St. Mark's Catholic School

CHILDREN WITH HEALTH NEEDS WHO CANNOT ATTEND SCHOOL POLICY

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Our Mission:

St Mark's is a Catholic community inspired by Gospel values where relationships are rooted in love. At the heart of our mission is a commitment to live out our faith and a dedication to embrace excellence in all that we do. We believe in education that instils possibilities, transforms lives and enables all to fulfil their potential.

1. Statement of Policy & Regulatory Framework

At St Mark's Catholic School, we are committed to promoting the education and emotional wellbeing of all children regardless of their medical condition or conditions.

This policy sets out the school's statutory duties and operational procedures to support pupils who cannot attend school due to health needs (physical illness, physical injury, chronic health conditions, or severe mental health difficulties).

This policy is formulated to ensure full compliance with:

- DfE Statutory Guidance: *Ensuring a good education for children who cannot attend school because of health needs*
- DfE Statutory Guidance: *Keeping Children Safe in Education (KCSIE) 2026*
- DfE Statutory Guidance: *Working Together to Improve School Attendance*
- Section 19 of the *Education Act 1996*
- Section 100 of the *Children and Families Act 2014*
- *Equality Act 2010*
- *UK General Data Protection Regulation (UK GDPR)* and *Data Protection Act 2018*

2. Objectives

- **Educational Continuity:** Ensure pupils who are unable to attend school due to medical needs receive continuous, high-quality education that enables them to fulfill their potential and keep pace with peers.
- **Inclusive Reintegration:** Plan and execute swift, personalized, and supportive reintegration strategies tailored to individual health capabilities.
- **Safeguarding Alignment:** Integrate health-related absence tracking with KCSIE 2026 safeguarding protocols to detect underlying vulnerabilities, mental health crises, or neglect early.
- **Multi-Agency Collaboration:** Partner effectively with Local Authorities (LAs), hospital schools, alternative provision (AP) providers, medical professionals, and parents/carers.

3. Local Authority (LA) Statutory Duties & School Responsibilities

Under Section 19 of the Education Act 1996, Local Authorities have a legal duty to arrange suitable, full-time education for children of compulsory school age who, because of illness or other reasons, would not otherwise receive suitable education.

School Support Threshold (0 to 15 Days)

- For health-related absences expected to last fewer than 15 consecutive or cumulative school days, St Mark's remains fully responsible for providing education, setting curriculum resources, and marking work.
- Remote learning resources (Chromebooks, Google Classroom, paper materials) will be issued immediately upon notification of absence.

Local Authority Referral Trigger (15 Days+)

- Where a pupil is absent or expected to be absent due to health needs for **15 or more cumulative or consecutive school days**, the Designated SLT (MKI) will formally notify the Local Authority.
- St Mark's collaborates with the LA to arrange alternative educational provision (such as home tuition or hospital school placement) while retaining the pupil on the school roll.
- The school maintains continuous contact with the LA and healthcare providers to monitor academic progression and well-being.

4. Safeguarding Links, Attendance & Mental Health (KCSIE 2026 Compliance)

ii) Safeguarding & Early Help Escalations

- Health-related absence logs are cross-referenced with CPOMS and safeguarding databases.
- Frequent, unexplained medical absences or chronic illness presentations are monitored by the **Attendance, Pastoral and Safeguarding Manager**, Pupil Progress Leader (PPL) and Director of Pastoral Care. If unmanaged health needs or parental disengagement suggest potential medical neglect or severe emotional harm, concerns are escalated immediately to the Designated Safeguarding Lead (DSL).

iii) Young Carers & Mental Health Distress

- **Mental Health & Emotional Difficulties:** School refusal, severe anxiety, self-harm, or acute mental health crises are recognized as medical needs. The school collaborates with Child and Adolescent Mental Health Services (CAMHS) and external medical teams to support learning.
- **Young Carers:** Pupils acting as Young Carers for family members with chronic medical conditions are identified and provided targeted pastoral care, flexible learning deadlines, and counseling referrals.

5. Roles and Responsibilities

i) Governing Body

- The Pastoral Committee oversees arrangements for pupils with health needs who cannot attend school.
- Ensures policy compliance through annual reviews and quarterly reporting on health-related attendance trends and LA alternative provision arrangements.

ii) Headteacher & Designated SLT

- Hold overall operational oversight for statutory compliance, LA Section 19 notifications, and alternative provision funding.
- Ensure all staff undergo Enhanced DBS checks with Children's Barred List checks (for regulated activity) and complete mandatory KCSIE 2026 Part One training.
- The DSL holds overall strategic and operational responsibility for monitoring, supporting, and safeguarding all pupils whose health needs prevent them from attending school. Their key duties are structured into five core areas:

a) Strategic Oversight & Catholic Mission Integration

- **Fulfilling Student Potential:** Ensure that every pupil facing health-related absences receives high-quality educational, emotional, and spiritual support, ensuring they do not lose the opportunity to fulfill their God-given potential in line with our Catholic mission.
- **Leadership & Strategy:** Collaborate directly with Pupil Progress Leaders (PPLs) to oversee, monitor, and approve individual intervention strategies, educational resource distribution, communication plans, and long-term pastoral support.
- **Senior Leadership Escalation:** Regularly report attendance, health-related absence trends, and reintegration progress to the Designated SLT (MKI / AWA) and the Governing Body's Pastoral Committee.

b) Local Authority Liaison & Statutory Compliance

- **LA Section 19 Escalations:** Oversee the statutory process when a pupil's health-related absence reaches or is expected to reach 15 cumulative or consecutive school days, ensuring timely formal notification to the Local Authority (LA) under Section 19 of the Education Act 1996.
- **Alternative Provision Monitoring:** Maintain oversight of all LA home tuition placements, medical alternative provision (AP), or hospital school educational plans to ensure pupils receive suitable, full-time equivalent education wherever their health permits.

c) Multi-Agency & Parental Partnership

- **Professional Agency Engagement:** Work closely with external multi-agency teams—including NHS health specialists, medical consultants, CAMHS teams, social workers, and Local Authority officers—to align school provisions with clinical guidance. While the PPL serves as the primary day-to-day contact, the DSL steps in to lead complex cases or high-level strategic reviews.

- **Parent & Carer Relations:** Maintain overarching communication with parents and carers to ensure consistent support, family wellbeing, and active engagement. Senior pastoral intervention is provided by the Director of Pastoral Care when navigating complex reintegration pathways or statutory LA procedures.

d) Reintegration Governance & Medical Team Briefing

- **Strategic Reintegration Oversight:** Co-design and formally approve all personalized, phased reintegration strategies alongside the PPL, ensuring all health, academic, and SEND adjustments are robust and realistic.
- **Welfare Officer Briefing:** Ensure the school Welfare Officer is fully briefed and provided with all necessary clinical notes, Individual Healthcare Plans (IHCPs), and emergency medication protocols prior to the pupil's return.
- **Pastoral Safeguarding Integration:** Evaluate health-related absence patterns for potential safeguarding risks (e.g., medical neglect, emotional harm, or unmanaged severe mental health distress), escalating concerns directly to the Designated Safeguarding Lead (DSL) in accordance with KCSIE 2026 protocols.

e) Quality Assurance & Record Governance

- **Secure Information Management:** Ensure all communications, medical certificates, multi-agency reports, and meeting outcomes are recorded accurately and securely on the school's MIS/CPOMS systems in compliance with UK GDPR and Data Protection Act 2018 requirements.
- **Impact & Data Review:** Periodically audit the progress of students receiving remote learning or returning via phased timetables, ensuring academic recovery interventions and pastoral adjustments are delivering effective results.

iii) Pupil Progress Leaders (PPLs):

The Pupil Progress Leader (PPL) has operational day-to-day responsibility for managing the educational, pastoral, and reintegration needs of any pupil absent due to medical needs. Their key duties are structured into five core areas:

a) Strategic Planning & Multi-Agency Liaison

- **Pastoral Strategy:** Collaborate with the Director of Pastoral Care to formulate, execute, and adapt the overall educational and wellbeing strategy for the pupil.
- **External Professional Engagement:** Act as the primary school liaison for external professionals supporting the pupil, including healthcare specialists, CAMHS teams, hospital education staff, local authority home tutors, and social workers.
- **In-School Team Coordination:** Consult with internal specialist teams—including the Designated Safeguarding Lead (DSL), SENDCO, Pupil Coordinator, and EAL Subject Leader—to ensure tailored support for pupils with complex learning, language, or statutory needs.

b) Pastoral Communication & Pupil Wellbeing

- **Parental Partnership:** Maintain regular, structured communication with parents/carers to monitor physical and mental health updates, evaluate learning capacity, and address emerging concerns.
- **Direct Pupil Connection:** Maintain consistent, supportive contact with the pupil using official school channels (such as school email or structured telephone calls

arranged through parents/carers). This ensures the pupil remains feeling connected to the St. Mark's school community.

- **Long-Term Continuity:** Where a pupil's health condition prevents a return to St. Mark's for an extended period, maintain ongoing communication with all involved agencies to review alternative provision pathways and ensure long-term educational continuity.

c) Information Governance & Teacher Coordination

- **Secure Record Keeping:** Maintain meticulous, dated logs of all interactions with the pupil, parents/carers, medical professionals, social care workers, and external tutors. All records must be stored securely on the school's MIS/CPOMS system in compliance with UK GDPR and Data Protection Act 2018 standards.
- **Staff Briefings & Confidentiality:** Keep subject teachers updated on the pupil's progress, work requirements, and expected return dates. Information is shared strictly on a "need-to-know" basis to preserve confidentiality while ensuring teachers are equipped to differentiate work appropriately.

d) Reintegration Strategy & Execution

- **Co-Designing the Return Plan:** In partnership with the DSL medical professionals, social workers, and parents, construct a personalized, phased reintegration plan tailored to the pupil's specific health and academic profile.
- **Pupil Consultation & Empowerment:** Review the reintegration plan directly with the pupil, ensuring their voice is heard, their anxieties are addressed, and they are comfortable with the proposed pace and adjustments.
- **Staff Preparation:** Brief all relevant teaching, pastoral, and support staff on the agreed reintegration plan prior to the pupil's physical return to campus.
- **On-the-Ground Transition Support:** Meet the pupil upon their return, ensuring seamless access to pastoral spaces, medical room provisions, and peer support networks.

e) Post-Return Monitoring & Academic Recovery

- **Post-Reintegration Tracking:** Continuously monitor the pupil's attendance, social reintegration, physical health, and emotional well-being following their return to school.
- **Targeted Academic Catch-Up:** Coordinate subject-specific catch-up sessions, intervention strategies, or homework adjustments to fill academic gaps without inducing undue stress or compromising the pupil's health recovery.
- **Data Drop Reviews:** Systematically evaluate the pupil's academic trajectory at every data drop (IPM, CWT, termly reports, and key assessments) to ensure intervention strategies remain effective.

v) Subject Teachers & Support Staff

- Provide accessible curriculum content, Google Classroom links, and physical work packs.
- Provide constructive feedback on returned work and facilitate catch-up support during reintegration.

- They must liaise regularly with the PPL and parents as directed by the PPL
- Maintain absolute confidentiality regarding medical conditions in compliance with UK GDPR.

6. Provision of Remote & Alternative Education

To maintain educational momentum during medical absence, St Mark's delivers tailored learning pathways guided by medical advice:

- **Digital Learning:** Provision of a school Chromebook, access to Google Classroom, and direct teacher communication via school email.
- **Physical Work Packs:** Textbooks, revision guides, workbooks, and core subject booklets for pupils unable to access digital screens.
- **Hospital & Home Tuition Coordination:** Direct sharing of scheme of work outlines with hospital schools or LA home tutors to ensure smooth academic alignment.
- **Assessment & Examinations:** Adaptation of internal assessments and coordination with examination boards (JCQ) for special consideration or alternative site exam arrangements where required.

7. Personalized Reintegration Strategy

Returning to school after a medical absence requires sensitive, structured planning to ensure long-term success.

Reintegration Plan Principles

- **Multi-Agency Planning:** Developed by the PPL and DSL in consultation with the pupil, parents/carers, healthcare professionals, SENDCO, and social workers (if involved).
- **Tailored Adjustments:** May include phased returns (graduated timetable hours), late starts/early finishes, reduced subject loads, or flexible movement passes.
- **Pastoral Support:** Provision of in-school counseling, welfare room access, designated peer buddies, and regular check-in meetings with the PPL.

8. Record Keeping, Data Protection & Monitoring

- **Data Protection (UK GDPR / DPA 2018):** All medical notes, clinical assessments, and reintegration plans are stored securely in the student's personal and safeguarding files. In line with KCSIE 2026, data protection laws will **never** impede necessary health or safeguarding data sharing with emergency services or statutory agencies.
- **Academic Monitoring:** PPLs monitor returning pupils at every academic data drop (IPM, CWTs, termly reports, and key subject assessments) to deploy targeted academic catch-up interventions.
- **Welfare Integration:** Mrs Scarrott (Student Services) is formally briefed prior to pupil return to ensure medical plans and emergency protocols are activated.

9. Policy Review

This policy is reviewed annually by the Designated SLT (MKI), with formal approval from the Pastoral & Safeguarding Governors Committee.

10. Statutory References

- DfE Guidance: *Ensuring a good education for children who cannot attend school because of health needs*
- DfE Guidance: *Keeping Children Safe in Education (KCSIE) 2026*
- DfE Guidance: *Working Together to Improve School Attendance*
- Section 19, *Education Act 1996*
- Section 100, *Children and Families Act 2014*
- *Equality Act 2010*
- *UK General Data Protection Regulation (UK GDPR)* and *Data Protection Act 2018*
- St Mark's School Policies: *Safeguarding & Child Protection Policy*, *Supporting Students with Medical Conditions Policy*, *Attendance Policy*, *SEND Policy*