



Children and Young People Scrutiny Committee

Date: Wednesday, 8 September 2021

Time: 2.00 pm

Venue: Council Chamber, Level 2, Town Hall Extension

This is a **Supplementary Agenda** containing additional information about the business of the meeting that was not available when the agenda was published.

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Membership of the Children and Young People Scrutiny Committee

Councillors –

Reid (Chair), Abdulatif, Sameem Ali, Alijah, Bano, Collins, Cooley, Foley, Hewitson, Lovecy, McHale, Nunney and Sadler

Co-opted Members -

Ms Z Derraz, Mr L Duffy, Mrs J Miles and Dr W Omara

Supplementary Agenda

6. **Mental Health Services in Schools** 3 - 34
Report of the Director of Education

This report provides an update on wellbeing and mental health and support for schools and settings and education for children unable to attend school due to ill health.

Further Information

For help, advice and information about this meeting please contact the Committee Officer:

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This supplementary agenda was issued on **Wednesday, 1 September 2021** by the Governance and Scrutiny Support Unit, Manchester City Council, Level 3, Town Hall Extension (Lloyd Street Elevation), Manchester M60 2LA

**Manchester City Council
Report for Information**

Report to: Children and Young People Scrutiny Committee – 8 September 2021

Subject: Update on wellbeing and mental health and support for schools and settings and education for children unable to attend school due to ill health

Report of: Director of Education

Summary

This report provides an update on the support for children and young people in schools and settings in the City. It focuses on how the local authority and partners have enabled schools and settings to support the wellbeing and mental health of children and young people at this time. There will be particular emphasis on the development of a multi-agency team who have established the M Thrive in Education local offer of wellbeing and mental health support for schools and colleges. It may also be helpful to watch this overview video which outlines the offer. [M Thrive in Education overview for professionals](#)

This report also references Elective Home Education (EHE). The periods of lockdown have clearly impacted upon the lives of children and young people beyond education. We have seen increased levels of anxiety from children and families which has also led to a significant rise in families choosing to electively home educate (EHE) nationally and in Manchester also. Prior to the pandemic, Education staff had started working with partners to produce guidance for supporting children with anxiety-based school avoidance. This has now been shared with schools and colleges and via the local area page and parent forums. It has been well received by parents, children and professionals alike.

Managing anxiety-based school avoidance can be really challenging for schools, despite their best efforts to work with families and partners in a multi-agency way. Where a school finds that anxiety, or any other medical issue is cause for a child to be unable to attend school, this would trigger the local authority's section 19 duty. The Local Government and Social Care Ombudsman has issued a report following its investigation of a complaint about Manchester City Council regarding its duty to provide alternative education for a child when a GP deemed them medically unfit to attend school. The outcome of the complaint was the ombudsman found that the Council had been at fault in not triggering its duty to provide alternative education for a period whilst a child was not able to attend school. As a result, the ombudsman has made some recommendations which Manchester City Council has accepted. These include reviewing our section 19 policy which is provided with this report.

Recommendations

The committee is asked to consider the content of this report, reflect and comment upon:

- The mental health and wellbeing offer for children and young people that is provided to schools.
- Note the ombudsman complaint outcome, the recommendations and action taken in respect of the revised s19 Policy.

Wards Affected: All

Environmental Impact Assessment - the impact of the issues addressed in this report on achieving the zero-carbon target for the city
Through the learning and education system children are informed and understand environmental issues and the negative impact of carbon; promoting safe and healthy lives.

Manchester Strategy outcomes	Summary of how this report aligns to the OMS
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	It is important we build a safe, healthy, happy and successful future for all of Manchester’s children so that they can benefit from and contribute to the sustainability of Manchester thriving, economically diverse and successful. Children and Education Services work with all schools and early years settings in Manchester to promote children’s learning and engage with those children and their families who need help, support and protection. The aim is for children to be safe, healthy and make progress in terms of education, training, social development so that they are successful and contribute and benefit from living in Manchester.
A highly skilled city: world class and homegrown talent sustaining the city’s economic success	Children and young people matter in Manchester. The work of the Children and Education Directorate is driven by a commitment to provide opportunities and achieve positive outcomes; building a safe, happy, healthy and successful future for all of the city’s children and young people
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	Increase the influence Manchester’s children and young people have on decisions that impact on them by supporting and enabling their voice to be heard; promoting a fair and inclusive place to live and work.

A liveable and low carbon city: a destination of choice to live, visit, work	A safe and effective children and education system is important to promote the awareness and inclusion of children in the engagement of wider societal issues; which together with a successful education offer make Manchester a place parents choose to visit, live and work.
A connected city: world class infrastructure and connectivity to drive growth	Continually improve outcomes for all children and 'reduce the gap' against the national attainment average

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Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

September opening of schools and colleges for all children and young people - paper presented to Children and Young People Scrutiny Committee 5th September 2020

Update on opening of schools and colleges for all children and young people - paper presented to Children and Young People Scrutiny Committee October 2020

Special Educational needs and disability update and the response to COVID-19 – paper presented to Children and Young People Scrutiny Committee October 2020

Update on opening of schools with a focus on school attendance – paper presented to Children and Young People’s Scrutiny Committee November 2020

Update on schools and their response to COVID19 - paper presented to Children and Young People’s Scrutiny Committee January 2021

Update on schools and their response to COVID19 - paper presented to Children and Young People’s Scrutiny Committee February 2021

Manchester City Council Section 19 policy

1.0 Introduction Children’s Mental Health and Wellbeing

1.1 There has been a wealth of services and organisations that provide support for the wellbeing and mental health of children and young people in Manchester for a number of years. However, schools and settings reported that they found it difficult to understand the offer and the level of support available, including how to commission services and where to get information to signpost to children and families. In February 2020, prior to the first Covid lockdown, Children and Education Services Directorate were working with colleagues across NHS, including Manchester Health and Care Commissioning (MHCC), Manchester University NHS Foundation Trust (MFT), and Child and Adolescent Mental Health Services (CAMHS), as well as with education psychology and the voluntary sector, to bring together a coordinated local offer for children and young people. This aim was accelerated through the Covid pandemic with the real need to ensure signposting of support to parents and schools and colleges for children and young people. Furthermore, the rollout of mental health support teams nationally, with Manchester as an early adopter in Greater Manchester was an additional timely opportunity.

2.0 Mental Health Support Team (M Thrive in Education)

2.1 Background

Nationally, new Mental Health Support Teams (MHST) are being established, working in schools and colleges, to build on the wellbeing support already available. Manchester Thrive in Education was established in March 2020 and consists of the new [Thrive model of care](#) from CAMHS, as well as the newly established Mental Health Support Team (MHST), as set out in the NHS Long-term plan. Schools and colleges are now signposted to universal, targeted and bespoke support for children and young people. M Thrive in Education was launched with schools and colleges in September 2020 with an online webinar attended by 160 delegates from across the education sector, as well as colleagues from health and social care. At the launch we shared how schools and colleges would be supported through training for staff, a directory of resources and the offer of mental health professionals in schools and colleges, targeted to priority settings initially.

The authors of the THRIVE framework suggest that in any stated population, 80% to 90% of children and young people can be said to be thriving. Of the remaining 10-20% of children and young people: 30% will fall into the Getting Advice cluster, 60% will fall into the Getting Help cluster, 5% will fall into the Getting More Help cluster and 5% will fall into the Getting Risk Support cluster.

According to Manchester City Council Forecasting Model (MCCFM) the child population of Manchester is forecast to grow to 150,017 by 2027 (*MCCFM W2016*). When applying these weightings, the results indicate the following:

Groupings	% of CYP Population	Number and contacts	% of CYP Population	Number and contacts
Thriving	90%	135,015	80%	120,014
Getting advice	3%	4,501	6%	9,001
Getting help	6%	9,001	12%	18,002
Getting more help	0.5%	750	1%	1,500
Getting risk support	0.5%	750	1%	1,500
Total	100%	150,017	100%	150,017

In keeping with the green paper and the national framework, the intention was for 25% of schools to have direct support in year 1. We exceeded this by putting support into 30% of schools. As we enter the next academic year, we will have 33% of schools with free professional support in school. [The Green paper](#) advises that all schools should benefit from the mental health support available within 10 years of the MHST being established.

2.2 M Thrive in Education Local offer

M Thrive in Education provides a range of guidance, support and services for schools and colleges in all Manchester settings to support our children and young people. The support is provided at universal, targeted and bespoke level. There are a large number of services delivered at universal level which is available to all settings. The targeted offer is support relates primarily to the rollout of the mental health support team in schools over the next ten years. The bespoke offer is available to all settings where there is a need that has been triggered by a critical incident or by a number of issues affecting a school.

2.3 Universal services available to all settings

2.3.1 Manchester Emotional Resilience Mental Health and Wellbeing Directory

Early in the development of the M Thrive in Education multi-agency group it was clear that there needed to be a repository which schools and colleges could use when looking for information and advice to support wellbeing and mental health. The Manchester Emotional Resilience and Mental Health Directory, which provides a wealth of resources on emotional health and wellbeing and signposting to services and organisations, was developed with partners and shared with all settings to support wider openings of schools and preparation for more students returning to settings, schools and college in June 2020.

2.3.2 Anxiety-Based School Avoidance Guidance

Education services, Educational Psychologists, CAMHS, Healthy Schools, parents and schools have co-produced a guidance document to help

families, schools and settings with children and young people who struggle who come to school due to anxiety difficulties – anxiety-based school avoidance. The guidance document includes tools for parents/carers and schools to talk to children and young people regarding their anxieties and to provide strategies to encourage school attendance. This was initially shared with schools in June 2020 in advance of the wider opening of schools in September 2020. The guidance, tools and new guidance from the attendance team were then launched through a webinar in early September 2020 attended by over 130 people – from a wide range of local authority teams, health, schools, colleges and parent/carer groups. Delegates were asked to trial the document and to feed in their own practice and research. Since then, following feedback the documents were updated in April 2021, with additional input from professionals, including a parent who attended the first webinar. The additional content will further support children and young people from minority ethnic backgrounds. [Hyperlink to the Local Offer page - Anxiety Based School Avoidance](#)

2.3.3 Free confidential online support for Children and young people

Manchester Health and Care Commissioning (MHCC) commissions Kooth, an online counselling and emotional wellbeing service for children and young people. It is confidential and anonymous, and can be accessed through smart phone, tablet or computer. The aim is to reduce waiting times for young people seeking help and removing stigma around mental health.

In addition to this, there is a digital offer to support children and young people through the Chat Health and Health for Teens website. Chat Health is a safe and secure messaging service that allows 11-16 year olds to text for advice on all kinds of health issues, including relationships, emotional wellbeing, healthy eating, bullying and general health. Health for Teens is a website that seeks to empower young people to take ownership of their physical health and mental wellbeing. Online video assemblies created to publicise Chat Health and Health for Teens had received 358 views by March 2021. In 2020-21 5763 young people in Manchester contacted Kooth with 40,151 total logins over the year. Quarter 4 saw the highest number of log ins. 79% are returning users. 30% identify as Black, Asian and Minority Ethnic (BAME). 94.5% of young people using the service say they would recommend it to a friend.

These two services have seen access increased during the lockdown period by Manchester young people. The most common topic accessed was emotional and mental health.

2.3.4 School Nursing team

The school nursing team has continued to support schools throughout the pandemic, though operating in a different model as it has also had staff redeployed to Covid response areas. There have been approximately 60 referrals a month in relation to emotional and mental health support since M

Thrive was operational. School feedback shows that the support from School Health has been really well received.

2.3.5 Healthy Schools

The Healthy Schools provide a wealth of support and curriculum resources, as well as training across a range of health topics. For a number of years they have provided specific support for schools in developing their mental health curriculum and in establishing a whole school approach. This is ordinarily available to all our primary and secondary schools, but not to colleges and independent schools.

The team paused their usual accreditation programme to concentrate on supporting schools responding to the current coronavirus pandemic. This offer includes 1-2-1 consultation (via phone and/or email), whole-school online training and virtual networking, plus resource and policy development i.e., Mental Health and Wellbeing Policy or Relationships and Sex Education curriculum.

The Wellbeing for Education Return (WER) DFE grant established in August 2020 has allowed us to commission Healthy Schools to deliver training and support to all of our schools and colleges across the city, including alternative provision and the independent sector, to support all our children and young people at this time.

Prior to delivering training, Manchester schools were surveyed to assess their needs. Schools identified they wanted support and had concerns about the following themes: Anxiety, Bereavement, Isolation, Loneliness, Re-building friendships and relationships, Transition back to school, Mental health awareness and interventions.

The initial phase of training is complete. Mental Health leads in almost every setting across the city have now attended training to support children with anxiety, bereavement, stress and trauma support. The training includes a focus on staff and parent wellbeing and it has been a testament to the commitment of our schools that they quickly offered sessions for families during the summer term of 2021. The next phase of the training will continue to support settings with bespoke guidance for delivering their whole school support. Through the commission healthy schools has also provided materials for settings to use as they rollout the mental health whole school approach. In the spring term of 2021 252 professionals from schools across the city continued with the training, even whilst managing the delivery of a remote learning offer during the second lockdown. In February 2021 Healthy Schools also delivered a Headteacher wellbeing session which was very well received. Bespoke wellbeing sessions for staff in schools have also been delivered where requested. Healthy Schools also provided 164 support or action planning meetings with schools during this time.

Healthy Schools delivers regular support for Manchester schools with 97% of Manchester schools regularly engaging in the Healthy Schools programme.

In 2020-2021 the team launched their SEND offer and a new PSHE I-Matter curriculum. Healthy schools mental health audit will recommence in September 2021 and training to support a whole school mental health approach will continue for all schools and colleges throughout the academic year.

The DFE is offering a grant to schools to provide training for senior mental health leads in schools in 2021-22. Organisations were invited to apply to be part of the delivery model. However, this will only be available to a third of schools nationally in 2021-2022. Rather than have a piecemeal offer, M Thrive in Education agreed that Healthy Schools would deliver senior mental health lead training free to all schools and colleges from October 2021. We are committed to ensuring all schools and colleges can access this training and that it has a Manchester focus and links to the M Thrive in Education local offer, rather than being a generic offer delivered without our local context.

2.3.6 Education Psychology

Manchester schools make use of education psychology support in a variety of ways, not just through the individual work they do to support children and young people. Education Psychology supports children, young people and families in relation to all aspects of mental health and well-being. These include working organisationally with settings to develop and implement broad and targeted provision, capacity building through training and workshops, therapeutic intervention and support (group and individual) and also individual assessment as part of the Education Health and Care Plan (EHCP) assess, plan, do, review cycle.

2.3.7 Targeted services from M Thrive in Education MHST-practitioners in settings

In the first year MHSTs were expected to work with 25% of the CYP in their area. The M Thrive organisational group mapped and planned how to best support schools. The schools who were given priority in 20/21 were chosen following extensive discussions between partner agencies involved in schools currently. Data was collated about schools readiness to work on the whole school approach to mental health alongside priorities and needs for schools in the coming year. Consideration was also given to school's previous involvement in the Greater Manchester Mentally Healthy Schools project and NHS Healthy Schools Project. We prioritised making sure we reached schools in each locality and across primary, secondary, colleges so we could learn and feedback as we add more settings over the coming years. Most of our high schools now have practitioners from the M Thrive in Education MHST. There are a range of practitioners working with schools at the targeted level of the offer of support. These include CAMHS practitioners who are Education Mental Health Practitioners (EMHPs) offering 6-8 sessions of low intensity CBT informed interventions to support anxiety, low mood, specific phobias, exam stress and also include parent/carers assessment and involvement in therapy. The CAMHS practitioners are from a range of backgrounds, nursing,

social work, CBT therapist and they also provide consultation to schools, supervision, training and support to whole school approach. MThrive also has Mental Health Practitioners (MHPs) from voluntary sector partners Manchester Mind, 42nd street and Place2Be. The MHPs offer psycho-social support and counselling interventions which include practitioners with backgrounds in social work or counselling who offer 8-12 sessions and include bereavement. There is also an Education Psychology offer from One Education who are currently working with 6 secondary schools using the Sandwell Wellbeing Charter Mark <https://www.sandwell.gov.uk/wellbeingchartermark>

2.4 M Thrive in Education Bespoke support

2.4.1 Critical Incident Support

The local authority commissions One Education Senior Education Psychology critical incident support in response to a significant event or a thematic concern in a school or college. This support has been available since the Arena incident which affected numerous schools where children or staff had attended the concert. It has been accessed during the Covid period by several schools, for differing reasons, including bereavement support following the loss of a child or adult within the school community. As well as providing support for the senior leader managing an event, the Education Psychologist can also provide support through coaching and coping sessions to help adults working with children to understand how to process their emotions and the best language to use when speaking about grief and loss.

2.4.2 Critical incident support project

Manchester City Council has been working with One Education to develop a project supporting schools in their response to critical incidents. This began prior to the first lockdown but is more timely now. The project is aimed at targeted provision, including high schools, special schools, the hospital school, colleges and the Manchester PRU. The schools selected have been affected by critical incidents in recent years. The aim of the project is to support these settings in building leadership capacity and resilience in the event of a critical incident. Phase 1 involved interviews with Headteachers reflecting on their past experiences of critical incidents and completing a literature review. The Education Psychology team were grateful to these school leaders who shared powerful insights into dealing with such events. The project has also engaged support from Ian Moggeridge from the forensic CAMHS team who specialises in supporting organisations and young people around high-risk behaviours. He has completed research into critical incidents in the UK and the US. Phase 2 commenced in March 2021 and will continue in September 2021 with development sessions with senior school leaders, reviewing critical Incident protocols and processes in school as well as providing support and training. Phase 3 will be the rollout of Critical incident guidance and resources in September 2021 for all schools and colleges. This will be further revised to include resources shared and developed through the project.

2.5 Team around the school or college

A team around the school may be established by the local authority following a significant event or thematic concerns that may impact the setting. We have provided multi-agency support several times now, in settings in each locality for a time-limited period. Not long after we established the team around the school, we were asked to share the model with another local authority. We were able to share our learning and reflect on how the model could continue to develop.

Members of the team may vary but have previously included the school's Senior School Quality Assurance officer, Service Lead from Children's Social Care, Early Help, Police, Youth Justice, Community Safety and NHS organisations such as Healthy Schools, School Nursing and CAMHS.

Manchester Children's and Education Services Directorate introduced this model in 2019 with a setting where they had concerns about some children and young people who were experiencing anxiety, wellbeing and mental health issues. The team met regularly to review support available and outcomes for children and young people. The school were invited to join the Greater Manchester Mentally Healthy Schools project which provided support for school leaders as well as for children and young people. The Designated Safeguarding Leads were also offered supervision. Partnership engagement was strong with a range of support offered, including delivered sessions for parents and children. When the team around the school was stepped down, the multi-agency team reviewed its impact. The school engagement had been excellent and they really valued the support. School leaders cited the shared responsibility as a key factor in supporting their resilience and they felt they had established stronger partnership working with NHS, police, social care and education psychology. Partners felt they also benefited from regular meetings and multi-agency reflection and support. The school has shared this experience with other schools and is now fully engaged with the M Thrive in Education offer.

2.6 Impact of M Thrive in Education to date

- 2.6.1 As reported previously, we have captured the views of children and young people about their wellbeing and mental health concerns during the pandemic. Since M Thrive in Education was established, we have continued to gather feedback from children and young people, parents and professionals about the impact so far.

Some of the feedback is here:

From Children and Young people:

"I am more aware of what makes me anxious and what I can do to reduce it"
 "The sessions have helped me to be more open and made me more relaxed"

'It is good to talk to someone about how I hurt myself when I am struggling and to say this is not wrong to do this. I feel you don't judge me or tell me to stop now, it is not that easy.'

'I don't want to be here sometimes, I don't think I am worth it, working with you, has made me see I need to be kinder to myself.'

'I feel safe in here'.

'I feel relaxed when I'm with you'.

'The sessions were good and fun. I learned what counselling is about. To me it's about expressing your feelings'.

From school staff:

'It is so good to have the Thrive in Education Team in our school, it means we can meet the young people's needs the best we can.'

"Thanks for everything. (Student) came to see me after your session with a big smile and said he really liked the session"

"Thank you for being so flexible during this Lockdown, I know our students have really appreciated the calls and sessions."

"I really like talking to the 42nd St Mental health practitioner as we walkthrough cases in school and they give me guidance and we think about how we can best support the young person, and when things needs escalating."

"It makes me realise I am doing a good job."

'I have noticed a big change how he comes into class since we talked, he is responding well to the positive affirmation. I always greet him with a smile and tell him how happy I am to see him today'.

From parents:

'Thankyou you have really supported my daughter. I am struggling to understand them wanting to transition to be male, but talking to you, and the information you have given me will really help.'

'She is so more confident since her counselling started. She is now coming into school much easier. She tells me at the weekend she can't wait to see you.'

'My child is able to voice more to me when he is struggling, and I can help him to talk about how he is feeling'.

'I absolutely love the ABSA (Anxiety-Based school avoidance) booklet you've created as it's really easy to follow and put practices in place'

2.6.2 Timeline of activity

- Established a M Thrive in Education multi-agency team as an operational group
- Creation of a Mental Health and Wellbeing Directory shared with all settings
- September 2020 webinar launch of the Anxiety-Based school avoidance guidance
- October 2020 webinar launching the wellbeing support and explaining the M Thrive in Education local offer
- November and December 2020 online webinars have taken place for North, Central and South Manchester schools and colleges. The training covered: whole school/college approach, wellbeing, resilience, bereavement and loss, understanding anxiety, supporting recovery from anxiety and low mood -stress and trauma and resources and accessing specialist support across Manchester
- January 2021 sessions delivered focusing on managing and supporting anxiety and building resilience
- Spring/Summer 2021 schools offering parent wellbeing support and online sessions
- February 2021 headteacher wellbeing session
- Our targeted support has exceeded the original aim of 25% as the service has reached 30% of schools.
- June-July 2021 Manchester Mind delivered Mental Health First Aid training to its first cohort of Manchester schools and colleges
- June 2021 First Mental Health lead network meeting with over 80 settings attending
- July 2021 Confirmed 120 Mental Health leads within Manchester M Thrive in Education network
- Between September and June, 446 children have had direct support from practitioners in school,
- 850 staff have attended training sessions
- 88 schools have signed up for Mental Health First Aid training to be delivered by Manchester Mind.
- An updated recorded webinar outlining the offer for children and young people was shared in May 2021 with schools and colleges. It can also be found on the local offer page and the Manchester Safeguarding Partnership so that all professionals and parents are aware of the existing local offer for wellbeing and mental health support. It has had 307 views as of 6 August 2021. [M Thrive in Education overview for professionals](#)
- In June 2021 a live webinar for schools and colleges discussed the impact of the offer and invited delegates to reflect and feedback on the offer to support the next steps.
- July 2021 Shared our learning with other GM LAS who are starting their own MHSTs in September 2021
- M Thrive in Education governance will be strengthened by reporting to Health and Wellbeing Board and Manchester Safeguarding Partnership

2.7 Thrive Hubs

Thrive hubs will complement the work of the M Thrive in Education local offer. Manchester Health and Care Commissioning approved new funding in March 2020 to establish a Manchester THRIVE Hub as a single point of entry, a front door, to Manchester's Emotional Wellbeing and Mental Health offer, which will be managed by Manchester Foundation Trust Child and Adolescent Mental Health service (CAMHS) and work alongside multi-agency partners, including Education, Early Help, Healthy Schools and voluntary sector. The Thrive hubs will be located in each locality of North, Central and South. The north hub was piloted in April 2021 and it is hoped that these 3 localities will commence go live from September 2021.

3.0 Elective Home Education (EHE)

EHE sits within the Schools Quality Assurance team. Where a family informs the school/LA that they intend to EHE an assessment is completed which includes liaising with school, social care and school nursing, as apt, to ensure that EHE is suitable.

The Association of Directors of Children's Services (ADCS) projected that as of October 2020, more than 75,000 children were being educated at home, an increase of 38 per cent from the previous year. The Covid pandemic is likely to have increased the number of families choosing to pursue home education.

There continues to be a significant increase in the number of children and young people registered as being Electively Home Educated (EHE) in Manchester. Following schools reopening in September 2020 and in February 2021, after the periods of closure due to COVID19, the number of parents requesting to home educate increased. Over 20/21 there have been 595 new notifications of the intention to home educate. This is more than double the number of new notifications in 19/20. In July 2021 there were 715 children registered as home educated with 659 suitable and the remainder currently in process. Numbers of EHE are closely monitored through a monthly Education Access Board and report. And in response to the increase numbers of requests, additional capacity has been provided including an address the increase in cohort we have increased the staffing, including recruiting a qualified teacher to support with the assessment of suitability and focus on the education provision in terms of how it supports the child to make progress in their learning.

Many parents/carers cited anxiety about COVID19 as the reason for choosing to home educate although some also cited their enjoyment of home educating during periods of national restrictions and philosophical reasons too. Initial analysis suggests an increase in the proportion of families from BAME backgrounds choosing to home educate.

In addition, there has been a noticeable increase in notifications from parents of children with EHCPs, in particular where children have been diagnosed with autism or have medical needs, including both physical and emotional.

However, a high proportion of these were deemed unsuitable and the children have been returned to appropriate school placements.

Overall, there has been a reduction in the proportion of children with EHCP being EHE. Furthermore, for those children who do have an EHCP and are EHE the team works closely with the EHCP team to monitor provision and attend annual reviews.

Positively, despite an increase in the number of notifications, overall, there is an increase in numbers of children deemed to be receiving a suitable education. This has been attributed to parents who are now more knowledgeable and confident following their experiences during lockdown and also that resources such as Oak Academy are readily available.

We have asked our headteachers to work with parents to ensure that they fully understand that by electing to home educate, their child will be removed from a school roll and will therefore not access the school's remote learning offer.

For parents who do want to home educate, Manchester has a clear policy on EHE which has recently been reviewed and is in line with DFE guidance for Local Authorities and for parents.

A recent analysis of resources used by families showed that most children are taught by their parents but supplemented by other family members and in 60% of families by paid tuition. All parents provide books and use the Internet (with 89% using Oak Academy). 70% of parents provide specialist equipment.

Home Educating families are provided with information and signposting through engagement with their named officer, through the MCC Website and through a termly newsletter. This has included information relating to exams, curriculum and resources, the MCC Year of the Child, Careers IAG, Health updates on Covid testing and vaccinations and a leaflet with guidance about ensuring safety in out of school settings.

Over the past 4 years The Manchester College has offered a part-time course for Year 10/11 home educated students, which enables them to gain accreditation in English and Maths and supports progression to Post-16 opportunities. 27 students accessed the course 2020/21. Careers Connect follow up all home educated children who may be at risk of Not in Education, Employment or Training.

4.0 Section 19 Duty on Local Authorities to provide suitable education for children who, by reason of illness, exclusion from school or otherwise, may not receive education

4.1 Local Government and Social Care Ombudsman report

Similar to a number of local authorities nationally, The Local Government and Social Care Ombudsman has issued a [report](#) following its investigation of a complaint about Manchester City Council. The complaint was about Education

& Children's Services. The outcome of the complaint is that the ombudsman found that the Council had been at fault in not triggering its duty to provide alternative education from the end of April 2019 when a GP confirmed Child B was medically unfit to attend their school until July 2019 when an offer of a place in a special school was made. The Ombudsman found that there had been fault on the part of the Council, and this had caused injustice to the complainant. As a result, the ombudsman has made some recommendations which Manchester City Council has accepted.

4.2 Report recommendations

In respect of procedural improvements, it is recommended that, within six months of the date of the report, the Council should:

- review its alternative education policy, paying particular attention to how it should decide whether its duty is triggered, taking account of the statutory guidance. The review of the policy should be ratified by the Council's relevant Committee, responsible for the oversight of educational provision in its area; and
- review cases of pupils out of school referred to it, either for medical reasons or missing from education, since April 2019 to the start of the first national lockdown (March 2020) to ensure that the faults in this case have not occurred in these other cases and tell us, if they have, how it intends to remedy the resulting injustice.

The Council has already undertaken a review of its section 19 policy and the new policy which will be implemented in September 2021 is attached. Section 19 of the Education Act 1996 requires local authorities to make arrangements to provide "suitable education at school, or otherwise than at school, for those children of compulsory school age who, by reason of illness, exclusion from school or otherwise, may not for any period receive suitable education unless such arrangements are made for them". Suitable education is defined as "efficient education suitable to the age, ability, aptitude and to any special educational needs", the child (or young person) may have.

Reducing exclusion from education and ensuring all Manchester's education settings are inclusive and able to meet the needs of their local communities are key priorities for Manchester City Council. The Manchester Inclusion Strategy was developed in 2019 to help the local authority and its partners work in a more coherent way to support young people to attend well and to reduce the risk of exclusion for any reason. The strategy provides an outline of approaches, interventions and services to support good attendance and prevent the use of exclusion wherever possible.

The vast majority of our children and young people in Manchester attend school full time and have any of their needs met at school through a graduated response. Manchester has a strong model of partnership and collaboration with the Manchester family of schools, and partners are committed to inclusion and improving outcomes for Manchester children. This partnership working has led to the development of the Inclusion Strategy and has resulted in a

reduction of permanent exclusions over the last 3 years. As part of the Inclusion Strategy our 'Every Child' project has worked with a number of schools and focused on year 6 to 7 transition, reducing exclusions and developing principles for inclusive practice. In addition to this project, there has been ongoing work to roll out ELKLAN training to our schools, with 81% school now trained on this approach and 29 schools have accessed nurture training.

Elklan was established in 1999 by two experienced speech and language therapists, Liz Elks and Henrietta McLachlan, in response to a demand for training to be delivered by speech and language therapists to education staff to enable them to be more effective in their support of children with speech, language and communication needs. Further to the Elklan training, a toolkit has been developed to support schools to access resources and strategies so they can address identified needs. It is being trialed in the Autumn term 2021 by schools involved in the Every Child project. A significant part of the Inclusion Strategy has also been the development of the mental health and wellbeing offer which is documented in this report and the development of an anxiety-based school avoidance pathway which takes an early intervention approach to pupils not attending school due to anxiety. This was coproduced with parents and partners and was disseminated to schools last year.

Manchester City Council commissions Manchester Hospital School and special schools to provide outreach support for mainstream schools and early years settings to provide advice, training and support to schools to enable them to meet the needs of their pupils who are disabled, have medical conditions or have special educational needs. This includes support with developing accessibility and medical conditions policies and with writing individual healthcare plans.

This revised section 19 policy outlines the steps the Local authority will take to make provision for children who despite the support and interventions available within their school, are unable to access education due to a permanent exclusion; medical conditions or where children are unable to attend school for some other reason.

5.0 Conclusion

- 5.1 In a time of enormous uncertainty, with changing guidance and policy affecting schools with extreme regularity, it is a testament to all of the partners who have set up M Thrive in Education, including the local authority, NHS, education psychology and the voluntary sector that our Manchester Mental Health Support Team (M Thrive in Education) is now established and understood by schools and colleges. Moreover, our school and college leaders have engaged phenomenally well with the training and support offered through the Wellbeing for Education Return programme during the Covid pandemic. Professionals, parents, children and young people have welcomed that services and support now co-ordinated as M Thrive in Education and that additional support has been available when it was needed.

The Children and Education Services Directorate has continued to move forward and bring about changes in policy to further improve the outcomes for children and young people. The documents cited in this report, including anxiety-based school avoidance guidance and the emotional resilience and mental health directory, will support schools in providing the right support at the right time for children and young people. At the heart of each document is the desire to provide timely interventions for children and young people. The revised EHE policy and Section 19 policy are intended to further ensure that all our Manchester children and young people can receive a good education irrespective of their circumstances.

6.0 Next steps

- Continue with Wellbeing for Education Recovery training and bespoke support which will continue to be available for all schools and colleges, including independents for 2021-2022
- Continue to rollout mental health first aid training for schools
- Webinar planned for September for nursery and primary schools to offer advice and support for helping Early Years and Reception children with recovery, including mental health offer
- Complete recommendations from ombudsman in relation to Section 19 duty
- Governance of M Thrive in Education to be strengthened by reporting to Health and Wellbeing Board and Manchester Safeguarding Partnership
- Implement revised EHE and Section 19 policies.

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Manchester City Council Children and Education Services

Section 19 Policy July 2021

Introduction

Manchester's Children and Young People Plan describes Manchester's vision for all children and young people: 'Our Manchester – building a safe, happy, healthy and successful future for children and young people.' This includes ensuring that children and young people of compulsory school age receive a suitable education either at school or otherwise than at school.

This policy describes how the Local Authority will achieve its commitment and meet its duties under relevant national legislation and guidance.

Legal context

Section 19 of the Education Act 1996 requires local authorities to make arrangements to provide "suitable education at school, or otherwise than at school, for those children of compulsory school age who, by reason of illness, exclusion from school or otherwise, may not for any period receive suitable education unless such arrangements are made for them". Suitable education is defined as "efficient education suitable to the age, ability, aptitude and to any special educational needs", the child (or young person) may have.

The education must be full time unless the local authority determines that it would not be in the best interests of the child or young person, due to their mental or physical health.

The Department for Education Alternative Provision Statutory Guidance 2013 states: 'Local authorities are responsible for arranging suitable education for permanently excluded pupils, and for other pupils who – because of illness or other reasons – would not receive suitable education without such arrangements being made.'

This applies to all children of compulsory school age resident in the local authority area, whether or not they are on the roll of a school, and whatever type of school they attend. Full-time education for excluded pupils must begin no later than the sixth day of the exclusion. Good alternative provision is that which appropriately meets the needs of pupils which require its use and enables them to achieve good educational attainment on a par with their mainstream peers.

The Department for Education guidance 'Ensuring a good education for children who cannot attend school because of health needs 2013' requires local authorities to provide education for children who cannot attend education because of their medical condition*.

**Please note that for the purpose of this policy, the term 'medical condition' also refers to mental health conditions.*

Section 7 of the 1996 Education Act states that parents/carers must ensure that children of compulsory school age receive efficient full-time education suitable to a) their age, ability and aptitude, and b) to any special educational needs they may have, either by regular attendance at school or otherwise.

The Manchester context

Manchester Inclusion Strategy. Reducing exclusion from education and ensuring all Manchester's education settings are inclusive and able to meet the needs of their local communities are key priorities for Manchester City Council. The Manchester Inclusion Strategy was developed in 2019 to help the local authority and its partners work in a more coherent way to support young people to attend well and to reduce the risk of exclusion. The

strategy provides an outline of approaches, interventions and services to support good attendance and prevent the use of exclusion from school for any reason wherever possible. Manchester has a strong model of partnership and collaboration with the Manchester family of schools, and all partners are committed to improving outcomes for Manchester children. This partnership working has led to a reduction in permanent exclusions since the development of the Inclusion Strategy.

All schools should have a graduated response to identifying and meeting a range of additional needs. Information on the support and services provided in school and how to get help should be available to parents/carers and schools should work in partnership with parents/carers to put in place appropriate and timely support and/or intervention and keep this under review. Manchester City Council commissions Manchester Hospital School and all of our special schools to provide outreach support for mainstream schools and early years settings to ensure they can meet the needs of their pupils who are disabled, have medical conditions or have special educational needs. This includes support with developing accessibility and medical conditions policies and with writing individual healthcare plans as well as provision of training and advice.

In 2020, the local authority, partner agencies and parents co-produced the Anxiety Based School Avoidance pathway, which takes an early intervention approach to pupils not attending school due to anxiety.

School and local authority responsibilities – exclusions

Manchester schools, Pupil Referral Units (PRUs) and the council work in close partnership to offer pupils and families early help to reduce the need for exclusion. Exclusions have been reducing year on year but there will still be circumstances where a head teacher considers an exclusion is the only course of action to be taken due to the nature of the event/incident. Only a head teacher can exclude a pupil and must tell the pupil's parent or carer, in writing, how long the exclusion is for and the reasons for it. (For permanent exclusions or longer fixed term exclusions the school governing body will also consider the head teacher's decision to exclude). While they are excluded the pupil is not allowed to attend their school, enter the school grounds or use school transport services.

It is important that pupils continue to have access to learning during their exclusion so that they continue to make progress and achieve. Schools should provide work for the first 5 school days of any exclusion. Parents and carers are responsible for ensuring that their children are supervised during school hours on these days and complete the work which has been set. This will ensure that they will have the best chance to keep up with their learning and be less at risk of becoming involved in anti-social activities.

The school must notify the governing board and the local authority of any permanent exclusion that would result in the pupil being excluded for a total of more than five school days (or more than ten lunchtimes) in a term or of any exclusion which would result in the pupil missing a public examination or national curriculum test. A lead officer from the Local Authority will follow up all permanent exclusions with a phone call to the school.

From the sixth day the school or Pupil Referral Unit must inform the parent or carer what arrangements have been made for full time supervised education until the end of the exclusion period.

If a pupil has been permanently excluded they do not return to their school and, in line with the Local Authority's statutory duties, will receive their education from a Manchester Pupil Referral Unit (PRU). The PRUs provide access to a balanced curriculum, small group teaching, specialist assessment and reintegration support to ensure that, wherever possible, pupils return quickly to mainstream schools. For some pupils the PRU will continue to provide education for a longer period of time. Pupils attending PRUs will be able to sit national tests such as SATs, GCSEs and other qualifications.

See Appendix 3 for information on Manchester's day 6 and exclusion provision.

School and local authority responsibilities - medical conditions

Schools must provide support for their pupils with medical needs under their statutory duties as set out in 'Supporting pupils with medical conditions at school' (DfE, 2014). Shorter term illnesses or chronic conditions are best met by school support and resources. Such conditions that might meet this definition include short term post-operative support and periods of reduced immunity. Resources to support schools in how to carry this out can be found on the Manchester Hospital School website. Schools will use the graduated response to assess, meet and review the needs of their pupils. When the pupil's medical condition becomes too complex, or the risks are too great to manage, the school should make a referral to the Hospital School for additional support.

In line with the Section 19 duty, Manchester City Council will arrange suitable full-time education (or as much education as the child's health condition allows) for children of compulsory school age who, because of illness, would otherwise not receive suitable education. This applies whether or not the child is on the roll of a school and whatever the type of school they attend. It applies to children who are pupils in Academies, Free Schools, special schools and independent schools as well as those in maintained schools.

Manchester City Council commissions a continuum of provision for children and young people with medical needs from Manchester Hospital School. This includes outreach support to schools, home tuition, tuition in community venues close to the pupil's home, AVI telepresence 'robot' supported learning and provision at the Hospital School. The Section 19 provision and referral process are described in appendix 4.

Education otherwise than at school

Where children are unable to attend school for some other reason, the local authority will address their individual needs when arranging suitable education. This may include the provision of virtual home learning.

The MCC School Admissions team are responsible for the education of children with additional health needs. schooladmissions@manchester.gov.uk

This policy will be reviewed periodically by MCC

Appendix 1: Links to documentation referred to in the policy

Department for Education (2013) *Ensuring a good education for children with health needs who cannot attend school* -

<https://www.gov.uk/government/publications/education-for-children-with-health-needs-who-cannot-attend-school>

Department for Education (2014, update 2017) *Supporting children at school with medical conditions* -

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

Also has templates for use by schools and links to other resources.

Department for Education (2013) *Alternative provision* -

<https://www.gov.uk/government/publications/alternative-provision>

Equality Act 2010 - <https://www.gov.uk/guidance/equality-act-2010-guidance>

Appendix 2 - Links to Manchester documents and services referred to in the policy

Supporting children at school with medical conditions – Manchester model policy:

https://www.manchester.gov.uk/schoolhub/downloads/file/35/supporting_pupils_with_medical_conditions_policy

[Anxiety Based School Avoidance pathway](#)

[Manchester Inclusion Strategy](#)

[Manchester Hospital School](#) - <https://www.manchesterhospitalschool.co.uk/>

Manchester Secondary Pupil Referral Unit

Bridgelea School

[Lancasterian Outreach and Inclusion Service](#)

<https://www.lancasterian.manchester.sch.uk/page/outreach-and-inclusion-service/52148>

Manchester City Council Attendance Team -
school.attendance@manchester.gov.uk

Manchester City Council Admissions Team -
school.admissions@manchester.gov.uk

Manchester CAMHS -
<https://mft.nhs.uk/rmch/services/camhs/>

Appendix 3

Offer for excluded pupils

The education offer for excluded pupils after day 6 will be made by Bridgelea Primary PRU or Manchester secondary PRU. The offer will be flexible and appropriate to individual needs.

Appendix 4

Ensuring a good education for children who cannot attend school because of health reasons – provision in Manchester

Identification and intervention

As soon as it is clear that the child will be away from school for 15 days or more or is too unwell to access education at their home school/normal place of education, the school should hold a Team Around the Child meeting with the family and relevant professionals before making a referral, which includes medical evidence, to Manchester Hospital School. The fortnightly multi-agency panel, consisting of representatives from health, education and MCC, will then determine if the referral is part of the Local Authority Section 19 Duty or whether the school should be required to meet the child's need with support. The panel will agree the service that is required to meet the pupil's individual needs and circumstances. Staff will liaise with the school, family and appropriate medical professionals to ensure minimal delay in arranging appropriate provision for the child. Every effort will be made to minimise disruption to the child's education.

Where an absence is planned e.g. hospital admission or recurrent stay in hospital, educational provision should begin as soon as the child is well enough. Teachers in the hospital settings will liaise with the child's home school and work with them to minimise any disruption to their education

Pupils receiving support will have their provision set out in a co-produced personalised plan, which makes clear the nature of the intervention, the objectives, the expected outcomes and timeline to achieve the objectives. The plan should also link to other relevant plans the child has to ensure a holistic approach. Effective multi-agency collaboration is essential in devising appropriate personalised learning plans.

The provision will be reviewed regularly, with the family and all professionals concerned, to ensure that it continues to be appropriate for the child and that it is providing suitable education.

Children with long term health problems will not be required to provide continuing medical evidence. However regular liaison with health colleagues is important and the level of support will be discussed through Team Around the Child meetings. MHS will liaise with the child's home school until the pupil is well enough to return.

Manchester City Council, through its commission with Manchester Hospital School, seeks to provide the same opportunities for children and young people with additional health needs as their peers, including a broad and balanced curriculum, which is of good quality. The education will be flexible and appropriate to pupils' health needs, and regularly reviewed to reflect their changing health status. It will aim to prevent them from slipping behind their peers in school and allow them to reintegrate successfully back into school as soon as possible. It will allow them to take external qualifications if appropriate.

MHS may use electronic media to provide access to a broader curriculum and to increase the numbers of hours of provision. However, this will be used in association with face to face contact and never in isolation. The telepresence robot, AV1, may also be used. MHS will maintain good links with all schools, academies and free schools in their area through effective communication and clear processes of assessment and referral. MHS will also ensure that schools are aware of their key role and reminded of their responsibilities in supporting their pupils with additional health and medical needs, so the child can be

reintegrated back to school as smoothly as possible. Schools will be encouraged to maintain their links with parents/carers who also have a vital role to play e.g. keeping in touch through school newsletters, emails, invites to school events etc.

When a child is approaching public examinations, MHS teachers will focus on the most appropriate curriculum in order to minimise the impact of the time lost while the child is unable to attend school.

Reintegration

The plans for the longer-term outcome and the next steps in a pupil's education will be agreed at the start of the commissioned support, intervention or provision, according to the statutory guidance for Alternative Provision (2013).

The expectation is that the majority of pupils will be reintegrated into their home school. Progress towards this will be discussed at reviews. Where reintegration to school is the objective, staff from the local authority, Manchester Hospital School, health and the school will work together with the family to assess when the child is ready to return to school and to assist reintegration.

On return to their school each child should have an individual healthcare plan and/or individual provision plan which specifies the arrangements for the reintegration and may include the reasonable adjustments and extra support the school and/or other services will provide.

Working together – with parents/carers, children, health services and schools

Co-production with children, young people and their families is the approach taken across Manchester. Parents/carers have a key role to play in their child's education and can provide helpful information to ensure that the teaching approach is successful. Children will also be involved in decisions, their engagement dependent on their age and maturity. This supports MHS and the school in being able to arrange the most appropriate educational provision with which the child is able to engage.

MHS will act on behalf of the local authority to remind schools they cannot remove pupils from their roll because of an additional health need without parental consent and certification from the school medical officer, even if they are being supported by MHS (Education (Pupil Registration) England Regulations 2006) and to ensure that they are meeting their statutory duty to provide suitable and appropriate education for pupils with medical needs.

Appendix 5

Services for pupils unable to attend school for medical reasons

Manchester Hospital School

What we offer:

A reputation as a beacon of excellence for providing a high-quality education. A reputation for being a school where leadership is ethically driven.

The leadership of a multi-agency panel which reviews all referrals to the hospital school and decides whether the application meets the criteria for support under section 19 or whether outreach support should be provided.

Criteria for accessing support which is clear and based on LA policy and the legal duties set out in Section 19. The offer is based on the matching provision to need tool. Details of the pathways and how they link to the tool are set out in detail later in this document.

What are schools expected to do before they make a referral to MHS? When should they refer?

Support for learners with short term illnesses or chronic conditions is often best provided by the home school when possible. This is set out in the statutory document [Supporting children at school with medical conditions \(2014, updated 2017\)](#).

Schools or the Local Authority should refer to Manchester Hospital School as soon as the child has been or will be absent from school for more than 15 days in a calendar year and as soon as they are aware that the school believes it is not able to meet need. Supporting evidence from a medical practitioner is required.

Section 19 Panel

The fortnightly multi-agency panel, consisting of representatives from health, education and MCC, will then determine if the referral can be considered as part of the Local Authority Section 19 Duty or whether the school, with support, should be required to meet the child's needs.

We will **not** provide education for children whose families are in dispute with the home school, children who have been withdrawn from school because of a dispute with the LA about a school placement or where family and social care issues are preventing the child from attending school.

Once a referral is accepted and whichever pathway chosen, we offer:-

- Senior Leaders who will advocate for this group of learners and ensure all of our staff provide excellent quality and good value for money.
- Senior Leaders who will make decisions in the best interests of the child and who will work with, and challenge schools to ensure children who cannot attend their own school are not missing their education or experiencing social isolation where this could be avoided.
- Liaison with the home school or MCC to determine what provision is required, the objectives, the expected outcomes and the timelines to achieve them
- A thorough assessment of needs which is a baseline and identifies gaps in and barriers to learning
- An individual education plan linked to other documents such as an EHCP, set out in writing and which is regularly monitored and reviewed with the child, the family and the school or MCC
- Education which is flexible and appropriate to meet physical or mental health needs
- Education which prevents learners from slipping behind their peers
- Education which reduces learner's anxiety about what they are missing by not being at school
- Education which is provided at the home or in a community setting
- Full time education equivalent to what a pupil would have received at school or, as much as the pupil can manage
- Education which is planned and delivered by highly specialist and well-trained staff
- Staff who are consistently linked to the pupil throughout their journey at our school
- A route back to the home school or on to a new placement
- Support with the transition back to school or on to college
- Support and advice to families
- Support and advice to schools
- Support and advice to professionals
- Opportunities for pupils to sit external examinations
- Opportunities for pupils to receive independent careers advice and guidance
- One to one tuition in the home or community setting
- A pool of teachers able to provide high quality one to one tuition to any pupil who cannot access school for whatever reason
- Partnership working with Health and other agencies such as children's social care

In delivering our offer nationally and locally we promise to:-

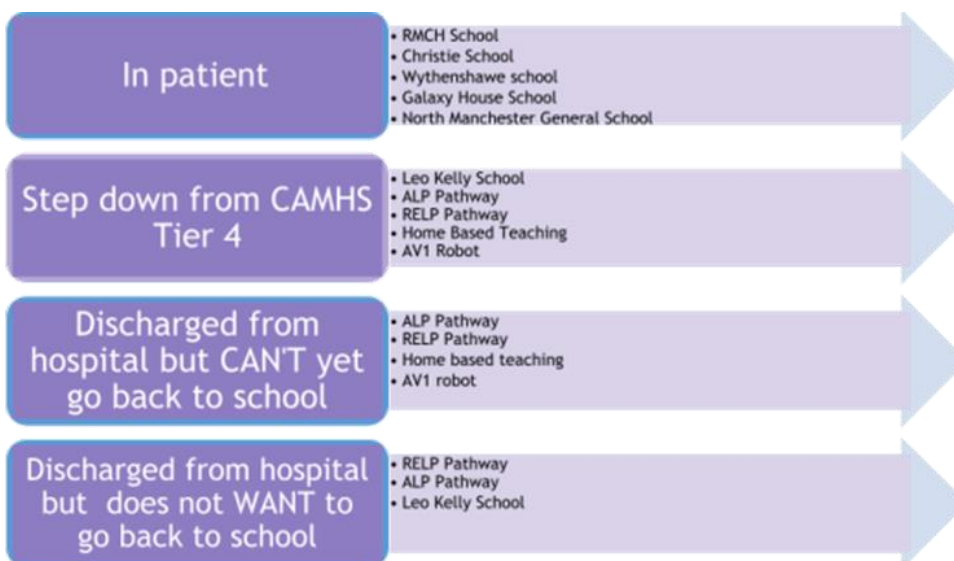
- Promote the hospital education offer available across the country to all schools and families we encounter Advocate for children with medical needs whenever we can
- Promote our hospital school offer at all our sites and online
- Promote our section 19 offer to all schools in Manchester
- Maintain good links with all schools in Manchester and with MCC
- Maintain good links with LAs in Greater Manchester and across the country especially when we liaise with them about patients being discharged who cannot return to their school

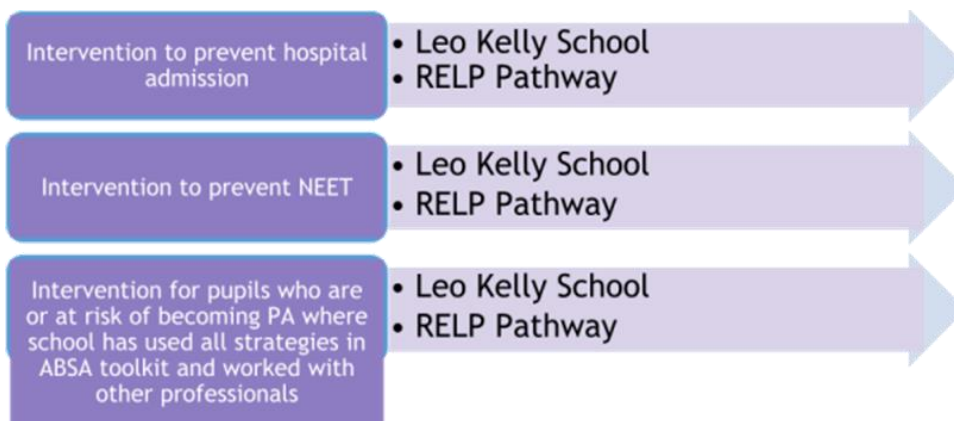
- Operate a clear, fair and transparent process for referrals
- Ensure schools are aware of their responsibilities to support pupils with medical and mental health needs
- Encourage schools to maintain their links with the child and their family when the child is in hospital or not able to attend their usual school
- Provide advice on reintegration and transition to schools and families
- Work with NHS trust staff, school nurses and LOIS in the development of individual health care plans for Manchester pupils being discharged from hospital
- Work with all hospital schools and Local Authorities up and down the country to prepare for new patients and help them transition back to school when they are discharged

The diagram below sets out when we start to provide education and pastoral support to the child



The flowchart sets out the available pathways we offer in each situation





Definitions of Learning Pathways

RE-ENGAGEMENT WITH LEARNING PATHWAY (REL)

This pathway has been developed to support learners who have become disengaged from learning because of their mental or physical health or both. The outcome of the work is to move the pupil along the pathway, to re-engage them with learning, to find activities which interest them and to move forward at a pace which does not overwhelm them. Pupils on this pathway have exceptionally high needs.

ACCESS TO LEARNING PATHWAY (ALP)

This pathway has been developed to support learners who are keen to learn and very engaged with their school work. They are afraid of falling behind their peers and want to be back to school as soon as possible. They long for contact with their friends and to remain part of their school community.

These learners benefit from remote or face to face one to one tuition based in their home. They may also benefit from a package which utilises online learning as well as face to face learning. They may also benefit from an AV1 robot to reduce their isolation within their homes. Pupils on this pathway have exceptionally high health needs which are preventing them from attending school.

Leo Kelly School

At Leo Kelly School we provide a full time and part time curriculum which is a modified version of the national curriculum and a balance of academic and therapeutic activities. Some pupils leave KS4 with sufficient breadth of subjects and high grades at GCSE to be able to access A Level courses at College. Some students are entered for Entry Level and will move to a Level One course at College. Some stay on another year, or even two, until their transition into post 16 is likely to be successful and they are no longer at risk of becoming NEET.

Leo Kelly looks like and feels like a regular school. It is a positive bridge back into mainstream provisions for the vast majority of learners.

Our staff are highly experienced in supporting vulnerable learners and provide good and outstanding teaching. We have a highly experienced and well-trained pastoral team. Learners often have complex family situations and benefit from the support of the Early Help team.