Part of
Education and childcare during coronavirus

Department for Education

Guidance

Supporting children and young people with SEND as schools and colleges prepare for wider opening

Updated 18 June 2020

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Main changes to previous guidance

We have updated this guidance as follows:

- new section added to cover the issue of settings requesting medical evidence ahead of re-admission
- removed paragraph on phased return from 1 to 15 June as this is out of date
- changed the tense of references to opening

From the week commencing 1 June 2020, we asked primary schools to welcome back children in nursery, reception, year 1 and year 6, alongside priority groups (vulnerable children and critical worker children). From the week commencing 15 June 2020 at the earliest, we are asking secondary schools, sixth form and further education colleges to offer some face-to-face support to supplement the remote education of year 10 and year 12 students who are due to take key exams next year, alongside the full time provision they are offering to priority groups.

As settings prepare for wider opening, this guidance provides information on provision for children and young people with education, health and care (EHC) plans and others with complex needs, such as children and young people with special educational needs and disability (SEND) who do not have an EHC plan, but for whom the educational setting or local authority has exercised its discretion to do a risk assessment and offer a place at an educational setting[1].

Throughout the coronavirus (COVID-19) outbreak, educational settings have been asked to ensure that vulnerable children and young people can attend where appropriate, including those children and young people who have an EHC plan, and for whom it is determined, following a risk assessment, that their needs can be as safely or more safely met in the educational environment. As settings prepare for wider opening, they should continue to offer places to vulnerable children and young people and should look to bring back more children and young people with EHC plans in these target year groups. Their return should be informed by their risk assessments, to help educational settings and local authorities ensure that the right support is in place for them to come back.

From 1 June we asked special schools and hospital schools to work towards a phased return of more children and young people, without a focus on specific year groups and informed by risk assessments. From 15 June, we are asking specialist post-16 institutions to work towards a phased return of young people, without a focus on specific year groups or proportion of learners and informed by risk assessments.

This guidance has been written with help from SEND sector organisations. It outlines pragmatic approaches that local authorities, educational settings, and parents or carers may wish to take.

Updating risk assessments

Following the partial closure of education settings from 20 March 2020, we asked local authorities to consider the needs of all children and young people with an EHC plan and to carry out a risk assessment. Local authorities were asked to work with educational settings and parents or carers to determine whether children and young people would be able to have their needs met at home and be safer there than attending an educational setting.

From 1 June, educational settings and local authorities should continue to offer places to all children and young people with EHC plans whose risk assessment determined that was the right course of action. Settings and local authorities should keep risk assessments up-to-date to reflect any changes in circumstances, including changes to coronavirus alert levels and the wider opening of education and care settings to more children and young people.

Risk assessments may prove useful when planning how best to support the return of individual children and young people with EHC plans. Local authorities and educational settings should make their own judgements as to whether risk assessments continue to be useful for each child or young person after they have returned. For example, it may be useful to maintain these in cases where the return is initially only part-time.

We recommend that risk assessments continue to be maintained for children and young people with EHC plans who remain at home, so that:

- they continue to guide local authority and education and care settings' decisions on which children and young people, with an EHC plan, should be attending their educational setting, taking into account the changing circumstances of individual children and young people, so that they can be brought back into face to face education when it is right for them
- when attendance is not appropriate, assessments can help make decisions about the support children and young people should receive at home, noting that circumstances may have changed
- they provide helpful information to headteachers and other professionals in planning for, and supporting, those children and young people with an EHC plan when they do return to educational settings

When updating risk assessments, it is important to take into account that some parents and carers may be unable to sustain the levels of care and support that their children need for a long period of time. As part of updating risk assessments, we ask local authorities and educational settings to be mindful of, for example, access to respite and short breaks services, the loss of care from extended family, and the risks to health of caring week round for children and young people with complex needs.

Where families are unable to continue supporting children at home, we ask educational settings, local authorities and clinical commissioning groups to work together with parents and carers to ensure that children and young people, in any year group, can return promptly to their educational setting. Educational settings and local areas should also keep this actively under review after 1 June, particularly for children and young people who do not return to their setting in the first phase of return.

The risk assessment should incorporate the views of the child or young person. Where a child or young person with an EHC plan has a social worker, the social worker should also be involved in the risk assessment, along with the local authority virtual school head if the child is in care. Local authorities and educational settings should decide together who is best placed to undertake the risk assessment, noting that the duty to secure provision remains with the local authority.

Phased returns to educational settings

Our aim is to support a phased and safe transition back to full-time educational provision for children and young people with EHC plans, including those attending mainstream settings, special settings, alternative provision (AP) settings, and those receiving education on hospital sites.[2] Our approach to vulnerable children and young people with EHC plans during the period of partial school closures has been to trust professionals who know each child and young person to make appropriate risk assessments based on each individual's needs. We are taking a similar approach in the first steps of transition back to normal provision.

Particular care will be needed in planning for and supporting children and young people with EHC plans to return to their schools and colleges. In the spirit of coproduction, educational settings should contact parents and involve them in decisions about their child who has an EHC plan. Similarly, they should contact and involve young people over 16 who have EHC plans. Schools and colleges will need to ensure that they have the staffing needed to support children and young people at safe ratios. Local authorities will also need to reinstate safe home to school transport arrangements.

Guidance has been published on how to implement protective measures in education and childcare settings. This advice seeks to support settings to enable more children to return to school in the safest way possible, focusing on measures they can put in place to help limit risk of the virus spreading within education and childcare settings. We trust leaders to implement these in the best way possible in line with their setting and local circumstances. Institutions offering residential provision will also need to consider the maximum number of children or young people they can safely accommodate in residences. Further information can be found in the guidance on isolation for residential educational settings.

As we move towards a phased return to educational settings, local authorities remain responsible for keeping the special educational provision in their areas under review. Due to the unprecedented circumstances presented by coronavirus, section 42 of the Children and Families Act 2014 has been temporarily modified so that local authorities and health commissioning bodes must use their 'reasonable endeavours' to discharge the duty to secure or arrange the provision specified in a child or young person's EHC plan. Local authorities and educational providers will therefore need to work together to consider for each child and young person with an EHC plan what can reasonably be provided during this temporary period.

Schools and colleges (both mainstream and special) should work with their local areas (local authority and health partners) to ensure that services for additional support and early help, for example around anxiety, mental health, behaviour, social care, or changes to mobility will be available as far as possible. Schools and colleges should be mindful that these considerations could apply to pupils and students who they did not previously affect. Similarly, local authorities will need to work with schools and colleges to ensure that key support services are available to facilitate transition plans.

We recognise that some children and young people with EHC plans will need careful preparation for their return, for example, social stories to help with the transition, or routes marked in Braille or with other meaningful symbols to support children and young people to follow protective measures that have been put in place. This could mean that, informed by risk assessments, the increase in attendance for some children and young people takes place over a longer period of time. (Mainstream and AP educational settings may need to consider similar approaches to support the return of pupils with SEND without an EHC plan.)

The small number of settings that had closed entirely have been asked to work towards reopening from the week commencing 1 June.

Supporting children with EHC plans in mainstream schools, colleges and AP settings

We encourage educational settings and local authorities to assure themselves that the risk assessments for children and young people with EHC plans, are kept up to date, as per the guidance set out above. Informed by these risk assessments, local authorities and educational settings should consider whether it is now safe to bring back children and young people with EHC plans whatever year group they are in.

From 1 June, for early years and primary schools, and from 15 June, for secondary, sixth form and further education colleges, provided the conditions for a phased return are met, children and young people with EHC plans in mainstream and AP settings who have not been attending and are in eligible year groups should experience the same return to settings as their peers without EHC plans in the same year group. This return should continue to be informed by their risk assessment.This includes children and young people who are placed in special units and resourced provision attached to a mainstream school, as they are recorded on the roll of the mainstream school.

Risk assessments should inform the way a school or college supports children and young people with EHC plans as they return. Local authorities and educational settings should make their own judgements as to whether risk assessments continue to be useful for each child or young person after they have returned to their setting.

Further information for schools can be found in the guidance on actions for educational and childcare settings to prepare for wider opening from 1 June 2020 and for colleges in the guidance on actions for FE colleges and providers during the coronavirus outbreak.

We encourage settings to provide additional support to pupils with EHC plans about to make a transition to another setting, or onto adult life.

Supporting children in special schools and specialist post-16 institutions

For all children and young people with an EHC plan in special education settings, such as special schools, special post-16 institutions and hospital schools, settings should encourage attendance based on the child's risk assessment, which should be kept up to date, and on the ability of the setting to provide for their needs. Decisions should not be made using the child's year group as a primary deciding factor. In these settings, year groups may not be as indicative of key transition points or moments that are particularly important for life chances.

Children and young people who have been attending a specialist setting should continue to do so. From 1 June (provided the conditions for a phased return are met), special schools and hospital schools should work towards welcoming back as many children and young people as can be safely catered for in their setting. From 15 June (provided the conditions for a phased return are met), specialist post-16 institutions should work towards welcoming back as many young people as can be safely catered for in their setting. This should be done without specific regard to year groups, unless that is appropriate for the individual child or young person.

Our aim is for specialist provision to support increasing numbers of children and young people to access on-site education, whilst prioritising the safety of children, young people and staff. If it is not possible to bring back all children and young people for whom a return would be appropriate straight away, for example, due to staff absences, settings may want to prioritise attendance for:

- children and young people approaching key transition points, for example, transition to another educational setting or from education to adult life, particularly where multi-agency work to secure that progression is needed
- children and young people who most need on-site provision to support their life chances and development, for example to reinstate routines and engagement with learning

In order to ensure as many children and young people as possible are actively transitioning back to on-site education in specialist settings, we encourage the use of flexible approaches. This may include:

- part-time timetables and attendance rotas
- blended onsite and home learning
- phased returns for individuals or groups
- children and young people being offered blocks of time on-site on a rotating basis

Supporting children and young people in hospital schools

Our aim is for hospital schools based on hospital sites to support increasing numbers of children and young people to access on-site education through a phased return. Education should be provided for as many pupils in these settings as is possible, in line with risk assessment and protective measures guidance and if headteachers agree with the NHS trust staff that it is safe and feasible to do so.

Hospital schools on hospital sites should use their discretion about providing education, including how and where this is carried out and which pupils should be prioritised. We expect that hospitals and NHS trusts will continue to work closely with headteachers so that children and young people in hospital schools are able to access their education, including through access to hospital classrooms. The hospital infection prevention and control team must be consulted about this, because there will be many infection prevention and control and safety considerations to be taken into account. Mainstream schools should continue to support their pupils in hospital in order to minimise the impact of their hospital stay on their education.

Questions and answers

What should be considered when updating risk assessments?

For children and young people for whom a risk assessment continues to be recommended, up to and/or after 1 June, their risk assessment will need to balance a number of different risks, including:

- the potential health risks to the individual from coronavirus, bearing in mind any underlying health conditions/ clinical vulnerability. For further information, refer to the guidance on shielding and protecting people who are clinically extremely vulnerable from coronavirus
- the risk to the individual if some or all elements of their EHC plan temporarily cannot be delivered in the normal manner or in the usual setting, and the opportunities to meet needs in a different way temporarily, for example, in the home or online or in a different way at school
- the ability of the individual's parents or carers or home to ensure that their health and care needs can be met safely week-round or for multiple weeks, bearing in mind the family's access to respite care. (This may be particularly important to consider, from 1 June, for those children and young people who are not in the year groups prioritised for a return to education settings.)
- any risk to siblings or family members if the child or young person's condition prevents or inhibits self-regulation and if their behaviours cannot be supported or managed by parents or carers at home
- the potential impact to the individual's wellbeing of changes to routine or the way in which provision is delivered
- any safeguarding risks for children with a social worker if not in school and the need to support care placements for looked-after children (see the vulnerable children and young people guidance for further information on school attendance for children with a social worker)
- any other out-of-school/college risk or vulnerability, for example, a child or young person becoming involved in dangerous behaviour or situations (including the risk of exploitation)

If a risk assessment determines that a child or young person's needs continue to be more safely met at home, local authorities, educational settings and parents should consider whether moving either equipment or services into a child or young person's home would enable them to be supported there. This may be a more feasible solution for day settings than residential settings, and may include:

- physiotherapy equipment
- sensory equipment
- online sessions with different types of therapists
- phone support for parents in delivering interventions
- in-person services, where necessary

Why is it now safe for some children to return to school or college when it wasn't previously?

There will be many children and young people with EHC plans who, following their original risk assessment, have not been attending their educational setting because it was determined that their needs could be more safely met at home. Risks change over time, and the phased return to educational settings will only take place if the national risk level is lower than it was when educational settings were first asked to close to most pupils and students, i.e. if the government's five key tests are met. When that is the case, it will be right for educational settings and local authorities, working with families, to bring back more children and young people who have not been attending their educational setting. This will be based on individual risk assessments and within the limits of what the educational setting is capable of accommodating, given any staff absences and the need for protective measures.

What does it mean for attendance to be 'appropriate' or 'expected' for particular children and young people?

The guidance on vulnerable children and young people refers to pupils and students attending if it is 'appropriate'. For children and young people with an EHC plan, when a child or young person's needs can be met as safely or more safely in the educational environment, attendance is deemed 'appropriate' and these children and young people should be strongly encouraged to attend. If their needs cannot be met as safely or more safely in the educational environment, attendance is 'not appropriate' at this time and these children and young people should remain at home and be supported through remote education and other services, where possible. Local authorities and educational providers should keep risk assessments under review, in case circumstances change and a different decision is needed.

Are all children and young people with EHC plans expected to attend?

Vulnerable children and young people are expected to attend, if it is appropriate for them (for example where there are no shielding concerns for the child or young person or their household, and/or following a risk assessment for children or young people with an EHC plan). This is so they can access the educational and wellbeing benefits of attending. Vulnerable children and young people – regardless of year group – who have not been attending in the recent period are expected to return to nursery, early years, school or college provision if it is now appropriate for them to do so.

There is further information on attendance outlined in the guidance on actions for educational and childcare settings to prepare for wider opening from 1 June 2020.

Can dual-registered children and young people attend both settings?

Moving between settings will increase the risk of viral spread, however there are circumstances where this may be required, such as where a child or young person's needs cannot be met without provision in two settings. This means that provision in two settings is possible, but will be subject to the child or young person's individual risk assessment, and on the ability of both settings to accommodate the child or young person. These risk assessments are likely to be complex, and the two settings may need to liaise with one another. It may be best for a child or young person to return to only one setting, or to return to one setting first before returning to both, so that their opportunity to receive on-site education is not delayed due to those complexities.

Does school or college provision have to be delivered as it usually is for children and young people with EHC plans?

Due to the unprecedented circumstances presented by coronavirus (COVID-19), the section 42 Children and Families Act 2014 duty to secure the provision within an EHC plan has been temporarily modified so that local authorities and health commissioning bodies must use their 'reasonable endeavors' to discharge this duty. This means that local authorities and health bodies must consider what they need to provide for each individual child or young person with an EHC plan during the period that the modified section 42 duty is in force. For some children and young people, the provision specified in their plan will continue to be delivered, but for others, the provision may need temporarily to be different to that which is set out in their EHC plan.

More information is available in the guidance on changes to the law on education, health and care needs assessments and plans due to coronavirus.

As per the actions for education and childcare settings to prepare for wider opening from 1 June 2020 guidance, no school will be penalised if it is unable to offer a broad and balanced curriculum to its pupils during this period.

How can a risk assessment be conducted (or updated) for all the children and young people with EHC plans in a school, college or local area?

Risk assessments should be proportionate. In both assessing risks and meeting needs, local authorities and educational settings should concentrate their resources on those children and young people with the most complex needs.

Local authorities and educational settings should work together to decide who is best placed to carry out risk assessments for individual children and young people.

Who needs to be involved in making/updating the risk assessment?

The key risk assessors should be local authorities and educational settings, taking into account the needs and views of the child/young person, their parents/carers and social workers and virtual school heads where appropriate.

Where an educational setting makes a decision without being able to involve the local authority, for instance where circumstances are changing too rapidly, they should inform the local authority of that decision immediately.

Where a child or young person is not initially returning to their educational setting, local authorities and educational settings need to ensure that the family understands the support plan that is in place for them.

If a child or young person has a diagnosis of a learning disability (such as profound and multiple learning difficulties, or a severe learning difficulty), autism or both, and behaviours that challenge or a mental health condition, the risk assessors should ensure, with the agreement of the family, that the child is identified on the NHS Clinical Commissioning Group dynamic support register (see the nasen guide improving health care: learning disabilities and autism for further information).

How does this guidance impact children and young people who have an EHC plan and a social worker?

There are a significant number of children and young people with an EHC plan and a social worker.

Decisions about whether these children and young people should attend or return to an educational setting should be made collaboratively on an individual basis. Local authorities and educational settings should work with parents or carers, the child or young person and social workers to undertake or update a risk assessment to determine where the child or young person's needs and best interests can be best met.

Is the government prescribing a particular form or process for the risk assessment?

No. Local authorities and educational settings will have their own arrangements in place. We trust local leaders to agree what the most appropriate and proportionate formats are.

Has the responsibility for special educational provision changed?

Responsibility for commissioning any at-home special educational provision lies with the local authority responsible for maintaining the EHC plan, although it may be possible for some of the provision to be provided by the school or college or even in a home setting. The local authority should work with the educational setting to ensure that parents and carers are aware of the education, health and care services available to them at home.

Under the temporarily modified section 42 duty, local authorities and health commissioning bodies must use their 'reasonable endeavours' to discharge the duty to secure or arrange the provision specified in a child or young person's EHC plan. We have published detailed guidance on the changes to the law on education, health and care needs assessments and plans due to coronavirus. It includes some illustrative examples of the type of arrangements that might be reasonable for local authorities and health commissioning bodies to put in place.

Can the risk assessment be reviewed or changed as events change?

Yes. Local authorities and educational settings will need to revisit and update risk assessments as circumstances change. For example, the needs of some children and young people may be able to be met at home but only for a finite amount of time.

Who might be involved in supporting learning for those children and young people who remain at home, on a full or part time basis?

Educational settings should ensure that pupils and students who are not attending settings full time in person continue to engage in learning as far as is possible (for example through remote education), and that an increasing focus is put on preparing the way for their return. Providers should engage proactively with parents and carers to explain the support that their children are receiving, to discuss the plans for returning and to consider how parents can support this and any additional help they might need.

We have an experienced, expert workforce of special educational needs coordinators (SENCos), education psychologists, speech and language therapists, qualified teachers of sensory impairments, other therapists, and teaching assistants often with specialist knowledge.

Designing at-home learning and support for children and young people with EHC plans could involve any or all of these professionals, to design or adapt interventions or learning materials. For example, this might involve designing a speech and language intervention that parents can deliver at home, or adapting or selecting online learning materials.

For those children and young people with EHC plans in mainstream schools and colleges, SENCos will typically lead on ensuring that they have access to materials they can use to learn, often drawing on other professionals to source or adapt online learning that addresses a child or young person's special educational needs. Similarly, education psychologists may play a key role in recommending the essential provision for a child or young person to receive at home.

In addition to a suite of online lessons and materials available from the Oak National Academy's specialist curriculum for children and young people with profound needs, we are helping parents to support learning at home, including by publishing a list of online learning resources for children with SEND.

What risk are teachers, support staff and other practitioners exposing themselves to?

As far as is possible, guidance on implementing protective measures in education and childcare settings should be adhered to in all settings and class or group sizes should be kept small. We have published additional guidance on protective measures in the safe working in education, childcare and children's social care settings guidance to support education settings in planning for the increase in numbers from 1 June. This outlines important actions that children and young people, their parents and those who work with them can take during the coronavirus outbreak, to help prevent the spread of the virus and reduce risk.

What about the risk to staff working hands-on with pupils and students who cannot adhere to strict hygiene practices?

We recognise that some children and young people with special educational needs present behaviours that are challenging to manage in the current context, such as spitting uncontrollably. It will be impossible to provide the care that some children and young people need without close hands-on contact. In these circumstances, staff should minimise close contact wherever possible, increase hand-washing and other hygiene measures, and clean surfaces more regularly and maintain existing routine use of personal protective equipment.

We recommend that educational settings follow the Public Health England guidance on cleaning in non-healthcare settings and the guidance on safe working in education, childcare and children's social care settings.

May educational settings require medical evidence, and may they offer places to children and young people advised to shield?

Educational settings should not seek medical evidence except to help them to support the child or young person more generally.

In some cases, a family may request a place for a child or young person who is clinically extremely vulnerable and has been advised to shield. Shielding is for the protection of the child or young person so, if families or young people wish to take up a place, educational settings should not take the clinical vulnerability as a reason to refuse a place to a child or young person, if they would otherwise have readmitted them.

The return to educational settings of children and young people with EHC plans should be informed by risk assessments to help educational settings and local authorities ensure the right support is in place for them to come back. These assessments need to balance a number of different risks.

Some children with specific health conditions may have been identified as at very high risk of severe illness (clinically extremely vulnerable) if they catch coronavirus (COVID-19) and have received a personal letter advising them to shield. Currently, these children are advised to stay at home and not to attend school. This is voluntary and is for the protection of the child or young person. This also applies, rarely, if the child lives in a household with another family member who is shielding, and where the child is unable to practise robust social distancing. However, shielding advice will change for both adults and children as the number of cases of coronavirus (COVID-19) continues to decline in our communities. Please see the latest guidance on shielding.

Children with some underlying health conditions have been advised to take particular care to follow social distancing and hand and respiratory hygiene advice (see the guidance on those considered clinically vulnerable. However, we know that clinical illness for children who might become infected with coronavirus (COVID-19) is generally much milder. Children in the clinically vulnerable group should therefore continue to attend or return to school.

Where clinically extremely vulnerable children do not attend school or other educational settings, the setting should continue to ensure that these children and young people continue to engage in learning as far as possible, for example through remote education, and that an increasing focus is put on preparing the way for their return.

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1. Throughout this document, except where reference is made to local authorities' modified duty to make provision for children and young people with EHC plans, references to children and young people with EHC plans should be read as also including any children and young people with SEND who do not have an EHC plan but for whom the education setting or local authority have exercised their discretion to carry out a risk assessment for them, for example due to the complexity of their needs. ↩
2. Children and young people who are clinically extremely vulnerable and shielding should continue to follow the guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19 . ↩

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Coronavirus (COVID-19)

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