Vicky Ford MP
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To all children and young people with special educational needs and disabilities (SEND), their parents/carers and families, and others who support them

On Saturday 31 October, the Prime Minister announced New National Restrictions which came into force on Thursday 5 November until Wednesday 2 December to control the spread of coronavirus (COVID-19).

I know that a return to national restrictions will be a source of great anxiety to many people across the country, particularly those children and young people with special educational needs and disabilities (SEND), their families and those who work tirelessly to support them. I want to re-emphasise that the Government continues to prioritise the wellbeing and long-term future of our children and young people and early years settings, schools, colleges and universities remain open.

As the Minister for Children and Families, I am committed to ensuring that appropriate education and support is available for all children and young people during the period of new national restrictions.

School attendance

It remains very important for children and young people to attend their education setting, to support their education and wellbeing and to help working parents and guardians. Education settings have implemented a range of protective measures to make them as safe as possible and the latest medical advice from senior clinicians is that school is the best place for children and young people to be. In light of this, the balance of risk continues to be in favour of their continued attendance at school or college.

There are, however, a small number of children and young people who are clinically extremely vulnerable who will be advised to stay at home, except for specific purposes. I know that for those children and young people, and their families, the next few weeks may be challenging and we want to reassure them that those children and young people affected will continue to receive support through remote education and other support services where appropriate.

Children and young people who are clinically extremely vulnerable

The Department for Health and Social Care (DHSC) has published new guidance for clinically extremely vulnerable people in England. This is available here: https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19.

During the course of the pandemic, further evidence has emerged which shows that the risk of children becoming very unwell from COVID-19 is very low – including those who have existing health conditions. Parents whose children were originally identified as being clinically extremely vulnerable should speak to their child's specialist clinician or GP, if they have not done so already, to understand whether their child should continue to be classed as clinically extremely vulnerable and what the appropriate advice is. Those aged 18 or over who have been identified as clinically extremely vulnerable will receive a letter informing them of the new guidance they are advised to follow. They do not need to contact their clinician.

Where a doctor has confirmed that a child or young person is still clinically extremely vulnerable, the child should not attend school or college during the period that the new national restrictions are in place and their absence should not be penalised. Where a meeting with a GP or specialist clinician has not taken place, the public health advice is that the child is still clinically extremely vulnerable and should not attend school or college.

If a child was not previously identified as being clinically extremely vulnerable, but their parent considers that there are good clinical reasons for them to be classed as such (for example, because they have a health condition that has become more severe since the start of the pandemic), they should discuss this with their GP or specialist clinician.

The DHSC guidance for clinically extremely vulnerable children is not compulsory, although parents are strongly advised to follow the guidance in order to keep their child safe. However, in some exceptional circumstances parents whose children are clinically extremely vulnerable may need to balance the health risk with the wider implications associated with the child or young person not attending their usual education setting and accessing the support that would normally be delivered through this placement. This may be based on the level of support that a child or young person needs, their ability to access remote education and additional services such as therapies, and the impact on wellbeing for the wider family of their child being at home full time. In these circumstances, parents, education settings, health professionals and local authorities should work together to agree the best arrangement for that individual child or young person and their family to ensure that they continue to receive the support they need.

We are continuing to work closely with our Strategic Reform Partner, the Council for Disabled Children, and will be asking them to convene a meeting of Designated Medical and Clinical Officers to identify and share best practice in supporting children and young people who are clinically extremely vulnerable, both where they are at home and in the exceptional cases where they may be continuing to attend their education setting. I hope that this will reassure parents that every local area has access to the best approaches for keeping clinically extremely vulnerable children and young people safe.

Children and young people who are not clinically extremely vulnerable should continue to attend school or college so that they can receive high quality teaching and specialist professional care. This includes those children who may have a clinically extremely vulnerable parent or sibling in their household. This is based on advice from senior clinicians that education settings are the best place for them and is particularly important for those who have an education, health and care (EHC) plan, as the majority of provision specified in plans is designed for delivery in education settings.

I know that some children and young people who are not clinically extremely vulnerable and their parents may experience anxiety about attending school or college during this period. Where this is the case, the education setting should work with the child or young person and their parents (and the local authority, if the child or young person has an EHC plan), to understand their concerns and provide reassurance regarding the protective measures that have been put in place to reduce the risk of transmission in the setting.

Remote education

Where a child's attendance at school would be contrary to government guidance or legislation on COVID-19, including because they are clinically extremely vulnerable, settings have a duty to provide remote education for state-funded, school-age children. We have worked with schools to co-design the remote education service for schools, FE providers and teachers, which can be accessed here: https://www.gov.uk/guidance/remote-education-during-coronavirus-covid-19. In addition, the Oak National Academy education offer provides free video lessons across a broad range of subjects for every year group from Reception to Year 11, including specialist content for pupils with SEND.

Where children and young people who are classed as vulnerable (due to having an EHC plan, a social worker, or because they are otherwise vulnerable) are not able to attend their education setting because they are following public health advice, including because they are clinically extremely vulnerable or are self-isolating, it is important that their education setting puts in place a system to keep in contact with them.

Schools must continue to use their best endeavours to meet the special educational needs of their pupils and should work collaboratively with families, putting in place adjustments to enable pupils with SEND to successfully access remote education alongside their peers. However, I know that some children and young people with the most complex needs may struggle to engage with remote education and that they and their families may struggle without the support and routine that would normally be provided through attending school or college. I would like to reassure you that any carers or visitors who provide care or support for a child or young person's everyday needs can continue to visit them in their home while the new national restrictions are in force, ensuring that they follow social distancing guidance where close or personal contact is not required. This includes for the delivery of therapies that would normally be provided in an education setting. Where a child who is clinically extremely vulnerable has an EHC plan, parents should discuss with their local authority and, where applicable, health lead and their child's education setting, to determine what arrangements should be put in place to provide support during this period.

As part of over £195 million invested to support remote education and access to online social care, over 340,000 laptops and tablets are being made available this term to support disadvantaged children whose face-to-face education may be disrupted, with 100,000 of these having already been delivered. This supplements over 220,000 laptops and tablets and over 50,000 4G wireless routers, which have already been delivered during the summer term. Where a child who has been advised not to attend school by their GP or specialist clinician does not have access to a device, their school should contact the Department for Education so that we can help them to provide support. Further information is available through this link: https://www.gov.uk/guidance/get-laptops-and-tablets-for-children-who-cannot-attend-school-due-to-coronavirus-covid-19.

We are also providing £37.3 million for the Family Fund in 2020-21, including £10 million specifically in response to COVID-19, to support low income families with disabled and critically ill children, including helping to buy specialist equipment and devices. More details on how to apply can be found here: https://www.familyfund.org.uk/.

New winter package to provide further support for children and families

I know that many families have faced particular challenges as a result of the pandemic. Building on the significant support given to the most vulnerable during the pandemic, we recently announced a new £170m Covid Winter Grant Scheme that will be run by councils in England. The funding will be ring-fenced, with at least 80% earmarked to support with food and bills, and will cover the period to the end of March 2021. Local authorities will receive the funding at the beginning of December 2020.

This funding will allow councils to directly help the hardest-hit families and individuals, as well as provide food for children and young people who need it over the holidays. Local councils understand which groups need support, and are best placed to ensure appropriate holiday support is provided – which is why they will distribute the funds, rather than schools, who will continue providing meals for disadvantaged children and young people during term-time.

In addition, the Holiday Activities and Food programme, which has provided healthy food and enriching activities to disadvantaged children and young people since 2018, will also be expanded across England next year. It will cover Easter, Summer and Christmas in 2021, and cost up to £220m. It will be available to children and young people in every local authority in England, building on previous programmes – including this summer's, which supported around 50,000 children across 17 local authorities.

The vast majority of pupils are now back in school or college, and kitchens are open to provide healthy, nutritious meal options to all children and young people, including those eligible for free school meals. We have put additional guidance in place to ensure we support children and young people who are eligible for free school meals who are having to self-isolate during term-time, or who are clinically extremely vulnerable and therefore not attending their school or college, asking education settings to work with their caterers to provide food parcels.

Further information is available here: https://www.gov.uk/government/news/new-winter-package-to-provide-further-support-for-children-and-families

Face coverings in education settings

The World Health Organisation published a statement on 21 August about children and face coverings, in which they advise that "children aged 12 and over should wear a mask under the same conditions as adults, in particular when they cannot guarantee at least a 1-metre distance from others and there is widespread transmission in the area." In primary schools and education settings teaching year 6 and below, where social distancing between adults in settings is not possible (e.g. when moving around in corridors and communal areas), adults (staff and visitors) should use face coverings. Younger children should not wear face coverings. During the period that the new national restrictions are in force, in education settings where pupils in year 7 and above are educated, face coverings should be worn by adults and pupils when moving around the premises, outside of classrooms, such as in corridors and communal areas where social distancing cannot easily be maintained. Face coverings should also be worn by pupils in year 7 and above when travelling on dedicated school transport.

Some individuals are exempt from wearing face coverings. This includes people who cannot put on, wear or remove a face covering because of a physical or mental illness or impairment, or disability, or people who are speaking to or providing assistance to someone who relies on lip reading, clear sound or facial expression to communicate. The same exemptions will apply in education settings and may be particularly relevant to children and young people with SEND.

Where a child or young person is exempt from wearing a face covering, we would expect teachers and other staff to be sensitive to those needs. Parents should discuss any concerns with the education setting. In addition, education settings may want to consider recommending the use of clear face coverings, as many children and young people, including those who are deaf, hearing impaired or with other additional needs, rely on lip reading or seeing facial expressions to be able to communicate fully.

We have published guidance on face coverings on education settings, which is available here: https://www.gov.uk/government/publications/face-coverings-in-education/face-coverings-in-education.

Respite

I recognise the importance of providing respite care for disabled children and young people and their families. That is why parents and carers may continue to access respite care to support them in caring for their disabled children while the new national restrictions are in force, with specific provision in the new regulations allowing for both services which care for children away from home and care which is delivered in the family home. The Council for Disabled Children has produced guidance for families, local authorities and short break providers on respite and short breaks under the new national restrictions, which is available here: https://councilfordisabledchildren.org.uk/help-resources/resources/family-support.

We continue to encourage local authorities to prioritise this support for disabled children, and to consider flexible and pragmatic options to deliver that support. For

example, some local authorities have made more use of direct payments beyond their usual criteria. The Council for Disabled Children has also worked with providers to produce Short Break Learning Examples, which are available here: https://councilfordisabledchildren.org.uk/help-resources/resources/short-break-learning-examples. These case studies are examples of the effective ways that services can operate so that children, young people and their families can access vital support with confidence.

I know that it is also important that parents whose children have particularly complex needs are able to access informal support during this period. For this reason, carers of disabled people of any age who are dependent on round-the-clock care, as well as all children under the age of five, are not counted towards the limit on two people meeting outside while the new national restrictions are in force.

Health services for children and young people with SEND

I know that limited or altered provision during the pandemic will have been extremely challenging, particularly for children and young people with SEND who require health services (such as speech and language therapy, occupational therapy and community children's nursing) and their families
. During the summer, NHS England published detailed guidance to ensure that community health services for children and young people with SEND (including therapies) could be restored as quickly as possible. In her letter of 7 October to Directors of Nursing, the Chief Nurse made clear that maintaining support for families is a priority during planning and prioritisation for services as we enter winter and that professionals supporting children and families (such as health visitors, school nurses, designated safeguarding officers and nurses supporting children with SEND) should not be redeployed to other services. Accessing medical services is specifically allowed in the new regulations, whether they are delivered at home, in an education setting or in the community.

I recognise that this is an extremely challenging period, especially for children and young people with SEND, their families and carers and those who work to support them. I hope this letter gives you some reassurance that the education, health and wellbeing of children and young people with SEND continue to be a top priority for the government during these difficult times and we continue to be incredibly grateful to all those who work so hard to support children and young people with SEND.

Yours sincerely,

Vicky Ford MP
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