PLC referrals, roles and responsibilities, operational information and guidance for schools and partner organisations.
The Local Authority has a statutory duty under Section 19 of the Education Act 1996 to make arrangements for the provision of suitable ‘education from school or otherwise than at school for 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.’

In addition, the DFE Statutory guidance, ‘Alternative Provision – Statutory guidance for Local Authorities January 2013’ sets out a clear definition of alternative provision:

*Education arranged by local authorities for pupils who, because of exclusion, illness or other reasons, would not otherwise receive suitable education; education arranged by schools for pupils on a fixed term exclusion; and pupils being directed by schools to off-site provision to improve their behaviour.*

Pathways Learning Centre (PLC) arranges the delivery of educational provision on behalf of the Local Authority, as defined above, for students who are resident in South Gloucestershire. However, schools remain responsible for arranging provision for pupils on fixed term exclusions and pupils being directed off-site to improve their behaviour.

**Pathways Learning Centre is responsible for the provision of:**

1. Full time equivalent education programmes for students Year R to Year 11 who are permanently excluded from school from Day 6 of exclusion until placement at a fresh start school as allocated by FAP/PEPP.

2. Flexible education programmes for students who are unable to attend school because of significant medical needs, who will be absent for 15 days or more, and whose needs cannot be reasonably met by adjustments within mainstream. These students would typically be under the care of a Consultant Paediatrician.

3. Flexible education programmes for students who are unable to attend school because of significant mental health difficulties and whose needs cannot be met in a mainstream provision. These students would typically be under the care of Child and Adolescent Mental Health Service (CAMHS).

**In addition Pathways Learning Centre also provides:**

4. Specific support for any new resident of South Gloucestershire who was attending an out of authority Pupil Referral Unit (PRU) as a result of permanent exclusion.

5. Specific individual student programmes commissioned by South Gloucestershire 0-25 Service eg. Students waiting for placement at a specialist provision.

6. Specific support for students who are in the care of the LA (CIC) and who are at risk of permanent exclusion.

7. Specific support for students who are at significant risk of PEX and who have been referred to PLC after discussion and agreement at the South Gloucestershire High Risk Group (HRG).

Please see ‘Routes to PLC’ diagram and ‘Entry and Exit Criteria’ below for further guidance.

**Where are we located?**

PLC is now located on a single site in Downend. **Overdale Road, Downend, Bristol, BS16 2RQ.  Tel: 01454 822630**
What is our core function?

Pathways Learning Centre delivers teaching, pastoral and therapeutic support for children and young people (CYP) who are unable to attend a mainstream school and may require a more tailored or specialist curriculum. In the vast majority of cases, CYP attending PLC fall into the ‘Social, Emotional and Mental Health Difficulties’ (SEMHD) category, or those with specific medical needs which cannot be met within the mainstream setting.

PLC is a temporary provision and supports CYP for no longer than necessary, helping prepare them for reintegration to mainstream or an alternative specialist setting. The decision to move on is made by a Permanent Exclusion Placement Panel (PEPP) for permanently excluded CYP and by professionals attending Team Around the Child (TAC) review meetings for all other students.

Who we support

We work with students from Reception to Year 11. We support children and young people (CYP) with a range of complex medical or SEMHD needs, including those that have been permanently excluded (PEX) from school, those unable to attend mainstream school due to medical needs and those under the care and guidance of Tier 3 professionals such as CAMHS.

Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. CYP often have a history of Adverse Childhood Experiences (ACEs) such as family breakdown, domestic violence, trauma including bereavement and neglect. Other children and young people may have disorders such as Attention Deficit Disorder (ADD), Attention Deficit Hyperactive Disorder (ADHD), Attachment Disorder, Oppositional Defiance Disorder (ODD), Conduct Disorder (CD) or Pathological Demand Avoidance (PDA).

Admissions and referral routes

Admission to PLC is by successful referral via the Referrals and Admissions Panel (RAP), as a result of a Permanent Exclusion (PEX) or via an agreed outcome from the High Risk Group (HRG). In all cases a ‘Single Referral Form’ is needed for all areas of PLC provision. (Appendix 1) Referrals are usually completed by School, medical professionals or 0-25 team and returned to PLC securely via the SOFIE system and marked for the attention of the ‘administrator’ role. We are not able to take direct referrals from parents.

All options available are identified in the ‘Routes to PLC’ flow diagram. (appendix 2)

Decisions on Admissions & Referrals

The Referrals and Admissions Panel (RAP) meet monthly to assess all non PEX referrals. All successful referrals will, wherever possible, be processed and admitted within three weeks of the panel meeting.

PLC receive multiple referrals each month and in order to allow the panel time to give serious consideration to the referrals prior to and during the meeting, it is necessary to apply a strict cut-off date for referrals to be received. This may mean that referrals just missing a previous panel may have to wait up to 6 weeks for the next meeting if it happens to fall either side of a holiday period. However, where possible the head of PLC will ensure that urgent referrals are considered between panel meetings. Please also see ‘role of the Referrals and Admissions Panel’ and ‘Entry and Exit Criteria’ below for further guidance.
## PLC Entry and Exit Criteria

### Pathway 1

**Children and Young People (CYP) with significant medical needs**

<table>
<thead>
<tr>
<th>TYPE OF REFERRAL</th>
<th>ENTRY CRITERIA</th>
<th>EXIT CRITERIA</th>
</tr>
</thead>
<tbody>
<tr>
<td>CYP must be under the care of a consultant or specialist pediatrician and the referral must be supported by supporting professional evidence.</td>
<td>The CYP’s medical condition or need for ongoing medical support has ended.</td>
<td></td>
</tr>
<tr>
<td>CYP unable to attend mainstream school and all appropriate support and reasonable adjustments have been explored through an IHCP.</td>
<td>The CYP’s medical needs have reduced in severity and can now be supported within the mainstream setting.</td>
<td></td>
</tr>
<tr>
<td>CYP has already missed or is likely to miss a significant amount of education due to significant medical needs as identified by the supporting medical evidence. (at least 15 days) and has not responded to the reasonable adjustments attempted by the school. Ie. Lack of attendance alone would not be enough to justify the referral.</td>
<td>The placement is reviewed at the end of the first month to agree whether it is working. If it is not working then the placement will be referred back to RAP for a decision on the placement continuing, or the place being reallocated to another referral.</td>
<td></td>
</tr>
<tr>
<td>PLC Referral and the above supporting evidence reviewed by Referrals and Admission Panel (RAP) and accepted when needs can be met.</td>
<td>All placements are then reviewed termly, via a Team Around the Child (TAC) meeting, or less frequently if guided by medical evidence. eg. Where frequent reviews would cause unnecessary stress and anxiety to the CYP. A link person from the home school is expected to attend and in some cases lead the review, for students who are Dual rolled. (See statutory guidance section).</td>
<td></td>
</tr>
<tr>
<td>Medical referrals from Hospital services will be reviewed by PLC asap.</td>
<td><strong>The TAC review will consider:</strong></td>
<td></td>
</tr>
</tbody>
</table>

- Is it still in the CYP best interests to be supported by PLC?
- Is it still in the best interests of other CYP to be supported by PLC?
- Is the CYP ready to return to school?
- IS the CYP able to increase their contact time?
- Is the CYP ready to transition to another school or setting?

Whether the CYP would like to return to school or other setting?

For any decision to end a placement PLC will continue to support until the end of the current term where necessary.
<table>
<thead>
<tr>
<th><strong>TYPE OF REFERRAL</strong></th>
<th><strong>ENTRY CRITERIA</strong></th>
<th><strong>EXIT CRITERIA</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pathway 2</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children and Young People with significant mental health needs</td>
<td>CYP must be under the care of CAMHS or consultant pediatrician and the referral must be supported by supporting professional evidence. CYP unable to attend mainstream school and all appropriate support and reasonable adjustments have been explored through an IHCP and or SAFeh. CYP has already missed a significant amount of education due to significant mental health needs as identified by the supporting medical evidence and has not responded to the reasonable adjustments attempted by the school. i.e. Lack of attendance alone would not be enough to justify the referral. Referral and above supporting evidence reviewed by Referrals and Admission Panel (RAP) and accepted when needs can be met.</td>
<td>The placement is reviewed at the end of the first month to agree whether it is working. If it is not working then the placement will be referred back to RAP for a decision on the placement continuing, or the place being reallocated to another referral on the waiting list. All placements are then reviewed termly via a Team Around the Child (TAC) meeting, or less frequently if guided by medical evidence. Eg. Where frequent reviews would cause unnecessary stress and anxiety to the CYP.</td>
</tr>
<tr>
<td><strong>Pathway 3</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CYP with EHCPs who are unable to be supported in mainstream and are waiting for appropriate provision to be found by the 0-25 team.</td>
<td>The existing provision supporting the CYP has called an emergency annual review to state they can no longer meet needs. 0-25 have then agreed a referral to PLC to consult on a temporary placement. PLC consider the referral as part of the usual RAP process and confirm whether the needs of the CYP can be met. A SEND funding Band must be agreed. A defined timescale must be agreed 0-25 must confirm the exit strategy from PLC.</td>
<td>0-25 confirm a long term placement has been agreed and transition arrangements are made clear. Appropriate funding is not agreed or a request for additional funding to support PLC in meeting the CYP’s needs is rejected. PLC are unable to continue to meet the needs of the CYP as confirmed at an emergency annual review. The agreed placement timescale has lapsed and the place is needed for another student. For any decision to end a placement PLC will continue to support until the end of the current term where necessary.</td>
</tr>
<tr>
<td>TYPE OF REFERRAL</td>
<td>ENTRY CRITERIA</td>
<td>EXIT CRITERIA</td>
</tr>
<tr>
<td>-----------------</td>
<td>----------------</td>
<td>--------------</td>
</tr>
<tr>
<td><strong>Pathway 4</strong></td>
<td><strong>A Child or Young Person (CYP) referred to PLC after discussion at the South Glos High Risk Group (HRG).</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The CYP has been referred to HRG after involvement and scrutiny of the Primary or Secondary Inclusion Officer.</td>
<td>The CYP reaches the end of June in Year 11. OR the termly TAC review consider it is not in the best interests of the CYP or other CYP to remain at PLC.</td>
</tr>
<tr>
<td></td>
<td>Where the school has provided a costed provision plan to HRG which identifies a suitable programme needed to continue to support the CYP and help avoid PEX.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Where HRG discussion identifies that PLC intervention could be part of the support required.</td>
<td><strong>The termly TAC review will consider:</strong></td>
</tr>
<tr>
<td></td>
<td>Where the support requested from PLC is no more than 50%.</td>
<td>Is it still in the CYP best interests to be supported by PLC? Is it still in the best interests of other CYP to be supported by PLC? Is the CYP ready to return to school? Is the CYP able to increase their contact time? Whether the CYP would like to return to school or other setting?</td>
</tr>
<tr>
<td></td>
<td>Where there is a clear time scale of intervention agreed to be reviewed each term. (unless the CYP has already reached Term 4 of Year 11 when any agreement will be to the end of June of Yr 11).</td>
<td>For any decision to end a placement PLC will continue to support until the end of the current term where necessary.</td>
</tr>
<tr>
<td></td>
<td>Referral and above supporting evidence is reviewed by Referrals and Admission Panel (RAP) and accepted when needs can be met.</td>
<td></td>
</tr>
<tr>
<td><strong>Pathway 5</strong></td>
<td><strong>Children in the Care of the LA (CIC)</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>CYP in CIC who are significantly at risk of PEX.</td>
<td>When a Child In care (CIC), attending PLC to support the prevention of a PEX, is no longer supported by the LA as a CIC.</td>
</tr>
<tr>
<td></td>
<td>PLC will support full or part time as required to support the prevention of the PEX.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>CIC who meet other entry criteria outlined in any other category.</td>
<td>The responsibility reverts to the school to provide appropriate support and the CYP will return to school.</td>
</tr>
<tr>
<td></td>
<td>Referral and supporting evidence reviewed by Referrals and Admission Panel (RAP) and accepted when needs can be met.</td>
<td>When a Team Around the Child (TAC) meeting involving all professionals agrees the CIC is ready to return.</td>
</tr>
<tr>
<td>TYPE OF REFERRAL</td>
<td>ENTRY CRITERIA</td>
<td>EXIT CRITERIA</td>
</tr>
<tr>
<td>-----------------</td>
<td>----------------</td>
<td>---------------</td>
</tr>
<tr>
<td><strong>Pathway 6</strong></td>
<td>Permanently Excluded (PEX) students are placed on PLC’s roll from the 6th day of the PEX.</td>
<td>IF a PEX is rescinded by the Headteacher or over turned by the School’s Governing Body the CYP is legally able to return to the sending school immediately.</td>
</tr>
<tr>
<td>Permanently Excluded (PEX1) Children and Young People (CYP)</td>
<td>PLC must receive the following basic information on the first day of the PEX for this timescale to be met.</td>
<td>When a new school is named at the Pupil Exclusion Placement Panel (PEPP) they will be removed from PLC’s roll and placed on the roll of the new school after 15 working days. This is in order to provide an appropriate amount of time for the receiving school to set up an admissions meeting and make arrangements for their transition.</td>
</tr>
<tr>
<td></td>
<td>- A completed Pathways Learning Centre Referral Form: (<a href="https://www.pathwayslearningcentre.org.uk/referral-form/">https://www.pathwayslearningcentre.org.uk/referral-form/</a>)</td>
<td>A PEX CYP in receipt of an Education, Health or Care Plan (EHCP) will exit to an appropriate long term setting as arranged by the 0-25 team.</td>
</tr>
<tr>
<td></td>
<td>- Exclusion letter</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Attendance Cert</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Behaviour Report</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Recent School Report/Levels</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- SAF if applicable</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Plan Do Review documents</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- EHCP if applicable</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Social care involvement</td>
<td></td>
</tr>
</tbody>
</table>

| **Pathway 7**   | As PEX 1 above | Pupils who have been permanently excluded from a second mainstream SG school will remain on the roll of PLC. Unless, the CYP is in need of an EHCna which results in an EHCP and that plan identifies a special school setting. |
| Permanently Excluded (PEX2) Children and Young People (CYP) | | |
Statutory guidance – Roles and responsibilities

The statutory guidance referred to in this section has been taken directly from:

1. DFE – Alternative Provision – Statutory guidance for local authorities – January 2013
2. Ensuring a good education for children who cannot attend school because of health needs – Statutory
guidance for local authorities – January 2013
3. Supporting pupils at schools with medical conditions – Statutory guidance for governing bodies of

Please refer to these documents for further detail and additional clarity.

General guidance and duties

- While ‘full time’ is not defined in law, pupils in alternative provision should receive the same amount of
  education as they would receive in a maintained school. Full time can be made up of two or more part time
  provisions.
- All pupils must receive full time provision in total, unless a pupil’s medical condition makes full time provision
  inappropriate.
- Some complex and/or long term health issues may be considered disabilities under quality legislation.

The Local Authority (LA) responsibilities

- LAs 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.
- While there is no statutory requirement as to when suitable full time education should begin for pupils placed
  in alternative provision for reasons other than exclusion, LAs should ensure that such pupils are placed as
  quickly as possible.
- LAs should be aware a school can only remove a pupil who is unable to attend school because of additional
  health needs where:
  - The pupil has been certified by the school medical officer as unlikely to be in a fit state of
    health to attend school before ceasing to be of compulsory school age, and; neither the pupil
    nor their parent has indicated to the school the intention to continue to attend the school,
    after ceasing to be of compulsory school age.
- LAs should provide education as soon as it is clear that the child will be away from school for 15 days or more,
  whether consecutive or cumulative. Liaising with appropriate medical professionals to ensure minimal delay.
  (See school responsibility regarding medical absence)
- LAs should not have processes and policies in place which prevent a child from getting the right type of provision
  or withhold or reduce provision, or type of provision, for a child because of how much it costs.
- Children with health needs should have provision which is equivalent to the education they would receive in
  school. Recognising that if they are receiving 1:1 tuition, the hours of face to face provision could be fewer as
  the provision is more concentrated.
• Where full time education would not be in the best interests of a CYP because of reasons relating to their physical or mental health, LAs should provide part time education on a basis they consider to be in the child’s best interests.

• LAs should have a named officer responsible for children with additional health needs and parents should know who that person is. (The SG named officer is Helean Hughes)

• LAs should have a written, publicly accessible policy statement on their arrangements to comply with their duty towards children with additional needs.

Pathways Learning Centre – (Pupil referral Unit)

• PLC is the school established and maintained by the LA to provide temporary educational provision for the CYP defined above.

• PLC’s Management Committee must have a strategic role setting out and monitoring the aims and objectives of the unit to ensure children are safe, have their needs met and receive a good standard of education.

• Provision will differ from pupil to pupil, but there are some common elements that APs should aim to achieve:
  
  • Good academic attainment, on par with mainstream schools, particularly in English, Maths and Science, with appropriate accreditation and qualifications.
  • That the specific personal, social and academic needs of pupils are properly identified and met in order to help them overcome any barriers to attainment.
  • Improve pupil motivation and self-confidence, attendance and engagement in education.
  • Clearly defined objectives, including next steps following the placement such as reintegration into mainstream education, further education, training or employment.
  • Provide a final report on the pupil’s achievements during the placement including academic attainment and progress, attendance records and evidence of change in behaviour.
  • Plan for the pupil’s reintegration into the school.
  • The use of virtual media, such as virtual classrooms and learning platforms can provide access to a broader curriculum, but it should generally be used to complement face to face education, rather than as sole provision.

School responsibilities

• Governing bodies of schools are responsible for:
  
  o Arranging suitable full time education from the sixth day of a fixed term exclusion.
  o Ensuring that all schools develop a policy for supporting pupils with medical conditions that is reviewed regularly and is readily accessible to parents and school staff.
  o Ensure that a named person who has overall responsibly for the policy implementation.
  o Ensure each pupil at school with a medical condition has an Individual Healthcare Plan and a clearly defined person responsible for their development.

• Schools may also direct pupils off-site for education, to help improve their behaviour

• Responsibility for any alternative provision used rests with the commissioner (school)

• The law does not specify the point a child’s illness becomes the LA’s responsibility. Schools would usually provide support to children who are absent from school because of illness for shorter periods. ie. Less than 15 days. There may be episode of illness that last for more than 15 days that schools are still able to support as appropriate.
A child unable to attend school because of health needs must not be removed from the school register without parental consent and the certification from the ‘school medical officer’ (Consultant paediatrician CAMHS), even if the LA has become responsible for the child’s education. Continuity is important for children and knowing they can return to their familiar surroundings and schools friends can help their recovery and their educational progress.

Schools should:

- Ensure the pupil remains on the roll of the school.
- Ensure pupils are Dual registered from the beginning of the first day of which the school has commissioned the AP. For the purpose of the school census a pupil should be ‘Dual Main’ registered at their school and ‘Dual Subsidiary’ registered at the AP.
- Ensure the child can successfully remain in touch with their school while they are away and encouraged to feel part of the school.
- Ensure that parents are given clear information about the placement: why, when, where and how it will be reviewed.
- Where possible, engage parents in the decision by the school to direct a pupil off site.
- The nature of the intervention, its objectives and the timeline to achieve these objectives should be agreed and clearly defined.
- Maintain on-going contact with the provider and pupil, with clear procedures in place to exchange information, monitor progress and provide pastoral support.
- Ensure the length of time a pupil spends in AP will depend on what best supports the pupil’s needs.
- Keep the placement under review and involve parents in the review. Frequency of reviews is not specified but should be frequent enough to provide assurance that the off-site education is achieving its objectives and that the pupil is benefitting from it.
- Maintain a full record of all placements they make, including a pupil’s progress, achievements and destinations following the placement. Including the pupil’s own assessment of their placement.
- Should recognise any issue and barriers as early as possible and carry out a thorough assessment of the pupil’s needs.
- Should look to have an increased focus on the early assessment and identification of a pupil’s needs before his or her behaviour has deteriorated to the extent that exclusion is the only option.
- Ensure a personalised plan for intervention is prepared setting clear objectives for improvement and attainment, timeframes, arrangements for assessment and monitoring progress and a baseline of the current position against which to measure progress.
- Ensure plans are be linked to other relevant information or activities such as EHCPs for CYP with SEND.
- Have a plan and processes in place to reintegrate the pupil at the end of the placement when ready to return to school.
• If the placement doesn’t end with reintegration into the school, work with the AP to ensure the young person can move on into suitable education, employment or training.

• Alternative Providers - General guidance (Including PRUs and other AP settings)

Schools / commissioners of Alternative Provision, such as those listed in the South Gloucestershire Alternative Provision catalogue, should be aware of this general guidance for APs.

• Provide good quality provision and be registered where appropriate. (ie. Provides full time education to five or more full time pupils of compulsory school age, or one such pupil who is looked after or has a statement of SEN/EHCP)

• Delivered by high quality staff with suitable training, experience and safeguarding checks.

• Have clearly defined objectives relating to personal and academic attainment.

• Have a clear purpose with a focus on education and achievement as well as meeting the pupil’s needs and rigorous assessment of progress

• Offer appropriate and challenging teaching in English, Maths and Science or par with mainstream education, unless this is being provided elsewhere within a package of provision.

• Placement in AP is part of the overall planning for the YP and is therefore subject to the normal PLAN DO REVIEW cycles.
PLC Provision Map - Primary (Fosse)

The Primary unit provides:

Short term, full time education for young people who:

- have been permanently excluded from school from Years R to 6, where it is not deemed appropriate for them to return directly to a mainstream school
- are in receipt of an ‘Education Health Care Plan’ (EHCP) and who are waiting for a placement in a specialist provision
- who are extremely vulnerable and need education in an alternative setting to mainstream, until EHCP assessments have been completed and suitable provision can be agreed

The majority of young people are with us for 3 – 6 months and receive:

- Full access to the curriculum
- Pastoral support and interventions which begin the process of enabling them to self-regulate their behaviour and function more effectively in an educational setting. These are listed in the intervention section below.
- Appropriate reintegration support for these young people into mainstream school or a new school.

All Primary referrals are placed one of three classes, supporting no more than six pupils. Decision upon which class they are placed depends upon a number of factors, including the social dynamics of the group. A small number of Primary Pupils stay with us longer than 6 months, but this is typically where EHCP assessment is taking a little longer, or where a suitable specialist placement is not yet available.

PLC Provision Map – Secondary (Cotswold)

The Cotswold unit provides:

- Education, support and guidance for students who are unable to access school on medical grounds. eg. Receiving treatment from oncology or suffering with chronic fatigue syndrome.
- Education, support and guidance for students who have complex social, emotional or mental health difficulties (SEMHD) that make access to mainstream provision an exceptional challenge eg. School phobia, extreme anxiety, depression, self-harm, eating disorders etc. These students are usually under the care of CAHMS or consultant level paediatric support.
- Medical needs students may only require our support for a number of weeks. The majority of students are with us for 3 – 6 months. PLC works very hard to support the reintegration of students to mainstream as soon as they are able.
- Some SEMHD students do not return to the mainstream school and complete their education to the end of Year 11 with us. This is more common for KS4 admissions.
- The initial level of provision and contact time will be dictated by the advice received from medical professionals at the referral and admissions stage. eg. A student may only be able to access 5 hours per week due to medical reasons such as chronic fatigue.
• An appropriate funding band is agreed based upon the individual needs of the student.

• The level of provision and funding is reviewed each month at a student conference chaired by the Head of PLC and termly review meetings with multi agency input.

• Provision for students attending the Cotswold unit of PLC typically includes an on-site programme between 15 – 25 hours per week, in groups no larger than 8 with a teacher and teaching assistant. Some students attend the site but require 1:1 sessions. For those unable to access the site we provide off site provision including Home Tuition for KS1 – KS4.

• Students attending the Cotswold unit at PLC have a full access to a core curriculum, if they are medically able to do so. This includes English, Maths, Science, ICT, Art, Food Technology, DT, RS, PSHE and Humanities (KS3).

• We work very hard to ensure that KS4 students can also access option subjects they may have already started at their mainstream school, such as music, languages, computer science / programming. This often requires us to work closely with external supply agencies to secure teachers with the correct subject background.

• In addition to Curriculum access, a key aspect of our provision is to offer highly skilled pastoral support and therapeutic intervention work for all young people. This includes access to counselling, emotional literacy support, advice around safety plans and self-harm, family liaison, behaviour and attendance and careers information advice and guidance (CEIAG).

• All students also have access to a range of intervention programmes and mentoring that focus on developing social skills, coping strategies, self-regulating techniques, resilience development and independence, to support a successful reintegration to mainstream or appropriate Post 16 provision.

PLC Home Tuition

• Students receiving home tuition may have a very similar profile to the Cotswold students above but are unable to leave their home to receive education on site. This is usually due to significant medical needs.

• Due to medical limitations, home tuition students typically receive 1:1 tuition between 3-5 hours per week.

• Home tuition students have access to a core of English and Maths, but some also access other subject such as Art, Science and a range of other subjects via online learning platforms.

PLC provision Map - Secondary (Frome)

The Secondary Pupil Referral Unit provides:

• Short stay, full time education for young people who reside in SG;
  
  o And have been permanently excluded (PEX) from school in Years 7 to 11.

  o Short stay placements are admitted within 6 days of a PEX and typically stay for up to 7 week, depending upon the dates of the ‘Pupil Exclusion Placement panel’ (PEPP) meeting.

  o Short stay students are transferred to a second mainstream school as a result of the decision made by the ‘Pupil Exclusion Placement panel’ (PEPP).
• Short stay students have access to a core curriculum offer including English, Maths, PE, PSHE, DT, Art and CEIAG.

• The priority for short stay students is to complete a reintegration programme of skills that focus on developing social skills, mentoring and self-regulating techniques to support a successful transition to the second mainstream school placement.

• Long stay, full time education for young people who reside in SG;
  o Where initial assessment identifies it is not in the student’s best interests to return directly to a mainstream school; and where further assessment may be required.
  o who are in receipt of an ‘Education Health Care Plan’ (EHCP) and waiting for a placement in a specialist provision
  o who are extremely vulnerable eg. A Child in Care (CIC) and need education in an alternative setting in order to avoid permanent exclusion from a mainstream school.
  o Who are at high risk of being permanently excluded from a second mainstream school and have been referred via the High Risk Group (HRG). Although there is still the expectation that students would be reintegrated into their school when ready.
  o Who have been permanently excluded from two SG schools.

• Long stay students have access to a core curriculum offer including English, Maths, PE, PSHE, DT, Art, Skills for Work Education Employment and Training (SWEET) and CEIAG.

• Long stay students also have access to greater flexibility in their programmes. In addition to the core offer they can complete a range of enrichment programmes in life skills, forest schools, cooking, sports, work experience and careers guidance. As well as access to taster courses such as construction, plumbing, mechanics, hair and beauty etc. Long stay students have individual bespoke programmes designed to suit their needs. These may also include work experience or college placements.

• In a small number of cases it may be appropriate for long stay students to complete their programme off site. In all cases, the quality of the programme is closely monitored and part of an overall plan which is subject to regular review.

• All students also have access to a range of intervention programmes and mentoring that focus on developing social skills, coping strategies, self-regulating techniques and CEIAG guidance, to support a successful transition to Post 16 provision.
PLC Provision Map - Intervention

PLC offer a range of support and intervention strategies to all students. Supporting the students’ emotional and social development is the overriding principle at PLC.

The interventions and strategies we use include access to:

- Counselling
- Anger management through Emotional Literacy support (ELSA 1:1)
- Therapy through play eg. Sand tray and art therapy
- Social skills programmes
- Trauma informed staff – including attachment awareness, Adverse Childhood Experiences (ACEs), sexualised trauma, self-harm strategies, primary mental health specialists, CASCADE, ASIST suicide intervention skills training, PACE and Sanctuary models.
- Emotion coaching
- Zones of regulation
- Mindfulness and grounding techniques
- Sensory coaching
- Bereavement support
- Behaviour, attendance and reintegration support
- Reengagement mentoring
- Medical needs advice and support
- CEIAG and skills for life and work
- Family liaison and parenting groups
- Specialist support and advice for Primary students and their schools
- Specialist support programmes for PEX students reintegrating to mainstream
- Plus any other external intervention strategies that may be required

This area of our work is equally important in measuring the achievement and progress of students, when compared to measuring students’ academic progress. For many of our students it is more important. Without the development of their ability to self-regulate their social behaviour or find coping strategies to manage their emotions, they simply cannot function in such a way that will allow them to access and positively participate in the next steps of their learning.

PLC does not adopt one specific approach to supporting the needs of PLC students, but rather adopts a ‘trauma informed’ approach which is an attachment aware, relationship based approach for students who have experienced adverse childhood experiences.
The role of the Referrals and Admissions Panel (RAP)

The role of the Referrals and Admissions Panel (RAP) is to secure appropriate placements for students of statutory school age, resident in South Gloucestershire, who by reason of medical need or significant Social Emotional or Mental Health Difficulty (SEMHD) are unable to attend mainstream school for a period of time.

The panel monitors the placement of all students into PLC and considers the following criteria for each case referred:

1. Appropriate alternative provision is needed
2. Referrals are supported by appropriate professional services. Eg. Medical professional / CAHMS
3. Whether PLC can offer support in addition to the support available from the home school
4. Anticipated timescale for the provision
5. What other multi-agency support is required
6. Funding arrangements

- The panel will accept students who meet the criteria above and whose needs cannot be met in their mainstream school. For medical and SEMHD students this must be supported by the views of professionals such as CAHMS or Consultant Paediatrician.

- There are three possible outcomes:
  1. Accepted. PLC will contact the school and parents to confirm and make arrangement for admission.
  2. Tentative – It is unclear from the information provided whether PLC can meet the needs of the students, or some essential information is missing.
  3. Declined – PLC are not able to support at this time or the referral does not meet the criteria.

- All placements agreed at panel meetings will be implemented by PLC within three working weeks.

- The panel meet 9 times per calendar year during term time. Dates are sent to schools in advance. Deadline for referrals are 5 days before the panel, in order to give panel members time to review the documentation before meeting. This means that referrals received after the deadline may not be considered until the next calendared meeting.

- Unsuccessful placements are extremely rare. However, the panel will refer students back to the home school and end the placement, where the placement has been unsuccessful and the place is needed for another student. This will be discussed in full with the parent and school. In all cases, student placements are reviewed termly, unless it is felt not to be in the best interests of the CYP.

- Membership of the Panel
  - Headteacher PLC
  - Deputy Headteacher PLC – Cotswold Unit
  - Deputy Headteacher PLC – Primary and Secondary PRU Unit
  - Intervention Manager
  - SENCO
  - Home tuition Co-ordinator
  - LA representative
  - Primary Mental Health worker
  - Primary or Secondary Inclusion Officers (where appropriate)
The role of the Pupil Exclusion Placement Panel (PEPP)

The Pupil Exclusion Placement Panel (PEPP) is part of the Local Authority ‘Fair Access Panel’. (See Guidance elsewhere in this document and / on SG website for further details).

The PEP Panel operates on behalf of all Secondary Headteachers to agree placement of all permanently excluded secondary students in to a new secondary school.

The Panel consists of 3 x LA Secondary Heads, PLC Head, Secondary EIO, LA lead ‘Exclusions and Licensing’, LA SEND strategic lead.

PLC Education Inclusion Officer (Secondary)

The Education Inclusion Officer (EIO) is employed by PLC, but funded jointly by all Secondary Schools in South Gloucestershire.

The EIO supports all schools to:

- Ensure that PEX students have fulltime education provision in place/planned from 6th day of exclusion
- Follow up those cases where, for instance, a PEX student moves out of LA (possible CME/Safeguarding issues)
- Liaise with parents/carers to ensure they understand the PEPP process and associated timescales
- Liaise with parents re. school preferences
- Notify PEPP panel/LA officers of parental preferences, plus any issues that may be relevant to the placing of the PEX student
- Collate data and information relating to PEX students and provide to panel for analysis
- Attend PEPP and RAP panel meetings in order to provide information and opinion
- Provide regular status updates to EOTAS staff in relation to PEPP/move to new school
- Follow up with ‘named’ schools to ensure planning in place for admissions
- Meet with and communicate with PEX students in the PRU, to provide them with information regarding the new school, admissions process and in some cases encourage to be positive/prepared for the move
- Where required, attend admissions meeting at the new school
- Link with other agencies/professionals re. PEPP process
- Support new school in planning for the student
- Where required, plan Alternative Provision with the new school

Evaluation

- Carries out case studies in order to judge how well the process works and how well students integrate in the new school
- Carry out Termly analysis of exclusion data
- Report Termly to SPIN(formal presentation)
- Meet monthly with relevant LA officer(G Halley)
- Report periodically to Secondary Headteachers
PLC Education Inclusion Officer (Primary)

The Primary Education Inclusion Officer role is a new position from January 2017. The role is the same as the Secondary Inclusion Officer role above, but with a focus on support primary schools and primary aged pupils to avoid permanent exclusion. The post is a pilot project funded by the LA until March 2019. The specific nature of the role will evolve during this time.

PLC Home Tuition

The home tuition (HT) co-ordinator a key position within PLC. The HT Co. is responsible for ensuring all students that are not able to attend the PLC site due to medical or mental health reasons and who are receiving home tuition are fully supported.

This is to ensure that:

- All part time programmes are suitable for the needs of the student.
- Are supported by evidence from medical professionals.
- Are regularly reviewed and monitored and involve students, parents, professionals and a home school representation.
- Manage the team of teachers and support workers who are delivering the home tuition programmes.
- Ensure that students are safeguarded and receive the same level of safeguarding support as students attending the PLC site, including safeguarding education such as online safety.
- Ensure that students are receiving input to support their social and emotional needs and have access to other support and intervention as those who attend PLC site.
- Ensure that students’ voices are heard and have opportunities to express their views.

Further supporting information

You will find these supporting documents in the annex for your information:

- PLC referral form
- TAC meeting template
- Referral routes to PLC diagram