



## **The Mast Academy Trust**

### **Our Vision**

***Enabling everyone within the Trust to harness their own power and potential.***

### **Our Aims**

***To create amazing learning opportunities for children and for generations to come. To play our part in helping all pupils to contribute to making the world a better place.***

**The Trust Board of The Mast Academy Trust approved the following  
Medical Referral Policy (Adopted from Kirklees Pupil Referral Service)**

**It was adopted with effect from.....27.03.18.....**

**This policy will be reviewed on.....Spring 2021.....**

**Signed by chair of the Board of Trustees.....** *Mark Jones*

# PUPIL REFERRAL SERVICE

## POLICY FOR MEDICAL REFERRALS

### Amendment Notice

If the policy is revised at any stage it will be noted in a PRS Management Committee meeting and a summary of the revision will be made below:

Summary of revision	Reason for revision	Reviewed by

## 1. Introduction

This policy, adopted by the Mast Academy Trust in its entirety, sets out the Kirklees LA standards for the education of children and young people who are unable to attend school because of health needs. The authority recognises that all children and young people are entitled to an education of high quality and is committed to ensuring that the needs of this vulnerable group of learners are met.

We recognise that there is a shared responsibility between the local authority, schools and partner agencies to successfully implement this policy. It is centred on high quality integrated service provision in order to promote better outcomes for this cohort of children and young people.

## 2. The Statutory Framework

In January 2013 the Department for Education published statutory guidance entitled 'Ensuring a good education for children who cannot attend school because of health needs – Statutory guidance for local authorities'. This replaces the previous guidance 'Access to Education for Children and Young People with Medical Needs' (2001). It provides comprehensive guidance to local authorities and related services. Roles and responsibilities, including those of the local authority and school, are outlined in detail. This policy should be read alongside this guidance and any future relevant guidance.

Educational Provision for pupils, who are physically ill, injured or who have clinically defined mental health problems is the responsibility of all schools and education services. Particular provision is made through the Pupil Referral Service in this authority.

From time to time schools or other agencies need to seek support from the Pupil Referral Service for pupils who are temporarily (absence of 15+ school days or recurrent conditions where attendance at school is intermittent) unable to attend mainstream school because of their health.

**At all times** the pupil remains the responsibility of the school where they are on roll. Some Key Stage 4 pupils have been allocated full time placements at Ethos College, the KS4 Pupil Referral Service, however they remain on the referring school's roll and reintegration is always considered at review meetings.

## 3. Roles and responsibilities of referring schools

Schools in Kirklees (including maintained schools, maintained nursery schools, academies, alternative provision academies) are required by law to make arrangements for supporting pupils at their school with medical conditions. Schools must provide an education that minimises change and disruption and is in the best interest of the pupil.

This duty is detailed in Section 100 of the Children and Families Act 2014 and statutory guidance entitled *Supporting pupils at school with medical conditions* has been produced by the Department for Education in order to assist schools to understand and comply with this legislation.

<http://www.legislation.gov.uk/ukpga/2014/6/section/100/enacted>

<https://www.gov.uk/government/publications/supporting-pupils-with-medical-conditions>

The education must be full-time or as much education as the pupil's health condition allows. This must be a suitable education for the age, ability, aptitude and to any special needs the child or pupil may have. (*"The law does not define full-time – page 6 para. 2. The important thing is the pupil*

*“should be able to access suitable and flexible education appropriate to their needs” – page 6 para. 6.)*

If the Pupil Referral Service is required to support school in educating the pupil this will be organised on an individual basis, based upon medical advice. As acknowledged within the Guidance: *“hours of provision could be fewer as the provision is more concentrated” - Guidance page 6 para. 2.*

The home school, with the Pupil Referral Service, aim to provide continuity of learning and to ensure improved access to quality education, *“the same range and quality of education as they would have experienced at their home school.” - Guidance page 6 para. 5.*

It is important that pupils remain engaged in learning and that their risk of social isolation is minimized. The home school and the Pupil Referral Service will work together to ensure the pupil maintains as much contact with school as possible via *“school newsletters, emails, invitations to school events or internet links” including links to lessons - Guidance page 9 para. 23.*

#### **4. Statutory guidance key points**

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 must ensure that school leaders consult health and social care professionals, pupils and parents/carers to ensure that the needs of children with medical conditions are effectively supported.

The statutory guidance also indicates that schools must develop a policy for supporting pupils with medical conditions and that there must be a named person who is responsible for the practical implementation of this policy within each school.

#### **5. Legal Framework for Local Authorities**

The Local Authority has a duty set out in Section 19 of the Education Act 1996 and in the statutory guidance ensuring a good education for children who cannot attend school because of health needs.

The Equality Act 2010 is also an important part of the legal framework around children and young people with significant medical needs.

#### **6. Kirklees Council Responsibilities**

Kirklees Council is responsible for arranging suitable education for children of compulsory school age who, because of illness, would not receive suitable education.

The statutory guidance is clear that there will be a wide range of circumstances where a child has a medical need but will receive suitable education that meets their needs without the intervention of the Local Authority. For example, where the child can still attend school with some support or where the school has made arrangements to deliver suitable education outside of the school for the child.

## **7. Named People**

It is a statutory requirement that local authorities have a named person responsible for the education of children with additional health needs. In Kirklees the named person is:

Mandy Cameron: Deputy Assistant Director for Learning and Skills  
mandy.cameron@kirklees.gov.uk

The above person is responsible, in liaison with schools and professionals, for ensuring that Kirklees Council fulfils its statutory duties in relation to medical needs provision for children and young people who cannot attend school for medical reasons and therefore require alternative educational provision.

Parents/carers can contact the Pupil Referral Service in order to discuss their child's specific circumstances relating to medical needs provision. This may be particularly appropriate in instances where they feel their child's medical needs are not currently being addressed.

Schools can contact the Pupil Referral Service in order to obtain support, advice and guidance in relation to medical needs provision, both generally and in relation to specific cases.

The Pupil Referral Service will also liaise with professionals and colleagues within both health and education as appropriate in order to ensure children with additional health needs are able to access a suitable education.

## **8. Provision in Kirklees**

### **Referral to the PUPIL REFERRAL SERVICE**

Schools must make appropriate referrals to the Pupil Referral Service for pupils unable to attend school due to health reasons where it is clear that the pupil will be away from school for 15 days or more, whether consecutive or cumulative. In these circumstances parents/carers must take medical evidence into the school which confirms why the pupil is unable to attend school and states how long this is likely to be the case. Statutory guidance states that evidence must be such as that provided by a consultant, however, in order to avoid delays the Pupil Referral Service will accept evidence from a GP if the pupil is to be referred to a specialist clinician\*. GP only referrals will initially be considered as an interim referral in order for provision/support to continue, usual timescale 6 weeks. Referrals must then be made via the Pupil Referral Service's Single Point of Referral – see link below:

[www.pupilreferralservice.co.uk](http://www.pupilreferralservice.co.uk)

\*Evidence from a consultant will still be required in this instance

## **9. Initiation of provision from the PRS**

Once the referral form and evidence has been considered and a decision about the referral has been made, the PRS will notify the school accordingly. A planning meeting will be arranged to confirm the appropriate arrangements that will be put in place. The school must liaise with the parents and pupil. Parents, carers and pupils will be invited to attend these meetings.

## **10. Ensuring children with medical needs in Kirklees have a good education**

Schools must provide an education that minimises change and disruption and is in the best interest of the pupil. Where support is agreed school staff and Pupil Referral staff will plan and deliver the provision for pupils in a suitable venue. If in the best interest of the pupil it is agreed that teaching can take place in the home risk assessments will be required. Where a pupil is taught at home a responsible adult must be in the house.

The pupil will remain on the school roll and the school must arrange review meetings (to take place every six weeks). As with an EHCP the guidance states that Individual Healthcare Plan (IHCP) must be reviewed at least annually or when the condition changes. Parents and/or the healthcare professional must initiate this. Where support is agreed, there is an expectation that all parties will engage with and contribute to the agreed plan.

## **11. Pupils who are not on a school roll**

Kirklees Council retain responsibility for supporting Kirklees children who are not on a roll at a school whose health needs prevent them from accessing education. These may include children who are awaiting placement. For example, children who have recently arrived in the county whose illness has prevented them from accessing school provision.

In these instances, parents, carers or professionals working with a child who falls into this category must contact the PRS to discuss further education provision. This may include interim provision through the PRS in which case medical evidence will be sought as described in section 8 of this policy.

## **12. Pupils who are not of compulsory school age**

Kirklees Council will not normally provide support for pupils who are under or over compulsory school age. However, where pupils who would normally be in Year 12 are repeating Year 11, due to a medical reason, requests for support can be considered on an individual basis.

For post-16 students attending mainstream provision, Kirklees Council would look to the host school, college or training provider to make any necessary reasonable adjustments for students who are unwell over a prolonged period.

## **13. Roles and Responsibilities**

### **The School's role is to:**

- Refer the pupil in an appropriate time frame
- Seek medical advice
- Name a representative
- Maintain lead professional role
- Provide a suitable working area within the school where necessary
- Host, chair and minute the meeting with the PRS to include the items below:
  - Venue for tuition
  - Estimated duration
  - Expected contribution from school
  - SEMHD needs
  - PRS roles
  - Plan for reintegration
  - Review meeting dates
  - Appropriate planning discussed
  - Discuss marking and feedback

- Inform the authority regarding part-time timetable
- Keep attendance records
- Inform PRS of any safeguarding issue prior to contact
- To ensure additional funding (EHCP, PP etc) is used to support the pupil
- Host, chair and minute regular review meetings (every 6 weeks)
- Provide materials for an appropriate programme of work and work plans
- Maintain a My Support Plan, where necessary, which records progress towards a return to school
- Ensure all school staff are informed
- Ensure appropriate arrangements, including entry and invigilation are made for all examinations
- Provide the pupil's academic attainment levels including any relevant examination requirements
- Make arrangements for SATs
- Assess coursework
- Provide written reports and communication to parents in line with school policy and practice
- Invite parents and carers to Parents Evenings/Events
- Support with the option choices for GCSEs
- Facilitate career interviews
- Arrange work experience placements and post-16 transition
- Support any change of school administration
- Provide transport support
- Be active in the planning for reintegration into school, using key staff to facilitate the reintegration into school
- Ensure that pupils who are unable to attend school, are able to, and encouraged to maintain friendship groups and are kept informed about school social events and other activities.
- Request updated medical advice termly

**The Pupil's role is to:**

- Engage with the provider
- Be prepared to communicate their views
- Engage with other agencies as appropriate
- Prepare for reintegration as soon as possible

**The Parent/Carer's role is to:**

- Produce appropriate medical evidence and commit to a plan of reintegration
- Be willing to work together with all concerned
- Provide accurate and timely communication if circumstances change
- Attend all meetings (initial and all reviews)
- Initiate a review meeting if the needs of their child changes
- Reinforce with their child the value of a return to school
- Ensure the pupil is ready to learn and there is an appropriate learning space

**The PRS' role is to:**

- Attend the initial meeting hosted by school
- Complete and implement the Medical Needs Support Plan
- Support as much provision and education as the pupil's health allows

- Support the delivery of a broad and balanced curriculum in conjunction with school
- Participate with regular review meetings
- Liaise with the school and Attendance and Pupil Support Officer (APSO) if necessary in order to provide accurate attendance records
- Support learners to access and complete key stage tests and public examinations
- Work with school, and following medical advice implement a programme of reintegration
- Provide an opportunity for students to contribute and comment on their report
- Ensure appropriate coursework and any other relevant material is returned to school

**The Health Service will:**

- Offer medical treatment and advice where appropriate
- Initiate a review meeting if the needs of the child change

**Involved Agencies role is to:**

- Work with others for the benefit of the child
- Attend review meetings
- Provide written reports
- Give appropriate advice and support

**14. Action required to initiate a referral**

If a school is concerned about a pupil:

- with a potentially long-term medical condition or a recurrent condition leading to intermittent, extensive periods of absence
- who is in hospital or is due to go in to hospital and is likely to be absent from school following this for a significant period of time

then a referral form must be submitted to the Pupil Referral Service. Schools or parents/carers can contact one of the head teachers of the relevant Key Stage Service to discuss their concerns or ask for advice prior to referral. If the pupil is to be home taught following a stay in hospital then tuition may well start before the Single Point of Referral form is discussed or done by the school as the hospital staff concerned will provide medical advice and contact the Pupil Referral Service directly in order to provide seamless provision.

Parent/carer consent to the referral must be obtained as Pupil Referral Service staff will need permission to obtain the appropriate medical advice. The Pupil Referral Service will seek advice re the pupil's medical condition, whether they are unable to attend school, whether they are fit enough to receive education and any limitations, a proposed/estimated date for a return to school and whether this is likely to be part time in the first instance.

If the concern is about a pupil who is refusing to attend school without supporting clinical advice then the school must initially refer to the Attendance and Pupil Support Team who will support with strategies and advise with regard to the way forward for the particular case and may advise seeking a GP's opinion and the involvement of the relevant Child Health Service.

If the medical advice supports provision then the school or Children Missing in Education Service will then need to complete the Single Point of Referral form as soon as is possible. Following panel or a hospital referral the relevant Pupil Referral Service staff will activate the request and make arrangements with school and parents for tuition to start.

Meetings, when appropriate, must be convened by the pupil's school for all involved parties to discuss, plan and review the most appropriate provision and draw up a **support plan** for the pupil. These meetings must include:

- Parent/carer and pupil (if appropriate)
- School staff – i.e. the “named person” for pupils with health needs or SENCO as appropriate, a middle leader – the personnel need to be in a position to make time table and funding decisions
- A representative from the Pupil Referral Service
- Representatives from other agencies, e.g. APSO, Educational Psychologists, Children and Adolescent Mental Health Service, Medical Practitioner, Social Services, as appropriate

In certain cases a meeting is not possible or practical prior to provision starting and then it is important that the school hold a planning meeting with the Pupil Referral Service as soon as possible and other professionals involved to collect relevant information to inform the support plan and the educational provision.

## **15. Reintegration and Educational Provision**

Once medical advice is obtained stating a pupil is well enough to receive full-time education from their home school then reintegration must take place. A planning meeting must be initiated by the school within 10 working days in order to ensure a smooth transition for the pupil. For some pupils this may require adjustments to account for areas of physical difficulty or cater for other special educational needs and so the school will call a reintegration meeting to devise and/or implement appropriate plans. This must identify a named person in school to support the reintegration. If a phased return is planned then a clear timetable of attendance must be agreed.

In some cases it may not be possible for the pupil to be in school on a full-time basis initially. Arrangements for reintegration (or any future education arrangements) will need to take into account any on-going health problems or disabilities they may have.

## **16. Reference**

*Ensuring a good education for children who cannot attend school because of health needs.*  
*DfE January 2013*

This policy is in line with the requirements that each local authority publish a policy detailing standards, procedures and responsibilities for those pupils unable to attend school due to health medical needs. In line with Section 19 of the Education Act 1996 we have a duty to:

“ make arrangements for provision of suitable education at school or otherwise than at school for those children of compulsory school age who, by reason of illness, or otherwise, may not for any period receive suitable education unless such arrangements are made for them.”

This policy sets out the roles and responsibilities of the local authority, schools and the relevant alternative education service provider.

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

**Equalities Policy**

**Health and Safety**