



School Attendance and Medical Needs

Delivered by the Attendance Team & Medical Needs Co-Ordinator

Netiquette

Switch off your camera

Mute your mic

Raise your hand if you want to speak

Use the CHAT facility to connect

Respect confidentiality











School
Attendance and
Medical Needs



Aims

01

To understand the expectations around school attendance at this current time

02

To be confident that you are recording absence correctly and access support for absence related to illness

03

To know when to refer children and young people to the Medical Needs Service to gain appropriate support according to their needs

04

Opportunity to ask questions at the end of the webinar

Action for all schools and local authorities

- Communicate clear and consistent expectations around school attendance to families
- Identify pupils who are reluctant or anxious about attending or who are at risk of disengagement and develop plans for re-engaging them
- Put measures in place for those families who will need additional support to secure pupil's regular attendance
- Work closely with other professionals as appropriate to support attending school, including continuing to notify the child's social worker, if they have one, of non-attendance
- 'Listen, understand, empathise and support —but do not tolerate' <u>Securing good</u> attendance and tackling persistent absence published 7 February 2022



Children and young people aged 18 years and under who have a positive test result



How to reduce the spread of infection with the people you live with if you have COVID-19.

If you have COVID-19, there is a high risk that others in your household will catch it from you. There are several things you can do to reduce the spread of infection in your household.

Limit close contact with others. Spend as little time as possible in communal areas.



Use a face covering if you

need to spend time in

frequently touched surfaces and shared rooms like kitchens and Wash your hands regularly using soap and water, particularly after coughing

Regularly clean



Get help where possible from those

unnecessary contact.

you live with. Ask for help with cleaning

and being brought food safely to avoid





It is not recommended that children and young people are tested for COVID-19 unless directed to by a health professional.

If a child or young person has a positive COVID-19 test result they should try to stay at home and avoid contact with other people for 3 days after the day they took the test, if they can. After 3 days, if they feel well and do not have a high temperature, the risk of passing the infection on to others is much lower. This is because children and young people tend to be infectious to other people for less time than adults.

Children and young people who usually go to school, college or childcare and who live with someone who has a positive COVID-19 test result should continue to attend as normal.





School attendance

Guidance for maintained schools, academies, independent schools and local authorities

May 2022

This guidance only applies until the end of the 2021/2022 academic year. Please refer to our new guidance: working together to improve school attendance which will apply from next academic year.

"In line with our transition to living with COVID-19 and the latest public health advice, we are no longer advising schools to record pupils who are not attending school because of COVID-19 using Code X (not attending in circumstances related to coronavirus).

Where a pupil is not attending because they have symptoms of COVID-19 or have had a positive test schools should record this using Code I (illness) unless another more appropriate code applies. Schools no longer need to record pupils who do not attend for reasons related to COVID-19, using Code X"

School attendance: Guidance for maintained schools, academies, independent schools and local authorities May 2022

Pupils with medical conditions

Some pupils face greater barriers to attendance than their peers. These can include pupils who suffer from long term medical conditions or who have special educational needs and disabilities. Their right to an education is the same as any other pupil and therefore the attendance ambition for these pupils should be the same as they are for any other pupil. That said, in working with their parents to improve attendance, schools should be mindful of the barriers these pupils face and put additional support in place where necessary to help them access their full-time education. This should include:

- Having sensitive conversations and developing good support for pupils with physical or mental health conditions
- Working with parents to develop specific approaches for attendance, ensuring the provisions outlined in the pupils EHCP is accessed
- Establish strategies for removing the in-school barriers these pupils face
- Ensure joined up pastoral care is in place where needed
- Ensure data is regularly monitored for these groups

In all cases, schools should be sensitive and avoid stigmatising pupils and parents and they should talk to pupils and parents and understand how they feel and what they think would help improve their attendance to develop individual approaches that meet an individual pupil's specific needs.

Code I: Illness (not medical or dental appointment)

In the majority of cases a parent's notification that their child is ill can be accepted without question or concern. Schools should not routinely request that parents provide medical evidence to support illness. Schools are advised not to request medical evidence unnecessarily as it places additional pressure on health professionals, their staff and their appointments system particularly if the illness is one that does not require treatment by a health professional. Only where the school has a genuine and reasonable doubt about the authenticity of the illness should medical evidence be requested to support the absence.

Working together to improve school attendance



Reduced Timetables

In very exceptional circumstances, where it is in a pupil's best interests, there may be a need for a temporary part-time timetable to meet their individual needs. A prime example, is where a medical condition prevents a pupil from attending full-time education and a part-time timetable is considered as part of a re-integration package. A part-time timetable should not be used to manage a pupil's behaviour.

A part-time timetable must only be in place for the shortest time necessary and not to be treated as a long-term solution.

Coding reduced timetables:

'C' – to be used when coding sessions that the pupil is not expected to attend. If a pupil does not engage with a session that is agreed for them to access then school should code appropriately, reflecting the reason for absence.

For pupils who are medically unfit to attend school and on a part-time timetable to support with their access to education the sessions that they are not expected to be in school or engaging with education should be coded 'I'.

Attendance Team

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Medical Needs Service Team

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Information via the Local Offer & NCC School & Learning Providers webpage

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What does the Medical Needs Service do?

Oversees
educational
provision of
young people in
hospital settings

Provides advice & support to families, schools & professionals around supporting health needs in schools

Coordinates
educational
provision for young
people who are not
well enough to
attend school

Provides
information &
resources
regarding
health needs in
education



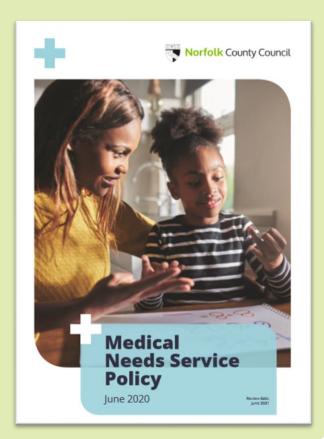


NCC guidance

- Medical Needs Service Policy
- Medical Needs Service online referral form
- Medical Needs Service Model Policy for Schools
- Pregnant Pupils Policy for Schools
- Joint Protocol between Health Services &
 Schools in respect of the management of pupil absence from school when medical reasons are cited Norfolk Safeguarding Children Partnership

https://www.schools.norfolk.gov.uk/pupilneeds/health-needs/medical-needs-service

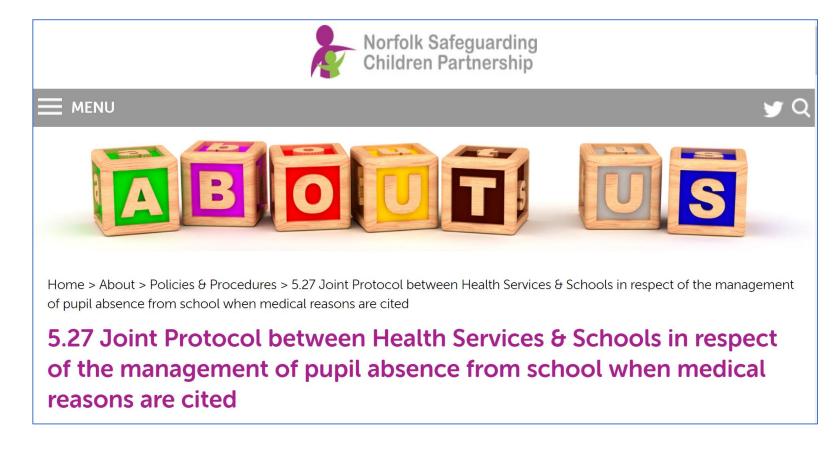






Joint Protocol

5.27 Joint Protocol between Health Services & Schools in respect of the management of pupil absence from school when medical reasons are cited - Norfolk Safeguarding Children Partnership (norfolklscb.org)





Flowchart for schools

Appendix 1 Flow chart for schools, HCP 5-19 and health professionals when health reasons are cited for poor school attendance.

At all stages consider impact on child, wider context and case history and follow safeguarding processes if applicable. At any stage if attendance improves monitoring and appropriate support should continue.

Emerging pattern of absence with medical reasons cited Known medical condition explaining absence? YES NO School contacts the Norfolk School Action: County Council Medical Discuss concerns with parents Needs Service for advice Offer Attendance Support Panel Seek consent to refer to JON 0300 300 0123 Schools can use the Joint Advice re: fitness to attend school Protocol forms to contact Consider FSP specialist services (e.g., CAMHS) if needed Consent obtained No parental cooperation 5-19 HCP (via JON) Engage parents and child re: managing health needs School makes decision to Work with family and school re managing minor illness unauthorise absences and Consider referral to other health care/agencies instigate fast-track process Consider FSP No medical need identified Medical Needs Identified School makes decision to School contacts Medical unauthorise absences and Needs Service instigate fast-track process Continuing absences School obtain consent to contact health professional [HP] from someone with PR and child is >16 Pre-filled form sent to HP HP provides information (including no information).



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Nearly 15 days of absence due to illness

Variety of health reasons reported by parents

No contact from health professionals to confirm health basis for non-attendance

What would you do?





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Over 15 days of absence due to illness and medical appointments

Clear health diagnosis confirmed by specialist health team likely to continue to impact on attendance

What would you do?





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Several weeks of unauthorised absence

What would you do?





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Student receiving support from the Medical Needs Service.

Online learning one day a week but not live. Face to face tuition two afternoons a week. Attending a AP setting one day a week.

Is this herringbone an accurate reflection of this?





- Accurate coding and recording of absence will prompt consideration of safeguarding issues and use of the Joint Medical Protocol
- More than 15 days of absence due to illness should prompt consideration of referral to the Medical Needs Service
- Where schools are coding absence as unauthorised and do not have appropriate health evidence to support referral into the Medical Needs Service, a referral should not be made
- Where schools are seeking advice around coding different types of learning activity or partial/reintegration timetables they should speak to the Attendance Team







Q&A



If you have any further questions that have not been answered today, then please contact the Attendance Team on

01603 223681 or at csattendance@norfolk.gov.uk

