

The UK will have a population of 70 million by 2028. There will be more children, more with special educational needs and disability, more complex needs, more enduring needs as a result of medical advance pre-birth and post-birth, better identification of needs and new conditions. We have too little knowledge and too little resource for this growing population but we recognise the reality and need partnerships to improve our ability to serve these children well.

The UK has separate education policies for England, Wales, Scotland and Northern Ireland. This information is about England.

England has just passed The Children and Families Act, effective from September 2014. It is the biggest change to special educational needs and disability legislation other than the Equalities Act for a generation. There are growing attempts at improving early assessment, pupil and parental preference and the integration of education, health and social care services.

England has 152 local authorities (LAs). These can be geographically small but with large urban populations or geographically large with smaller distributed rural populations. LAs have a diminishing role in education but remain responsible for places and place-planning and a particular responsibility for special needs and disability. Home and Hospital Education falls into this area for budgetary purposes. LAs receive their Designated Schools Grant (DSG) in three notional blocks for Early Years, Schools and High Needs Funding. Much of this funding is historical although there are attempts at moving towards a national formula. LAs are allowed to via moneys between these notional blocks.

Schools can be:

- state maintained and administered through LAs;
- state maintained but independent of LA control through becoming Academies (in law, charitable trust or companies)
- non-maintained (charitable companies)
- independent (companies allowed to make a profit). These, confusingly can be called 'Public' schools but are, actually, private schools

Whatever the type of school, headteachers (principals, directors) are responsible for:

- the appointment, dismissal and performance of staff;
- budget and resources;
- the quality of achievement, teaching, behaviour and safety and leadership in the school;
- the professional development of staff;
- parental and external links

There are about 25,000 schools across the Primary, Secondary and Special sector. Hospital schools are counted amongst the special schools, of which there are 996 with a population of just under 100,000.

Hospital Schools have come about for different reasons. Some are based on particular medical expertise e.g. Great Ormond Street while others serve a geographical area. Hospital

Schools always serve pupils from a number of LAs given the low incidence of need. Pupils remain the responsibility of their home school

Hospital Schools can be:

- purely ward-based
- have an additional off-hospital site day school
- be responsible for secure mental health accommodation
- run outreach services such as home-education, the education of pregnant schools girls
- quite integrated with health and social care or quite distinct

Pupils are entitled to a 'full time' education after 15 days' absence from school. The definition of full time is not specified since short interventions could be regarded as intense enough for them to count for more than hours in a school.

Hospital schools face:

- high degrees of turbulence in numbers
- a need to be able to teach across the whole age and ability range
- difficulties in being accountable for progress of sick pupils and in short spaces of time
- uncertain funding
- growing mental health needs
- higher public expectations
- relative isolation given their unique remit