



From mountain to sea

Guidance on education for children and young people unable to attend school due to prolonged ill health

October 2020



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Version	Status	Issue date	Reason
1.0	Initial Draft	February 16	Aberdeenshire ECS guidance of Scottish Govt. guidance
1.2	Draft	March 16	flowchart of procedures, recording absence guidance & additional case study added
1.3	Draft	April 16	Further flowchart added, additional clarification in relation to Absence Guidelines. Enquire fact sheet referenced
1.4	Draft	June 16	Amendments made after group discussion
1.5	Guidance	September 2017	Contents and hyperlinks enabled
1.6	Guidance	September 2020	Amendment to Hospital Tuition Service delivery

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1 Background

1.1 The purpose of this guidance is to provide advice and information for Aberdeenshire schools in relation to their statutory duty, under section 14 of the Education (Scotland) Act 1980, to make special arrangements for pupils to receive education when they are unable, or it would be unreasonable to expect them, to attend a suitable educational establishment as a result of their prolonged ill health.

Every child has a right to education. Aberdeenshire Council is committed to enabling all children and young people to get the most from the learning opportunities in learning, work and in life.

1.2 The Scottish Government has produced revised guidance for local authorities, hospitals and other services on the education of pupils unable to attend school due to ill health.

Guidance on education for children and young people unable to attend school due to ill health 2015

<http://www.gov.scot/Resource/0047/00479700.pdf>

The guidance sets out the key rights, duties and principles relating to pupils unable to attend school due to ill health, including:

- Every child and young person's right to be provided with an education
- Parents having a legal duty to provide education for their child, either by ensuring they attend school or by providing education at home
- The rights, well-being, needs and circumstances of the individual child or young person should at all times be at the centre of the decision making process
- All children and young people are entitled to support with their learning, where a need is identified, whatever their circumstances.

2 Aberdeenshire Guidance

2.1 This guidance applies to children and young people whose learning is interrupted due to prolonged ill health for a range of reasons such as accidents or trauma, chronic, long term, life limiting or terminal conditions, mental health issues, and conditions which require repeated medical intervention, such as dialysis. This list is illustrative, not exhaustive. **Common childhood conditions such as colds, influenza, chicken-pox etc. where a prompt return to school is expected, will not normally be covered by this guidance.**

Children who are absent from school for a range of common childhood ailments will be covered by Aberdeenshire Council Guidelines on Managing and Promoting Pupil Attendance in Nursery, Primary and Special Schools, and Guidelines on Managing and Promoting Pupil Attendance in Secondary Schools.

<http://www.aberdeenshire.gov.uk/media/20039/attendance-policy-guidance-primary-schools-november-2015.pdf>

2.2 Where a pupil has been exempted from attending school to give assistance at home due to the illness or infirmity of a family member, then as far as is reasonably practicable and **without undue delay** schools should make special arrangements for the pupil to receive education.

2.3 Section 14(1) of the Education (Scotland) Act 1980 requires local authorities to make special arrangements for pupils absent from school through ill health **without undue delay**. The main emphasis in the initial period of absence will be on recovery, and the time required for this will vary. Wherever possible, absence should not lead to a reduction of education which would have a detrimental effect.

2.3 A useful fact sheet has been produced by Enquire which explains children and young people's rights to education and support while they are:

- absent from school because of ill health
- unable to attend school for other reasons

<http://enquire.org.uk/20100622/wp-content/uploads/2016/04/when-a-child-cant-go-to-school.pdf>

3 Responsibilities and Process

3.1 The Named Person will be responsible for supporting children and young people who are unable to attend school due to prolonged ill health. Staff within the school are best placed to understand the educational needs of each individual child or young person. In most instances, the school retains the lead role and works with partners.

Class and subject teachers should record missed work to ensure effective education and maintain the child/young person's links with school; this will support reintegration as part of broader transition planning.

Whatever the circumstances, the objective at all times is to ensure that the child's educational entitlement and wellbeing are met. The process followed in

each case is likely to differ depending on individual circumstances, but common throughout all stages is the need for clear lines of communication between staff across education and health boards, and the child or young person and their parent or carer.

If it is deemed appropriate that the child or young person's educational needs will be continued outwith school then the Named Person will manage arrangements in partnership with the local authority and other relevant agencies.

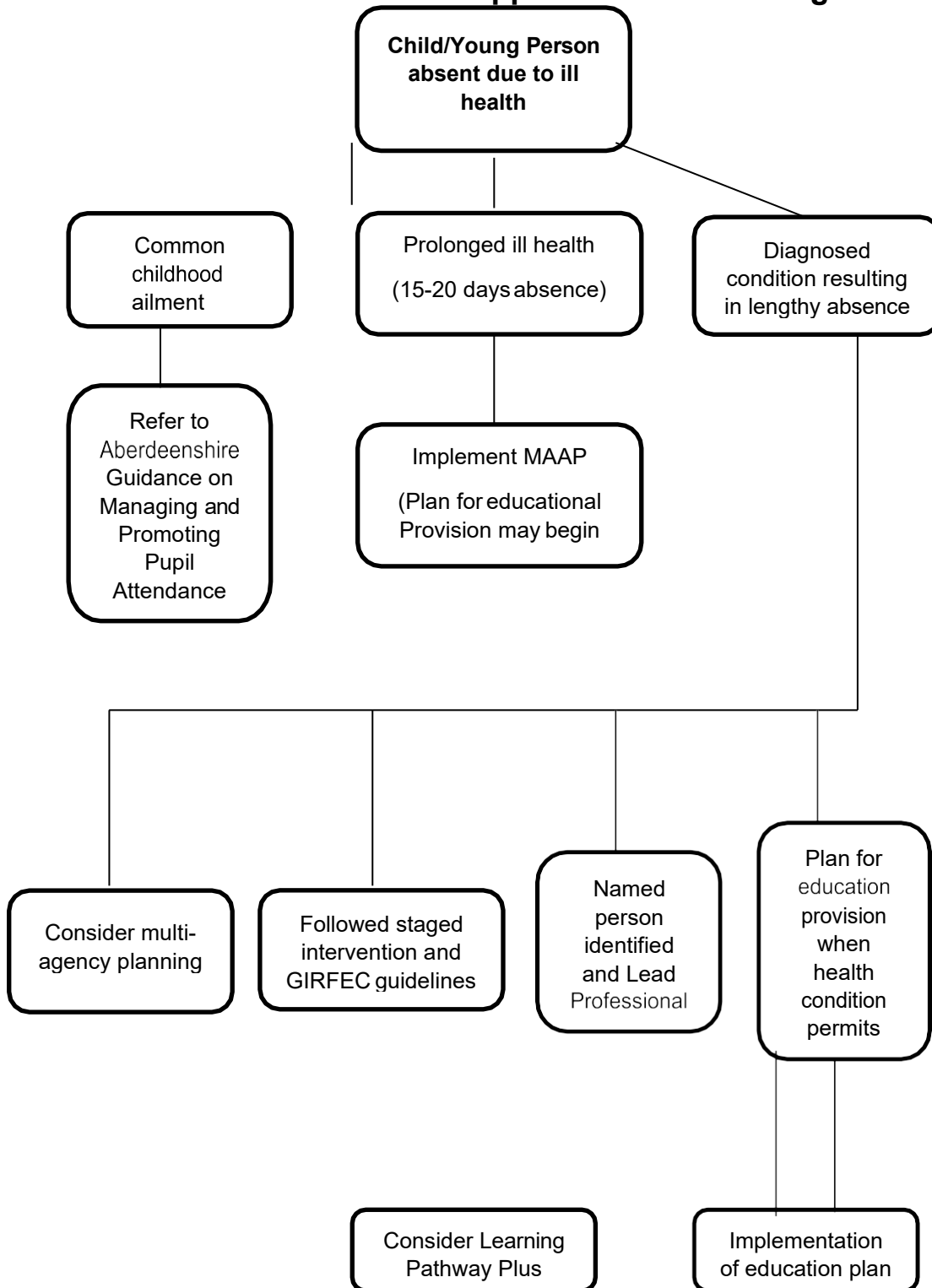
3.2 There are three main instances when a pupil may require educational provision out with school to be arranged.

1. If the child or young person's illness is known, or reasonably thought likely to extend to or beyond 5 days, then education should proceed immediately, **if medical assessment permits**.
2. Where there is less certainty over the possible length of any absence, education out with school should commence at the earliest opportunity and certainly no more than 15 working days of continuous or 20 working days of intermittent absence.
3. Where children or young people who have been in hospital and are discharged to go home to continue treatment or to recuperate, the arrangements for their learning should also be considered if the total period of absence is likely to extend beyond 15 days.

The ambition is to continue education wherever possible, whilst taking into account the practical limitations of education outwith an educational setting.

3.3 Once a child or young person has been identified as having prolonged ill health then school based action should be initiated. A flow chart has been developed to help. This guidance sits within Aberdeenshire's Staged Intervention model.

Flow Chart to Support Decision Making



4 Educational Support

4.1 The **Named Person** will be the main point of contact between home and school.

Support could include:

- Named Person liaising with class teachers regarding course work and liaising with the parents / carers / child
- Direct liaison between the class / subject or guidance teachers as appropriate of the school with the parents / carers/child / young person
- Child/ young person having access to school software/websites as part of educational provision & use of electronic links such as GLOW, Solar, Scholar.
- Children and Young People with more complex or longer term illness may be designated a Lead Professional as the main point of contact.
- It would be good practice for contact to be maintained with the pupil's peer group
- If the child/young person is in hospital (and this may be outside Aberdeenshire) then the school should liaise with the Hospital and Home Tuition Service. This service, based at Royal Aberdeen Children's Hospital (RACH) provides educational provision, as appropriate, for children and young people whilst in hospital at RACH.
- If therapeutic intervention is appropriate then a proposal for a Learning Pathway Plus should be completed:

<https://asn-aberdeenshire.org/planning-documentation/>

In exceptional circumstances, and with a clear evidence base, tutor support may be appropriate. In this instance the Named Person should contact the Quality Improvement Officer for the School. The School Nurse should also be approached for advice on appropriate provision in relation to the illness or condition

5 Legislative position

This Annex sets out some key provisions within Scottish legislation directly relevant to the education of children or young people including legislative provision in relation to children or young people who are unable to attend school or ELCC due to ill health. It does not however offer any interpretation of the legislation.

As indicated at paragraph 24 the **National Framework for Supporting Learners** draws together several of the legislative frameworks which apply to children and young people that need support for their learning. The links within the document provide further information on the legislative and policy frameworks.

<http://www.gov.scot/Publications/2015/06/6846/12>

The interplay between legislative provisions is important in terms of provision of services for children and young people unable to attend school due to ill health. The diagram below sets out the relationship between the provisions of key legislation



6 Case studies

Case Study 1

Rosemary is a young girl aged 14 years. She had begun to experience severe anxiety whilst at primary school, beginning in P6. There was a successful transition to secondary school following Aberdeenshire's Staged Intervention model at Intensive Support level 3:

- IEP
- Personalised and enhanced transition arrangements.
- Intervention and Prevention Teacher
- Significant use of the quiet area.

However, in S4 Rosemary's severe anxiety worsened, Rosemary's medication was altered and further support from the Young People's Department was put in place.

Rosemary began to want to stay at home, not to go out, not to meet with friends, and became increasingly reluctant to attend school. Rosemary's illness affected her school attendance which fell below 65%. She was then absent from school for 5 weeks. There was a very good relationship between home and school, school staff were very supportive of Rosemary and her family. Rosemary's Guidance Teacher (PTG) was the link between home and school.

As part of the process of identifying and assessing Rosemary's needs via GIRFEC, it was decided it was appropriate for Rosemary to attend school part-time based on her Health & Well-being needs underpinned by curriculum flexibility. The PTG as Named Person acted as a link between subject departments and Rosemary's family. This proved to be very successful. Partnership working between home, school and Health Services through multi-agency action planning (MAAP) enabled the planning process to be outcome led and support was put in place to respond to Rosemary's needs. This included:

- Reviewing a part-time timetable to ensure that Rosemary was able to make progress in the subjects that she was completing at school.
- Targeted support prior to assessments.
- Alternative assessment arrangements
- Opportunity for Rosemary to access a wider and broader curriculum e.g., participating in Senior Phase activities such as charity events and volunteering
- Enhanced transition planning.

Rosemary maintained part-time attendance for most of S4. She made a successful transition into S5 and was able to increase her attendance at school. There continued to be regular review and planning meetings.

Rosemary left school at the end of S5 following supported enhanced transition planning. Rosemary then began a course at the nearby further education college.

Case Study 2

Allison is in primary 4 and has cerebral palsy. She underwent an operation to try and help strengthen her muscles, she was unable to return home immediately and needed more time to recuperate in hospital where she received physiotherapy.

From the outset the school was very supportive of Allison. They issued her with a tablet to take to hospital, loaded with apps relevant to her year and stage, providing fun games on topics that she had been covering in literacy and numeracy. Allison also used the device to keep in touch with her teacher and classmates.

Her teacher from the Hospital and Home Tuition Service consulted at length with her class teacher and detailed information about Allison's learning targets was shared. Allison was supported in her learning in the hospital by the Hospital, Home and Tuition Service.

Once back in school full-time the school took account of the feedback on Allison's learning from the Hospital and Home Tuition Service. Her class teacher was also able to monitor and assess her online learning that had been organised for her. Her Class Teacher was very aware of Allison's condition and recognized there were times when she was tired, and she was unable to attend school. A tutor was arranged for some sessions to help support Allison's learning. Allison was soon able to attend school full time and engage with her school curriculum without the additional support of a tutor.

Further Case Studies can be found in Education Scotland: Supporting Learners: children too ill to attend school. A Conversation. December 2013

7 Useful resources

- Aberdeenshire ECS: ASN webpages <http://asn-aberdeenshire.org/>
- Guidance on education for children and young people unable to attend school due to ill health 2015_ <http://www.gov.scot/Resource/0047/00479700.pdf>
- Supporting pupils with medical needs and managing medicines in educational establishments <http://asn-aberdeenshire.org/policies-and-guidance/>
- Pupil Inclusion Network Scotland (PINS) recommends the following resource:

What works in promoting social and emotional well-being and responding to mental health problems in schools?

Advice for Schools and Framework Document:

https://www.ncb.org.uk/sites/default/files/uploads/documents/Health_wellbeing_docs/ncb_framework_for_promoting_well-being_and_responding_to_mental_health_in_schools.pdf

- CHAS is a charity that provides the only hospice services in Scotland for children and young people who have life-shortening conditions for which there is no known cure. CHAS runs two children's hospices, Rachel House in Kinross and Robin House in Balloch, and a home care service called CHAS at Home

<http://www.chas.org.uk/>



