



# Hospital education: local authority baseline collection guidance

## Introduction

1. Between 13 March 2018 and 27 April 2018, the Education and Skills Funding Agency (ESFA) is collecting information from local authorities to produce updated baselines to inform the development of a new calculation for the hospital education factor in the high needs national funding formula. This follows a commitment in the [national funding formula policy document](#) to find a better way of distributing funding for hospital education.
2. The purpose of the exercise is to collect details on planned spend by local authorities on hospital education in the 2018 to 2019 financial year. We need more detailed information on hospital education than that collected in the wider baseline exercise completed last year. Section 251 budget data for 2018 to 2019 isn't due to be published until September, which is too late for this purpose. It's also limited in the information it provides.
3. This document defines hospital education for the purpose of this exercise and explains how local authorities should complete the template.

## Hospital education: definition

4. Hospital education is defined in the School and Early Years Finance Regulations as: education provided at a community special school or foundation special school established in a hospital, or under any arrangements made by the local authority under section 19 of the Education Act 1996, where the child is being provided with such education by reason of a decision made by a medical practitioner.
5. Provision that fits this definition can take a variety of forms. In many cases, the education is provided by hospital schools, pupil referral units (PRUs) or alternative provision (AP) academies. It could also be provided through a service centrally managed by the local authority or by an independent provider.
6. In this return we are seeking information about local authority spending on educational provision for patients at hospital and health providers in the local area.
7. If your authority has other planned spend associated with hospital education, this should be recorded in the second section of the return. This may include spending on the costs of individual children attending out-of-area independent provision associated with

child and adolescent mental health services (CAMHS) and other provision not associated with a hospital or health provider in your area.

## Completing the template

8. Local authorities are asked to provide planned spend on hospital education for the 2018 to 2019 financial year by provider. Local authorities should also include information on the medical provision associated with such education provision.

9. You may wish to speak with the named officer responsible for the education or children with additional health needs in the local authority, as well as providers of hospital education in your area.

10. The cells where the user can input data or information are shown in orange. Pre-populated cells are shown in green.

11. In the first section of the return, column A should provide information on the health providers in the local area that are associated with education that your local authority funds. In many cases this will be the name of the hospitals or trusts.

12. Columns B, C and D should provide information on the hospital education associated with these health providers. These can be maintained schools, academies, independent providers in the area, services directly funded by the local authority, or other. The funding for academies should include the deductions made to the local authority's high needs block by ESFA for places at hospital schools. The LAEstab and provider name should be given where applicable.

13. Column E should set out the total planned spend on each education provider.

14. In the second section of the return, column A should provide a description of other planned spend associated with hospital education that is not associated with hospital or health provision in your area. Column E should set out the total planned spend on such provision.

15. Column F and row 31 are opportunities for the local authority to provide any further information about the spend listed.

16. In cell C7, local authorities are reminded of their 2018 to 2019 allocation through the hospital education factor of the high needs national funding formula. The hospital education total (cell D20), summed from the amounts you have entered in cells D11 down, may not match the amount in C7. This may be because spending plans have changed since 2017 to 2018, or because some of the planned spend in 2017 to 2018 relates to provision captured in the second section of the return.

17. Local authorities are also asked to provide contact details for the officer completing the template, and are required to provide chief finance officer sign off in the return.

## Next steps

18. The template will be issued via the [ESFA data collections portal](#). The return must be agreed and signed off by the chief finance officer and should be returned via the [ESFA data collections portal](#) by 27 April 2018.

19. All local authorities should return a template, even if they've no planned spend on hospital education.

20. Any local authorities resubmitting their return after an initial upload are asked to [email our high needs team](#) to notify ESFA of a resubmission.

21. As part of the collection we'll review returns and may request further information if the total planned spend reported is significantly different from that reported in last year's baseline exercise or section 251 return. We may also request further information if the total planned spend reported doesn't reflect what's known about medical provision in the area (such as where there's a children's hospital).

22. The information gathered in this exercise will inform the high needs funding formula allocations for 2019 to 2020, and specifically the development of a new hospital education factor in the formula. Any changes to the hospital education factor calculations for 2019 to 2020 will be subject to consultation later in the year.

23. Any queries should be sent to our [high needs team](#).

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