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 onsite 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.



Schools meet their statutory responsibilities to support pupils with medical conditions. There is a presumption that most health needs will be met by the home school with appropriate adjustments. Pupil not attending school due to significant health needs. Absence of more Absence of less than School-led team around the child meeting to determine than 15 school days 15 school days probable length of absence and next steps to take. (or attending with significant health needs) Has the pupil been discharged from a hospital admission or have a chronic illness? No Yes School liaises with parent/pupil to provide appropriate work. Appropriate absence code is used. School completes referral and submits to Medical Alternative Provision (MAP) service for pupils Pupil returns to school within 15 Referral considered by temporarily unable to attend days and is supported to catch up. MAP panel school due to significant health needs. Appropriate medical evidence required following Agreed by panel clinical appointment with the child Not agreed by panel + evidence of reasonable adjustments made by the school. Referral accepted by the School notified. Pupil returns to Triple Crown Centre or home school. Appropriate Education Service for adjustments continue. Provision begins as soon as Children out of School. appropriate, ensuring minimal Placement offered as part delay.8 of treatment pathway. Pupil supported back into School notified and school, as per statutory service level agreement guidance.* Clinical partners in health signed. help to determine timescales for re-integration to Health and education review mainstream school. every 6 weeks - involving Pupil continues to access and Exit plan on entry. There is a referring clinician, education, engage with appropriate shared understanding that pupil and parent/carer. clinical treatment/support.

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

provision is temporary.

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





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

Appropriate medical evidence: Senior Clinical Psychologist, Consultant Psychiatrist, Associate Specialist Psychiatrist, Community Paediatrician, Hospital Consultant. Evidence from an QP will only be considered where specific medical evidence from an appropriate clinician is delayed. The QP must provide accompanying evidence that specialist referats have been made.

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
- 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.

