

**Kent Policy on the education of children and young people
with medical needs**

Amended March 2008



1. *Introduction*

The Health Needs Education Service works to deliver the five outcomes defined in Every Child Matters:

- be healthy
- stay safe
- enjoy and achieve
- make a positive contribution
- achieve economic well-being

2. How responsibility for provision is shared between the home school, the LEA service for children with medical needs and the health agency

Kent County Council considers that the well-being and education of pupils who are physically ill, injured or who have mental health problems is the responsibility of the schools and services. The Home school has a vital role to play in ensuring children who are ill have the support they need to maintain their education. The LEA service has a vital role in resourcing, delivering and monitoring the specialist provision required during their illness. The health agency has a vital role in liaising closely with the education staff to ensure that the planned provision is appropriate and that all the needs of the child, health, social, education and emotional are being addressed.

The Home School¹

The Home school will

- Produce a written policy and establish practical procedures showing clearly how the school will support children with medical and mental health needs by making those appropriate arrangements for educational provision² and working with all those involved in the child's life to ensure that they achieve the five outcomes set out in the introduction to this policy
- Monitor pupil attendance and mark registers so that they show if a pupil is, or ought to be, receiving education otherwise than at school
- Establish appropriate management structures, staff responsibilities and lines of communication within the school for pupils with medical needs
- Identify a named contact within the school with overall responsibility for the provision of education and support to children with medical needs
- Ensure that pupils with statements of special education needs who cannot attend school for medical reasons continue to receive the support outlined in their statement for example additional support learning time, access to other LEA specialist services. Responsibility for providing this support will lie within the home school.
- Set out clearly how the school's procedures will take account of pupil's views
- Establish procedures in line with guidance from the LEA laid out in this policy for ensuring that pupils are reintegrated smoothly into the school, when the time is right for the pupil.
- Set out clearly how the school will liaise with parents and carers
- Review the school's policy and procedures each year, revise as necessary and use as a tool for improving provision

¹ The Home School refers to the mainstream school, special school or resourced mainstream provision in which the child is on roll

² Policies and procedures will be drawn up with reference to the Department of Education and Skills guidance for Head teachers, Local Authorities and Governors issued in November 2001, entitled Access to Education for children and young people with medical needs.

³ The HNES for children with medical needs within the current organisational structure refers to the centrally managed services of the HNES Bases at East Kent, West Kent and Gatland House.

In the case of each child absent from school for medical reasons,

- Notify the Health Needs Education Service Coordinator as soon as it becomes apparent that the child will be absent for more than 15 days due to illness. This notification should be copied to the cluster based education welfare officer.
- Liase with the health professionals responsible for the child and ensure that a referral is made to the HNES with all the necessary information
- Follow the procedures for referral set out in section 4 of this document

As soon as admission to the HNES has been agreed,

- Provide assessment information and curriculum plans to inform the planning of educational provision and support at the outset and on a regular basis in cases of pupils with long term or recurrent illness
- Identify a named staff member who will act as contact point and aid communication with the HNES, the relevant health professional, the parent/carer and the pupil
- Provide work and materials for the pupil as required
- Liase with the named staff member or tutor from the HNES to jointly draw up a Personal Education plan (PEP) to cover the complete education for the child from day one of absence through to reintegration to the home school
- The PEP should be agreed with the appropriate Health professional that is, the, hospital staff member or consultant responsible for the child's medical diagnosis
- Set and attend regular review dates to assess progress and encourage reintegration

The HNES for children and young people with medical needs³

The HNES – East and West Kent will

- Ensure that pupils receive continuity of education complementary and/or comparable to that available in schools, including a broad and balanced curriculum where physical needs allow
 - Work closely with all those involved in the child's life to ensure that they achieve the five outcomes set in the introduction to this policy
 - Maintain an effective tracking system to ensure that children with medical needs are not out of school without access to education for more than 15 working days
 - Ensure that children who have an illness/diagnosis which indicates prolonged or recurring periods of absence from school, whether at home or in hospital have access to education, so far as possible, from day one of their absence.
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- Ensure that pupils with medical needs educated at home receive a minimum entitlement of 5 hours teaching per week, with take-up depending on medical advice and their views and those of their parents
- Have a written admission policy with clearly defined admission criteria and exit strategies for pupils accessing their service
- Make available up to date information for schools, parents, children & young people and health professionals on the service and how it can be accessed

In the case of each child absent from school for medical reasons,

- Follow the procedures on referral detailed in Section 4 of this policy
- Ensure that an individually tailored Personal Education Plan is in place for all children absent from school for medical reasons
- Ensure that the PEP is agreed with the appropriate Health professional that is, hospital staff member or consultant responsible for the child's health
- Teach pupils in accordance with their Personal Education Plan

The Personal Education Plan will include:

1. *The Education plan for the period of absence including curriculum to be covered and type of tuition suitable at each stage of the absence i.e. hospital ward tuition, home tuition and/or hospital school placement*
2. *Name of the Key worker responsible for ensuring that the PEP is implemented in full*
3. *Dates and details of regular review meetings to monitor progress of the child and to discuss potential reintegration*
4. *Views of the child and parent/carer*
5. *Responsibilities of all those involved in the delivery of the pupils education and support package*
6. *Agreed reintegration plan*

The centrally managed HNES will

- Review this policy and all procedures for the education of children with medical needs each year, revise as necessary and use this policy as a tool for improving provision
- Set out clearly how the views of children and families are taken into account in the planning and provision of education for children with medical needs. This is covered in Section 5 of this policy
- Monitor the quality of provision in all parts of HNES including home tuition, hospital ward tuition and day unit placements. The quality of educational provision within the service will be further monitored through the Ofsted inspection process
- Establish robust management, organisational and budget structures which facilitate rapid response to pupil's needs and efficient resourcing across all parts of the service

The Health agency⁴

The health professional will

- Ensure that a holistic approach is taken to the welfare of the child by facilitating timely access to appropriate advice and to effective services which address their health, social, education and emotional needs throughout the period of their illness
- Work closely with all those involved in the child's life to ensure that they achieve the five outcomes set out in the introduction to this policy
- Establish clear procedures for staff which enable children who are in their care to participate in education
- Make arrangements at a strategic level for co-operation and planning between the health agency and the education service
- Have agreed protocols for sharing information about children who are ill between the health agency and the education service
- Make necessary arrangements for publicising education provision in the county for children who are ill
- Once educational provision has been agreed, make arrangements for a health professional to participate in multi-agency meetings to plan and monitor the child's education and reintegration into school

In some cases, the nature of a child's illness is unclear. Mental health problems in particular can involve frequent or long absence from school. A mental health condition may for example manifest itself in truancy, school refusal or disruptive behaviour. Medical needs of this kind include conduct or hyperactivity disorders, emotional disorders such as depression, anxiety and in some cases psychosis. In such cases, mental health professionals will

- Make every effort to provide the medical evidence necessary for the child to secure eligibility for educational support as quickly as possible
- Liaise closely with the child's home school and the hospital school service throughout the referral process to ensure that a child is not left without education for longer than the statutory period of 15 days

3. Kent specialist provision for children and young people with medical needs

Specialist provision for children covered by this policy is made through the HNES, which manages school, group and home tuition from two bases, one in East Kent and one in West Kent, as well as providing education on hospital wards with Gatland House Education Unit serving the needs of tier 4 inpatients at the Oast in Maidstone. Procedure for accessing the service is covered in section 4 of this document. The service offers the following provision –

⁴ The health agency refers to the agency with primary responsibility for addressing the child's health needs. This could be the consultant, psychiatrist, CAMHS professional or hospital staff member caring for the child during their illness.

Hospital ward teaching

Pupils are eligible for hospital ward teaching when they are expected to be in hospital for 5 days or more, subject to their medical condition. Pupils with recurrent admissions are taught from the first day, where possible. Hospital teachers will design specific work programmes outlined in the Personal Education Plan, in the context of the National Curriculum, which represent worthwhile educational experiences but which can be completed in short periods. Teaching is provided on the wards. Teaching sessions are scheduled as appropriate, subject to the child's medical condition.

Home tuition

Pupils absent from school because of medical needs will have access to home tuition within 15 working days. If a pupil is likely to return to school within 15 days, the home school will be responsible for any provision of work required. If there is prolonged, or recurring absence from school, the pupil will have access to home tuition, as far as possible, from day one. Home tutors are contracted and managed by the Hospital School Service in the area in which they work. Reintegration to schools is facilitated immediately when a child becomes well enough to attend school, or gradually when a home tutor teaches for a limited period in the school or both school and home tuition are maintained for some time.

Day unit placement

The HNES in West and East Kent provide unit placements on three sites –

West Kent HNES

- Raynehurst School, Gravesend
- Tonbridge Unit, Oakley School, Tonbridge
- Tunbridge Wells Satellite, Seal Satellite
- Seal Satellite

East Kent HNES

- City View, Canterbury, (Beauherne School)

Gatland Education Unit

- Gatland House, Maidstone – serving the inpatients at the Oast

These units provide a safe and protective environment for children with a range of medical needs. Provision is made at these units for pupils to attend for short placements as part of the process of reintegration back into their mainstream school. Provision is also made for pupils with long term or recurring illnesses who cannot attend mainstream school due to their condition but will benefit from social interaction of a school environment.

Gatland Education Unit

The Oast is a specialist unit run by the Invicta Trust and has residential accommodation for 10 pupils with 2 further emergency beds for secondary aged pupils. Teaching support is provided through the LA Attendance and Behaviour Service. The Unit provides

- Assessment and treatment of children, adolescents and their family/carers who are experiencing psychological, developmental, behavioural and interpersonal difficulties
- Assessment and treatment of children and adolescents who are presenting with definable childhood and adolescent psychiatric disorders.

The teaching unit aims to provide a small therapeutic environment and positive experience of education, which builds pupils' self esteem, enabling them to experiment with different strategies for their recovery. It also aims to develop patterns of behaviour and attendance that will make it possible for them to return to mainstream education with the support of their parents/carers. Referrals are made to the HNES Coordinator by the home school.

ICT

ICT will play an increasingly important part in ensuring the quality and continuity of out-of-school education. Kent LEA and schools will increasingly use CD-ROMs, e-mail and the Internet to extend the variety of educational materials available to children and young people with medical needs and their teachers. Standards fund allocations have been used to develop distance learning using an approach known as the "virtual classroom". All pupils with medical needs have access to ICT educational provision of this kind.

The Curriculum and Public examinations

Unless there are very good reasons otherwise, the Hospital School Service will ensure that pupils have access to the full National Curriculum and public examinations at the appropriate age. As a minimum, pupils are entitled to a broad and balanced curriculum complementary and comparable to that in schools. How and when they are able to access this will depend, of course, on their medical condition.

Arrangements for sitting examinations will form part of the pupil's Personal Education Plan. Awarding bodies may make special arrangements for pupils who are ill, taking public examinations, such as GCSE's or A levels. The named key worker within the PEP should submit applications for special arrangements to the awarding bodies as early as possible.

Long-term patients

Teaching whether in hospital, at home or at hospital school will continue for any child with a life-threatening chronic or degenerative condition for as long as they feel able to access this. Arrangements to undertake examinations will proceed as for any other pupil. Pupils with a variety of progressive or degenerative medical conditions may require special consideration when educational support or intervention is considered. In particular the HNES makes arrangements for

- Maintaining educational input, even when a condition is progressing rapidly
- Close contact and involvement of the parent/carer in the planning and provision of education for the child

- More frequent and regular reviews of the child's education and support plan to ensure that all of their needs are being met.
- Close liaison with health professionals to ensure that the child's well being is considered above all else, particularly where medications and medical equipment are provided
- Rapid response from agencies contributing to SEN statutory assessment in cases where a statement is required

Post-16 transition

A young person's educational needs post-16 may require additional consideration, particularly where he or she has made slow progress up to the age of 16 because of interruptions in their education due to illness. All agencies try to enable a pupil to continue any course of study being taken on entry to hospital or whilst ill or injured at home.

The HNES will normally arrange continuing education for a young person over compulsory school age but under 18 where, because of illness, he or she will need to study for a further year to complete examination courses. Where a young person has a Connexions personal adviser, they will play a key role in co-ordinating delivery of the Transition Plan and in helping to identify and co-ordinate access to appropriate post-16 provision. Further details on how the education service collaborate with the Connexions service in such cases is dealt with in Section 6 of this document. Where students are one year behind the LSC scheme for medically unwell, distance learning is available.

Transport

The provision of transport to and from school by the LEA can sometimes enable a pupil to readapt to school. Kent LEA, however, is only under a statutory duty to provide a transport if the nearest suitable school is not within statutory walking distance of the child's home by the nearest available route. Otherwise the provision of transport is at the LEA's discretion. If a child is attending a Health Needs Education base or grouped/satellite tuition, transport is provided. It is recognised that it is generally more cost effective and educationally and socially sound for children to be transported to a centre for tuition or to the home school, rather than to provide tuition at home.

4. How to access the HNES

Referrals for children and young people with medical needs are routed directly to the Coordinators. The referral forms are available on Kent Trust Web. The pupils considered will be those outlined in the "Introduction" of this document. Referrals to the service can be divided into three categories for the purposes of this process

Cases in which the nature of the pupil's illness is clear and the package of education support required can be set up immediately. The following steps will be taken:

- a Referral form completed by home school in liaison with the relevant health professional and forwarded to the Co-ordinator at Sessions House

- b Contact with the Family, Hospital and Home school made by the Head teacher of the East or West Base or Gatland Education
- c Arrangements are made for the most suitable package of provision – home tuition, hospital tuition and/or tuition at a base or satellite
- d Personal Education Plan is drawn up jointly by the named staff member at the home school and the named staff member or tutor within HNES

Cases in which the nature of the child's illness is more complex and where the involvement of a multi-agency panel in decision-making is seen as beneficial. These cases are often those of pupils with mental health-related problems. The following steps will be taken.

- a Referral form completed by the home school in liaison with the relevant health professional and sent to the HNES Co-ordinator
- b Contact made with Family, School and Health professionals by the Head teacher
- c No obvious support package identified therefore case forwarded to the District Inclusion Forum (DIF) or CBR for multi-agency consideration
- d In cases where at the outset, there is doubt as to whether the child is a suitable referral for the HNES, a referral form can be sent directly to DIF for multi-agency consideration.
- e The Senior Inclusion Coordinator operating across two districts will through DIF chair discussion across agencies and seek to identify a suitable placement for the child.
- f The resulting action plan will be co-ordinated through a key worker from the predominant service
- g Details of the referral and support package are recorded on the DIF or CBR database

Cases where a child is out of school for what is perceived to be medical reasons and is not on the roll of a school. The following steps will be taken:

- a Referral form completed by the parent or health professional and sent to HNES Coordinator
- b Referral to admissions and ACM by HNES

Contact details

East Kent Health Needs Education Service

Ros Eastwood. Tel: 012227 781548

West Kent Health Needs Education Service

Graham Taylor. Tel: 01474 365467

Gatland Education Unit

Julia Coles. Tel: 01622 693000

5 Partnership with parents and carers and pupils

It is recognised that parents and carers have a key role to play in their child's education and have valuable expertise and knowledge, which will ensure their child's well being and the continuity of their education during the period of their illness. They will be full partners in the drawing up of their child's personal education plan and will be fully informed about their progress at all times. Children and young people, will also be fully involved in making decisions and exercising choices.

Wherever possible, parents carers and pupils are informed about the education available before a child is admitted to hospital. Leaflets are available to provide information about educational and medical services. The Kent Partnership with Parents service is available to all parents who need support during this difficult time⁵.

All parents and carers are consulted before teaching begins at home and offered advice and support during the pupil's illness. Parents and carers are encouraged to liaise with the pupil's home school, both at the beginning and end of a stay in hospital and with the home tutor. The positive involvement of parents with the school once the child has returned to school provides reassurance for the child, teachers and parents themselves.

In the case of a child or young person in public care Kent County Council, as the corporate parent, is responsible for safeguarding and promoting his/her welfare and education. The authority and primary care users (foster carers or residential social workers) hold valuable information about the educational achievements of the children and young people in their care. They will play the same key role to play in the planning and implementation of the child's Personal Education Plan as any other parent.

6 The role of other services and agencies

Effective and flexible collaboration of all those involved in educating and supporting the child through their illness is crucial to the continuity of high quality educational provision for children and young people with medical needs and successful re-integration into school. Whilst the responsibilities of the key agencies are set out in section 2 of this document, this section covers the role of other professionals that may be involved at different stages of the child's illness.

Education Welfare Officers (Attendance and Behaviour Service)

Education Welfare Officer (EWOs) play a key role in resolving attendance issues, importantly that of identification of attendance problems related to medical issues. EWOs employ a variety of strategies including a school referral system, home visiting and working with other agencies. Each cluster of schools has a named EWO to work alongside the designated member of school staff to co-ordinate a response to poor attendance as a part of a whole

⁵ The Partnership with Parents helpline 01622 755515

school approach to inclusion. Shared policy and operational practice between the Education Welfare Service, the Health Needs Education Service and schools is vital. EWOs will work with school to ensure registers are checked and contact is made with a child's parents or carers promptly on the first day of the absence.

Connexions

The Connexions Service provides information, guidance, referral and support for all young people aged 13 to 19 in England, including giving more in-depth support to those who are at greatest risk of not making a successful transition to adulthood. The service will therefore play a key role in supporting children with medical needs who need some extra guidance or mentoring at various stages either throughout their illness or as they decide on their future path after school.

The personal adviser, working closely with the home school, will need to assess the young person's needs and in some cases help broker access to, and monitor the support given by, the HNES or any other specialist service. The service provides a link Personal Adviser to each of the HNES Bases. The HNES will notify the Connexions Service of all young people with medical needs, aged 13+. The link Personal Adviser will ensure that young people with medical needs have access to a Connexions Personal Adviser either at the school, college they are attending or within the home area, if not attending a school.

7 Ensuring successful reintegration into mainstream school

Returning to school after a period of absence can be an emotional hurdle for a pupil. Friendships can be damaged by a long absence. Peer group contact during an absence, for example cards, letters, videos and invitations to school events, are as important as formal contact. The Home School needs to develop a welcoming environment and encourage pupils and staff to be as positive and proactive as possible during the transition period. Consultation with the child and parents and key staff about concerns, medical issues, timing and pace of return is important.

A strategy for re-integration will be a key element of the child's Personal Education Plan developed jointly by the staff member within the HNES Base and the child's home school. The re-integration strategy should include

- Date for planned reintegration
- Details of regular meetings to discuss reintegration
- Clearly stated responsibilities and rights of all those involved
- Details of social contacts including the involvement of peers and mentors during the transition period
- A programme of small goals leading up to reintegration
- Follow up procedures

8 Budget, organisation and staffing

Budget

Kent receives funding through its standard spending assessment enabling the required resources to be delegated annually to the HNES to cover the running costs of the main bases and the costs of the home / hospital tuition.

Mainstream schools' recurrent funding is based on their pupil numbers on the second Thursday in January. With certain limited exceptions relating to pupils in nursery or SEN units, all pupils on register on the day of count (including pupils absent on grounds of sickness) will be included in the count. This funding is used to resource the delivery of the Home School's responsibilities to children on their roll who are absent due to illness.

Organisation

Kent LA's service for children and young people with medical needs was established in 1996 to manage and develop the work of existing Hospital and Home teachers around the county. The service is co-ordinated from Sessions House with bases in East and West Kent. The management groups and Headteachers are responsible within their area for-

- Provision planning
- Budget management
- Day to day operational issues
- Staffing
- Monitoring and Evaluation of teaching and learning
- Quality and standards

Staffing

The HNES Base teachers and tutors working in day units, children's homes or hospitals are employed by the HNES Base within their area. They are subject to the same recruitment process and checks teachers in any other school.

Continuing professional development is particularly important for teachers of pupils with medical needs. They have responsibility for teaching all ages and all abilities. They also have a key responsibility in dealing with other agencies. Kent LEA will ensure that teachers in home and hospital teaching services have access to continuing professional development in the same way as other teachers and assistants.

HNES teachers are encouraged to liaise and share good practise with other teachers of pupils with medical needs. Opportunities will be considered for training health, social services and education professionals together, to facilitate the development of multi-disciplinary teams to work across traditional boundaries and to promote multi-skilling.

Budget

In order to address the service development of needs the Schools Funding Forum agreed that schools be charged a daily proportion of Age-Weighted Pupil Unit for the support of their pupils.

Year Group	R	1 - 2	3 - 6	7 - 9	10 - 11	Retakes
Daily amount in £	10.50	11.10	9.80	13.80	15.60	17.60

Cross Border Referrals

Where pupils live in a Local Authority bordering Kent County Council, KCC will provide a service to the Kent schools to enable continuity of education.

Independent Schools

The Service will be available to pupils in independent schools on the same financial basis as Kent schools, as agreed in the charging paper presented to Schools Funding Forum on 25 January 2008. Charges will be at a proportion of the Age-Weighted Pupil Unit. This will be calculated daily on the basis of 190 days per school year.