# Policy for Children and Young People who are unable to attend School due to Health Needs

**Hull City Council** 

#### **Background**

Hull City Council is committed to ensuring that all children and young people in the city receive a good education to enable them to achieve their full potential. A key element of our Local Offer is to enable all learners the opportunity to access an inclusive education which meets their individual needs.

Children and young people who have additional health needs are at risk of not being able to fulfil their true educational potential by the nature of their difficulties. This is particularly the case for children and young people whose health needs prevent them from attending school for an extended period, or for those who are only able to attend on a part time or sporadic basis because of restrictions relating to their health needs.

This policy details how Hull City Council will comply with its statutory duty to arrange suitable full time (or part time when appropriate) education for learners of compulsory school age, living in the city of Hull, who because of illness, would otherwise not receive suitable education. This applies to all children and young people, whether or not they are on the roll of a state-funded school.

#### **Key Legislation**

Hull City Council has responsibility under section 19 of the Education Act 1996 as amended by section 3 of the Children, Schools and Families Act 2010 to:

'Make arrangements of the provision of suitable full-time or part-time education otherwise than at school for those children of compulsory school age who, by reason of illness ... may not for any period receive suitable education unless such arrangements are made for them'.

Education Act 1996 (legislation.gov.uk)

Local authorities must have regard to statutory guidance when carrying out their Section 19 duty. The relevant guidance is: "Ensuring a good education for children who cannot attend school because of health needs":

Education for children with health needs who cannot attend school - GOV.UK

#### Equality Act 2010:

Some complex and/or long-term health issues may be considered disabilities under equality legislation.

#### Equality Act 2010 (legislation.gov.uk)

Working Together to Safeguard Children

#### Working together to safeguard children - GOV.UK

The statutory guidance 'Keeping children safe in education' and 'Early years foundation stage (EYFS) statutory framework' set out the safeguarding duties and expectations on schools, colleges and other education providers and should be read alongside this guidance.

To support with school attendance

Working together to improve school attendance - GOV.UK

#### **Useful references**

- Preventing bullying GOV.UK
- Safeguarding and social care for children GOV.UK

#### Children with health needs who cannot attend school

We advise that governing bodies review this requirement annually and the governing body must approve any school policy.

#### Supporting pupils with medical conditions

The governing body, proprietor or management committee is free to decide how often this policy is reviewed. However, it should be regularly reviewed and readily accessible to parents and school staff.

#### First aid in schools

First-aid provision must always be available while people are on school premises, and off the premises whilst on school visits. We advise that governing bodies review this requirement annually.

Non-statutory guidance on first aid provision can be found here: First aid in schools - GOV.UK (www.gov.uk)

#### **Roles and Responsibilities of Hull City Council**

The statutory guidance is clear that there will be a wide range of circumstances where a learner 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.

Hull Council is responsible for ensuring a suitable full-time education is provided for children of compulsory school age who, because of illness cannot attend school. This duty applies to all children and young people who live in the City of Hull, regardless of the type or location 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. A full time education offer would be sought unless it is evident that the learners' condition means that full time provision would not be in their best interests. Where a learner is ordinarily resident in Hull but attends school outside the city, Hull retains responsibility for arranging health needs provision for that child.

Pupils absent for 15 days or more will be tracked and monitored against the I attendance code. Targeted support meetings will take place with each school, every term, to review those pupils with attendance concerns. Schools are responsible for ensuring the Local Authority is notified of all pupils subject to Section 19 (s19)

#### **Named Person**

It is a statutory requirement that local authorities have a named person responsible for the education of children with additional health needs and that parents should know who that person is. In Hull the named person is:

Name/Role: Hayley O'Grady, Head of Access and Inclusion

**E-mail:** Hayley.o'grady@HullCC.gov.uk

**Telephone:** 07725557172

The named person is responsible, in liaison with schools and professionals, for ensuring that Hull City Council Children's Services fulfil its statutory duties in relation to health needs provision for children and young people who cannot attend school for health or medical reasons.

Schools, colleges and education and training providers may contact the named person for further advice if required. If the young person has an Education Health and Care Plan [EHCP], the provider should contact the SEND Assessment and Review Team in the first instance to seek advice.

#### School roles and responsibility

Schools (including maintained schools, maintained nursery schools, academies, and alternative provision academies) are required by law to make arrangements to support pupils at their school with medical conditions. This duty is detailed in Section 100 of the Children and Families Act 2014 and statutory guidance entitled Supporting pupils at school with medical conditions has been produced by the Department for Education to assist schools in understanding and complying with this legislation. Governors, proprietors and management committees should make themselves familiar with this guidance.

Schools should ensure that pupils with medical conditions are properly supported in school to have full access to education including school trips and physical education. Schools may need to make "reasonable adjustments" to accommodate learners with medical needs.

Initially, the school will attempt to make arrangements to deliver suitable education for learners with additional health needs who cannot attend school. Where a learner is not attending due to ill health, it is important that they feel supported in their learning and that each learner's situation is assessed on an individual basis so that their needs are met accordingly.

#### Under this policy schools will:

- make arrangements in collaboration with the child and parent/carer to provide suitable home learning activities as soon as an absence is expected to last for more than 15 school days (or less if this part of a recurring pattern of illness).
- The school will liaise with parents/carers to put in place suitable arrangements to ensure the best continuity of learning possible.
- support pupils to attend school where possible through the implementation of phased returns following a period of absence or a part time timetable if this will support the health needs of the learner.
- Continue to conduct necessary welfare checks for the learner. There are no firm recommendations
  around the frequency of welfare checks; schools must make this decision based upon their
  knowledge of the child and family. Safeguarding responsibilities will continue to be based within the
  home school.
- Monitor arrangements between home and school, including liaison with teachers.

- Ensure that appropriate work is provided to the home address or hospital where this is relevant.
- Monitor the learner's engagement with the work and liaise with the learner's parents/carers and teachers where necessary.
- Refer to the commissioned provider/Local Authority for additional support where the school is unable to arrange a suitable full time educational offer.
- Where a referral to the commissioned provider is accepted the home school will be responsible for arranging any transport and meeting these costs to enable the learner's engagement with the Health and Medical Needs Education Service offer.
- Maintain communication with the commissioned provider and as a minimum, contribute to initial plans and 6 weekly reviews to support reintegration.

#### The responsibility of the LA

If the school cannot make suitable arrangements and this is evidenced, the LA will become responsible for arranging suitable full-time education for learners of compulsory school age. Hull City Council commission a provider to deliver its' offer to children and young people with an additional health need who are unable to attend school due to medical or health reasons. To ensure continuity in the curriculum, the responsibility for the learner's education remains with the school at which the learner is on roll. All learners must be on a school roll to access support from the commissioned provider.

Hull City Council will retain oversight of the support provided in accordance with this policy and will monitor and evaluate the quality and effectiveness of any provider commissions to provide this service.

Where a learner is subject to a Child Protection Plan, is a Child Looked After (CLA) or a Child in Need the Education Safeguarding Manager will be informed of provision under this policy. In addition to this the Virtual School Worker and/or Social Worker will also be notified in order to adequately safeguard the child.

Where a learner has an Education, Health & Care Plan the Head of Service (SEND) will be informed of provision under this policy.

#### The responsibilities of the Commissioned Provider

To collate and circulate all referrals and linked information in preparation for the multi-agency panel meeting monthly.

To deliver high quality teaching which meets the health and educational needs of the learner.

To monitor engagement with provision and progress towards academic outcomes to support any home school reporting cycles.

To make any further relevant referrals to other services who would be appropriately placed to support the learner.

To provide regular updates to the home school and parents/carers on the progress of the learner.

To report on the number of learners accessing provision, their periods of involvement and reintegration rates on a termly basis to the LA Health and Medical Tuition Panel.

Where a staff member from the provider has concerns about safeguarding, they should contact the providers' Designated Safeguarding Lead [DSL] who will liaise with the DSL of the home school.

To respond to actions, questions and queries within a set time from the LA Health and Medical Tuition Panel.

#### When support is available

Schools may refer for support from the Local Authority commissioned service when a learner has:

- an illness which will prevent them from attending school for 15 or more school days, either in one
  absence or over the course of a school year and where suitable education is not otherwise being
  arranged.
- a health need and their absence has been validated as necessary by a medical professional, either a consultant community paediatrician or consultant psychiatrist from CAMHS.

Health problems can include physical illnesses, injuries and clinically defined mental health problems certified by medical evidence, such as that provided by a medical consultant. From CAMHS consultants, the evidence would be in the form of a letter detailing their professional opinion that attendance at an educational setting is currently not appropriate to support the learner's needs.

Hull City Council will normally provide support for pupils who are between the ages of 5 and 16 (Reception to Year 11). However, where pupils who would normally be in Year 12 and are repeating Year 11 due to medical reasons, requests for support will be considered on an individual basis.

For post-16 pupils attending mainstream provision, Hull City Council would look to the school, college or training provider where the learner is on roll to make any necessary reasonable adjustments for pupils who are unwell over a prolonged period.

#### What support is offered/available?

A suitable full time (where appropriate to the needs of the learner) education will differ depending on the health needs of the individual learner and their current circumstances. As a result there are a range of possible support options which may be utilised to support the learner.

In principle any support to learners could be enhanced by online learning packages but this will need to be a personalised offer that considers the individual needs of the learner on a case by case basis.

#### **Inspire Unit**

The Inspire Unit is a CAMHS inpatient service with 2 wards – Orion is a 9 bed General Adolescent Unit (GAU) and Nova is a 4 bed Psychiatric Intensive Care Unit (PICU). The service aims to provide an evidence based and effective service for young people aged 13 – 18 years with severe and complex mental health difficulties. Most young people will attend the service on an informal basis. On occasion, young people are admitted and detained under the Mental Health Act (1993).

Whilst staying at the Inspire Unit learners will have access to an appropriate education that is planned and delivered by The Sullivan Centre guided by medical professionals working with the young person.

#### **Hospital Classroom**

If a learner aged 5-16 is admitted to Hull Royal Infirmary, they are eligible for support from the Hospital Education team from The Sullivan Centre.

Referrals to this support are made by the medical staff in the hospital and are discussed daily upon the advice from the medical team supporting the learner. Tuition will only commence following consultation with a learner's parents/carers.

Once tuition has been agreed the home school (where the learner is ordinarily on roll) will be contacted on to inform the school of the provision being put in place and progress made. The Sullivan Centre will liaise with the home school upon discharge to ensure an appropriate plan is in place to support reintegration into the school environment. In some circumstances, upon discharge, pupils may be referred to The Sullivan Centre onsite classrooms or the Home Tuition Service.

For pupils not on the roll of a school, the LA will be informed of the provision in place and progress made, this will be overseen by the named contact.

The Hospital Education team will liaise with the home school to identify and deliver an appropriately identified curriculum which will align with the curriculum being delivered in the home school with a view to supporting a successful reintegration.

#### **Home Tuition**

Home tuition is provided by The Sullivan Centre and is offered to learners who are unable (due to their health needs) to access an educational setting. The home tuition team can arrange to deliver tuition to the learner at their home (this may be virtually) or in a suitable public space (such as a library).

The home tuition team will deliver a highly personalised curriculum to support the bespoke needs of the individual learner with an initial focus on social skills and content to support engagement with learning.

#### **Short Stay Classrooms**

The short stay classrooms are learning spaces which are available for use by pupils supported by The Sullivan Centre. These small classroom bases are located on a small site within the city and can be accessed by those learners who are able to access a group based learning offer but are unable to attend a mainstream education site due to their physical or mental health needs. These short stay classrooms may be used to support a transition from home tuition outreach back into a mainstream school environment. These classrooms can also be utilised to support the engagement of learners in enrichment activities and/or to support a learner's social skills in a group environment.

The short stay classrooms facilitate a bespoke curriculum with a focus on core curriculum content to support the reintegration into the learner's home school, once the learner has made appropriate progress with their health needs. This core curriculum will be enhanced by support from life coaches who develop individuals social and emotional and mental health skills and other appropriate content to continually support engagement with learning.

#### **Referral Process**

Referrals for support for learners who are unable to access a suitable full-time education because of their physical or mental health needs can be made by the following professionals:

- schools
- directly from a Consultant or CAMHs when a child is enrolled at a school
- through coordination with the Hospital Education Service (located at Hull Royal Infirmary) and other hospitals outside of the city

Direct referrals cannot be received from parents/carers and will only be considered in joint partnerships with a child's home school, the LA and other health care professionals supporting the child.

All schools are required to fill in a referral form (See Appendix 1) which will enable the learner's case to be discussed at the panel. This referral requests information relating to the learners SEND status, details and history of their current care arrangements and data relating to their academic attainment levels. Referring

schools will also be expected to detail other agencies and support services that the learner is known to, what supportive provision they currently have in place for the learner, what reasonable adjustments they have made to meet the learner's needs and how well the learner has engaged with this provision.

The referral form and supporting documents must be completed and signed by the pupil's parents/carers and mainstream school. It is important that all areas are completed so that we have a clear picture of ability and interventions tried as well as all the personal and contact details.

All referrals **must** have supporting evidence from a senior medical practitioner detailing the learners' unsuitability to access an education offer from their home school. This is at Consultant, Paediatrician level. Supporting evidence may also be provided by CAMHS or equivalent.

A letter from a GP is rarely enough to support a referral although may be accepted in some circumstances e.g. when a CAMHS referral has been accepted but interventions have not yet commenced or where a call to the Crisis Team is evident in the case of a suicide attempt

Referral forms need to securely be sent with supporting medical evidence to the commissioned provider via email to SullivanCentrePanel@vennacademy.org

Referrals will be considered at each multi-agency panel meeting which will be held monthly. On each panel there are senior staff from the commissioned provider, alongside experienced multi agency staff including; educational psychology, specialist nursing, CAMHS and the local authority. Decisions made by the multiagency panel will be recorded and shared with the LA named person. Interim decisions on the access to Health and Medical Needs Education Service will be considered if referrals are classed as 'special circumstances' where urgent action is required. These decisions will be made by the commissioned provider in conjunction with the LA named person based on information provided by professionals and parent/carers.

In some circumstances, the commissioned provider may not be the most appropriate provision for a learner, in such situations, the panel will endeavour to signpost the referring body to different provision better suited to meet a particular learner's needs.

#### When a referral is accepted

Following consideration by the panel for those cases where a referral is accepted a decision will be made as to the most appropriate provision for the learner at the current time. Each individual's package of support is not pre-determined and should be bespoke to the needs of the learner, as a result the most appropriate provision will be identified through an initial planning meeting with the learner and their parent/carer and/or lead practioner.

Depending on the provision identified a number of induction processes will be required to take place and may include:

- The home school will be required to identify a lead member of staff who will liaise regularly with the
  provider team to ensure that the work undertaken at home is in line with the home school's
  curriculum
- The home school will be required to detail how they will maintain regular contact and engagement with the learner to support a reintegration when the time is right
- A home visit by the relevant member of the provider staff

- Details of expectations to ensure safeguarding and effective use of time will be shared with families where tuition is to take place in the home or an agreed public space
- A welcome visit and tour of the short stay classrooms
- An admissions meeting to confirm all appropriate documentation is received and information is correct, detailing the proposed timetable of provision and support
- Clarification of responsibilities relating to dual registration and transport costs will be discussed
- Following an initial meeting the responsibilities of both the home school and the provider will be agreed and recorded. A signed copy of the agreement will be held by both settings. The agreement will be referred to at all subsequent reviews

The commissioned provider must notify the Local Authority in writing of the provision they are implementing by sharing the Health and Medical Tuition Plan and Review form (Appendix 2) of any learner whom it is intended will receive support under this policy. In addition, prior to any decision being finalised to implement support through this policy the following professionals should be consulted:

- Where a learner is subject to a Child Protection Plan, is CLA or a Child in Need the Education Safeguarding Manager, Social Worker and Virtual School Worker.
- Where a learner has an Education, Health & Care Plan the Head of Service (SEND)

#### **Monitoring and Review Processes**

Following the commencement of provision a six-week review meeting will be held. The review meeting will be attended by representation from The Sullivan Centre, the learner, the parent/carer, the lead member from the home school and any health professionals where appropriate. This six week review will focus on:

- The continuing suitability of the current provision
- Learner's progress and engagement with educational provision
- Review of learner's health needs
- Initial plans for reintegration into the learners mainstream setting
- Agreement of next steps and responsibilities of those involved

Learners who are supported by The Sullivan Centre will receive a termly progress report which details progress through the providers SEMH curriculum. This will include comments from the learner's outreach tutor/teacher, the Principal of the provider and Life coach.

#### Withdrawal of tuition

Offers of support may need to be reviewed in circumstances when:

- A learner's behaviour poses a health and safety risk to themselves or others
- A learner fails to attend or make themselves available for tuition on a regular basis without production of an appropriate medical certificate or having a valid reason for absence
- A learner ceases to follow a therapeutic programme recommended by any other agency as part of a rehabilitation and reintegration package. Isolated tuition sessions do not in themselves support a programme of reintegration, nor can they give the learner sufficient confidence to ensure a successful return to school
- For home tuition, when an adult (parent or carer) is not available within the home

Where the learner is supported by the commissioned provider, normal procedures will apply for both fixed term and permanent exclusions, please see the provider's behaviour policy.

#### Exit process and reintegration plans

Health and Medical needs provision will end when Hull City Council receives guidance that the young person is well enough to return to school, or there is no longer appropriate health evidence to support absence from school. Hull City Council retains the statutory duty around provision and, following liaison with parents/carers and health professionals, makes the final decision on provision ending.

It is anticipated that an initial 12-week programme of health and medical needs provision will provide sufficient time for many learners' health needs to make progress and following this time will be able to successfully reintegrate back into their host school.

Where at a 12-week review meeting it is evident that the health needs of the learner continue to prevent them from attending mainstream education, an agreement of further medical or health needs provision will be considered on a case-by-case basis by the multi-agency panel.

#### **Ending of provision**

When it is agreed that health and medical needs provision is due to end this will be communicated to the learner, parents/carers and the home school clearly in writing.

The Discharge Report (appendix 3) from the commissioned provider will detail:

- Provision which has been in place
- A brief report on progress and engagement with provision
- Confirmed date of return to full time provision from home school
- Details of any identified support strategies
- Details of any continuing reintegration support required for implementation by the home school
- Details of the lead person at the home school that the learner and parent/carer can liaise with for support moving forward
- Appendix 1: Referral Form
- Appendix 2: Health and Medical Tuition Plan and Review form
- Appendix 3: Discharge Report template

# **Appendix 1: Referral Form**

# **Health and Medical Needs Education Service**

All Sections are mandatory.

	i Oillis Wii	i be rett	illied ii lic	of fully confi	летес	WI	lich may delay	supp	JOIL	
Name of main contact			Email ad	dress of main						
						Hon	ne tuition	ement	at Sullivan C	entre
Referring School							Do you think this referral should be considered urgently due to special circumstances YES/NO			ed urgently due to
Section 1:	Biographical Details									
Child's Name			ate of Birth ear group		Gend		Male  Female		Identified Gender	Male
Address:									Post Code	
Free School Meals	Yes No No	Looked /	After Child	Yes No		C	Open Child Protection	n Pla	n	Yes No No
SEND Status	None SEND	Support		Undergoing	Statut	ory A	ssessment			EHCP
Referral reason	☐ Complex Medica			Ethnicity				<u> </u>	Language f not nglish	
Parent/Carer Name				Relationship				Con	tact Number	
Current details	and history of the chil	d's care ar	rangements	and / or family	circum	stan	ices:			

	The	Assessment Date	must l	be within 9 months of ref	erral			
Science								
ICT				Other				
English				Spelling				
Maths				Reading				
Subject	Level	Dated Assess	ed	Skill		Age	Date As	sessed
	National Curriculum Leve	ls	1		Basic L	iteracy Skills	1	
Attendance %	Current Academic Year to r	referral date	Last	t Academic Year - Overall	%	Open EWO Case	Yes 🗌	No 🗌
		Number of Exclusio	ns Issu	ued Number of	Days Excl	uded		
HIGHLIGHTED	Date of Last Meeting regardi	ing the child/family						
BE ATTACHED FOR ALL DOCUMENTS	ATTEND framework or equivalent		Refer	ral to REFRESH		Referral to CAMI	HS	
EVIDENCE MUST	Headstart referral			ral to EHASH		Multi agency rev	iew	
Response to Concerns	Health & Safety Risk Assessment			uated support strategies rement from agencies		Staff training und	dertaken	
School's	IEP / PEP implemented Nurture Group			w of IEP / PEP		Emergency Annu Review	ual	
Please Give a Brief	Description of Concerns							
						Stay in nospitai/i	npatient	
concerns	Anxiety Substance misuse			dS Involvement g Disorder		Illness Stay in hospital/i	nnationt	
Please Indicate concerns	Self harm  Currently out of education  Low attendance		Medic	le Ideation al assessment/pending		Safeguarding co Vulnerable Pupil Injury		
			OFFI	CIAL				
Section 2:	Information about the Chil	•			n below			

Please Give a Brief Description of the Pupil's Strenghths and Interests
Section 3:
Please describe the school strategies tried by the referring school & all external agencies involved (these must demonstrate a full graduated response including the ATTEND framework or equivalent)

	OFFICIAL					
Section 4:	Section 4: Supplementary Background Information OFFICIAL					
Medical Information	- Please indicate any l	known	medical conditions / needs			
ADHD ☐ ASC ☐	Asthma Diabete	es 🗌	Eczema	eech Inpediment	Glasses	
Other Please give fu	ll details of any medical	conditio	ons highlighted above			
Agencies Involved -	Please indicate which	Agenc	ies have been involved with the child within	last 3 years:		
Names and numbers	s/email must be provid	ed				
	Agency		Contact Name	Contact Number & email	Open Case	
Social Care & Safegu	arding				Yes No No	
Paediatrics					Yes  No	
Education Psychology	/ Service				Yes 🗌 No 🔲	
CAMHS					Yes 🗌 No 🔲	
Family Support Centre	е				Yes 🗌 No 🔲	
Other, please state					Yes  No	
In making this referra	al you and all parties a	e agre	I eing to the following terms. If the pupils secure	L es a placement at the Sullivar	Centre classrooms or	
receiving home tuition.						
We expect:						
			gether in partnership and to attend relevant re			
<ul> <li>The referring school will keep their child on the school roll during the placement.</li> <li>The lead contact from the referring school will make contact at least once a week.</li> </ul>						
			any concerns regarding attendance, safeguar hospital education is short term provision whi	-		
			will be responsible for organising and the pay			
			l Education admissions panels from a range on anager, Educational psychology, CAMHS, sp			
	•		place will be offered, in line with our admission			
Child Protection pro	cedures					
Where staff have conce	erns that a child has beer	n harmed	d or abused or is at risk of harm or abuse, then the	relevant child protection procedu	ures must be followed.	

Section 5:	Parental View	
Please give details of	f any views that the parent / carer has regarding this referral	
Please give details o	f any views that the child has regarding this referral	
i lease give details o	rany views that the child has regarding this referral	
	The reason for the referral has been explained to me by the school and I agree to the referral being made	Yes No No
December 10 constant	g	
Parental Consent	I am aware of the information contained in this form and acknowledge the Data Protection Clause detailed in	Yes 🗌 No 🗌
	Section 7.	
Section 6:	Submission of Referral Form	
	bmitted electronically to the Hospital Education referral panel.	
SullivanCentrePa	nel@vennacademy.org or please contact school on 01482 585203.	
•	ings will be held 4 weekly. If a referral is deemed as urgent/subject to special circumstances the referral will be c referrals made will be provided within 5 working days.	onsidered shortly after
receipt. Feedback on	elerrais made will be provided within 3 working days.	
Please sign ensure b	oth signatures are complete below for consideration – electronic signatures are not permitted.	
Signature from refe	rrer Date	
Parental/Carer cons	sent	
Section 7: Date	a Protection Act 1998 & General Data Protection Regulation 2018	
	by you on this form is required for the purpose of providing appropriate support services for the identified child. This may be disclosed	to other relevant Children
and Young People Service	es and partner agencies for this purpose. Information will not be passed to any other third parties unless required to do so by law. All p	ersonal data used by
	curely retained for the duration that this is legally required. The subject of this data and those who exercise legal responsibility for them. All Sullivan Centre staff have been trained and follow the General Data Protection Regulation.	i nave the right to see this

# Appendix 2: Health and Medical Tuition Plan and Review

	<u>Health a</u>	<u>na Medical Needs Edu</u>	ication Serv	/ICE - Plan and Review
Learn	ner Name:			
Date	of Birth:			
Start	date of Tuitio	n:		
Others i	involved in suppo	orting the learner:		
Name			Role	
			Parent	
			Home Sc	hool Contact
			Sullivan Centre Tutor	
<u>Phase</u>	1 Provision			
Week	Week Commencing	Planned Attend (Including times, loca staff responsil	ations and	Review of Weeks Attendance
1				
2				
3				
4				
5				
6				
This pla	ın will be reviewe	ed via telephone/email/p	arental con\	versation on a weekly basis.
Date for	or Interim Revie	w of this Plan		
(Week	6)			
Signat	tures of Agreem	ent with this Plan (We	ek 0)	
Sulliva Centre			Parent:	
Learne	er:		Home School Contact:	

# **Phase 1 Review**

Discussion Points	Comments		
Engagement with provision			
Academic Progress			
Learner's Health Needs			
Plans for reintegration to provision provided by home school	(Where it is felt a return to home school provis review should be planned for week 11 to notify Education Service panel for agreement of	$\prime$ the Health and N	/ledical Needs
SCHOOL	Action	By whom	By when

# **Phase 2 Provision**

Week	Week Commencing	Planned Attendance (Including times, locations and staff responsible)	Review of Weeks Attendance
7			
8			
9			
10			
11*			
12			

This plan will be reviewed via telephone/email/parental conversation on a weekly basis.

\*At week 11 this case will be reported back to the panel for review.

Date for Forma	I Review of this Plan			
(Week 12)				
Signatures of A	Agreement with this Pla	n (Wee	k 6)	
Sullivan Centre:			Parent:	
			Home	
Learner:			School	
			Contact:	

# **Phase 2 Review**

<b>Discussion Poi</b>	nts	Comments			
Engagement wit	h provision				
Academic Progress					
Learner's Health	Needs				
Plans for reintegration to provision provided by home school		complete Health  ☐ Agreement to	Tuition Rei Continuation complete e)	n Setting from (Date) (Please integration Report) on of Health & Medical Tuition new Health & Medical Tuition Plan	
Signatures of A	greement w	ith this Plan (Wee	k 12)		
Sullivan Centre:			Parent:		
Learner:		Home School Contact:			

# Health and Medical Needs Education Service

# Discharge Report (photo & name)

D.O. B	
Lead Tutor	
Lead Tutor contact details	
Year Group	
Admission Date	
Transition Date	
Discharge Date	

Add photos.

# Pupil Discharge/Transition Report

Date:	Year Group:
Written by:	Current Attendance:
Class size:	Interventions Received:
Educational offer:	Subjects Studied:

- 1. Relevant Background:
- 2. Provision in place:
- 3. Progress and Engagement:
- 4. Identified barriers to learning:

**Cognition and Learning** 

**Communication and Interaction** 

Social, Emotional and Mental Health

Physical/Sensory

- 5. Successful strategies:
- 6. Discharge plan:

Details of continuing reintegration support required by the home school

Confirmed date of return to full time provision from the home school.

Name and contact details of the lead person at the home school.