



BHES

“Provision/Admissions Policy”

Note: in this policy reference to governing body or governors refers to the management committee and its members.

Where contextually appropriate for school read service.

Date adopted: [Click here to enter a date](#)

HISTORY OF POLICY CHANGES

Date	Page	Details of Change
March 2022	1 3 5 & 6	Policy added to BHES format Contents added Wording removed with regards to 'statement of special needs' – reason out of date terminology

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1. Overview

This document outlines the policy and procedures for admissions of students to the Bristol Hospital Education Service (BHES), which is designed to meet the educational needs of children and young people who are absent from school through medical needs.

Children and young people are entitled to educational provision when they are absent from their home school on medical grounds for 15 school days or more but are still well enough to access education and engaging with a health care plan to meet the health needs causing the absence.

BHES will work with schools and LA officers in line with statutory guidance Supporting pupils at school with medical conditions. DfE-00393-2014 and Ensuring a good education for children who cannot attend school because of health needs. DfE-00307-2013.

Following the acceptance of a referral students must remain on the role of their mainstream school or college, they will be dual registered with the BHES while the service is providing support. In conjunction with the students on-roll school BHES will ensure that students are safeguarded during times that they are providing education.

2. Referrals

For Children admitted to Hospital the following criteria will be applied:

1. Recurrent admissions.
2. Any inpatient of statutory school age admitted for 5 days or more.
3. Siblings of inpatients of the Children's Hospital who are not Bristol City Council residents.
4. Students who are aged 16 to 19, who are on roll at a school or college and meet criteria 1 or 2 above.

For Children who are residents of Bristol City Council or in the care of Bristol City Council and not in hospital, referrals must be made:

1. Using the service referral form which must be signed by the health care professional who is providing an ongoing health care plan to meet the medical needs causing the absence from school. Referrals will need to be accompanied by the child's school's plan to support their reintegration into school.
2. Using an appropriate hospital discharge notice. (note: these will cover short term periods, any period beyond 6 weeks will require ongoing input from Health Professionals as in 1. above)
3. Referrals will be accepted by GP's only where the GP has made an ongoing referral to a specific health provider (e.g. CAMHS). In this situation BHES provision will cease if the ongoing referral is not taken up.

Referrals will be processed centrally and acknowledged within 1 week. Incomplete referrals will not be taken up and returned to the referrer.

3. On Referral

The student's school will be required to complete a data capture form. If the student meets the criteria for provision from the service best practice will be for a multi-agency planning meeting to be convened by the student's school which will involve.

- The student's home school/college.
- The parents/carers and student if appropriate.
- The Health professional making the referral.
- BHES referral follow up lead.
- Other agencies working with the student or their family as appropriate.

At this planning meeting an Individual Support Plan (ISP) will be agreed:

- Identifying and naming the key worker from the home school who will co-ordinate support in line with statutory guidance.
- Confirming ongoing contact names and details for all agencies.
- Stating how the student's additional needs including SEN will be met and resourced.
- Agreeing a reintegration plan or BHES exit strategy.
- Specifying roles and responsibilities of all parties.
- Setting the date for the first review.

If the on-roll school is unable to arrange a meeting promptly then BHES will offer an Initial Support Plan which will be evaluated at the first review.

The service recognises that it has an important role as part of a coordinated multi agency approach in situations where the student presents with a complex pattern of need and the medical diagnosis, treatment, benefits of BHES provision and period of absence may be unclear. In these cases, educational provision will be provided by the BHES when there is:

- A clear and agreed time limit for support.
- Continued and regular input from health care provision.

4. Commencement of Provision

For non-hospitalised students who are resident of Bristol City Council and are of statutory school age, provision and tuition from the BHES will commence when an ISP is agreed and completed.

In accordance with statutory guidance, it is recognised that the home school/college has a central role in ensuring continuity in a student's education, the home school/college will remain responsible for:

- Looking for all opportunities to reintegrate the student into their school.
- Providing a key worker who will coordinate the ISP and monitor the student's progress.
- Placing the student on to the SEN code of practice.
- Convening any subsequent planning and review meetings.
- Convening and planning any annual review meetings for students with statements of special educational needs/EHCP's.
- Requesting statutory assessment for students should that be an appropriate course of action.
- Communicating Information to all agencies involved.
- Ensuring termly work plans and schemes of work are available in all subjects which the student would normally be studying.
- The loan of any appropriate resources relating to the student's education, including resources to ensure students can access online teaching.
- Examination entry fees and arrangements, including the application for any exam concessions and commissioning any required testing.
- Making arrangements for any national assessment procedures.
- Assessment of coursework for accreditation.
- Provision of Independent Advice & Guidance and support to help the student progress successfully into post 16 education or training.
- Arranging or commissioning any work-related learning placements for the student.
- Communicating any changes or alterations of the ISP to all agencies.
- Provision of suitable tutoring and mentoring facilities when BHES staff are working on their site.
- Implementation of reintegration plans into school.

BHES tuition is not viewed as a long-term alternative to mainstream educational provision. The expectation is that students will increase their engagement with education up to full time provision, ideally through a return to their mainstream school.

For student's in schools and colleges above the statutory school age provision by BHES is discretionary. In these cases, any provision will be agreed by the Head Teacher based upon individual circumstances.

5. Nature of Provision

The precise nature of provision will be determined at the point of referral and recorded in the ISP. Provision will be reviewed at all subsequent review meetings.

In all cases BHES will provide:

- The agreed amount of education that the student's health allows them to engage with.
- An appropriate member of staff to act as the service lead worker who will be aware of and sensitive to the medical needs of the student.

6. Case Reviews

Regularity of case reviews will be specified in the ISP, the minimum review period being termly. Reviews must include the lead professionals from all services providing support to the student.

7. Cessation of Provision

BHES provision will cease if:

- The Student is attending school/college.
- The student is too ill to access BHES education provision in which case the final review meeting will agree an appropriate course of action.
- The young person fails to engage with or access the provision in which case the final review meeting will agree an appropriate course of action.
- Other provision is agreed at a review meeting.
- The student leaves school or college.
- The student stops accessing the health care plan being provided by the referrer.
- Where there is evidence that the student is able to attend mainstream provision.
- The Health referrer ceases to provide a health care intervention.
- The students on roll school requests that provision ceases and to do so would not be against statutory guidance.
- The student states that they wish to return to school and not access BHES provision.

If a student fails to attend or make themselves available for tuition for 3 consecutive sessions without an appropriate medical certificate or other valid reason, BHES will take action in line with the service attendance policy, continued non-attendance may lead to withdrawal of the BHES provision.

If a student ceases to follow a therapeutic programme recommended or provided by any other agency as part of a rehabilitation or reintegration package provision may be withdrawn following planned review meetings.

8. Students with EHCPs or receiving Top Up Funding

Students do not meet the referral criteria for BHES if they have an EHCP, except for situations where the health issue preventing them attending school is absolutely unrelated to any needs related to their EHCP.

If a student with an EHCP is unable to attend schools for health reasons then health professionals should work with the student's school (or with the Local Authority) to ensure their EHCP fully reflects the student's needs.

Where a student is referred who has an EHCP, Statement of Special Needs or for whom the school are receiving top up funding, once the initial individual support plan has been agreed BHES will invoice schools for the full cost of BHES provision.

Support will only be provided once it has been agreed with the on-roll school, support and progress will be reviewed at termly reviews and invoices adjusted accordingly.

9. Students who have an EHCP published during BHES provision

Once a student has an EHCP finalised, they will no longer be eligible for BHES support unless this is commissioned by their on-roll school or the Local Authority directly.