual registration
- Pupils who require exceptional admissions including step down from a Tier 4 or emergency medical stay.
- Those that have a diagnosed medical or health condition preventing attendance in school.

Admissions to Castle School should be mainly on a short stay basis and therefore pupils are in the main dual registered. The Health Needs Education Panel will review all pupils placed at Castle School on a half termly basis to ensure that transitional arrangements are in place for a young person to either move onto a new school or return to the home school.

Pupils will be educated through the following arrangements in accordance with the needs of the pupil and arrangements with parents/carers and mainstream school,

- home learning (1-1) or remote learning (non- digital or digital)
- on site at Castle School for KS3-KS4
- blended learning – a mixture of onsite and home or remote learning

Where schools refer a pupil with SEND, the school will need to satisfy how the elements of the EHCP are being met with funding transferred where appropriate. Where there is dual registration Respect Collaboration of Schools (Castle School) will recoup the basic entitlement funding (AWPU) from schools for pupils placed at the point of dual registration.

Occasionally an alternative to Castle School may be deemed more appropriate. The Health Needs Education Panel will consider placements options. In all cases pupils will be dual registered under joint funding arrangements.

Once a pupil is accepted for support by Castle School, the school and professionals involved with the pupil must provide all necessary information requested and follow the support plan agreed with Castle School.

6.0 Children not on a school roll

6.1 Children who are not on a school roll are subject to this policy. Where their circumstances mean that there is a delay in the usual admissions process, their cases should be referred to the Health Needs Education Panel for consideration and agreement reached about any arrangements that will be made for them to receive education.

7. Monitoring arrangements

This policy will be reviewed annually by the Headteacher at every review, it will be approved by the full governing board.

8. Links to other policies

This policy links to the following policies:

- Accessibility plan
- Supporting pupils with medical conditions

HEALTH NEEDS EDUCATION PANEL REFERRAL FORM

The Derby City Health Needs Education Panel has been set up to review cases in which pupils are likely to miss more than 15 days of school due to health needs. The panel will review eligible cases individually and will recommend suitable interventions and alternative provisions where appropriate.

Before completing the referral form, please ensure you have met the following criteria. Unfortunately, we will not be able to consider any applications that do not meet the below requirements:

This referral form is for children and young people who:

1. Are Derby city residents
2. Have missed 15 or more days of school due to health needs
3. Have already received in-school interventions to support their attendance

Please note that in advance of filling out the referral form you will need to have gathered:

1. Pupil absence data
2. Evidence of school-based interventions and their impact ☐
3. Your setting's policy for supporting pupils with health needs, including the child's Individual Healthcare Plan. ☐
4. Supporting evidence such as health reports, support plans, one-page profiles, IEPs annual reviews, risk assessments, current academic data ☐
5. Evidence of the child's views and parent/carers views ☐
6. Parental/carers consent ☐

All documentation and evidence to support this referral should be emailed together with the referral form to IYFA@derby.gov.uk

Referral Form Questions:

I have permission to make this referral and for information to be shared and stored electronically from the young person or parent/carers.

YES ☐

NB you must have answered yes to this question to proceed with the referral.

Date of referral _____

SECTION 1 - PUPIL DETAILS

Pupil name	
Pupil DOB	
Pupil gender	
Pupil address - please note that the pupil must be a Derby City resident	
Unique Pupil Number (UPN)	
Pupil NHS number	
School year	
How long has pupil been enrolled in the setting (years)	
Pupil ethnicity	
Pupil nationality	
Pupil religion	
Pupil Premium If yes, please specify how the pupil premium fund has been spent	
EAL If EAL, please specify first language	
Known vulnerability factors e.g. CIN, CP, LAC, Young Carer	
Has a safeguarding risk assessment been carried out? <u>*This must take place if the child,</u> <ul style="list-style-type: none"> <u>Has a history of violence to others</u> <u>Poses a significant risk to themselves or others</u> <u>Has a history of substance misuse</u> <u>Any other significant risks that may have an impact on the child's presentation</u> 	
Pupil health needs <u>*This section should include all health needs leading to the pupil's non-attendance and will be the main consideration of the panel, along with supporting evidence*</u>	
Names of ALL other involved professionals and contact details: e.g. social care, EWO etc	
Pupil GP - name and address	

Pupil Medical Practitioner – name and contact details	
Any referrals made to health services? Who? When? Outcome	
SEND (SEN Support, EHCP, none) *For pupils with an EHCP, any E3 funding will follow the pupil whilst they are educated in AP.	
Outline any behaviour concerns Suspensions When? How long for? Reason?	
Child views - What is going well? What are you concerned about? What needs to happen next?	

SECTION 2 - PARENT/CARER DETAILS

Parent/Carer name		
Relationship to child		
Email address		
Contact number		
Interpreter required?		
If yes, type of interpreter required?		
Please detail any additional needs that would be relevant when communicating with parents/carers		
Parent/carers views - What is going well? What are you concerned about? What needs to happen next?		

SECTION 3 - SCHOOL DETAILS

Referring provider/main contact	
Setting name	
Setting address	
Referrer email address	
Has this case been discussed with EWS? Please provide outcomes.	
School views - What is going well? What are you concerned about? What needs to happen next?	

SECTION 4 - ATTENDANCE DATA

Attendance Data Please outline pupil attendance and any relevant Education Welfare support. Please provide data from when the pupil started at your setting (attendance reports should be attached to the email when sending the referral form)	
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SECTION 5 - SCHOOL INTERVENTIONS

Please attach all relevant evidence to this referral form, for example: school-based support and interventions, health reports, individual support plan, one page profile, pastoral support plans, most recent annual review, latest academic report, any involvement from additional services with contact details. Provide the impact of any school-based interventions and how they have been measured.

Check list – the following documents MUST be included in the referral

Medical evidence, including health reports	
Individual Healthcare Plan	
Attendance data (including a print out of the herringbone)	
Current academic data (school report)	
Inclusion Graduated Response	
Evidence / impact of interventions from the EBSNA pathway	
Behaviour log, including suspensions and the number of days	
SEND – IEP / 1 page profile and / or EHCP/ annual reviews	
Support Plans	
Reports from external agencies (e.g. STePS)	
EHA (if appropriate)	
Risk Assessment	
Parental consent	

Any other useful information	

What happens next?

Your referral will be triaged, and you can expect to hear a response within 7 working days following the panel.

If you have not included the required documentation and evidence the referral will not be able to be passed on to be heard at the Health Needs Panel.

Data Protection

We use the data you provide in this form to help us make the best decision for the child or young person you are referring, and to ensure that we are the right service for you or the person you are referring. We will keep this information as part of a record of our work with you or the person you are referring. All information is held securely — electronic and paper records are kept in a secure way.

Privacy Statement

You are providing your information to Derby City Council. Your information is collected to assess the needs of the child or young person you are referring and consider provision of appropriate services. Your information will also be used to improve service delivery as required to fulfil the council's duties under the Children Act 1989, Education Act 1996, SEN code of practice and other DfE regulations, where appropriate.

The information will be shared with other Council services and partnership organisations to ensure that your assessment and support is accurate and that you receive the appropriate and holistic support required. Information will be obtained from other Council services, Health services, Social Care, and Education as appropriate.

Further information can be found at [Children and Young People - privacy notice - Derby City Council](#)