

Schools, colleges and local authorities should ensure risk assessments are kept up to date so that pupils and students can be brought back in, in any year group, where circumstances change, for example if it is becoming unsustainable for parents and carers to care for their child week-round.

This includes children and young people who are placed in special units and resourced provision attached to a mainstream school, since they are recorded on the roll of the mainstream school.

Schools, colleges and local authorities have latitude to use [special educational needs and disability \(SEND\) risk assessments](https://www.gov.uk/government/publications/coronavirus-covid-19-send-risk-assessment-guidance) also for children and young people who have SEND without an EHC plan, where they feel it would be beneficial, for instance for children on SEN support who have complex needs. This means they can use this as a mechanism to bring back pupils and students with SEND who need it, in other year groups, even if they do not have an EHC plan.

For all children and young people with an EHC plan in special educational settings, such as special schools, special post-16 institutions and hospital schools, settings should encourage attendance based on the child's risk assessment and on the ability of the setting to provide for their needs, and not using the child's year group as a primary deciding factor, both because all children and young people in these settings are considered vulnerable and because year groups may not be indicative of key transition points. In line with the [guidance on implementing protective measures in education and childcare settings](https://www.gov.uk/government/publications/coronavirus-covid-19-implementing-protective-measures-in-education-and-childcare-settings) and the [guidance for special schools, specialist colleges, local authorities and any other settings](https://www.gov.uk/government/publications/coronavirus-covid-19-send-risk-assessment-guidance/), special schools and special post-16 institutions should:

- consult risk assessments conducted and where children and young people are attending their specialist setting, they should continue to do so
- work with local authorities and families to continually review risk assessments and bring children and young people back to face to face education where circumstances change, for example where it is becoming unsustainable for a family to care for a child week-round
- consider how to increase the numbers of children and young people accessing on-site education from the week commencing 1 June, including where appropriate by considering what the key transition points are, and ensure that as many children as can be safely catered for are able to attend their setting
- consider a range of options to enable as many children as possible to benefit from attending their setting, such as creating part-time attendance rotas

Hospital schools should:

- aim to provide educational services for as many pupils in these settings as is possible, in line with risk assessment and social distancing guidelines and where headteachers agree with medical practitioners that it is safe and feasible to do so
- use their discretion in considering how to provide education services - taking into consideration issues of safety, capacity and so on - and how to prioritise pupils if this is required, including through a phased return approach
- work closely with hospitals and NHS trusts so that children and young people in hospital schools are able to receive their education, including through access to classrooms where appropriate

2.4 Attendance of children and young people who are otherwise vulnerable