

Referral Policy and Procedures

Hospital and Home Education Service

September 2015



Hospital and Home Education Service (HHES)

This document should be read in conjunction with the Department for Education's *Ensuring a good education for children who cannot attend school because of health needs. Statutory guidance for local authorities.* January 2013.

Local Authorities (LAs) have a duty to arrange suitable full-time education (or part-time when appropriate for the child's needs) for children who are unable to attend mainstream or special school because of their health.

There will be a wide range of circumstances where a child has a health need but will receive a suitable education that meets their needs without the intervention of the LA.

The Department for Education guidance is due to be reviewed in September 2014, so the Hospital and Home Education Service (HHES) will review its policy in the period following.

Referral Policy and Procedures

1. Introduction.

This policy applies to all children who are of statutory school age. Where children or young people are under or over statutory school age the home school should make appropriate provision for the education of that child or young person.

It is important that from the outset that the Team Leaders/Learning Coordinators make it clear to parents/carers and home schools how this policy operates in relation to the pupil.

All pupils must remain on the roll of their home school. Pupils will be Dual Registered at Becton School.

2. Remit for Education.

On behalf of pupils who require education other than at school for medical or medically related reasons including:

- Pupils in hospital
- Pupils with medical problems whose illness means that they will be absent from school for more than 15 days.
- School-age pregnancies and young mothers
- Pupils with psychological and emotional problems.

On rare occasions there may be exceptional circumstances which deem that a young person's education should be provided through the HHES although they may not meet the requirements outlined above. Such decisions will be made in consultation with the Local Authority (LA) and any provision will be time limited.

3. Referrals

With the exception of children in hospital, all referrals to the HHES team must come to Becton School (Tel: 0114 3053121). Whilst referrals can originate from schools, medical staff, Multi-Agency Support Team staff, midwives, Sheffield Futures workers, social workers or other appropriate agencies **they must be supported at medical consultant level before the HHES can start to work with the child. Once the**

consultant referral is received, a referral form (see Appendix A) **must** be completed by the home school prior to the HHES staff working with any young person.

For children and young people in the Children's Hospital, the HHES staff based in the hospital will seek to provide education for all children and young people of statutory school age, subject to the provisions set out in Section 7 below.

For young people in Sheffield Teaching Hospitals Trust (adult hospitals), the hospital admission lists are checked regularly to identify in-patients of school age. Where pupils are identified, a member of the HHES will visit the pupil and parent in the hospital to discuss the education that is required.

4. Who will consider the referral?

The referral will be assessed by the Head Teacher with responsibility for the HHES, who will decide whether the referral is appropriate for a placement with the team. If there is doubt, there will be consultation at a senior leaders' meeting and/or reference back to the referring consultant.

5. Following referral

Once a referral has been deemed appropriate, a meeting is arranged between the young person (if appropriate), the parents/carers, the school and HHES. At this meeting an Individual Education Plan (Appendix B) will be drawn up which identifies the roles and responsibilities of the parties involved and sets clear targets for the young person. The initial offer of teaching hours will be agreed at this meeting.

Where full time education would not be in the best interests of the child because of health-related reasons, part-time education will be provided on a basis which the LA considers to be in the child's best interests. "Children with health needs should have provision which is equivalent to the education they would receive in school. If they receive one-to-one tuition, for example, the hours of face-to-face provision could be fewer as the provision is more concentrated" (Department for Education, 2013)

6. Provision

In hospital, we aim to teach from day one for pupils who are in hospital frequently and who are deemed to be well enough to be taught, but we prioritise according to need. Staff will select pupils taking into account current medical well-being, likely length of stay and impact on education e.g. exam students and ratio of students to teaching staff. We will give priority to children who are:

- long stay patients
- recurrent admissions
- assessed to have Special Educational Needs
- taking public examinations

For all other pupils, we aim to start teaching on day four after consultation with the medical and nursing staff, and with the agreement of parents/guardians. (The three day 'wait' is at the request of the medical staff in the Children's Hospital).

We also teach children and young people with physical or mental health needs who are anticipated to be absent from school for over 15 school days.

School-age pregnant girls will be offered group mentoring support by the HHES for a contact period of up to 12 weeks around the time of the baby's birth. The curriculum offer is for a total of 12 weeks of home education, generally from week 36 of the pregnancy, (ie 4 weeks prior to the expected due date of the baby's birth) , with two weeks off over the birth 'maternity leave' and then teaching for a further 8 weeks. The curriculum provision will be agreed with the school and the young woman and her parents/carers.

7. Reviews

It is recognised that children and young people unable to attend school because of their health needs should be able to access suitable and flexible education appropriate to their needs. The nature of the provision must be responsive to the demands of what may be a changing health status.

With the exception of children in hospital, all provision will be reviewed regularly.

For young people educated at home due to medical needs, there will be a review half termly. The young person, parents/carers, school representative, health professionals, and any other professionals (as appropriate), working with the young person will be invited to this review at which the provision and the number of hours will be discussed. Minutes of review meetings will be recorded and shared with all parties (see Appendix C).

For teenage mothers, the educational provision is likely to be arranged before and after the birth of the baby. As such it is inappropriate to hold a review half termly unless there are exceptional circumstances. In the majority of cases the review meeting will be replaced by the reintegration meeting in around week 9 of teaching, to ensure a smooth transition back in to school and continued attendance. There will be liaison with MAST to ensure smooth transition and continued attendance at school.

8. Reintegration

In all cases, HHES intervention is to be seen as temporary, pending reintegration to mainstream education or integration to a Special School following the statementing process. The pupil will remain on the roll of the school, and there will be a reintegration plan which should be drawn up by the HHES in consultation with the school, family and other agencies and where appropriate will involve the school nurse.

9. Registering attendance

All pupils taught by the HHES must remain on the roll of their home school. Where the pupils are in-patients in hospital, the home school should use register code **I** from the first day that the pupil is admitted until the date of discharge from the hospital. Other relevant codes for absence should then be used as appropriate. The HHES team will record the sessions when the pupil was taught in hospital and provide the home school with a copy of that information. HHES will use the appropriate attendance code for each session; where the pupil is not well enough to be taught HHES will use the code **I**. The home school should translate any HHES 'present' codes to code **B** for the home school register.

When pupils are receiving support from the Outreach team of the HHES, the school should use register code **I** to note that the pupil is unable to attend school because of

illness. Attendance by all pupils taught on outreach will be marked by the HHES using the standard DfE codes on SIMS. The HHES will advise the school the sessions when the pupil should be taught and a copy of the internal HHES register will be provided for the home school at each review. The school should translate all 'present' marks on the HHES attendance register as code 'B' onto the school register. More frequent attendance reports may be supplied by arrangement. Sessions where the pupil is not taught should be coded as I by the home school unless the home school has made alternative arrangements for the pupil to be taught (or attend a work placement etc).

Where a young woman is absent because her baby is unwell, her absence should be recorded as code 'C'.

All HHES involvement will be ended when the pupil is discharged from hospital or the final date of teaching when a pupil is reintegrated into the home school. For pupils who have long term illnesses, the involvement will end when the child ceases to require the support of the HHES.

Appendix A. Referral document for support from HHES.

Appendix B. Individual Education Plan

Appendix C. Review document.

Policy written: September 2013 – revised and updated December 2013

Review date: October 2014

1. Current involvement of other Educational Services/other Agencies:

	Yes/No	Name of contact	Date of Referral
Educational Psychology Service			
Learning Support Service			
MAST - Engagement with Learning			
MAST - Attendance			
MAST – Family Support			
Youth Offending Team			
Police			
Social Care			
CAMHS			
School Nurse			
Sheffield Children’s Hospital (including Ryegate)			
Multi Systemic Team			
Connexions			
Other – please specify			

2. Special Educational Needs:

Please complete the following	YES	NO
Does the student have a Statement of Special Educational Needs?		
Does the student have a Statement in Lieu?		
Date of last annual review:		

For a student with a Statement of SEN please attach a copy of the Statement.

Has the Authority agreed to undertake an Assessment of S.E.N.?		
Date of MPA request		
Has the student been recognised by the school as having S.E.N.?		
If YES, please indicate at which Stage of the Code of Practice.	School Action	School Action Plus
For a student at School Action onwards, a copy of the Individual Education Plan must be attached.		

Any SEN other than above:

3. To help us to work with your pupil more effectively we would like to know what your pupil was like before s/he was referred to HHES. **Please complete for your pupil as s/he is now. If this is different from before the medical issue please provide further information in Q7.**

Self Esteem

		Yes	No	N/A
A1	Shows determination if tasks are difficult			
A2	Expresses feelings appropriately			
A3	Waits patiently for help			
A4	Responds appropriately to praise			
A5	Shows pride in achievements			
A6	Recognises own wrong doings			
A7	Uses eye contact appropriately			
A8	Is able to make a genuine apology			

Study Skills

		Yes	No	N/A
B1	Has correct equipment and books			
B2	Will re-do or correct work if asked			
B3	Treats equipment and property with respect			
B4	Keeps focused on work (Doesn't get involved in off-task behaviour)			
B5	Can work well independently			
B6	Presents work tidily (neat handwriting/ underlines title and date)			
B7	Settles to work quickly			
B8	Completes and hands in homework on time (If not applicable, score 4)			

Respect for others

		Yes	No	N/A
C1	Listens to the teacher, or friends, when spoken to individually			
C2	Listens when an adult talks to the whole class			
C3	Accepts decisions/ consequences from adults or friends			
C4	Uses polite language (Doesn't swear)			
C5	Respects other people's personal safety (Is not physically aggressive- even as a joke)			
C6	Uses appropriate volume/tone of voice (Doesn't talk loudly/shout)			
C7	Respects other's right to a quiet working environment (Doesn't hum/make			
CC8	Is sensitive to other people's feelings (Doesn't make unwanted personal comments)			

Relationships

		Yes	No	N/A
D1	Can take turns			
D2	Co-operates in group work			
D3	Offers to help/ makes positive comments to others			
D4	Is socially accepted by peers			
D5	Is confident to greet and talk to adults			
D6	Tells the truth when required			
D7	Stands up for self appropriately			
D8	Can disagree with someone without having an argument			

Any other information that you think will be helpful? Please add in Q7.

4. Parent(s)/Carer(s) Involvement

Brief details of contacts between the school and parent(s)/carer(s) giving details of any agreements, contracts, support and action to taken.

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5. Attendance/Punctuality

Are there any attendance issues?	Yes/ No	Details:
Have there been any episodes of truancy? (internal/external)	Yes/No	Details:
What is the student's current attendance percentage?		

6. Achievement/Attainment

It is essential that sufficient information on the academic performance of the student is provided to enable suitable educational provision to be made available as soon as possible

(Please complete this section as fully as possible)

Subject	Teacher Assessment			GCSE/NC Information	Current grades/levels	Expected grades/levels
	KS1	KS2	KS3			
English Lang.						
English Lit.						
Maths						
Science						
ICT						
Technology						
Art						
Drama						
PSHE/CIT						
PE						
History						
Geography						
Languages						
Music						
RE						

7. For GCSE/exam students please complete the additional pro-forma at the end of this document

Additional student information: e.g. other achievements/areas of interest/skills that will help us to work with and support your pupil

Additional information from Q3 should be included here – we need to know what the pupil was like prior to their medical issues.

Thank you for your help

Signed

Name

Date

GCSE /external exam pupil Referral to Hospital and Home Education Service

Pupil Name:	
UCI	

Please circle	Y9/Y10/Y11
ULN	

It will remain the school's responsibility to enter all Y11 students for their exams when referred to HHES

Subject Name	Exam Board	Course Title & Level	Subject Award Code	Component Codes	Email contact - Head of Department/ Subject Teacher	Subjects completed and examined	Topics taught but not yet examined	Position re Controlled assessments – completed? To be completed?	Other information

Hospital & Home Education Service



Pupil: _____ **Year:** _____ **School:** _____

Review Date: _____ **Held at** _____

Present: _____ **Apologies:** _____

ENGLISH Teacher:	Review Meeting Notes	
Work covered		
Progress and attitude		
Any further work needed from school		
Attendance and punctuality		
Current NC Level of work:		
MATHS Teacher:		
Work covered		
Progress and attitude		
Any further work needed from school		
Attendance and punctuality		
Current NC level of work		
SCIENCE – Teacher:		
Work covered		
Progress and attitude		
Any further work needed from school		
Attendance and punctuality		
Current NC Level of work:		
Recommendations:		
Confirmation of continued medical referral Yes / No (Comments as appropriate)		
Confirmation of hours offered -		
Action points -		

Date of next meeting:

A copy of this document will be sent to all parties.