

Section 19 of the Education Act 1996

Gloucestershire's Response to the Duty

July 2025

Multi-Agency Support Service (MASS)

Living our values every day



Accountable



Integrity



Empower



Respect



Excellence



Section 19

**Illness- Group 1
(GHES)**

Otherwise

Illness- Group 2

Exclusion



Section 19- The legislation – LA Duty

[Section 19 \(S19\) of the Education Act 1996](#) places a duty on Local Authorities to:

*‘Make arrangements for the provision of suitable education at **school or otherwise than at school**, for those children of **compulsory school age** who, by reason of **illness**, **exclusion from school** or **otherwise**, may not for any period receive a suitable education unless such arrangements are made for them.’*

GCC Attendance & Section 19 policy- [Section 19 of the Education Act 1996 | Gloucestershire County Council](#)

Illness

Two approaches for children requiring a Section 19 response under the category of **illness**.

- **Illness Group 1** – Gloucestershire Hospital Education Service (**GHERS**)- referred **directly by a medical professional** with oversight for the treatment of a diagnosed illness.
- **Illness Group 2** – Health needs not meeting GHERS 'Core Offer'

Otherwise

'Otherwise' is intended to cover other situations in which it is **not reasonably possible or practicable** for a child to **access** and take advantage of any **existing suitable schooling**. GCC will only provide education under the 'Otherwise' category if it assesses that it is **not possible for a child to receive a suitable education at their current school**.

The Legislation – School Duty

Schools should utilise reasonable adjustments to support removal of barriers to education. The duty is anticipatory – Should be planned for in advance (**Equality Act 2010**)

Schools are required by '[Supporting pupils at school with medical conditions](#)' (2015) (Statutory guidance informed by Children and Families Act 2014), to have a medical needs in schools' policy which highlights their local response to meet their legal duty to '*support pupils with medical conditions*'.

For 'Illness' absence

- Prior to requesting that Gloucestershire County council considers the need for Alternative Education Provision for a child with identified needs relating to illness, schools should refer to their own Medical Needs policy (as required by the statutory guidance) and consider advice from health professionals.
- Where schools need advice/ support to inform their actions or responsibilities they can contact Gloucestershire's Designated Clinical Officer (Charlotte Ward).

The Legislation – Parental Duty

Section 7 (S7) of the Education Act 1996 places a duty on parents to:

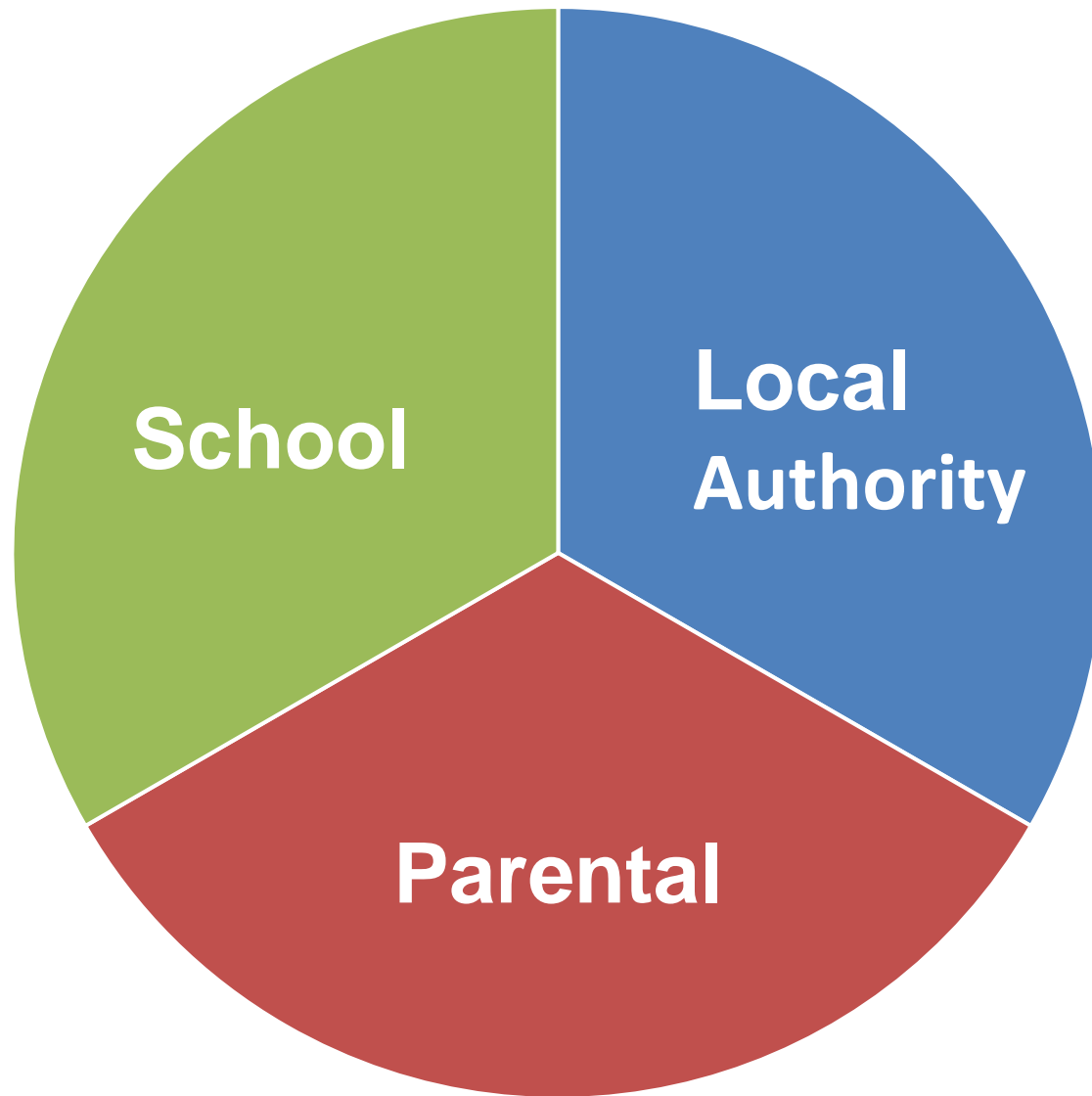
Secure education of children of compulsory school age.

*The parent of every child of compulsory school age shall cause him to **receive efficient full-time education suitable—***

(a) to his age, ability and aptitude, and

(b) to any special educational needs they may have, either by regular attendance at school or otherwise.

Attendance and access to Education is a **shared responsibility**.



- School have met their statutory duties and offered a range of reasonable and supportive adjustments including following their medical needs policy.
- Parents are meeting their duties under Section 7 of the Education Act 1996 then a referral to Section can be made.
- School professionals can request Local Authority 'assess' the need to provide Alternative Education Provision as part of Section 19 duty.

Key S19 eligibility criteria



- ✓ Gloucestershire Resident
- ✓ Compulsory school age- (Child aged 5 – 16, from school term after a child's 5th birthday, until last Friday in June of the school year they turn 16)
- ✓ Meets absence criteria- '15 days in the same school year for same or linked reason'
- ✓ Not subject to AIM or attendance procedures
- ✓ School can demonstrate that:
 - ✓ Engaged with appropriate support agencies and utilised graduated pathway
 - ✓ Have met the requirements outlined in their medical needs policy and statutory guidance for schools
 - ✓ Child is unable to access education despite reasonable adjustments
 - ✓ Parents are meeting their duties under **Section 7 of Education Act**

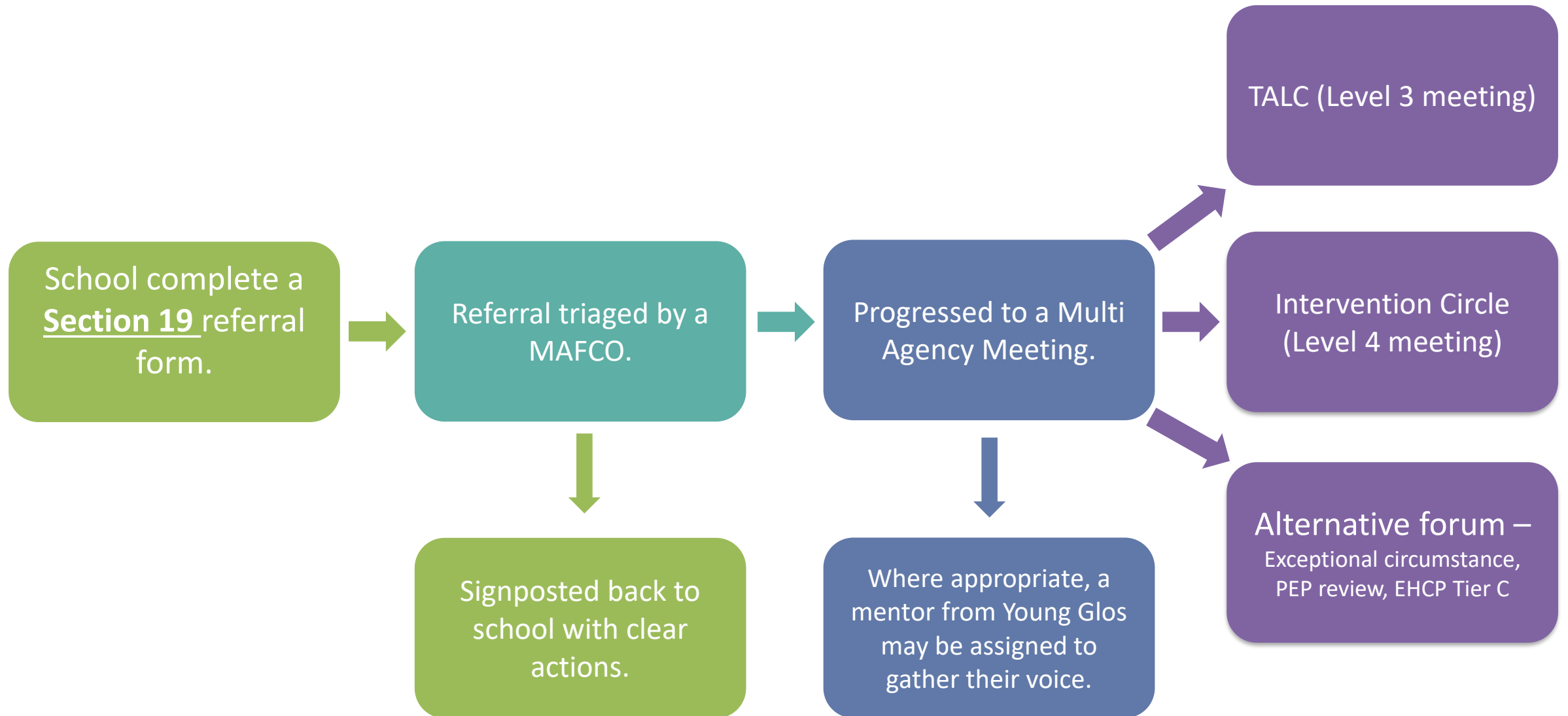
Schools Requesting Section 19 for a Child with an EHCP

In first instance school asked to discuss with Case Co-ordinator

- Does this require a S19 response, or is an annual review more appropriate?
 - If Annual Review, follow EHCP process – Section 19 not required at this stage.
 - If S19 – School to submit a S19 Referral with the support of EHCP case Co-Ordinator after discussing the merits of an Annual Review.

Completing a S19 Referral

- **School professionals** can request **GCC** 'assess' the need to provide **Alternative Education Provision**
 - Must be **completed by school where CYP is on roll** (In Year or EHCP Teams will submit for CME cohort)
 - Without an EHCP it is '**highly unlikely**' to be specialist provision
- **Parental requests-** EIS/EHCP shared process in place to **manage and advise parents** that school are responsible for submitting request if deemed necessary.
- **Medical professionals** (NHS consultant, community paediatrician or a registered clinician of a child in treatment with CAMHS) can refer to GHES, to seek support through GHES. This can be accessed through **GHES webpage and bespoke GHES JADU form**. Lead school professional, identified by medical professional will be sent a link and asked to add school supporting information. [Outpatients and Outreach Team](#)



Levels of Intervention

Level 3 – TALC meeting

Level 4 – Intervention Circle

- For children who have an EHCP - Where Case Co-ordinator agrees S19 consideration is appropriate (illness).
- For children who have open social care involvement.



Key questions during assessment

Is it reasonably possible or reasonably practical for the child to attend host school?

Is the child able to engage with a remote learning environment?

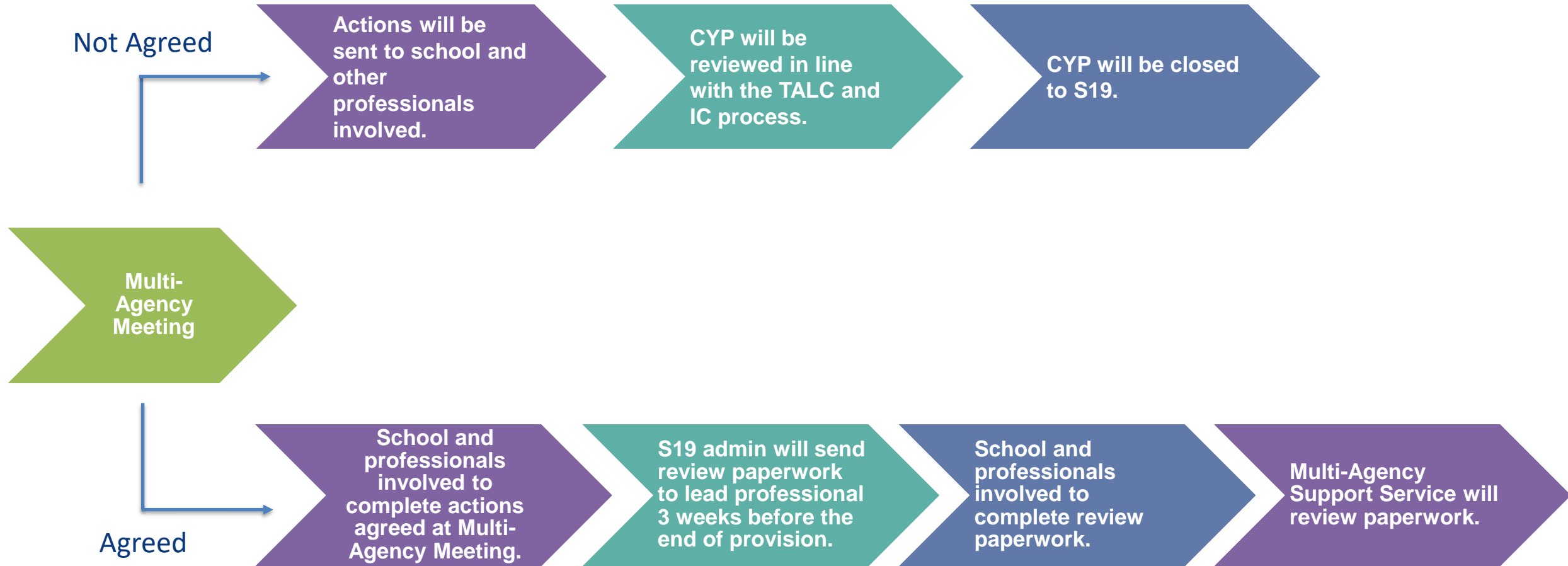
Would remote provision adversely affect the pupil's return to school?

Is the Child able to learn independently?

What additional input can be provided by partner agencies?

Would the child receive suitable education without alternative S19 provision?

What happens following Multi-Agency meeting?



Section 19 Reviews



S19 Referral 1

Level 3 – TALC meeting

- Child A is in Y7. He has been unable to attend school for 8 weeks.
- Has a diagnosis of autism and ADHD from a private provider.
- Has recently been assessed by CAMHS and has been placed on a waiting list.
- Parents have proactively tried to bring them into school and are working closely with school to update them on their current health needs.
- When in school Child A presents well but can struggle with overwhelm. Parent's report Child A is becoming isolated and is reluctant to leave the house at weekends.
- **Child A voices that school is “busy, overwhelming and noisy”**
- School have held multiple TAF meetings, looked at a range of reasonable adjustments such as reduced timetables, ELSA sessions, time out cards and access to a key adult.
- SEND needs have been fully explored and My Plan's have been updated. Child A has recently been moved up to My Plan Plus.
- School have explored a Talk Well referral and they have been accessing counselling support.

S19 Referral 2

- Child B is in Y10. Has not attended school for over 2 terms.
- Child B's parents say that he is too anxious to attend school.
- Child B's parents are proactive in speaking to school but do report to be struggling with Child B's behaviour at times.
- **Child B voices that they find it hard to leave the house in the morning and worries about being in the corridors and noise in class.**
- Child B is generally able to attend a few sessions a week on an inconsistent basis.
- Early help have not yet been explored.
- School are yet to reach out to Education Inclusion Services regarding support for a part time timetable.
- Child B has a My Plan but this has not recently been reviewed.
- Child B is still able to participate with their hobbies outside of school and enjoys going to round play with their friends.

Signposted back to school.
Further reasonable adjustments to explore.

S19 Referral 3

- Child C is in Y6. Has not attended school for over 2 terms.
- Child C's parents report that they have anxiety and suffer with sickness and stomach aches when school is mentioned.
- Child C has a history of involvement with Early Help and a previous CIN plan from a few years ago.
- When in school, Child C has a good circle of friends and previously presented with no concerns. Child C has always found academic work challenging.
- **Child C voices that school is hard and they don't want to return to school as they would rather be at home.**
- Child C is not on a My Plan.
- Child C's parents have not engaged with TAF meetings.
- When staff complete safeguarding checks, Child C is often at home alone and spending long periods of time gaming on their Xbox.
- Child C has been seen out in the community and enjoys socialising with their friends.

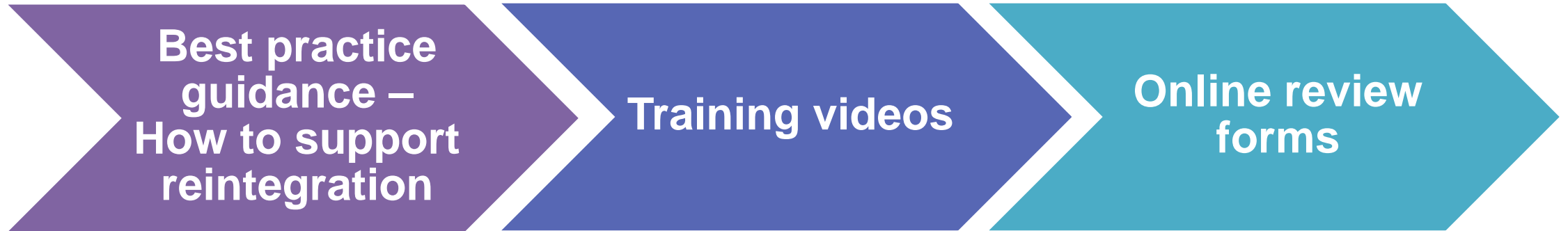
Signposted back to school.

Early Help?

Education Inclusion Services?

Attendance policy?

Coming soon...



Questions...

- GCC Attendance & Section 19 policy - [Section 19 of the Education Act 1996 | Gloucestershire County Council](#)
- Conversation with your Inclusion Officer or EHCP Caseworker in first instance.
- If needing further clarification, ask a MAFCO, always happy to speak to you prior to a referral.
- Lots more information on the S19 page, including a new best practice guidance document which will be available in September.

MAFCO Contact information:

Phone- 01452 427434

Email- S19Referrals@gloucestershire.gov.uk