



CHILDREN WITH HEALTH NEEDS  
WHO CANNOT ATTEND SCHOOL

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Statutory Policy	Yes

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### Appendix A: **Home Tuition and Hospital Teaching Services: Guidance on Alternative Provision for children who cannot attend school because of their health needs**

### Appendix B: BUCKINGHAMSHIRE COUNCIL: HOME TUITION SERVICE REFERRAL FORM

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

## 2. LEGISLATION AND GUIDANCE

This policy reflects the requirements of the [Education Act 1996](#). It also based on guidance provided by our local authority (Appendix A).

## 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 children with health needs who cannot attend school.

- The Headteacher will be responsible for making and monitoring these arrangements
- The responsibilities outlined in Appendix A Point 5 will be followed

### 3.2 If the local authority makes arrangements

If the school cannot make suitable arrangements, Buckinghamshire Council will become responsible for arranging suitable education for these children.

- The Local Authority will fulfil the responsibilities outlined in Appendix A

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

- Work constructively with the local authority, providers, relevant agencies and parents to ensure the best outcomes for the pupil
- Share information with the local authority and relevant health services as required
- Help make sure that the provision offered to the pupil is as effective as possible and that the child can be reintegrated back into school successfully
- When reintegration is anticipated, work with the local authority to:
  - Plan for consistent provision during and after the period of education outside the school, allowing the pupil to access the same curriculum and materials that they would have used in school as far as possible
  - Enable the pupil to stay in touch with school life (e.g. through newsletters, emails, invitations to school events or internet links to lessons from their school)
  - Create individually tailored reintegration plans for each child returning to school
  - Consider whether any reasonable adjustments need to be made

## 4. Monitoring arrangements

This policy will be reviewed annually by Achievement Committee. At every review, it will be approved by the full governing board.

#### **5. Links to other policies**

This policy links to the following policies:

- Accessibility plan
- Supporting pupils with medical conditions

## Home Tuition and Hospital Teaching Services

Guidance on Alternative Provision for children who cannot attend school because of their health needs.

### 1.0 Introduction

1.1 Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools, proprietors of academies and management committees of PRUs to make arrangements for supporting pupils at their school with medical conditions. Schools are required to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential. In meeting this duty schools must have regard to the following statutory guidance: Supporting pupils at school with medical conditions Statutory guidance for governing bodies of maintained schools and proprietors of academies in England (December 2015).

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/484418/supporting-pupils-at-school-with-medical-conditions.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/484418/supporting-pupils-at-school-with-medical-conditions.pdf)

Although schools are required to ensure that all children with medical conditions are properly supported in school, there are situations where children are unable to attend school because of their health needs. The Local Authority has a statutory duty to arrange suitable education for pupils who because of illness would not receive suitable education. This must be full-time education unless the pupil's health means that full-time education would not be in his or her best interests.

There is no absolute legal deadline by which LAs must have started to provide education for children who cannot attend school because of their health needs. Schools should usually provide support to children who are absent from school because of health needs for a shorter period of time, for example when experiencing chicken pox or influenza. There will also be a wide range of circumstances where a child has a health need that will prevent them from attending school for a longer period of time and they will continue to receive suitable education that meets their needs without the intervention of the LA – for example, where the child can still attend school with some support; where the school has made arrangements to deliver suitable education outside of school for the child; or where arrangements have been made for the child to be educated in a hospital by an on-site hospital school or hospital teaching service. However, LAs should arrange education provision as soon as it is clear that a child will be away from school for 15 days or more (whether consecutive or cumulative across the school year) and where suitable education is not otherwise being arranged.

LAs are required to have regard to the following statutory guidance when arranging suitable full-time education (or part-time when appropriate for the child's needs), and this statutory guidance applies to all children and young people of statutory school age, regardless of the type of school they would normally attend and it applies equally whether a child cannot attend school at all or can only attend intermittently: *Ensuring a good education for children who cannot attend school because of health needs: Statutory guidance for local authorities* (January 2013).

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/269469/health\\_needs\\_guidance\\_-\\_revised\\_may\\_2013\\_final.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/269469/health_needs_guidance_-_revised_may_2013_final.pdf)

1.2 This Buckinghamshire guidance document sets out how the LA will arrange suitable education for Buckinghamshire resident children who cannot attend school because of their health needs through the commissioning of the Buckinghamshire Home Tuition Service and the Hospital Teaching Service at Stoke Mandeville Hospital. For the purpose of this guidance, pupils with health needs are defined as:

- Pupils who are physically ill, injured or recovering from medical interventions
- Pupils with mental health problems
- Teenage mothers/mothers-to-be who are unable to access education in their registered school

Some pupils may not be able to attend school because they are deemed to be school refusers. School refusers are eligible for support from the Home Tuition Service; however they will only be eligible when there is clear supporting evidence from a qualified CAMHS practitioner to certify that the child is unable to attend school due to mental health reasons.

## **2.0 Statutory Duties and guidance, the key points**

### **2.1 Supporting pupils at school with medical conditions Statutory guidance for governing bodies of maintained schools and proprietors of academies in England (December 2015)**

- Pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education.
- Governing bodies must ensure that arrangements are in place in schools to support pupils at school with medical conditions.
- Governing bodies should ensure that school leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are properly understood and effectively supported.
- Governing bodies should ensure that all schools develop a policy for supporting pupils with medical conditions that is reviewed regularly and is readily accessible to parents and school staff. This policy should cover the role of individual healthcare plans.
- Individual healthcare plans should be developed with the child's best interests in mind and should capture the steps which a school should take to help the child manage their condition, overcoming any potential barriers to getting the most from their education.
- Where the child has a special educational need identified in a statement or EHC plan, the individual healthcare plan should be linked to or become part of that statement or EHC plan. Where a child has SEN but does not have a statement or EHC plan, their special educational needs should be mentioned in their individual healthcare plan.
- Where a child is returning to school following a period of hospital education or alternative provision (including home tuition), schools should work with the local authority and education provider to ensure that the individual healthcare plan identifies the support the child will need to reintegrate effectively.

### **2.2 Ensuring a good education for children who cannot attend school because of health needs: Statutory guidance for local authorities (January 2013):**

#### **Local authorities must:**

- 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.
- Suitable provision means suitable to the child's age, aptitude, ability and any special educational needs that he or she may have.
- Provision should be "full time" unless the pupil's condition means that full-time provision would not be in his or her best interests. Although "Full-time education" is not defined in law, it should equate to what the pupil would normally have in school. If they receive one-to-one tuition, for example, the hours of face-to-face provision could be fewer as the provision is more concentrated.

#### **Local authorities should:**

- Provide such education as soon as it is clear that the child will be away 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 children receive is of good quality (as defined in the *Alternative Provision January 2013* statutory guidance), allows them to take appropriate qualifications, 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 individual children in arranging provision. 'Hard and fast' rules are inappropriate: they may limit the offer of education to children with a given condition and prevent their access to the right level of educational support which they are well enough to receive. Strict rules that limit the offer of education a child receives may also breach statutory requirements.
- 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, LAs should 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 particularly in English, Maths and Science.

## **1.0 Home Tuition and Hospital Teaching Services in Buckinghamshire**

Buckinghamshire Council commissions the Aspire Pupil Referral Unit (PRU) to deliver suitable full-time education (or part-time when appropriate for the child's needs) to children who are unable to attend school because of their health needs.

This Buckinghamshire guidance document is premised on schools working collaboratively to support the education of children with health needs and an acknowledgement that the sharing of information between schools, health services and the PRU is important. We will expect schools to work with the PRU to ensure that the provision offered to the child is as effective as possible and that the child can be reintegrated back into school successfully. We recognise that parents also have a vital role to play, and encourage schools to have a publicly accessible policy that sets out how they will support children with health needs.

Whenever pupils are referred to Aspire PRU, regular medical guidance will be sought to support the provision of education other than at school. In particular, the PRU will wish to establish whether pupils are able to continue to receive some or all of their education at school. This may apply in particular to pupils with mental health needs, in whose case collaboration will be sought with the Children and Adolescent Mental Health Service (CAMHS).

In order to better understand the needs of the child, and therefore choose the most appropriate provision, the PRU will work closely with medical professionals and the child's family, and consider the medical evidence, making every effort to minimise the disruption to a child's education. For example, where specific medical evidence, such as that provided by a medical consultant, is not quickly available, the PRU will consider liaising with other medical professionals, such as the child's GP, and consider looking at other evidence to ensure minimal delay in arranging appropriate provision for the child.

Once parents have provided evidence from a consultant, the PRU will not request continuing evidence from the consultant without good reason, even where a child has long-term health problems. Evidence of the continuing additional health issues from the child's GP will be seen as sufficient. In cases where it is felt that a consultant's on-going opinion is absolutely necessary, parents will be given sufficient time to contact the consultant to obtain the evidence.

### **3.1 Hospital Tuition:**

Buckinghamshire Healthcare NHS Trust provides hospital health care for children at Stoke Mandeville Hospital and the LA provides education for children admitted to the paediatric ward and National Spinal Injuries Centre through the Hospital Teaching Service provided by Aspire PRU.

In some cases, where a child is hospitalised other than at Stoke Mandeville Hospital, the host hospital may provide education for the child within that hospital and the LA would not need to arrange any additional education, provided it is satisfied that the child is receiving suitable education.

With planned hospital admissions, LAs should give the relevant Hospital School or Hospital Teaching Service as much forewarning as possible, including the likely admission date and expected length of stay. This allows them to liaise with the child's school and, where applicable, with the LA about the programme to be followed while the child is in hospital.

## **4.0 Referrals for Home Tuition**

Unless the pupil has a long-term or recurring medical condition, a pupil out of school will not qualify for home tuition unless they are likely to be out of school for more than 15 school days. If a child is likely to be out of school for more 15 school days and the school hasn't made other arrangements to deliver suitable education outside of school, they should liaise with appropriate medical professionals as soon as possible to establish whether referral to the Home Tuition Service is appropriate.

If it is deemed appropriate to make a referral to the Home Tuition Service, a referral should be sent to the Aspire PRU Home Tuition Service Coordinator using the appropriate proforma [Appendix A]. Referral forms

should be completed by the home school's designated teacher. Each referral will must include supporting medical evidence that the child is unable to attend school due to health reasons. This evidence needs to be a letter from a medical consultant, Community Paediatrician, or qualified CAMHS practitioner. Where this specific medical evidence is not quickly available, supporting evidence from the child's GP will suffice in the interim.

Following referral, medical evidence and advice from the school will be sought to establish the amount, pattern and location of tuition provided as well as to plan pupil reintegration at school. Home Tuition Service staff will initiate contact and liaise closely with the pupils, their families, their schools and other services as appropriate, including Social Services, Health Services, and Educational Psychologists.

In every case, contact will be made with the home school through the designated teacher. Information will be requested, in particular, the pupil's level of attainment within the core subjects of the National Curriculum. Additionally, evidence of progress from standardised tests, or from Individual Education Plans in the case of pupils with Special Educational Needs, will contribute to the planning process.

School staff will work in partnership with the pupil, the Aspire PRU staff and parents, and will make available to tutors information such as curriculum and lesson plans as well as materials to enable continuity in education provision. This will enable the PRU to ensure that children are able to access suitable and flexible education appropriate to their needs. The nature of the provision will be responsive to the demands of what may be a changing health status.

As appropriate, arrangements will be made for pupils to undertake national tests and examinations.

## **5.0 School Responsibilities**

At all times the pupil remains the responsibility of the school where they are on roll.

All schools must have a written policy and procedures for dealing with the education of children and young people with medical needs. This may stand alone, or be incorporated into the school policy on Special Educational Needs.

Each school must designate a named member of staff to be responsible for dealing with pupils who are unable to attend school because of medical needs. Where a pupil is known to have potentially long-term sickness or recurrent bouts of chronic sickness involving periods of absence, the designated teacher should contact the Community Paediatrician in order to discuss the management of continuing education, including referral to the Home Tuition Service if the school hasn't made other arrangements to deliver suitable education outside of school and this is needed to ensure the child receives suitable education. Through regular communication and forward planning, unnecessary gaps in education can be avoided. In every case, the designated teacher needs to inform parents and carers that other professionals are being consulted about their child's absence from school. The designated teacher will take responsibility for supplying the Home Tuition Service with information about the pupil's capabilities, progress and programme of work. The school will be active in the monitoring of progress during absence from school, in liaising with other agencies and in the pupil's reintegration.

In cases of unpredictable, acute episodes of health needs resulting in absences from school of more than 15 days, the designated teacher should liaise with appropriate medical professionals as soon as possible to establish whether referral to the Home Tuition Service is appropriate.

Schools will ensure that pupils, absent from school because of medical needs, are kept informed about school social events and that they are able to participate as fully as possible in the life of the school, for example in homework clubs, study support and liaising with peers through visits and videos.

A school can only remove a pupil who is unable to attend school because of additional health needs where:

- the pupil has been certified by the designated school medical officer as unlikely to be in a fit state of health to attend school, before ceasing to be of compulsory school age, and;



- neither the pupil nor their parent has indicated to the school the intention to continue to attend the school, after ceasing to be of compulsory school age.

A child unable to attend school because of health needs must not, therefore, be removed from the school register without parental consent and certification from the school medical officer, even if the LA has become responsible for the child's education. Continuity is important for children and knowing that they can return to their familiar surroundings and school friends can help their recovery and their educational progress.

In particular, it is expected that schools will:

- Liaise with the Home Tuition Service, in particular provide prompt up-to-date information about records of achievement and the curriculum.
- Ensure that suitable programmes of work are available to pupils receiving home tuition/hospital teaching, that these are consistent with what the pupil would normally be studying whilst at school and that they take account of the pupil's views.
- Where appropriate, provide resource material to support the programmes of work for the pupil where possible.
- Make appropriate contributions to the cost of providing home tuition as outlined in Section 7.3 of this document.
- Meet all examination fees on behalf of the pupil.
- Make arrangements for Secondary School Transfer Test (11-plus), National Curriculum Assessments, GCSEs, A/AS levels and any other examinations/accreditations.
- Provide the funding for invigilators to ensure completion of any external examinations where it is not possible for the pupil to complete the assessment within the school or PRU. Invigilation of exams will be funded by the school where the pupil is on roll.
- Assess coursework.
- Maintain contact with the pupil and their family.
- Take part in planning and review meetings, especially those called to organise reintegration at school.

## 6.0 Local Authority Responsibilities

The LA holds responsibility for ensuring that pupils who are unable to attend school because of their health needs are able to access education by commissioning a high quality Home Tuition Service. This includes developing and implementing guidance which secures individual entitlement. The key to successful implementation is partnership between agencies and the LA holding the central role in initiating, developing and sustaining these partnerships. The provision of education to pupils with medical needs through the Home Tuition Service aims to maintain pupil progress. This is essential to the timely reintegration into the school of each pupil in accordance with his/her needs.

In particular, the Local Authority will ensure that:

- This guidance is readily available and widely publicised.
- Every pupil, who is unable to attend school because of a long-term or recurring medical condition, will have an Individual Learning Plan. Education should begin as soon as the medical condition allows.
- Pupils absent from school because of their health needs receive education no later than the sixteenth day following referral.
- Pupils whose diagnosed medical condition indicates prolonged or recurring absence from school have access to education from day one of each absence where possible.
- Regular reports on pupil progress are provided in writing to the pupil, to parents and to the school.
- Multi-agency/multi-disciplinary working is promoted, with clear lines of communication, in particular ensuring appropriate liaison with medical professionals, including where appropriate CAMHS staff, relevant staff in the pupil's school, educational psychologists and any other involved professional parties.
- Continuity in education is supported, including promoting access to home school activities and events.



- An individually tailored reintegration plan which meets with multi-agency approval is in place before the pupil returns to school.
- Educational support continues to be provided by the Home Tuition and Hospital Teaching Service in those cases where reintegration is gradual and part-time.
- Home Tuition Service staff receive appropriate professional support in order to sustain the quality of teaching and learning.
- The Home Tuition and Hospital Teaching Service is monitored and reviewed to ensure that the needs of pupils are met, that the service is cost-effective and that all relevant statutory requirements and guidance is adhered to.
- Appropriate information on the Home Tuition and Hospital Teaching Service is available.

## **7.0 Approaches and Strategies to be followed within the Buckinghamshire Home Tuition Service**

### **7.1 Referral and Assessment:**

On receipt of a referral, complete with supporting medical evidence, the Home Tuition Service will make a home visit in order to ensure that the tuition provided is appropriate to meet the needs of the pupil. As an integral part of the assessment, the Home Tuition Service will decide whether it is in the best interest of the pupil to receive 1:1 tuition or whether the tuition can be delivered as part of small group at an appropriate centre.

### **7.2 Method of Delivery:**

Provision is delivered by the Home Tuition and Hospital Teaching Service during term time only. The Home Tuition Service will usually deploy staff registered within the Home Tuition Service but will also, where appropriate, seek to secure tuition that is delivered by a teacher or teaching assistant from the pupil's normal school. In the latter case charging will be adjusted to acknowledge the teaching provided.

### **7.3 Level and Cost of Provision:**

The cost of running the Home Tuition Service is significant and income needs to be generated in order to offset some of these costs. The Home Tuition Service will seek a weekly charge equivalent to one-thirty-eighth of the appropriate AWPU for pupils of statutory school age, plus pupil premium where this is applicable.

Invoices will be raised on a termly basis at the end of each term. Schools will receive written advice of any charges at least 2 weeks prior to the charges being raised.

In cases of post-16 education the legal responsibility to provide home tuition and hospital teaching only exists where evidence is presented that the student is one or more academic years behind. The Home Tuition Service will meet this legal responsibility. In other cases, involving post-16 students the Home Tuition Service is willing to cooperate with any school seeking to release the post-16 funding that has been assigned to that pupil and convert the funding into an equivalent allocation of home tuition.

### **7.4 Tutor Responsibilities:**

Tutors employed by the Home Tuition Service will need to hold appropriate DBS clearance and to have undertaken appropriate child protection training. The Home Tuition Service will cover the cost of one DBS check per employee per annum. Any additional DBS checks necessitated by a break in service will need to be paid for by the employee. Staff will be required to attend basic safeguarding training as delivered by Buckinghamshire Local Authority and an appropriate allowance will be paid to support attendance.

Tutors are expected to submit claim forms for hours worked, which may include tuition hours and meetings to support reviews and reintegration, and travel expenses on a regular basis to the appropriate place of tuition. These will be checked and approved by the local Home Tuition Service Coordinator and Business Manager.

Tutors are also expected to maintain Individual Learning Plans and records of pupil progress regarding the tuition programme and progress of individual pupils.

## **8.0 Contact Details:**

All general enquiries regarding the Home Tuition should be referred to the Home Tuition Coordinator in the first place

### **Aylesbury Vale Area:**

Gill Lewendon  
Home Tuition Coordinator  
Aspire  
Blueprint  
Coventon Road  
Aylesbury  
HP19 9JL  
Tel: 01296 387600  
E-mail: [glewendon@bucksqfl.org.uk](mailto:glewendon@bucksqfl.org.uk)

### **Wycombe, Chiltern & South Bucks Areas:**

Liz Haddock  
Home Tuition Coordinator  
Aspire  
The Wycombe Grange  
Amersham Hill  
High Wycombe  
HP13 6PQ  
Tel: 01494 445815  
E-mail: [EHaddock@aspireap.org.uk](mailto:EHaddock@aspireap.org.uk)

All general enquires regarding the Hospital Teaching Service should be referred to the Teacher in Charge at Stoke Mandeville Hospital:

Michelle Jones  
Teacher in charge  
Ward 3  
Stoke Mandeville Hospital  
Aylesbury  
Bucks HP21 ORP  
Tel 01296 315067  
Email: [michelle.jones38@nhs.uk](mailto:michelle.jones38@nhs.uk)

It is a requirement of the service that at least one other adult nominated by the parent/hospital staff is available on the premises during home/hospital tuition, ie the home tutor is not the only adult on the premises during tuition.

Other premises may be used for home tuition, for example school or PRU premises, other Council or Health Service premises. The additional available adult principle applies in each case. Locations within the hospital other than the designated schoolroom may be used for hospital tuition.

### **Local Authority Commissioning Manager**

Issues concerning quality of service, including complaints, should be directed to:

Manjit Bains  
Education Commissioning Manager- Children's Services  
Children's Commissioning  
Buckinghamshire Council  
Walton Street Offices  
Aylesbury.  
HP20 1UA  
Tel: 01296 475494  
Email: [manjit.bains@buckinghamshire.gov.uk](mailto:manjit.bains@buckinghamshire.gov.uk)

**Updated: May 2020**

## BUCKINGHAMSHIRE COUNTY COUNCIL

## HOME TUITION SERVICE

## REFERRAL FORM

A	NAME OF PUPIL
	SCHOOL: SCHOOL CONTACT: PHONE NUMBER: SCHOOL ADDRESS:
	PUPIL ADDRESS:

	DATE OF BIRTH: KEY STAGE: YEAR:		
	NAME OF PARENT/CARER:	TEL. NO:	
B	SPECIAL EDUCATIONAL NEED (PLEASE SPECIFY):		
C	REASON FOR REFERRAL:		
D	Evidence attached in support of this referral (Please tick relevant boxes)		
	Recommendation from Community Paediatrician / Hospital Consultant / CAMHS Consultant.		
	Reports from school		
	Information from Education Welfare Service		

Name of Referrer: \_\_\_\_\_

Date: \_\_\_\_\_

Please return this form to your local Home Tuition Coordinator:

**Aylesbury Vale Area Referrals:**

Gill Lewendon  
 Aspire  
 Blueprint  
 Coventon Road  
 Aylesbury  
 HP19 9JL  
 Tel: 01296 387600  
 E-mail: [office@aspireap.org.uk](mailto:office@aspireap.org.uk)

**Wycombe, Chiltern & South Bucks Area Referrals:**

Liz Haddock  
 Aspire  
 The Wycombe Grange  
 Amersham Hill  
 High Wycombe  
 HP13 6PQ  
 Tel: 01494 445815  
 E-mail: [office@aspireap.org.uk](mailto:office@aspireap.org.uk)