

Written evidence submitted by the National Network of Designated Healthcare Professionals for Children
(NNDHP)

Submission from the NNDHP to the Education Select Committee inquiry into Elected Home Education	
The Committee is inviting written submissions, addressing any or all of the following points:	<p>Summary observations</p> <p>The Covid pandemic demonstrated that schooling can be done at home. We have to acknowledge this. It is good for some and bad for others.</p> <p>A balanced approach that ensures all CYP receive an equal education and are supported to reach their educational potential, recognising what a vital part school plays in CYP lives, and its many social and emotional benefits.</p>
The duties of local authorities with regards to home education, including safeguarding and assuring the quality of home education	<p>All children and young people should have access to equitable education – this includes mainstream, SEND, special school, virtual school, short term health related school support/at home and home schooling.</p> <p>LA and education should have the authority and accountability to quality assurance and manage all these environments.</p>
whether a statutory register of home-educated children is required	<p>A separate register is not needed if it is mandatory for all CYP of school age to be on the register of a local school – that register should state where the child is being educated. A register can be viewed negatively and we should promote the idea of equity for all CYP.</p> <p>It must include all children without any discrimination & aiming for equality. It should include the mobile</p>

	<p>population and have no invisible children.</p> <p>This register should have the NHS number which is a universal number and infrequently changed; could be the key link to GPs/primary and CP-IS</p>
<p>the benefits children gain from home education, and the potential disadvantages they may face</p>	<p>Advantages</p> <ul style="list-style-type: none"> • It can permit a highly tailored education program that permits the learning to be adapted to the CYP • Allows consistent educational provision in families who would experience disruption in standard education due to the need to be highly mobile (e.g. parental occupation, travelling community, canal community) • May permit a stable education for CYP who are frequently unable to attend a standard setting due to complex health needs or health needs that would impact on the standard school day (e.g. dialysis or the need for frequent interventions) • Families can adapt the teaching to account for topics that may not be available in a standard setting in that locality, language needs, or personal beliefs or views on information presented to CYP • Permits level of study and examinations to be entered at time points to suit the individual CYP • Can be a rich and rewarding experience for the family as a whole <p>Disadvantages</p> <ul style="list-style-type: none"> • Potential barriers to access to 0-19 services (for example: health education and promotion, targeted support including emotional health, vaccination, safeguarding support and health needs assessment etc.) due to factors such as not being aware of entitlement to services, confusion as to how to access the 0-19s, lack of opportunistic contact for CYP with the practitioner at a school setting • EHE advisors are only legally regulated to inspect an EHE child education programme on an annual

	<p>basis, which may not adequately capture the learning experience of the CYP, the voice of the child, or permit the same level of awareness/understanding of health / safeguarding factors – particularly as it does not require the CYP or the educational environment to be seen.</p> <ul style="list-style-type: none"> • Although many EHE families ensure that socialisation opportunities are provided outside of family members (e.g. joining groups or clubs), it is difficult to emulate the diversity and richness of social education that is possible in a more conventional setting. This may be particularly relevant in CYP with neurodiversity (e.g. traits of autism spectrum disorder or ADHD) of learning needs. • Reduced access to a diverse peer group may occur, resulting in a smaller support network, less experience at working effectively with peers that have views/opinions that differ from your own, and reduced access to the ‘buffer’ that peers provide in times of stress • Many disclosures of safeguarding concerns arise in the educational setting to peers or a trusted member of staff, including concerns not arising from the home itself (e.g. online bullying or grooming) • Education is a setting where changes in the health and wellbeing of CYP is visible to staff who are accustomed to working with children and are able to flag up when something is outside of their experience of healthy CYP – and support the family in seeking further advice • The cost of interventions/provision by schools must be met by the family (e.g. exam fees, books, IT equipment, sports facilities, musical instruments, many activities) • Difficulties in accessing a national examination if wanted-during Covid pandemic children could not be assessed by parents to achieve qualifications. • Lack of access to expert support/advice if a CYP is struggling with their learning • Difficulty if the parent/carer who provides the home education becomes unwell or needs support • Reduced ability to access SEND expertise and additional provision • The voice of the child is difficult to gain as they may have limited opportunities to be seen alone or know how to access services.
<p>the quality and accessibility of support (including financial support) available for home</p>	<p>All schools are allocated a proportion of funds for each pupil, and schools can choose what to do with those monies – should some be mandated to home schooling but for external provision e.g. tutors for</p>

<p>educators and their children, including those with special educational needs, disabilities, mental health issues, or caring responsibilities, and those making the transition to further and higher education</p>	<p>complex subjects or on line lessons?</p> <p>Consideration of how virtual school and EHCP process works and may be able to provide a framework of support moving forward.</p> <p>Consideration of home education as a liaison with a mainstream school and possible hybrid model development of joint weekly timetable or specific lessons and events home education can join at school. (Points in time of importance at mainstream offered to home school e.g. exams, stats, prom, school trips)</p> <p>Clear meetings and review points over the year; mandatory review points e.g. last year at primary and GCSE year and for further education/careers support</p>
<p>whether the current regulatory framework is sufficient to ensure that the wellbeing and academic achievement of home educated children is safeguarded, including where they may attend unregistered schools, have been formally excluded from school, or have been subject to 'off-rolling'</p>	<p>No.</p> <p>The current regulatory framework is not sufficient and the benefits of a system that requires a mandatory registration system would be desirable to provide a full and appropriate offer to address education, health, wellbeing and safeguarding of CYP. LA intervention before the child is off rolled needs to be considered to determine the preparedness of the provision, and also when it's appropriate to instruct schools to off roll.</p> <p>The system must ensure that if a child is being educated at home, they have clearly chosen this and not been forced into this for whatever reason. This is the voice of the CYP.</p> <p>The system must assure parental ability to provide home education.</p> <p>Where there are safeguarding concerns there needs to be as part of the child protection/child in need plan a comprehensive educational component which is assessed by educationalists to support children's services assessments and plans. Joint assessments lead to joined up planning and management of safeguarding risks.</p>

<p>the role that inspection should play in future regulation of home education</p>	<p>CYP needs should be the focus of all inspection. Inspection must include CYP educated off site.</p> <p>Inspections should be carried out to ensure standards are met for all children not just for education but for health and wellbeing.</p> <p>Inspectors need to be able to escalate safeguarding concerns effectively.</p>
<p>what improvements have been made to support home educators since the 2010-15 Education Committee published their report on ‘Support for Home Education’ in 2012</p>	<p>Nothing to add</p>
<p>the impact COVID-19 has had on home educated children, and what additional measures might need to be taken in order to mitigate any negative impacts.</p>	<p>There has been an increase in EHE.</p> <p>Some children have increased anxiety to re-enter education now and continue EHE.</p> <p>The Covid pandemic has however provided parents the opportunity to experience home learning, and many have reflected on the more positive aspects of educating this way. For those already home schooled more resource and sense of belonging has been achieved.</p> <p>Action:</p> <p>In each LA there should be dedicated support for EHE children who can signpost to other services eg SENCO; school nurse. Should be an extension of the role of the inspector & virtual school with a ‘support worker’ making contact.</p> <p>School nursing service currently is an opt in for EHE children and opt out for children going to school. Recognition of the value of school nursing and recommend an increase in provision.</p>

	Complexities of commissioning and provision of health services for children does need someone to have oversight and be able to signpost to the relevant services.

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