

# **Medical Needs Service Policy**

Date: May 2019

Review date: May 2020

Linked with other policies:

Signed: S. Day -

# This policy is to be read in conjunction with the following statutory guidance and legislation:

- Ensuring a good education for children who cannot attend school because of health needs. Statutory guidance for local authorities; January 2013
- <u>Supporting students at school with medical conditions.</u> Statutory guidance for governing bodies of maintained schools and proprietors of academies in England; December 2015.
- Education Act 1996; Section 19.
- Equality Act; 2010
- Children and Young People privacy notice
- Alternative Provision: Statutory guidance for Local Authorities
- SEND Code of Practice 0-25 years Statutory guidance for organisations which work with and support children and young people with special educational needs or disabilities January 2015

### 1. The underlying principles behind this policy

Norfolk County Council Children's Services are committed to ensuring that all children and young people in the county receive a good education to maximise the learning potential of every young person. A fundamental part of our local offer aims to ensure that all children and young people are given the opportunity of an inclusive education that meets their specific needs.

Children and young people who have additional health needs are, by the nature of their difficulties, at risk of failing to reach their true potential within an educational context. This is particularly the case for those children and young people whose health needs prevent them from attending school for an extended period, or for those who are restricted by their health needs to attending school on a part-time or sporadic basis.

This guidance aims to outline the support available within Norfolk for children and young people with additional health needs. This includes details of when and how alternative provision will be arranged if required, and the respective roles and responsibilities of the local authority, schools, parents/carers, providers and other agencies.

### 2. Role and responsibilities of Norfolk County Council

The statutory guidance is clear that there will be a wide range of circumstances where a child has a health need but may 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 school for the child.

Norfolk County Council is responsible for arranging suitable full-time<sup>1</sup> education for children of compulsory school age who, because of illness, would not receive suitable education otherwise. This duty applies to all children and young people who live in the county of Norfolk, regardless of the type<sup>2</sup> or location<sup>3</sup> of the school they would normally attend and whether or not they are on the roll of a school. The law does not define full-time education, but children with health needs should have provision which is equivalent to the education they would receive in school. Norfolk County Council's medical needs provision, commissioned via the Short Stay School for Norfolk [SSSfN], typically consists of a blended package of home learning support (with a visiting Home

<sup>&</sup>lt;sup>1</sup> Unless it is evident that a student's condition means that full-time provision would not be in his or her best interests.

<sup>&</sup>lt;sup>2</sup> Inclusive of students attending academies, free schools, special schools, independent schools or maintained schools. <sup>3</sup> Where a child is ordinarily resident in Norfolk but attends school outside the county, Norfolk retains responsibility for arranging medical needs provision for that child. Norfolk County Council may seek to recoup costs incurred from the home authority in relation to medical needs provision for Looked After Children placed in Norfolk by a different local authority.

Learning Support Assistant or HLSA), e-learning (remote access to a trained teacher with work completed on a computer), small hub working (where available; this may involve working at a location away from school, in small groups, for example, to begin to rebuild confidence to a full reintegration into school) and continued links with the home school. The latter may include opportunities to attend on a part-time basis initially, or to attend social events and/or trips as appropriate, for example. The ratios of the package are not pre-determined and should be bespoke to the needs of the young person (agreed during the planning meeting). The planning meeting will normally take place in the home environment and be attended by the parent/carer, SSSfN representative, home-school representative, the young person if s/he is able and other professionals as appropriate (for example, CAMHS key worker, Medical Needs Coordinator etc.)

The Medical Needs Service at Norfolk County Council sits within the Education Quality Assurance and Intervention Service. The Norfolk Attendance service is also located within this team and strong links are therefore in place. Where necessary, the Medical Needs Coordinator liaises closely with colleagues (e.g. SEND Advisers) from the Vulnerable Groups Achievement and Access Service; links to SEND support are provided later in this policy. The NCC Medical Needs Service aims to work closely with NHS colleagues and meets regularly with representatives from the Healthy Child Programme 5-19 years (school nursing service), Clinical Commissioning Groups, GP representatives, CAMHS Tier 4 colleagues, and hospital school leaders for example.

### 2.1 Named Person

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

### Anna Duckworth, Medical Needs Coordinator

E-mail: medicalneeds@norfolk.gov.uk

Telephone: 01603 223609

The Medical Needs Coordinator is responsible, in liaison with schools and professionals, for ensuring that Norfolk County Council Children's Services fulfils its statutory duties in relation to medical needs provision for children and young people who cannot attend school for medical reasons.

Parents/carers can contact the Medical Needs Coordinator in order to discuss their child's specific circumstances relating to medical needs education provision. This may be particularly appropriate in instances where they feel their child's educational needs are not being addressed due to a medical condition or ill health.

Schools can contact the Medical Needs Coordinator in order to obtain support, advice and guidance in relation to medical needs education provision and their own statutory responsibilities in supporting children with additional health needs, both in general terms and in relation to specific cases.

The Medical Needs Coordinator will also liaise with professionals and colleagues within both health and education as appropriate to ensure children with additional health needs are able to access a suitable education.

### 3. Roles and responsibilities of Norfolk schools

Schools in Norfolk, as in the rest of the country, (including maintained schools, maintained nursery schools, academies, alternative provision academies and the Short Stay School for Norfolk) are required by law to make arrangements to support students at their school with medical conditions.

This duty is detailed in Section 100 of the <u>Children and Families Act 2014</u> and statutory guidance entitled <u>Supporting students at school with medical conditions</u> has been produced by the Department for Education to assist schools in understanding and complying with this legislation.

Independent schools are under no legal obligation to follow the statutory guidance contained within the document *Supporting students at school with medical conditions*. However, the non-statutory advice within this document is intended to assist and guide these schools in promoting the wellbeing and academic attainment of children with medical conditions.

The key points detailed in the guidance indicate that:

- Students 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 students at school with medical conditions.
- Governing bodies should ensure that school leaders consult health and social care professionals, students and parents/carers to ensure that the needs of children with medical conditions are effectively supported.

The guidance <u>Statutory Policies for Schools</u> also indicates that schools should develop a policy for supporting students with medical conditions and that there should be a named person who is responsible for the practical implementation of this policy within each school. (*Below is a screen shot of the relevant paragraph; the hyperlinks will not work*). Prior to making a referral to the Medical Needs Service, colleagues should check their own school's Medical Policy to ensure that all appropriate steps have been followed.

# Supporting pupils with medical conditions

MS Acad FS PRU

Review frequency: Governing bodies, proprietors and management committees free to determine.

Approval: Governing bodies of maintained schools, proprietors of academies, and management committees of pupil referral units.

Statutory guidance: Supporting pupils at school with medical conditions

Legislation: Children and Families Act 2014 section 100

The following checklist can be found within the Medical Needs Referral Form; school colleagues may find it useful in employing different strategies to support young people with medical conditions and reintegrate students into school:

- The school's own policy for supporting students with medical conditions (as above) has been checked and all procedures followed
- SEN Support Guidance checked for potential strategies
- Contact <u>Just One</u> for advice 0300 0300 0123
- Contact the Virtual School SEND for advice cs.sendadviceandsupportrequests@norfolk.gov.uk
- Use of SEN notional budget (find your school's budget AT
   http://efs.norfolk.gov.uk/BudgetShare/ E.g. how has SEN funding been used to support
   this child as per the SEND Code of Practice
- Provision of key-worker/access to a preferred staff member in school who can support this child
- Individual healthcare plan if appropriate (see <u>Supporting students at school with medical conditions</u>)
- Safe space/break-out room
- Time-out card/exit strategy
- Temporary reduced timetable (give details); see <u>LA guidance</u><sup>3</sup>
- Reduced exam offer (KS4-5 only)
- Outreach support/use of Alternative Provision
- Provision of e-learning
- SENCO assessment
- Meeting with parent/carer
- Attendance action plan
- · Strengths and Difficulties questionnaire completed
- Mental Health and Behaviour in schools guidance checked (if appropriate)

### 4. Students who are not on a school roll

Norfolk County Council retains responsibility for supporting Norfolk children who are not on roll at a school (Children Missing Education) whose health needs prevent them from accessing education. Schools can access the CME service at <a href="http://www.schools.norfolk.gov.uk/Behaviour-and-safety/Children-missingeducation/index.htm">http://www.schools.norfolk.gov.uk/Behaviour-and-safety/Children-missingeducation/index.htm</a>.

In these instances, parents/carers or professionals working with a child who falls into this category should contact either their Education, Health and Care Plan Coordinator or alternatively Norfolk County Council's Medical Needs Coordinator to discuss future educational provision.

The children of parents/carers who have registered them as being electively home-educated [EHE] are not regarded as Children Missing Education [CME]. Their parents/carers have elected to accept responsibility for their education. Therefore, the SSSfN home-learning support is not available in these cases. In rare circumstances, referrals may be considered however. Parents/carers should contact the Medical Needs Coordinator if they feel that there are exceptional circumstances to be considered.

### 5. Early Years and Post-16

Norfolk County Council will normally provide support for students who are between the ages of 5 and 16 (Reception Year to Year 11). However, where students who would normally be in Year 12

<sup>&</sup>lt;sup>3</sup> http://www.schools.norfolk.gov.uk/Behaviour-and-safety/School-attendance/Reduced-timetables/index.htm

are repeating Year 11 due to medical reasons, requests for support will be considered on an individual basis.

For post-16 students attending mainstream provision, Norfolk County 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. Schools, colleges and training providers may contact the Medical Needs Coordinator for further advice if required. If the young person is in Y12-13 and has an EHCP, the provider should contact the EHCP Coordinator in the first instance to seek advice.

### 6. Hospital in-patients

Norfolk County Council provide education (via the SSSfN) for children and young people who are short-term in-patients in the Buxton Ward (Jenny Lind) at the Norfolk and Norwich Hospital. If a young person has been in hospital and would benefit from a transition period prior to recommencing full-time education, this service can be accessed via the referral form.

Students who are inpatients in hospitals or other Tier 4 settings (e.g. for mental health, an eating disorder etc.) are usually educated within schools on the hospital site. In certain instances, particularly in the case of severe mental health needs, children may be placed in specialist residential hospitals outside of Norfolk by the National Health Service (NHS). Many of these facilities have access to an on-site education provision or Ofsted registered school that can offer education as part of the package of care. Norfolk County Council retains responsibility for the education of these children whilst they remain in hospital and upon their return to Norfolk following discharge. The Medical Needs Service requires evidence of a hospital admission, timetable and attendance records to ensure that all invoices for education are paid. It is the responsibility of the hospital school to provide this, not the parent/carer or home school. Hospital schools are expected to liaise with the young person's home school to ensure a relevant curriculum and reintegration. Parents/carers and home school representatives can contact the Norfolk County Council's Medical Needs Coordinator for further support in this area if required.

In advance of a proposed discharge, particularly in the instance that an alternative educational provision is being proposed, parents/carers or professionals working with a child who falls into this category should contact either their Education, Health and Care Plan Coordinator or alternatively Norfolk County Council's Medical Needs Coordinator to discuss future educational provision.

### 7. Children with life-limiting and terminal illness

Norfolk County Council will continue to provide education for as long as the child's parents and the medical staff deem it appropriate.

If the student and parents wish to withdraw from education their wishes will be respected if the decision is supported by medical advice.

### 8. Pregnant Students

It is an expectation that students who are pregnant will continue to be educated at school whilst it is reasonably practical, and it is in the interests of the student. Medical Needs Referrals for pregnant students will be considered on a case by case basis and support will generally be provided for six weeks prior to, and six weeks following, the birth of the baby. The student will remain on roll of their school. If the student has not reached statutory school leaving age, it is expected that she will reintegrate into school, with appropriate arrangements made as necessary.

Evidence needs to be provided to the school to confirm when the baby is expected so that an appropriate Medical Needs referral can be made.

For further advice, schools may contact the Just One service via <a href="https://www.justonenorfolk.nhs.uk/">https://www.justonenorfolk.nhs.uk/</a> or by telephone at 0300 300 0123.

### 9. Medical Needs home-learning support

Norfolk County Council commission the Short Stay School for Norfolk (SSSfN)<sup>4</sup> to support the home-learning of children that are unable to attend school because of health needs.

Schools can make a Medical Needs Referral for a child who cannot attend school because of health needs where they will be away from school for 15 days or more, whether consecutive or cumulative.

### 9.1 Medical Needs Referral

Medical Needs Referrals will ordinarily be made by the school at which the child is on roll. All referrals should be sent to Norfolk County Council's Medical Needs Coordinator using the e-mail address <a href="mailto:medicalneeds@norfolk.gov.uk">medicalneeds@norfolk.gov.uk</a>. If the child is not on a school roll, please contact the Medical Needs Coordinator to discuss. Referrals will be accepted if the following documents are submitted:

### 1) Medical Needs Referral Form (Appendix 01)

a) An example of the Medical Needs Referral Form is provided in Appendix 01. Forms must be completed fully to avoid delays in processing. Any questions regarding the completion of the forms can be addressed to the Medical Needs Coordinator.

### 2) Medical Evidence

- a) Medical evidence must come from a medical professional who has physically seen the young person. The LA recognises that there are waiting lists for some services, which means that on occasion, a GP letter is all that is available. However, schools should note (and make parents aware), that repeat referrals based on a GP letter alone may not be processed. It is expected that a young person who is too unwell to attend school for more than 12 weeks will have had contact with other health services.
- **b)** Medical evidence may be considered from at least one of the following medical professionals:
  - ✦ General Practitioner
  - ★ CAMHS professional (i.e. mental health nurse/mental health practitioner)
  - → Norfolk and Suffolk ME/CFS service (i.e. Specialist Physiotherapist)
- c) Medical evidence should contain the following in writing:
  - ★ A clear statement that the young person is unable to attend school due to health needs.
  - → The estimated length of time for which home-learning support may be required.
  - ★ Information regarding referrals to other services (e.g. CAMHS).
  - → How the young person may best be supported to reintegrate into full-time education.
- **d)** Medical evidence **should not** be in the form of an adult Statement of Fitness for Work ('sick note').

<sup>&</sup>lt;sup>4</sup> Further information on the Short Stay School for Norfolk can be found on their website: http://www.theshortstayschoolfornorfolk.co.uk/

e) Medical evidence which names SEND but no other illness or medical diagnosis, will not be accepted.

### 3) Current attendance herringbone

a) Schools should attach an electronic copy of the young person's attendance herringbone for the year to date; this enables the service to correctly assess the referral. If schools are unsure how to code absence due to health needs, colleagues can contact the LA attendance service on <a href="mailto:csattendance@norfolk.gov.uk">csattendance@norfolk.gov.uk</a> or by telephone at 01603 223681.

### 4) Individual Healthcare Plan

a) Not all young people who are medically unfit for school require an Individual Healthcare Plan. Schools should check the statutory guidance (and templates) which are available within <u>Supporting students at school with medical conditions.</u>

Following the acceptance of a referral, the Medical Needs Coordinator will contact the SSSfN to request that interim medical needs provision is implemented without delay. The first step in this process is a planning meeting.

### 9.2 Timeline

The acceptance letter (see Appendix 02) will include a copy of the timeline. There is a blank column for schools and parents/carers to add their own dates.

### 9.3 Initial Planning Meeting (prior to provision commencing)

The planning meeting will determine the structure of the provision for an initial period of 12 school weeks (or for the period that the student is absent from school, whichever is shorter; see below). Planning meetings will ordinarily take place within the school which submitted the referral or the child's home.

Attendees should include:

- Child
- parent/carer
- home school representative if on a school roll
- representative from SSSfN
- Local Authority Medical Needs Coordinator (where possible)
- An invite should also be sent to the health professional that provided the medical advice

During the meeting, attendees will establish the most appropriate package of education for the young person. This may consist of a blended package of:

- home learning support (with a visiting HLSA from the SSSfN); the HLSA will assist the young person in completing work set by the home school
- e-learning (some may be delivered through school, some via the SSSfN who commission a service led by trained teachers),
- small hub working (where available and appropriate), continued links with the home school
- a clear plan for reintegration.

The ratios of the package are not pre-determined and should be bespoke to the needs of the young person (agreed during the planning meeting).

The home school is responsible for setting and marking work to be completed. This is to ensure that the young person's learning remains broadly in line with the curriculum being delivered at

school. Schools may provide pre-existing lesson plans, schemes of work, worksheets, PowerPoints etc. as would be in place for the young person's usual subject classes. It is not a requirement that teachers produce individual bespoke plans for each young person medically unfit to attend school.

This work can be sent via email to the HLSA or parent/carer, via an online portal, posted, delivered by hand, or collected by the parent/carer. It is **strongly** recommended that the school maintains contact with the young person through the delivery or collection of work. Young people too unwell to attend school can easily begin to feel forgotten and devalued without such contact. It may be advisable, for instance, for a young person to visit the home school after 4pm, when other students have left the building (especially if the health need relates to anxiety, for example). A 10-minute catch up with a preferred member of staff can greatly encourage the young person and ensure that contact is maintained.

Furthermore, the school's continued involvement with the education provision fulfils the following:

Where an intervention is part-time or temporary, to help minimise disruption to a student's education, it should complement and keep up with the student's current curriculum, timetable and qualification route.<sup>5</sup>

If provision is due to cease prior to 12 weeks, schools should inform the Medical Needs Coordinator and <a href="Micky.Butterworth@sssfn.org.uk">Nicky.Butterworth@sssfn.org.uk</a> immediately. Please then proceed to step **9.6 End of provision**.

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If the young person has an EHCP, a copy of the latest review should be brought to the meeting to inform planning and the allocation of the most suitable HLSA.

### 9.4 Review/Reintegration Action Plan (Appendix 03)

A Review/Reintegration Action Planning Meeting should take place halfway through the 12-week provision. The purpose of this meeting is to:

- 1. Review how the SSSfN provision is working
- 2. Propose potential amendments to the provision
- 3. Begin to discuss planned reintegration into school, short or long-term. The plan could include the following (these are suggestions and the school can be flexible in its approach):
  - a. opportunities to attend on a part-time basis initially
  - b. attendance at social events and/or trips as appropriate
  - c. coming into school for break or lunchtimes
  - d. visiting school after other students have left the building
  - e. being met on arrival by a key worker/preferred staff member

### Attendees should include:

- The young person (if possible)
- Parent/carer
- Home school representative
- SSSfN
- Health professional (if appropriate)

A copy of the template for the action plan can be found in Appendix 03 or via <a href="the Medical Needs">the Medical Needs</a> <a href="mailto:service web site">service web site</a>. The plan should be reviewed during week 10 of the provision and emailed by the end of week 11 to <a href="mailto:medicalneeds@norfolk.gov.uk">medicalneeds@norfolk.gov.uk</a> and to <a href="mailto:Nicky.Butterworth@sssfn.org.uk">Nicky.Butterworth@sssfn.org.uk</a>.

### 9.5 Continuation

If after the 12-week period, the student is unable to return to school, further updated medical advice will be required for the provision to continue. Schools should submit a Medical Needs Continuation Request form (<u>Appendix 04</u>) or via <u>the Medical Needs service web site</u> to <u>medicalneeds@norfolk.org</u>. This form should be accompanied by:

- Updated medical evidence (see also note on p5)
- Attendance herringbone
- Updated Individual Healthcare Plan (if appropriate)
- Reintegration Action Plan review

If a Continuation is agreed, a letter is sent (Appendix 05) and the timeline recommences.

<sup>&</sup>lt;sup>6</sup> https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/supportservices/health-medical-needs-support/medical-needs-education-provision

### .6 End of provision

At the end of the medical needs provision, schools and parents/carers (with the views of the young person) should complete the Medical Needs Provision evaluation form (<a href="mailto:Appendix 06">Appendix 06</a>) and email it to <a href="mailto:medicalneeds@norfolk.gov.uk">medicalneeds@norfolk.gov.uk</a>. Evaluations enable us to review and improve the service.

# **Appendices**

- 1) Medical Needs Referral Form
- 2) Acceptance Letter
- 3) Review/Reintegration Action Plan
- 4) Continuation Request form
- 5) Continuation Request Acceptance letter
- 6) Medical Needs Provision Evaluation

# **Appendix 01: Referral Form**

Prior to completing this form, please complete the pre-referral checklist on p2; actions on the checklist may assist the young person in reintegrating into school and therefore make the referral unnecessary. The checklist also helps us to identify key strategies.

The referrer **must** have the consent of the parent/carer and sufficient evidence for that consent. Referrers must understand that they cannot make a referral without consent.

Medical Needs Referral Form							
Personal Details of the young person requiring support							
Full name							
DOB		Year group	Choose an item.	UPN			
Gender/identifyii	Choose an item.	EAL	Choose an item.	FSM/PP	Choose an item.		
EHCP in place	Choose an item.	EHCP Coordinator name/email					
Date of last EHC review	Р	SEN Support	Choose an item.	Name of SENCO			
LAC	Choose an item.	If LAC, date of last PEP	f	Child Protection	Choose an item.		
Parent/carer							
Telephone		Email					
Address			•	Postcode			
GP							
Surgery name				CCG <sup>7</sup>	Choose an item.		
Surgery Address (including postcode)	5			Telephone			
		D : f :	1.1.9.				
Named contact		Referrer	details Email				
ivanieu contact			Lilidii				

Referrer details					
Named contact		Email			
		Role			

<sup>&</sup>lt;sup>7</sup> You will need the postcode for the **GP surgery**; enter it <u>here</u> Medical Needs Service Policy | Version 1 | May 2019 |. Page 12 of 30

School name	Telephone	
and address		

Pre-referral checklist: the following must have been co	nsidered/at	tempted prior to making a referral
Action (can be in any order)	Date(s)	Outcome (cells can be expanded)
The school's own Medical Needs policy <sup>8</sup> checked and all procedures followed.		
SEN Support Guidance checked for potential strategies		
Contact the Virtual School SEND for advice cs.sendadviceandsupportrequests@norfolk.gov.uk		
Contact <u>Just One</u> for advice 0300 0300 0123		
Use of SEN notional budget (find your school's budget <a href="here">here</a> ). E.g. how has SEN funding been used to support this child as per the <a href="SEND Code of Practice">SEND Code of Practice</a> .		
Provision of key-worker/access to a preferred staff member in school who can support this child		
Individual healthcare plan if appropriate (please attach a copy to this referral) <sup>10</sup>		
Safe space/break-out room		
Time-out card/exit strategy		
Temporary reduced timetable (give details); see <u>LA</u> <u>guidance</u>		
Reduced exam offer (KS4-5 only)		
Outreach support/use of Alternative Provision (give details)		
Provision of e-learning (give details)		
SENCO assessment		
Meeting with parent/carer		
Attendance action plan		

<sup>&</sup>lt;sup>8</sup> See statutory guidance <u>here</u>; p19 <sup>10</sup> See statutory guidance <u>here</u>.

Strengths and Difficulties questionnaire completed (please attach)	
Mental Health and Behaviour in schools guidance checked (if appropriate)	
Other – please describe	

Health					
Diagnosis details					
Which	health professionals are so	upporting the young persor	n?		
Name/email	Role	Regularity of contact	Is the professional aware of this referral?		
What support, t	reatment and/or therapies	s are in place or planned fo	r this child?		
Туре		Frequency			
How do the yo	oung person's health need	s and treatment impact on	learning?		
Please give specific details:					
Which oth	ner agencies are involved in	n supporting this young pe	rson?		
Туре	Key contact	Purpose	Outcomes		

	T		T	Т			
Consent  Parental consent <sup>9</sup> for above named professionals to be contacted by the Medical Needs Service (can be electronic but the school must retain its own evidence)							
Signature			Date				
*please note that this referral should <b>only</b> be used for a young person who is unable to attend school due to <b>health</b> needs. It should not be used for young people whose SEND are at the root of their absence from school. In such cases, please contact the young person's EHCP Coordinator for advice or contact other relevant professionals <a href="here">here</a> . Young people with SEND may of course also have medical needs.							
Please provide a summary of the young person's Si If the young person is strategies that best support him/her. unwell and has SEN				• .			
Please comment on the young person's strengths. What works well?  Please give details of any hobbies or interests which may help an HLSA to engage with the young person.							
		Curricu	lum				
Subject	Current leve	l/grade	Current topic	Course & exam board if KS4/5			
English <sup>10</sup>							
Maths							
Science							
ICT							
History							
Geography							
MFL (state language(s)							

<sup>&</sup>lt;sup>9</sup> Please refer to the Children and Young People privacy notice which can be <u>here</u>

 $<sup>^{\</sup>rm 10}$  If English Literature, please give details of texts being studied.

DT		
Art		
RE/social science		
PSHE/Citizenship		
PE		
_		
Music/Drama		
Other:		

# Online resources/e-learning Please list all subjects where an online learning platform can be used (including the school's own VLE if appropriate) Schools must ensure that usernames and passwords are confirmed with the young person during the planning meeting Subject Website

If in Y2, Y6 or Y11-13 What transition plans are in place for school/college/next steps?						
Next school/further education plan (name of setting)	Application made	Key contact				
	Choose an item.					
If no applications have been made, who is working with this young person to decide on next steps?						
Name	Role	Email/telephone				

Baseline Information								
	Please highlight the relevant description							
Attendance in last 6 school weeks	Over 50%	25-50%	10-25%	Below 10%	0%			
Timetable	Timetabled for all subjects	Timetabled for most subject classes	Timetabled for less than 4 subject classes	Timetabled for 1 or 2 classes	Not expected to attend classes			
Independence in lessons	Is independent in class	Some accommodations made by teacher but largely independent	Some adult support in class	Has adult support at all times	Is not able to attend class even with support			
Social times (breaks and lunchtimes)	Mixes with other students well, without support	Manages social times without support	Manages social times in supported environment	Is supported by staff at social times	Avoids school at social times			
Accessing Lessons	Goes into classrooms for lessons without support	Accesses classrooms with support	Accesses small group teaching	Accesses 1:1 teaching	Does not access teaching in school			
Friendships	Has a number of good relationships	Has more than one good relationship with other students	Has one good relationship	Has acquaintances	Socially isolated			
Navigates the school	Can move around school and follow timetable independently	With small accommodations can manage timetable independently	Support required such as meeting and greeting or prompting throughout the day	Substantial support required e.g. accompanied in small part of the school	Does not move around school			
Cooperation	Always cooperative and follows rules	Small infrequent problems	Some problems, cannot / will not cooperate especially when under stress	General issues with behaviour	Behavioural difficulties			

Communicatio n	Communicates well and is polite	Some difficulties communicating	Often cannot / will not communicate e.g. in class or discussions with staff	inappropriate	Is often rude and inappropriate	
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	Parents and Carers
What are the views of the parents/carers?	
What are the views of the young person?	
Parental consent <sup>11</sup> for this referral (can be electronic but the school must retain its own evidence)	

Please make sure that all sections are completed in full. If incomplete forms are submitted this may result in a delay whilst we wait for additional information.

# Attachments

Please ensure that the following are attached to this referral. Failure to do so will result in a delay in processing.

in processing.		
Document	Notes	
Attendance herringbone	For this academic year (and previous year if the referral is made Sept-Oct)	
Medical Evidence	Must be from a health professional who has physically seen the young person (e.g. GP, CAMHS, nurse practitioner etc.) Please refer to the Medical Needs Policy for further details on Medical Evidence.	
Individual Healthcare Plan <sup>14</sup>	As appropriate	

Completed forms and attachments should be emailed to <a href="mailto:medicalneeds@norfolk.gov.uk">medicalneeds@norfolk.gov.uk</a>.

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 $<sup>^{11}</sup>$  Please refer to the Children and Young People privacy notice which can be <u>here</u>  $^{14}$  See statutory guidance <u>here</u>

The time and date of the receipt of the referral form to the Medical Needs inbox will mark the time and date that the referral becomes live.

If you would like to discuss any of the above, please email (as above) or telephone 01603 223609.

### Appendix 02: Acceptance Letter

Medical Needs Referral Name (DOB)

Thank you for submitting a Medical Needs Referral for the above-named young person. I am pleased to inform you that this referral has been accepted having met the criteria for support.

You will be contacted within the next week by the Short Stay School for Norfolk (SSSfN) to arrange a planning meeting to establish the provision. The provision should consist of a blended package of home learning support (with a visiting Home Learning Support Assistant; HLSA), e-learning, small hub working (where available) and continued links with the home school. The latter may include opportunities to attend on a parttime basis initially, or to attend social events and/or trips as appropriate. The ratios of the package are not pre-determined and should be bespoke to the needs of the young person (determined during the planning meeting). The planning meeting will normally take place in the home environment and be attended by the parent/carer, SSSfN representative, home-school representative, the young person if s/he is able and other professionals as appropriate (for example, CAMHS key worker, Medical Needs Coordinator etc.)

The home school is responsible for setting and marking work to be completed (and for ensuring that work has been set up until the start of the SSSfN provision). This work can be sent via email to the HLSA or parent/carer, posted, delivered by hand, or collected by the parent/carer. It is strongly recommended that the school maintains contact with the young person through the delivery or collection of work. Young people too unwell to attend school can easily begin to feel forgotten and devalued without such contact.

E-learning may be a combination of programmes already in use at school, and/or via the Norfolk E-learning Service. This, and other elements of the provision, will be thoroughly discussed during the planning meeting.

\*The support will continue to be provided for a period of 12 school weeks (or less if the young person is able to successfully reintegrate back into school within this timescale). A clear action plan for reintegration should be agreed between the school, young person and parent/care by week 6 of this provision (see timeline below) and emailed to <a href="mailto:medicalneeds@norfolk.gov.uk">medicalneeds@norfolk.gov.uk</a> and the HLSA, so that they can facilitate and support in that process. A review of the action plan should be held during week 10 and emailed, again to <a href="mailto:medicalneeds@norfolk.gov.uk">medicalneeds@norfolk.gov.uk</a> and the HLSA by the end of week 11.

The final date of support will be 12 school weeks from the date of the initial planning meeting. This will be confirmed in writing by the SSSfN. It is anticipated that the child will return to school at this point, following the successful implementation of the reintegration plan.

It is acknowledged that there may be some instances whereby a longer period of support is necessary. If this is the case, when the school emails the reviewed reintegration action plan, it must also submit the following: a Continuation Request Form and additional, and updated medical advice supportive of the young person's inability to attend school due to health needs, **by the end of week** 

**11**. The Continuation Request will be considered, and the home school informed by the end of week 12. If accepted, the cycle must recommence from \* as above.

**Timeline** (the final column has been left blank for you to add relevant dates):

Week of provision (school weeks – not including holidays)	Action	Responsible	Date
Prior	Planning meeting arranged with the SSSfN.	SSSfN Home school Parent/carer, Young person (if s/he is able)	
1	Provision begins	SSSfN Home school (provision of work; sustained contact with the young person)	
6	Review/Re-integration action planning meeting	Home school Parent/carer, Young person (if s/he is able) SSSfN	
7	Review/Re-integration action plan emailed to medicalneeds@norfolk.gov.uk, and Nicky.Butterworth@sssfn.org.uk	Home school	
10	Review/Re-integration action plan review	Home school Parent/carer Young person (if s/he is able) SSSfN	
11	Submission of Review/Re-integration action plan review and the following if necessary: Continuation Request form and updated medical advice supportive of the young person's inability to attend school due to health needs to medicalneeds@norfolk.gov.uk and Nicky.Butterworth@sssfn.org.uk	Home school Parent/carer	
12	Confirmation of Continuation Request decision.	Medical Needs Coordinator	
13	End of provision; the young person returns to school	Parent/carer	
14	Post-provision evaluation	Home school Parent/carer	

If you have any questions regarding this letter, please do not hesitate to contact me.

Yours sincerely,

Anna Duckworth
Medical Needs Coordinator

Date <sup>15</sup> Year group Tu			
Year group Tu			
	tor group Tu	utor Key worker/preferre staff member	
Start date medical needs date provision:	End date m		
Review/Reintegration planning med	eting held:	Attended by:	
Date/location	Name(s)	Role(s)	
		Young person	
		Parent/carer	
		School	
		SSSfN	
		Health	
	Review		

	Action plan			
Action	Person(s) responsible	Date(s)	Review (week 11 of provision)	
1.				
2.				
3. Additional rows may be added as required				
Form completed by:				
Name	Role	Email	Telephone	

Please forward a copy of the Action Plan by the **end of week 7** and the Review by the **end of week 11** to <a href="mailto:medicalneeds@norfolk.gov.uk">medicalneeds@norfolk.gov.uk</a> and to <a href="mailto:Nicky.Butterworth@sssfn.org.uk">Nicky.Butterworth@sssfn.org.uk</a>

**Appendix 04: Medical Needs Continuation Request Form** 

# Personal Details of the young person requiring support

The referrer **must** have the updated consent of the parent/carer for this continuation request and sufficient evidence for that consent. Referrers must understand that they **cannot make a continuation request without consent.** 

If any of the details below have changed since the initial referral, please type them in red.

Full name					
DOB		Year group	Choose an item.	UPN	
Gender/identifying as	Choose an item.	EAL	Choose an item.	FSM/PP	Choose an item.
EHCP in place	Choose an item.	EHCP Coordinator name/email			
Date of last EHCP review		SEN Support	Choose an item.	Name of SENCO	
LAC	Choose an item.	If LAC, date of last PEP		Child Protection	Choose an item.
Parent/carer					
Telephone		Email			
Address				Postcode	
GP					
Surgery name				CCG <sup>12</sup>	Choose an item.
Surgery Address (including postcode)				Telephone	

Referrer details				
Named contact		Email		
		Role		
School name			Telephone	
and address				

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<sup>&</sup>lt;sup>15</sup> 6 weeks after start date of medical needs provision

 $<sup>^{12}</sup>$  You will need the postcode for the **GP surgery**; enter it  $\underline{\text{here}}$  Medical Needs Service Policy | Version 1 | May 2019 |.

Health				
Which health professionals are supporting the young person?				
Name/email	Role	Regularity of contact	Is the professional aware of this referral?	
What support, tr	eatment and/or therapies	are in place or planned for	this child?	
Тур	oe e	Frequen	су	
How do the y	oung person's health need	Is continue to impact on lea	arning?	
Please give specific details:				
Which oth	er agencies are involved in	supporting this young per	son?	
Туре	Key contact	Purpose	Outcomes	
Parental consent <sup>13</sup> for ab	Conser	nt to be contacted by the Me	dical Needs Service	

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(can be electronic but the school must retain its own evidence)

 $<sup>^{\</sup>rm 13}$  Please refer to the Children and Young People privacy notice which can be  $\underline{\text{here}}$ 

Signature	Date	

Education			
	Curriculum		
Subject	Current level/grade	Current topic	Course & exam board if KS4/5
English			
Maths			
Science			
ICT			
History			
Geography			
MFL (state language(s)			
DT			
Art			
RE/social science			
PSHE/Citizenship			
PE			
Music/Drama			
Other:			

If in Y2, Y6 or Y11-13 What transition plans are in place for school/college/next steps?		
Next school/further education Application made Key contact plan (name of setting)		
	Choose an item.	
If no applications have been made, who is working with this young person to decide on next steps?		
Name	Role	Email/telephone

	Parents and Carers
What are the views of the parents/carers?	
What are the views of the young person?	
Parental consent <sup>14</sup> for this continuation request (electronic signature will suffice but the school must retain its own evidence)	

Please make sure that all sections are completed in may result in a delay whilst we wait	•
Attachme Please ensure that the following are attached to this in process	referral. Failure to do so will result in a delay
Document	Notes
Attendance herringbone	For this academic year (and previous year if the referral is made Sept-Oct)

 $<sup>^{14}</sup>$  Please refer to the Children and Young People privacy notice which can be <u>here</u>  $^{19}$  See statutory guidance <u>here</u>

Updated Medical Evidence	Must be from a health professional who has <b>physically seen</b> the young person (e.g. GP, CAMHS, nurse practitioner etc.)
Updated Individual Healthcare Plan <sup>19</sup>	
Reintegration Action Plan Review	

Completed forms and attachments should be emailed to <a href="mailto:medicalneeds@norfolk.gov.uk">medicalneeds@norfolk.gov.uk</a>.

The time and date of the receipt of the referral form to the Medical Needs inbox will mark the time and date that the referral becomes live.

If you would like to discuss any of the above, please email (as above) or telephone 01603 223609.

### **Appendix 05: Medical Needs Continuation Request Acceptance letter**

### Name (DOB)

Thank you for submitting a Continuation Request Form for the above-named young person. I am pleased to inform you that this continuation has been accepted having met the criteria for further support.

You will be contacted within the next week by the Short Stay School for Norfolk (SSSfN) to establish the continued provision. The provision should consist of a blended package of home learning support (with a visiting HLSA), e-learning, small hub working (where available) and continued links with the home school. The latter may include opportunities to attend on a part-time basis initially, or to attend social events and/or trips as appropriate. The ratios of the package are not predetermined and should be bespoke to the needs of the young person (determined during the planning meeting). The planning meeting will normally take place in the home environment and be attended by the parent/carer, SSSfN representative, home-school representative, the young person if s/he is able and other professionals as appropriate (for example, CAMHS key worker, Medical Needs Coordinator etc.)

The home school is responsible for setting and marking work to be completed. This work can be sent via email to the HLSA or parent/carer, posted, delivered by hand, or collected by the parent/carer. It is strongly recommended that the school maintain contact with the young person through the delivery or collection of work. Young people too unwell to attend school can easily begin to feel forgotten and devalued without such contact.

E-learning may be a combination of programmes already in use at school, and/or via the Norfolk E-learning Service which is hosted by trained teachers. This, and other elements of the provision, will be thoroughly discussed during the planning meeting.

\*The support will continue to be provided for a period of 12 school weeks (or less if the young person is able to successfully reintegrate back into school within this timescale). A clear action plan for reintegration should be agreed between the school, young person and parent/care by week 6 of this provision (see timeline below) and emailed to <a href="mailto:medicalneeds@norfolk.gov.uk">medicalneeds@norfolk.gov.uk</a> and <a href="mailto:Nicky.Butterworth@sssfn.org.uk">Nicky.Butterworth@sssfn.org.uk</a> so that they can facilitate and support in that process. A review of the action plan should be held during week 10 and emailed, again to <a href="mailto:medicalneeds@norfolk.gov.uk">medicalneeds@norfolk.gov.uk</a> and <a href="mailto:Nicky.Butterworth@ssssfn.org.uk">Nicky.Butterworth@ssssfn.org.uk</a> by the end of week 11.

The final date of support will be 12 school weeks from the date of the initial planning meeting. This will be confirmed in writing by the SSSfN. It is anticipated that the child will return to school at this point, following the successful implementation of the reintegration plan.

It is acknowledged that there may be some instances whereby a longer period of support is necessary. If this is the case, when the school emails the reviewed reintegration action plan, it must also submit the following: Continuation Request Form and additional and updated medical advice supportive of the young person's inability to attend school due to health needs, **by the end of week 11**. The Continuation Request will be considered, and the home school informed by the end of week 12. If accepted, the cycle must recommence from \* as above.

**Timeline** (the final column has been left blank for you to add relevant dates):

Week of provision (school weeks – not including holidays)	Action	Responsible	Date
Prior	Planning meeting arranged with the SSSfN.	SSSfN Home school Parent/carer, Young person (if s/he is able)	
1	Provision begins	SSSfN Home school (provision of work; sustained contact with the young person)	
6	Review/Re-integration action planning meeting	Home school Parent/carer, Young person (if s/he is able) SSSfN	
7	Review/Re-integration action plan emailed to medicalneeds@norfolk.gov.uk, and Nicky.Butterworth@sssfn.org.uk	Home school	
10	Re-integration action plan review	Home school Parent/carer Young person (if s/he is able) SSSfN	
11	Submission of Review/Re-integration action plan review and the following if necessary: Continuation Request form and updated medical advice supportive of the young person's inability to attend school due to health needs to medicalneeds@norfolk.gov.uk and Nicky.Butterworth@sssfn.org.uk	Home school Parent/carer	
12	Confirmation of Continuation Request decision.	Medical Needs Coordinator	
13	End of provision; the young person returns to school	Parent/carer	
14	Post-provision evaluation	Home school Parent/carer	

If you have any questions regarding this letter, please do not hesitate to contact me.

Yours sincerely

Anna Duckworth Medical Needs Coordinator

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# **Appendix 06: Medical Needs Provision evaluation**

Your name	Role	School	Email	Telephone
Young person	Dates of provision:	From	to	Name of HLSA

Provision: please describe briefly the package received using the bullet points as guides (please give hours per week as appropriate):

- SSSfN home learning support
- E-learning
- Small group/hub work
- Reintegration activities e.g. transition timetable, visits to school, trips etc.
- Other (please give details)

Please rate the following and give reasons for your answers:					
	Excellent	Good	Required develop ment	N/A	Reasons
Quality of the HLSA support					
Contact with the young person					
Success of the reintegration action plan					
Communication with the LA					
Communication with the SSSfN					
Communication with the parent/carer					
E-learning					
Provision of work					
Completion of work					

Please add any other additional information below and email this form to <a href="medicalneeds@norfolk.gov.uk">medicalneeds@norfolk.gov.uk</a>