

Part-Time Timetable: Student Plan

All children of compulsory school age are legally entitled to a full-time education which is suitable for them, including their age, ability, aptitude and any special educational needs they may have.

The local authority has a statutory responsibility to identify and track any pupil missing education. Any pupil on a part-time timetable is deemed to be at risk of missing education and therefore needs to be identified and tracked.

It is important to highlight there is no statutory basis upon which to establish a part-time timetable, however, in very exceptional circumstances schools may need to implement one to support a pupil who cannot attend school full-time for a short, agreed period.

Hillingdon Council remains committed to all children's right to a full-time education offer and makes clear the requirement that a part-time timetable cannot be implemented without written agreement from a parent/carer (and the Virtual School, Social Worker or EHC team at the Local Authority where appropriate).

Schools have a safeguarding responsibility for all pupils on their roll and therefore must be aware that even with parental agreement to any arrangement they make, they are responsible for the safeguarding and welfare of pupils off-site during school hours.

A part-time timetable should be:

- agreed between Parents/ Carer (child where applicable) and the school
- time-limited (up to 6 weeks), and
- have regular review dates

A part-time timetable must not be treated as a long-term solution and should not be used to manage a pupil's behaviour.

The statutory guidance [Working together to improve school attendance](#) (applicable from 19 August 2024) makes the above clear (see paragraphs 66-67).

Please return a copy of this form to the allocated Attendance Support Officer via their direct email and to attendancesupport@hillingdon.gov.uk

**** A new form should be sent in each time the allocated hours change, as a result of a review if not outlined in the initial timetable****

Key Information and Planning Considerations

Name of pupil & D.O.B:		Year group/class name:	
School:		LAC: SEN Registered / EHCP Agreed: CIN / CP:	Yes / No SEN / EHCP CIN / CP
Parent / Guardian Name: Relationship to Child:		Named School Professional: (Completing form) Position/ Job Title:	
Date when part-time education is proposed to commence:		Target date for return to full-time education (6-week duration)	
Date of first review meeting (During 6-week period)		Dates of subsequent review meetings (Dates or weekly intervals)	
Any Known Key Professionals: (Social Worker, Early Help, EHC, Virtual School, etc.)	Name & Position:	Named professional allocated to student: (Professional identified by pupil as a safe person or check-in)	Name & Position:

School Signature:

Parent Signature:

Planning of Part-time Timetable (PTTT)

Main reason for PTTT:

(Delete / Highlight as applicable)

1. Part of in-school support package
2. Medical Reasons (agreed in line with Medical Professionals)
3. Reintegration

Highlight barriers and expand how PTTT will benefit concerns?

How are the barriers to accessing full-time education being addressed by the school?

What are the pupil's views on the arrangements and how have these been taken into consideration?

(Where Applicable)

What are the parents'/carers' views on the arrangements and how have these been taken into consideration?

What measures have been put in place to ensure that the child does not fall behind with their learning?

What pastoral support is in place for the family to access when their child is not attending school?

I have consulted with key agencies involved with the child or family and obtained their views? (Social Worker, EHC co-ordinator etc.) Where an EHCP, CIN or CP plan is in place, you must gain approval and support from the EHC Coordinator and or Social Worker.

4. EHC Co- Ordinator Y N

5. Social Worker Y N

School Signature:

Parent Signature:

Attendance Coding – Please use code X, for non-compulsory school age pupils ONLY or C2 for compulsory school age pupils.

Weekly Timetable - No of Teaching Hours Allocated (Week 1 of 6)					Total Hours Per Week:	
<p>Include subjects taken when student is in school or receiving provision.</p> <p><i>When student is not expected in school highlight if work is to be completed off-site or any other therapies or interventions in place.</i></p> <p><i>Please state number of hours/minutes teaching time per morning/afternoon session per day.</i></p>	Example:	Monday	Tuesday	Wednesday	Thursday	Friday
	P1: 9-10am: Music at school	P1:	P1:	P1:	P1:	P1:
	P2: 10-11am: Maths at School	P2:	P2:	P2:	P2:	P2:
	P3: 11:20-12:20:1-1 intervention	P3:	P3:	P3:	P3:	P3:
	P4: 12:20-13:20- Online AP at home	P4:	P4:	P4:	P4:	P4:
P5: 14:00-15:00 N/A at Home	P5:	P5:	P5:	P5:	P5:	
Weekly Timetable - No of Teaching Hours Allocated (Week 2 of 6)					Total Hours per week:	
<p>Include subjects taken when student is in school or receiving provision.</p> <p><i>When student is not expected in school highlight if work is to be completed off-site or any other therapies or interventions in place.</i></p> <p><i>Please state number of hours/minutes teaching time per morning/afternoon session per day.</i></p>	Time:	Monday	Tuesday	Wednesday	Thursday	Friday
		P1:	P1:	P1:	P1:	P1:
		P2:	P2:	P2:	P2:	P2:
		P3:	P3:	P3:	P3:	P3:
		P4:	P4:	P4:	P4:	P4:
	P5:	P5:	P5:	P5:	P5:	

School Signature:

Parent Signature:

Attendance Coding – Please use code X, for non-compulsory school age pupils ONLY or C2 for compulsory school age pupils.

Weekly Timetable - No of Teaching Hours Allocated (Week 3 of 6) **Total Hours Per Week:**
(Week 1 for schools operating a 2-week timetable)

<p>Include subjects taken when student is in school or receiving provision.</p> <p><i>When student is not expected in school highlight if work is to be completed off-site or any other therapies or interventions in place.</i></p> <p><i>Please state number of hours/minutes teaching time per morning/afternoon session per day.</i></p>	Time	Monday	Tuesday	Wednesday	Thursday	Friday
		P1:	P1:	P1:	P1:	P1:
		P2:	P2:	P2:	P2:	P2:
		P3:	P3:	P3:	P3:	P3:
		P4:	P4:	P4:	P4:	P4:
		P5:	P5:	P5:	P5:	P5:

Weekly Timetable - No of Teaching Hours Allocated (Week 4 of 6) **Total Hours per week:**
(Week 2 for schools operating a 2-week timetable)

<p>Include subjects taken when student is in school or receiving provision.</p> <p><i>When student is not expected in school highlight if work is to be completed off-site or any other therapies or interventions in place.</i></p> <p><i>Please state number of hours/minutes teaching time per morning/afternoon session per day.</i></p>	Time	Monday	Tuesday	Wednesday	Thursday	Friday
		P1:	P1:	P1:	P1:	P1:
		P2:	P2:	P2:	P2:	P2:
		P3:	P3:	P3:	P3:	P3:
		P4:	P4:	P4:	P4:	P4:
		P5:	P5:	P5:	P5:	P5:

School Signature:

Parent Signature:

Attendance Coding – Please use code X, for non-compulsory school age pupils ONLY or C2 for compulsory school age pupils.

Weekly Timetable - No of Teaching Hours Allocated (Week 5 of 6)					Total Hours Per Week:	
<i>(Week 1 for schools operating a 2-week timetable)</i>						
<p>Include subjects taken when student is in school or receiving provision.</p> <p><i>When student is not expected in school highlight if work is to be completed off-site or any other therapies or interventions in place.</i></p> <p><i>Please state number of hours/minutes teaching time per morning/afternoon session per day.</i></p>	example	Monday	Tuesday	Wednesday	Thursday	Friday
		P1:	P1:	P1:	P1:	P1:
		P2:	P2:	P2:	P2:	P2:
		P3:	P3:	P3:	P3:	P3:
		P4:	P4:	P4:	P4:	P4:
	P5:	P5:	P5:	P5:	P5:	
Weekly Timetable - No of Teaching Hours Allocated (Week 6 of 6)					Total Hours per week:	
<i>(Week 2 for schools operating a 2-week timetable)</i>						
<p>Include subjects taken when student is in school or receiving provision.</p> <p><i>When student is not expected in school highlight if work is to be completed off-site or any other therapies or interventions in place.</i></p> <p><i>Please state number of hours/minutes teaching time per morning/afternoon session per day.</i></p>		Monday	Tuesday	Wednesday	Thursday	Friday
		P1:	P1:	P1:	P1:	P1:
		P2:	P2:	P2:	P2:	P2:
		P3:	P3:	P3:	P3:	P3:
		P4:	P4:	P4:	P4:	P4:
	P5:	P5:	P5:	P5:	P5:	

School Signature:

Parent Signature:

Parental Consent: *I hereby agree to the part-time timetable as outlined in the attached plan and proforma.*

Parent / Guardian Name:

Parent / Guardian Signature:

Student Name:

**Student Signature:
(Where applicable)**

**Named School Professional
completing form:**

School Signature:

Position / Job Title:

Date:

School Signature:

Parent Signature:

Checklist

Consideration	Yes	No	Not applicable
Has a written evaluation, indicating why there is a need for this pupil to have a part-time timetable, been completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has a risk assessment been completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have measures been put in place to mitigate any risks identified on the risk assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have evidence of parents'/carers' consent for the arrangements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there clear timescales on the plan that indicate a target date for the pupil to return to full-time education?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If the pupil has an EHCP, has a review taken place and have any relevant amendments been made to this?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the child have a social worker and, if so, are they aware?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the child looked-after and, if so, has the virtual headteacher/ officer been informed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have all other relevant parties been informed in line with national or local requirements (e.g. the local authority)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

School Signature:

Parent Signature:

Part-Time Timetable Risk Assessment

Name of pupil

Date completed

Considerations when implementing a part-time timetable

How this risk relates to this pupil

Anticipated level of risk for this pupil (circle as appropriate)

Measures to be taken to reduce any risk

Risk of the pupil falling behind with their learning		Low Medium High	
Risk of missing important educational opportunities/events		Low Medium High	
Risk of inadequate supervision when the child is not at school		Low Medium High	
Potential for increased safeguarding risks, e.g. exploitation, exposure to substance misuse, domestic abuse		Low Medium High	
[Insert additional risk factors you may consider]		Low Medium High	
[Insert additional risk factors you may consider]		Low Medium High	

School Signature:

Parent Signature:

[Insert additional risk factors you may consider]		Low Medium High	
[Insert additional risk factors you may consider]		Low Medium High	
[Insert additional risk factors you may consider]		Low Medium High	
Signed: (member of staff completing risk assessment)		Date:	
Signed: (Parent or Carer)		Date:	
Student Signature: (where applicable)		Date:	

School Signature:

Parent Signature: