



Birmingham
City Council

SECTION 19 POLICY

**SUPPORTING CHILDREN & YOUNG PEOPLE
WHO ARE UNABLE TO ATTEND THEIR
EDUCATIONAL SETTING**



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SECTION 19 POLICY

EDUCATION OTHER THAN AT SCHOOL (EOTAS)

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INTRODUCTION

Birmingham City Council (the Council) is committed to ensuring that all children and young people (CYP) in Birmingham thrive by feeling connected, confident, included, safe, healthy, happy, and respected. This is delivered through our overarching principles:

- Children and young people are at the heart of everything we do.
- We are ambitious for every child and young person in Birmingham.
- We are one partnership with one set of priorities.
- We are relationship-based and restorative in our approach.

This policy outlines the Council's legal duties to children of compulsory school age¹ who for by reason of illness, exclusion from school or otherwise, may not for any period receive suitable education unless such arrangements are made for them. It also provides the Council's policy for CYP who are not of compulsory school age.

This policy has been written with due regard to the following legislation and statutory guidance:

- The Education Act 1996
- The Equality Act 2010
- The Children and Families Act 2014
- 'Alternative Provision' Statutory Guidance (2013)
- 'Arranging education for children who cannot attend school because of health needs' Statutory Guidance (2023)
- 'Suspension and Permanent Exclusions' Statutory Guidance (2023)
- 'Working together to improve school attendance' Statutory Guidance (2024)
- 'Summary of responsibilities where a mental health issue is affecting attendance' Guidance (2023)
- 'Providing remote education' Guidance (2023)

1. As defined by section 8 Education Act 1996 - <https://www.legislation.gov.uk/ukpga/1996/56/section/8>

AIMS OF THE POLICY

- 1** The Council's aim is to ensure that all CYP receive a suitable, full-time education which meets their individual needs to enable them to thrive and fulfil their dreams and aspirations.
- 2** When a child of compulsory school age is unable to access their educational setting due to illness, exclusion or otherwise, the Council must consider whether it has a duty under section 19 of the Education Act 1996 to make suitable provision for them.
- 3** All CYP must receive a good education, regardless of their circumstances or the settings in which they find themselves. Where the Council has a duty to secure alternative provision, this must appropriately meet the individual needs of the child and enable them to achieve good educational attainment on par with their mainstream peers.



THE 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.’

The DfE statutory guidance “Ensuring a good education for children who cannot attend school because of health needs”, states that, “The law does not define full-time education but children with health needs should have provision which is equivalent to the education they would receive in school. If they receive one-to-one education, for example, the hours they receive could be fewer as the provision is more concentrated”.

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.

SCHOOL & LOCAL AUTHORITY RESPONSIBILITIES

SCHOOLS RESPONSIBILITIES	LOCAL AUTHORITY RESPONSIBILITIES
Schools should 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) and 'Arranging education for children who cannot attend school because of health needs' (DfE, 2023)	Birmingham City Council will, in line with their Section 19 duty, 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.
Shorter term illnesses or chronic conditions are best met by school support and resources, some of which have been outlined in this document. Such conditions that might meet this definition include short term post-operative support and periods of reduced immunity. Where possible, schools should continue to provide education to children with health needs who can attend school.	Birmingham City Council can commission a continuum of provision for children with health and mental medical needs. This includes outreach support to schools, educational tuition, and provision at Hospital Schools.
Schools must be aware of their responsibilities when mental health issues are impacting on a child's attendance.	Birmingham City Council has responsibility for promoting and protecting public physical and mental health and safeguarding children and young people.
Under equalities legislation schools must consider whether they need to make any reasonable adjustments to provide suitable access for a child whose condition amounts to a disability.	Birmingham City Council will work with schools to set up an individually tailored reintegration plan for each child.
Schools should 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 a relevant outside agency for additional support.	The local authority does not need to become involved in such arrangements unless it has reason to believe that the education being provided by the school is unsuitable.

SUSPENSION & PERMANENT EXCLUSIONS

Birmingham local authority through its balanced education system is committed to working in Partnership with schools/education settings and other agencies to prevent exclusion as this can have a significant negative impact on our young people's lives and particularly those who are vulnerable. Evidence has shown that young people permanently excluded, are far more likely to live in poverty, be known to social care, have Special education needs or recognised mental health issues. Of those permanently excluded only 7% then went on to achieve a good pass in English and Maths; 50% were unemployed following the end of compulsory education; and of those attending alternative provision only 4.5% achieved a good pass in English and Maths. Furthermore, half of the prison population had been PEX (Timpson 2019).

Whilst it is acknowledged that schools must be calm and safe spaces and, in some instances, a permanent exclusion is the only course of action to be taken due to the nature of the event/incident. However, since 2015 Birmingham's permanent exclusion rate has been higher than the national and currently our exclusion rate is the highest it has been.

ACADEMIC YEAR	BIRMINGHAM %	ENGLAND%
2015/16	0.13	0.08
2016/17	0.13	0.10
2017/18	0.11	0.10
2018/19	0.12	0.10
2019/20 * lower due to Covid-19	0.08	0.06
2020/21* lower due to Covid-19	0.06	0.05
2021/22	0.10	0.08
2022/23	0.14	0.11

We must work together across the education partnership to ensure that everything possible has been done to avoid the exclusion of any child and young person from a Birmingham school (whether maintained or an academy) and be confident that in every school exclusion is only used as a last resort. Early intervention is paramount, and in academic year 24-25 we will bring school leaders together through our Education Board to agree ways in which we can reduce the number of permanent exclusions. School's should consider **Birmingham's Local Offer**; direct support from **COBS Behaviour Support**

Team; Virtual School Guidance for schools setting out the continuum of support for those known to social care, our **SEND Ordinary Available Guidance**; our **Trauma Informed Attachment Aware Schools Programme**; alongside national evidence such as those set out in the **Youth Endowment Fund Toolkit**, the **UNICEF Rights and Respecting Schools Programme**.

We must strengthen and widen our Inclusive Pathways through our Tackling Exclusions working group alongside our Alternative Provision Strategy for the city and the team around the school. Setting out additional supportive interventions to consider alongside statutory responsibilities and expectations.

For the vast majority of pupils, suspensions and permanent exclusions will not be necessary and other strategies will be successfully used to identify and address their behaviour. Suspensions and permanent exclusions should only be used as a last resort when all other strategies and support have been exhausted.

Managed Moves, Off-site direction and Alternative provision can be important in managing behaviour and providing alternatives to exclusion.

This can include outreach support for pupils in mainstream schools and offering short term places to pupils who need a time-limited intervention away from their mainstream school.

However, where a pupil is at risk of permanent exclusion, schools are asked to discuss this with the Council's Exclusion Team; for children known to a social worker they must also notify and discuss prevention with the child/young person's Virtual School; and for a child/young person with an EHCP they must contact the school's SEND case officer to call an early annual review.

SUSPENSIONS

If a child/young person is suspended from school for more than five school days or are permanently excluded from school, suitable full-time education must be arranged no later than the sixth school day following the suspension or exclusion:

- For a suspension of more than five school days from a school, the governing body must arrange suitable full-time education for any pupil of compulsory school age. Where a child receives consecutive suspensions, these are regarded as a cumulative period of suspension for the purposes of this duty. This means that, if a child has more than five consecutive school days of suspension, education must be arranged for the sixth school day of suspension, regardless of whether this is because of one decision to suspend the pupil for the full period or multiple decisions to suspend the pupil for several periods in a row.
- For suspensions of more than five school days the Council must arrange suitable full-time education for any pupil of compulsory school age.

PERMANENT EXCLUSIONS

For permanent exclusions, the Council must arrange suitable full-time education for the pupil to begin from the sixth school day after the first day the permanent exclusion took place. Please note: Provision does not have to be arranged by either the school or the Council for a pupil in the final year of compulsory education who does not have any further public examinations to sit.

- In all cases, provision should be arranged as soon as possible to help minimise the disruption that the suspension or permanent exclusion can cause to a pupil's education.
- If the pupil who is suspended/excluded is a Looked After Child, the school or Council should arrange alternative provision from the first day of suspension/exclusion in line with the child's needs and their Personal Education Plan (PEP)
- Where a pupil has an EHCP, the Council may need to review the plan or reassess the child's needs, in consultation with parents, with a view to identifying a new placement.

NOTIFICATION

1. The headteacher must inform the Council without delay of all school exclusions regardless of the length of the exclusion, in line with the Suspension and Permanent Exclusions Statutory Guidance and the Council's Exclusion Guidance.
2. For a permanent exclusion, if the pupil lives outside the LA area in which the school is located, the headteacher must also notify the pupil's 'home authority' of the permanent exclusion and the reasons for it without delay.
3. Notifications must include the reasons for the suspension or permanent exclusion and the duration of any suspension or, in the case of a permanent exclusion, the fact that it is permanent.



ARRANGING EDUCATION OTHER THAN AT SCHOOL

If a child is unable to attend school due to a permanent exclusion, education will be arranged for them at City of Birmingham School (COBS) which is the Council's PRU. COBS has several teaching campuses across the city offering personalised educational programmes to pupils from 5 to 16 - <https://cobschool.com>. The placement at COBS may be for a short-term period whilst for others it may be for a longer time. The PRU will provide access to a balanced curriculum, smaller working groups, specialist assessment and reintegration support to ensure that, wherever possible, pupils can be supported to return to mainstream schools as soon as possible. Pupils who attend COBS in primary years must transition back to a mainstream school by secondary age; and pupils attending COBS in Key Stage 4 all have the opportunity to achieve national qualifications including GCSE's.

Provision at COBS will be arranged by the Council's Exclusions Team once it is notified of the permanent exclusion (or over five day suspension from a PRU). If the child has an EHCP, the exclusions team will liaise with the SENAR service to ascertain its views on the suitability of the alternative provision proposed.

Where provision through COBS is not deemed an appropriate provision for whatever reason, the Council will make alternative arrangements. This may include:

- Access to an alternative provider e.g. COBS may commissioner places to another alternative provider such as Flexible Learning or Titan St George
- Access to home tutoring arranged through a provider approved by Birmingham City Council e.g. the Council's Home Bridging Team or the Virtual School Tuition Framework for Birmingham children in care.
- Access to on-line learning through an approved online school.



FUNDING ALTERNATIVE PROVISION FOR CHILDREN AND YOUNG PEOPLE EXCLUDED

Money Following Excluded Pupils

The School and Early Years Finance and Childcare (Provision of Information About Young Children) (Amendment) (England) Regulations 2024 made under section 47 of the School Standards and Framework Act 1998 state that where a child is **permanently excluded** from a maintained school the Local Authority (LA) must redetermine (reduction) to the excluding school's budget share. Equally, where a permanently excluded pupil is admitted to a new school, the LA must redetermine (increase) the receiving school's **budget share**.

However, where a child remains on the roll of their home school and attends alternative provision to avoid permanent exclusion, the local authority and home school may wish to consider the transfer of a portion of the school's funding associated with that child to the alternative provision.

This ensures that the funding supports the child. This arrangement would cease when the child is reintegrated back to their home school or are no longer on the roll of the home school. When a child permanently leaves the roll of their home school and is admitted to COBS or alternative provision, a mandatory funding adjustment is made by the local authority. Details of these adjustments are set out in the 'Redetermination of budgets' sections of the 'Schools operational guide' on the web page entitled 'Pre16 schools funding: local authority guidance' for the relevant financial year, a link to which can be found in the following web page: **Local authorities: pre-16 schools funding - GOV.UK** (www.gov.uk).



MEDICAL CONDITIONS & ILLNESS

The guidance below outlines how local authorities and schools can best support children who cannot attend school because of physical or mental health needs. The guidance also covers the role that the child's home school (if they have one) should play in ensuring the child receives a suitable education when too unwell to attend school and, where appropriate, is successfully re-integrated back into their home school once they are well enough to be.

This guidance also highlights the role the parents / carers and the child should play in agreeing suitable provision and on how and when a child could be reintegrated back into mainstream schooling (where relevant).

The 'home school' in this document refers to the school that the child is on the roll of when they become ill. Not all children will have a home school as, for example, their health needs may have arisen before they were old enough to enrol at school.

SCHOOL RESPONSIBILITIES

CYP may have health/medical needs which require support at any time whilst they are in education. These may be both short and long-term physical health needs or mental health needs; and there is a range of circumstances where their health needs can and should be managed by the school so that they can continue to be educated there without the need for the intervention of the local authority. The NHS has produced helpful guidance on when a child may be too ill to attend school - <https://www.nhs.uk/live-well/is-my-child-too-ill-for-school/>

CYP with medical conditions should be properly supported so that they have full access to education. Governing bodies must ensure that arrangements are in place in schools to support pupils at school with medical conditions in accordance with the 'Supporting pupils at school with medical conditions' Statutory Guidance 2015.² This includes having clear school policies for supporting pupils with medical conditions and ensuring these pupils can access and enjoy the same opportunities at school as any other child. Schools also need to be aware of their responsibility to support mental health needs.

Parents also have a vital role to play, and schools should have a publicly accessible policy that sets out how schools will support children with health needs including a named person who can be contacted by the Council and by parents. Regular communication should be maintained between a named member of school, the child, and parents/carers to promote engagement and welfare, monitor progress

2. [Supporting pupils at school with medical conditions \(publishing.service.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/478142/Supporting_pupils_at_school_with_medical_conditions.pdf)

and any safeguarding concerns. Schools should also ensure that children and young people and their parents/carers successfully remain in touch through school newsletters, emails, and invitations to school events.

There will be a wide range of circumstances where a child has a health need but will receive suitable education that meets their needs without the intervention of the Council – for example, where the child can still attend school with some support; where the school has made arrangements to deliver suitable education outside of school for the child; or where arrangements have been made for the child to be educated in a hospital by an on-site hospital school. In these cases, the Council would not need to arrange any additional education, provided it is satisfied that the child is receiving suitable education.

SUPPORT FOR FAMILIES AND SCHOOLS

1. The school should develop good support for pupils with physical or mental health conditions and the sharing of information between schools, health services and the Council is important. For example, by making reasonable adjustments where a pupil has a disability or putting in place an individual healthcare plan where needed. The setting should also consider whether additional support from external partners (including the Council or health services) would be appropriate and, if necessary, make referrals in a timely manner and work together with those services to deliver any subsequent support. Schools can also play a big part in making sure that the provision offered to the child is as effective as possible and that the child can be reintegrated back into school successfully.
2. Schools should work with professionals and make full use of the available services which can provide advice and guidance to support children to remain in school such as:
 - School Health Support Service which supports children with health concerns which are impacting on their ability to participate fully in education - https://www.birmingham.gov.uk/info/20014/schools_and_learning/692/home_education/7
 - **Early Help Assessment** with the family and ensure regular reviews are in place to support the child while absent from school.
 - Forward Thinking Birmingham including STICK (Screening, Training, Intervention, Consultation, Knowledge) Team - <https://forwardthinkingbirmingham.nhs.uk/stick-team>
 - The #YouveBeenMissed campaign is led by Forward Thinking Birmingham, Birmingham City Council and Birmingham Education Partnership supporting pupils, parents, carers and professionals to aid our children and young people manage their mental wellbeing in school. As part of the project, clear guidance for schools and primary care professionals has been

developed to support children and young people to remain in school. A range of resources, videos and webinars has also been created for children, young people, parents/carers and professionals to support the mental wellbeing of children and young people in Birmingham -

<https://bwc.nhs.uk/youve-been-missed>

- Specialist SEND Support Services e.g. Educational Psychology Service (EPS), Pupil and School Support (PSS), Communication and Autism Team (CAT), Physical Difficulties Support Service (PDSS) -

<https://www.localofferbirmingham.co.uk>

- Social Care - **<https://www.birminghamchildrenstrust.co.uk/>**

3. Schools can also contact the Council's **Education Legal Intervention Team** which provides statutory support and advice to schools and other services where there are concerns about pupil attendance. The **'Support First'** framework for schools sets out interventions to reduce school absence and should be read alongside the council's attendance strategy and the **DfE's working together to improve school attendance guidance**. Primarily, the team fulfils the Council's statutory responsibility of investigating unauthorised absence and uses enforcement powers where parents have failed to provide suitable education for their child or have failed to ensure their child attends school regularly. The team also provides training and advice to schools on legal action, pupil registration and deletion from roll.

The team also provides a triage service for social workers and family support workers concerned about the attendance of children with child in need/child protection plans. For more information on attendance, deletion from roll and legal processes please look at the team's website - **www.birmingham.gov.uk/school-attendance**

However, as soon as it is clear that the pupil 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/academy should hold a 'Team around the Child' meeting with the family and relevant professionals before making a referral (see Appendices) to the named LA officer in this policy, which includes medical evidence. Schools and academies must be able to evidence a graduated response to supporting the pupil, including the reasons why they have not been successful. Schools and academies should also be in a position to evidence they have also accessed the Emotional Based Non-Attendance (EBNA) guidance, Ordinarily Available Provision (OAP) guidance and an Individual Attendance Support Plan (IASP) as part of the school's responsibilities and should ensure that regular communication and partnership working with the family has taken place.

If it is clear after the interventions above that the school can no longer support the child's health needs and provide suitable education, the school must notify the Council. Lisa Smith, School Improvement is the named officer responsible for the education of children with additional health needs. Further

details can be found on the Council's Local Offer website - <https://www.localofferbirmingham.co.uk/>. **Please note:** The law does not specify the point during a child's illness when it becomes the Council's responsibility to secure suitable full-time education. However, when the Council becomes aware that a child of compulsory school age is unable to access their educational setting due to illness for 15 days or more, whether consecutive or cumulative, and suitable education is not otherwise being arranged, the Council has a duty to secure suitable and flexible education appropriate to their needs.

The local authority will not provide education for children whose families are in dispute with the home school, children who have been withdrawn from the 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.

SCHOOL ROLL

A child unable to attend school because of health needs must not be removed from the school register unless the child meets one of the deletion from roll regulations, even if the Council has become responsible for the child's education. Continuity is important for children and knowing that they can return to their familiar surroundings and school friends can help their recovery and their educational progress.

Where a child is not on a school roll, a lead health professional involved with the child will promote an application for a school place in the first instance. If all professionals involved with the child feel that the child's needs mean that they should be considered under Section 19, the lead professional who is presenting this issue, is responsible for gathering the appropriate evidence and presenting the referral to the Section 19 officer.



EVIDENCE OF MEDICAL NEEDS

1. It will be necessary for the Council to be provided with evidence of the child's medical needs and the impact on their ability to access education. The medical evidence should be provided by a clinical specialist such as a consultant.
2. All medical evidence will be used to better understand the needs of the child and identify the most appropriate provision. The Council, working closely with the child's school, medical practitioners (such as a GP or consultant) and the child's family, will make every effort to minimise the disruption to a child's education by identifying the most suitable provision.
3. The Council will work closely with medical professionals, the school and the child's family, to obtain and consider medical evidence. Where specific medical evidence, such as that provided by a medical consultant, is not quickly available, the Council will consider evidence from other medical professionals, such as the child's GP.
4. Once appropriate medical evidence has been provided, the Council will only seek continuing evidence where this is necessary.

NOTIFICATION

The child's school has a duty for all children of compulsory school age, under regulation 13(9)(a) of the School Attendance (Pupil Registration) (England) Regulations 2024 to make a sickness return and inform the Council's attendance team of any child recorded as absent due to illness where there has been (or there is reason to believe the child will have) at least 15 days cumulative or consecutive in an academic school year, at least 15 days absence. Where it is believed that the at agreed intervals, the full name and address of any pupils of compulsory school age who are not attending school regularly (including due to their health needs).

Where the school or other educational setting believe that the child could be eligible for education provided by the council via section 19 duties they must notify the Council via the Education Access for Medical Needs referral form to request the case to go to panel for a decision (see appendix 1 and 2 for the referral form). This notification includes:

- The child's details – name, date of birth, UPN.
- The parent/carer's details.
- Details of the child's medical needs including any supporting medical evidence
- Details of any SEND including whether they have an EHCP.
- Details (where relevant) if currently open to social care.

- The educational provision and support that has been in place to date.
- Whether a referral to James Brindley Academy has been made to arrange alternative provision or whether James Brindley Hospital School are involved?

The Council will carefully consider the referral and determine whether its duty to secure suitable alternative provision has arisen. A decision will be communicated to the school and parents within five working days of receiving the referral.

CHILDREN WITH EHCPs

If a CYP with an EHCP experiences health difficulties which impact their attendance, their setting should involve appropriate external professionals who can provide advice and support to settings such as:

- SEND advisory teams e.g. Pupil and School Support (PSS), Communication and Autism Team (CAT), Physical Difficulties Support Service (PDSS).
- Educational Psychology Service (EPS).
- Health Services e.g. School Nursing Service, Forward Thinking Birmingham.
- Social Care.

Referrals to appropriate external professionals must be made in a timely manner and the school must work together with those services to deliver any subsequent support.

The setting must also inform the CYP's SEND Case Officer with the Special Educational Needs Assessment and Review Service (SENAR) so SENAR can then support and advise the setting. It may be appropriate for settings to request an early annual review is held where there has been a change in the CYP's needs and the provision they require.

If a child of compulsory school age with an EHCP is unable to access their educational setting due to illness for 15 days or more, whether consecutive or cumulative, their educational setting must notify the Council's named officer responsible for the education of children with additional health needs and the SEND Case Officer in SENAR. Any arrangements for alternative provision will need to be done in consultation with SENAR considering the child's identified SEND and the special educational provision they require as outlined in their EHCP.

ARRANGING ALTERNATIVE PROVISION

Children unable to attend school because of health needs should be able to access suitable and flexible education appropriate to their needs. The nature of the provision must be responsive to the demands of what may be a changing health status. Where the Council has identified that alternative provision is required, it must be arranged as quickly as possible. The provision will aim to ensure that:

- Pupils make good progress in their education and do not fall behind their peers.
- Disruption to learning is minimised and there is a continuity of education provision within the school curriculum.
- Pupils can obtain qualifications as appropriate to their age and abilities.
- Pupils can reintegrate successfully back into school and that this takes place as soon as their health permits.
- Pupils feel fully part of their school community and can stay in contact with their peers.

The alternative provision should be full-time. "Full-time education" is not defined in law, but it should equate to what the pupil would normally have in school - for example, for pupils in Key Stage 4 full-time education in a school would usually be 25 hours a week. If alternative provision is delivered by one-to-one tuition, for example, the hours of provision could be fewer as the provision is more concentrated.

It may not be in the child's best interests to receive full time provision for reasons which relate to their physical or mental health. In these cases, the Council will arrange part-time provision on a basis it considers to be in the child's best interests in consultation with the child's parents/carers, educational setting, and medical professionals.

The alternative provision must be reviewed on at least a half-termly basis to ensure this remains suitable for the child. This is the responsibility of the officer/school/hospital who has commissioned or made a referral to the alternative provision.

If a child is unable to attend school due to illness, provision will be arranged through James Brindley Academy (JBA) - www.jamesbrindley.org.uk. Where provision through JBA is not deemed an appropriate provision for whatever reason, the Council will make alternative arrangements. This may include:

- Access to an alternative provider e.g. COBS.
- Access to home tutoring arranged through a provider approved by Birmingham City Council e.g. the Council's Home Bridging Team or the Virtual School Tuition Framework for Birmingham children in care.
- Access to on-line learning either through the school where the child is registered or through an approved online school.

HOSPITAL ADMISSIONS

For children and young people aged 2-19, with an inpatient admission, hospital schools (which in Birmingham is provided by James Brindley) provides access to education in general and mental health hospitals across Birmingham.

If the hospital admission is planned conversations between the home school, the hospital education service, Birmingham City Council and the hospital school James Brindley Academy should take place as early as possible to discuss likely admission date and expected length. This will give the provider time to liaise with the child's school and, where applicable, with the local authority on the educational programme to be followed while the child is in hospital.

Within hospital centres, partnership working, integration and flexibility is key to effective educational outcomes during a young person's stay. James Brindley staff work as part of the multi-disciplinary team within the centre to ensure that potential barriers to learning are accounted for and a bespoke package of education delivered in liaison with the home/schools to ensure continuity in provision. Teaching models across centres vary, depending on the young person's needs and the hospital centre environment. Teachers may deliver education to pupils in a number of ways: 1:1 next to the bed side, small groups on the ward, in classrooms within the hospital or in small provisions adjoining the hospital.

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.

James Brindley Short Term Provision (STP)

Provides education for children and young people, aged 4 to 16, who are unable to access their school due to their health condition. Pupils receive access to a minimum of five hours of lessons a week, which can be clustered to support a fun, creative and supportive timetable that will best suit the learning needs of the pupil, maximising pupils' progress. The STP Team works closely with the Council, pupils, parents, schools, health professionals and other relevant agencies, to ensure that pupils have appropriate access to education and continue to make progress whilst they are unable to attend school. This multi-agency approach focusses on providing a time limited provision that includes the pupil's educational and wider support requirements. Teaching takes place at distinct locations depending on the needs of the pupil, some of these locations include James Brindley centres; home schools; local colleges; and the pupil's home. Referrals will always be guided by health professionals regarding a pupil's ability to access education and, as such, all referrals for STP must be supported by medical evidence stating the reason for non-attendance at school and the anticipated length of absence. Placements will only be

offered where the referral criteria is met as stated in the JBA referrals policy **[23-24-Referrals-and-Admissions-Policy-301419123-1.pdf](#)** (jamesbrindley.org.uk).

JBA 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. staying connected through school newsletters, emails, invites to school events etc.

PREGNANCY

Pregnancy and maternity are a protected characteristic under the Equality Act 2010. It is unlawful to treat a pupil less favourably because she is pregnant or a new mother. Pregnancy does not, of itself, present a health need. However, complications that may arise during and after pregnancy may be a health need and may include physical or mental health issues for new mothers and their babies which impact on a young person's capacity to attend school.

Pupils who are pregnant and school-age mothers should continue to be educated in a school while it is practicable to do so.



FUNDING ALTERNATIVE PROVISION FOR CHILDREN WITH MEDICAL NEEDS

Funding Alternative provision for children with medical needs is funded from Birmingham City Councils high needs budgets. However, where a child remains on the roll of their home school but requires a period of time in alternative provision due to their health needs, the local authority and home school may wish to consider the transfer of a portion of the school's funding associated with that child to the alternative provision.

This ensures that the funding supports the child. This arrangement would cease when the child is reintegrated back to their home school or are no longer on the roll of the home school. When a child permanently leaves the roll of their home school and is admitted to another school or alternative provision, a mandatory funding adjustment is made by the local authority.

Details of these adjustments are set out in the 'Redetermination of budgets' sections of the 'Schools operational guide' on the web page entitled 'Pre16 schools funding: local authority guidance' for the relevant financial year, a link to which can be found in the following web page: **Local authorities: pre-16 schools funding - GOV.UK** (www.gov.uk).

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, the 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.

In cases where a child was not on the roll of a school when becoming ill, or where a child may not wish to return to their home school, the local authority should consult with the family on finding a new suitable placement when they are ready to return to the mainstream.

WORKING TOGETHER – WITH PARENTS / CARERS, CHILDREN, HEALTH SERVICES AND SCHOOLS

Co-production with children, young people and their families is the approach promoted in Birmingham. 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 should also be involved in decision making from the start. How a child is engaged should reflect their age and maturity. This will help ensure that the right provision is offered and encourage the child's commitment and engagement.

This supports the Hospital School and the home school in being able to arrange the most appropriate educational provision with which the child is able to engage. Birmingham City Council will 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 currently attending a Hospital School or receiving education via another commissioned alternative provision as per School Attendance (Pupil Registration) (England) Regulations 2024. The Council will also support schools to ensure that they are meeting their statutory duty to provide suitable education.

Parents and carers have a significant role to play and can provide necessary information about the child and their needs, whether the child is at home or in hospital. Parents and carers should always be consulted before new provision begins. In all cases, effective collaboration between relevant services (local authorities, CAMHS, NHS, home schools, school nurses, where relevant, etc.) is essential to delivering effective education for children with additional physical or mental health needs.

When a child is in hospital, liaison between hospital teaching staff, the local authority, alternative provision or home tuition service, and the child's school (if they have one) ensures continuity of provision and consistency of curriculum. This collaboration enables the child's home school to make information available about the curriculum and work the child may miss, helping the child to keep up, rather than having to catch up.

The role of parents/carers is crucial in ensuring that each learner makes suitable and sufficient progress, and all providers should have policies and procedures in place which involve parents in a regular assessment, planning and review process.

ABSENCE FOR 'OTHERWISE' REASONS

Apart from illness and exclusion, there may be other reasons why a child cannot attend their education setting. Consideration needs to be given to the specific factors in each case to determine if the Council's duty under section 19 of the Education Act 1996 to arrange suitable alternative education arises.

If a child of compulsory school age is unable to attend school for a period of 15 days or more, their educational setting must notify the Council. The notification must include:

- The child's details – name, date of birth, UPN.
- The parent's/carer's details.
- Details of the reasons for the child's absence including any supporting evidence.
- Details of any SEND including whether they have an EHCP.
- The educational provision and support that has been in place to date.
- Whether a referral to alternative provision such as JBA teaching centres or COBS has been made by the school.

Both the Council and the provisions will carefully consider the referral and determine whether its duty to secure suitable education otherwise than at school (EOTAS) has arisen. A decision will be communicated to the school and parents within five working days of receiving the notification.



ARRANGING ALTERNATIVE PROVISION

If a child is unable to attend their school for other reasons and the Council accepts its section 19 duty has arisen, the Council will arrange suitable alternative provision through COBS or make a referral to JBA via their placement panel. If the child has an EHCP, the view of the SENAR service on the suitability of the alternative provision proposed will be sought before any provision is arranged.

Where a referral for provision has been by JBA or COBS or is not deemed an appropriate provision for whatever reason, the Council will make alternative arrangements. This may include:

- Access to an alternative provider.
- Access to home tutoring arranged through a provider approved by Birmingham City Council e.g. the Council's Home Bridging Team or the Virtual School Tuition Framework for Birmingham children in care.
- Access to on-line learning either through the school where the child is registered or through an approved online school.

It is recognised that the ultimate outcome for all young people accessing any EOTAS is that if it is a short-term intervention and there must be re-integration back into their mainstream setting. The EOTAS provision **must** be reviewed on at least a half termly basis to ensure this remains suitable for the child. This is the responsibility of the officer school or hospital who has commissioned the alternative provision.



CYP BELOW & ABOVE COMPULSORY SCHOOL AGE

The Council's duty to arrange alternative provision under section 19 only applies to children of compulsory school age.³ The Council understands that there may be occasions when CYP under or over compulsory school age may require alternative provision to be made for them.

In these cases, the Council would expect the educational setting the CYP attends to support them and their family to secure suitable alternative provision and minimise the disruption to their education.

If their setting cannot arrange alternative provision for CYP without an EHCP, the Council will consider whether there are exceptional circumstances which require the Council to use its discretionary powers to arrange suitable alternative provision.

If a CYP has an EHCP, the Council's duty to secure the special educational provision in Section F of their EHCP under section 42 of the Children and Families Act 2014 applies even if the CYP is not of compulsory school age. When the SENAR service is notified that a CYP is unable to attend their setting due to illness, exclusion or otherwise, it will consider whether it needs to arrange alternative provision to secure the special educational provision the CYP requires.



3. As defined in section 8 Education Act 1996 - <https://www.legislation.gov.uk/ukpga/1996/56/section/8>

RAISING CONCERNS

If parents/carers are concerned about the support being provided for their child by their school, they should discuss their concerns directly with the setting. If, for whatever reason this does not resolve the issue, they may make a formal complaint via the school's complaints procedure which should be outlined on their website. In the case of academies, parents/carers can raise concerns with academy or trust directly using the appropriate complaints procedure which should be outlined on their website. If parents do not feel that their concerns have been adequately addressed, they can raise their concerns with the Department for Education - <https://www.gov.uk/complain-about-school>

If a parent/carer is unhappy with the Council's arranged alternative provision or other related matters, they should contact the Council in the first instance to discuss the issue:

- For children absent due to medical needs – the council's Education Access for Medical Needs panel will be responsible for the education of children with additional health needs.
- For children who have been excluded from school: Exclusions Team – 0121 303 2685.
- For children who are absent from school for other reasons – Contact the attendance team attendance@birmingham.gov.uk.
- For children who have an EHCP – SENAR – <https://www.localofferbirmingham.co.uk/education-health-and-care-plan/senar/>.

If parents/carers remain unhappy, they can make a formal complaint via the Council's complaints procedure - https://www.birmingham.gov.uk/info/50172/comments_compliments_and_complaints.

If parents/carers are dissatisfied with the Council's responses to their complaint (after being considered at Stage 2 of the Council's complaints procedure), they may submit a complaint to the Local Government and Social Care Ombudsman (LGSCO). The LGSCO investigates complaints in a fair, impartial, and independent way. Parents/carers must submit complaints within 12 months of becoming aware of the matter. Further information including how to submit a complaint can be found on the LGSCO's website – www.lgo.org.uk. Alternatively, the LGSCO can be contacted on 0300 061 0614.

Parents/carers can seek further support, advice, and guidance from the following organisations:

Coram Child Law Advice Service

Provides legal advice and information on child, family and education law for parents, carers and young people in England:

Website: <https://childlawadvice.org.uk/>

Phone: 0300 330 5485 (10am to 4pm, Monday to Friday)

Email advice: <https://childlawadvice.org.uk/clas/email-advice-education/>

Birmingham Special Educational Needs and Disability Information, Advice and Support Service (SENDIASS)

Offers impartial information, advice and support to children and young people with special educational needs or disabilities:

Website: <https://www.localofferbirmingham.co.uk/send-support-and-information-2/sendiass/>

Phone: 0121 303 5004 (8:45am to 5pm, Monday to Friday)

Email: sendiass@birmingham.gov.uk



APPENDIX 1 – SCHOOL REFERRAL FORM

REQUEST FOR EDUCATION ACCESS FOR A PUPIL WITH MEDICAL NEEDS – SECTION 19 DUTY

The information that you provide to us will be used to consider your request/application and for subsequent administration. It may also be used for management information and statistics to assess the service and measure future provisions. All of your information is processed in accordance with any applicable data protection legislation and regulations.

For full details on how we use, store and share your information please view **the council's privacy notice**.

Section 19 Education Access Referral Content Guide

To support you in completing the Section 19 referral to Birmingham City Council listed below is an overview of the information you will be asked to provide. We recommend gathering the information outlined below in advance or having access to staff who can provide it. Please note: the list outlined below is not exhaustive and additional information may be required due to the child/young person's circumstances.

REFERRING SCHOOL / PROFESSIONAL DETAILS		
PUPIL INFORMATION <ul style="list-style-type: none"> • Personal information: name, D.O.B, etc. • Graduated Response documentation • Special educational needs information • Social care involvement and contact information • Risks and associated risk assessment documentation 	EDUCATIONAL RECORD <ul style="list-style-type: none"> • Core educational attainment, progress, & attitude to learning • Pupil's strengths and areas of development • Attendance breakdown • Exclusions overview (suspension & permanent) • Presenting needs leading to referral • Agency involvement and contact 	CURRENT EDUCATIONAL PROVISION <ol style="list-style-type: none"> 1. Barriers to education 2. Reasonable adjustments and support implemented 3. Assessments completed 4. Remote education and ability to learn independently 5. Parental and pupil views on education
MEDICAL CONDITIONS <ul style="list-style-type: none"> • Medical needs overview • Supporting medical documentation • Medical needs policy 	PARENT /GUARDIAN INFORMATION <ul style="list-style-type: none"> • Contact details • Emergency contact information 	INFORMATION Alternative provision and outreach information



SCHOOL REFERRAL FORM:

[HTTPS://WWW.BIRMINGHAM.GOV.UK/XFP/FORM/1157](https://www.birmingham.gov.uk/xfp/form/1157)

APPENDIX 2 – MEDICAL PROFESSIONAL REFERRAL FORM

REQUEST FOR EDUCATION ACCESS FOR A PUPIL WITH MEDICAL NEEDS – SECTION 19 DUTY

The information that you provide to us will be used to consider your request/application and for subsequent administration. It may also be used for management information and statistics to assess the service and measure future provisions. All of your information is processed in accordance with any applicable data protection legislation and regulations.

For full details on how we use, store and share your information please view **the council's privacy notice**.

Section 19 Education Access Referral Content Guide

To support you in completing the Section 19 referral to Birmingham City Council listed below is an overview of the information you will be asked to provide. We recommend gathering the information outlined below in advance or having access to staff who can provide it. Please note: the list outlined below is not exhaustive and additional information may be required due to the child/young person's circumstances.

REFERRING MEDICAL PROFESSIONAL DETAILS		
PUPIL INFORMATION <ul style="list-style-type: none"> • Personal information: name, D.O.B, etc. • Risks and associated risk assessment documentation 	MEDICAL CONDITIONS <ul style="list-style-type: none"> • Medical needs overview • Supporting medical documentation • Medical needs policy • Latest Health Care Plan 	CURRENT EDUCATIONAL PROVISION <ol style="list-style-type: none"> 1. Barriers to education 2. Reasonable adjustments and support implemented 3. Assessments completed
PARENT / GUARDIAN CONSENT AND INFORMATION <ul style="list-style-type: none"> • Contact details • Emergency contact information 		



MEDICAL PROFESSIONAL REFERRAL FORM:
[HTTPS://WWW.BIRMINGHAM.GOV.UK/XFP/FORM/1158](https://www.birmingham.gov.uk/xfp/form/1158)

