

# Supporting children with significant health needs

Bev Petch

Head of Alternative Provision

- Solihull is committed to meeting the needs of children with significant medical needs where their needs cannot be met for a period of time in their home school.
- Presumption- most health needs will be met by the home school with appropriate adjustments

*‘There will be a wide range of circumstances where a child has a health need but will receive suitable education that meets their needs without the intervention of the LA – for example, where the child can still attend school with some support; where the school has made arrangements to deliver suitable education outside of school for the child; or where arrangements have been made for the child to be educated in a hospital by an on-site hospital school’.*

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

# Scenario

- Joe Bloggs has been put on a timetable of 10 hours per week – out of a total of 25 on offer.
- He has attended 5 hours per week.

**What is his attendance?**

- It is 20% (5 out of 25), **not** 50% (5 out of 10)



# DfE statutory guidance makes it clear that:

- The majority of pupils who experience medical needs are best provided for in their home school, with appropriate adjustments.
- Where the medical needs are so significant that education off-site is required for a period, this should be for the shortest appropriate time to prevent pupil losing their links with friends and to reduce the impact on attainment and progress.

# Removing children from their school and local community is a big decision!

- Can lead to erosion of the relationships that have developed over time with staff and peers in school.
- Positive relationships and a sense of belonging in school are often protective factors for the most vulnerable children. These should be sustained wherever possible.

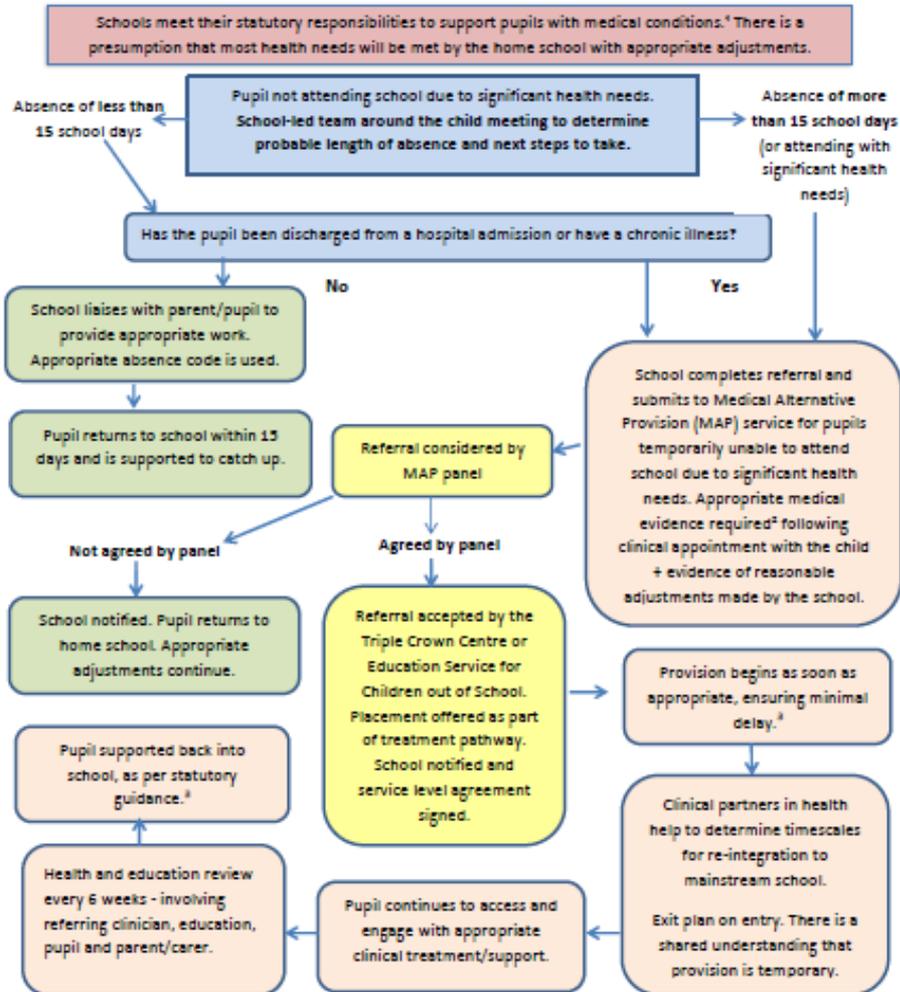


Wikipedia.org)

# LA provision: new medical pathway

- Where a pupil's health needs are significant, they may require educational provision for a period that is provided by the Local Authority under Section 19 of the Education Act 1996.
- Solihull Local Authority needs to ensure greater equality of access and consistency across this provision.
- As a result, some changes to the process have taken place.

### Solihull Medical Alternative Provision Pathway for Supporting Pupils with Significant Health Needs



<sup>1</sup> Supporting pupils at school with medical conditions: statutory guidance for governing bodies of maintained schools and proprietors of academies in England, DfE 2015

<sup>2</sup> Appropriate medical evidence: Senior Clinical Psychologist, Consultant Psychiatrist, Associate Specialist Psychiatrist, Community Paediatrician, Hospital Consultant. Evidence from a GP will only be considered where specific medical evidence from an appropriate clinician is delayed. The GP must provide accompanying evidence that specialist referrals have been made.

<sup>3</sup> Ensuring a good education for children who cannot attend school because of health needs: statutory guidance for local authorities, DfE 2013

# Process for prolonged absence due to significant health needs

- Referral by the home school and sent to the 'education for children with health needs' mailbox:  
[echn@solihull.gov.uk](mailto:echn@solihull.gov.uk)
- Complete in full using the new referral form.
- The signature of the Headteacher is a requirement.
- The inclusion of parental details and their accompanying signature should indicate that the home school has discussed the referral and implications with the parent who has then consented to the referral being made.

# Please include appropriate medical evidence

- As per statutory guidance, medical evidence from a **GP** will only be considered in exceptional circumstances e.g. where there would be a considerable delay caused by waiting times to obtain specific medical evidence from a consultant.
- GP would need to include full details of specialist referrals made to appropriate senior clinicians.
- As per pathway, appropriate clinician = Hospital Consultant, Senior Clinical Psychologist, Consultant Psychiatrist, Associate Specialist Psychiatrist, Community Paediatrician, Hospital Consultant



# Panel meetings (MAP)

- Regular panels for medical alternative provision (MAP), usually held weekly, will continue to assess and approve referrals. All referrals will be assessed on a **case by case** basis.



# Please note:



- The phrase ‘medically unfit for school’ is an unhelpful Solihull construct. Please do not encourage its use.
- For mental ill-health, pupil would usually receive specialist tier 3 services from Solar CAMHS (complex, severe, persistent).
- Clinicians need to provide detail about the pupil’s difficulties (following a recent clinical appointment with the child), how long they may require reasonable adjustments etc so we can all make sound educational decisions.

# DfE Guidance

## Local authorities should:

- Ensure that the education children receive is of good quality, as defined in statutory guidance **Alternative Provision** (2013), allows them to take appropriate qualifications, prevents them from slipping behind their peers in school and allows them to reintegrate successfully back into school as soon as possible.