



Part Time Timetable Student Plan:

Proforma
Re-Integration Plan
Re-Integration Plan Review
Checklist
Risk Assessment
Consent Form

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/carers (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).

When a pupil has been on a PTTT for 12 weeks (or following two submissions: initial and subsequent), a professionals' meeting must be held. Attendance Support and SEND (where an EHCP is in place) are required to attend. Where applicable, the Virtual School and the pupil's Social Worker must also be invited. This meeting is mandatory to review the pupil's progress, evaluate the effectiveness of the PTTT, and determine next steps. It ensures that the arrangement remains appropriate, legally compliant, and in the best interests of the pupil.

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

PTTT Submission: 1st ☐ 2nd ☐ 3rd ☐

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:

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 ☐
Views:
5. Social Worker Y ☐ N ☐
Views:

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

Weekly Timetable - Number of Teaching Hours Allocated (Week 1 of 6) (Week 2 for schools operating a 2-week timetable) Total Hours per week:						
<p><i>Include subjects taken when student is in school or receiving provision.</i></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: 9-10: Music at school	P1:	P1:	P1:	P1:	P1:
	P2:10-1: Maths at School	P2:	P2:	P2:	P2:	P2:
	P3: 11:20-12:20:1-1 intervention	P3:	P3:	P3:	P3:	P3:
	P4:12:20-3:20- Online AP at home	P4:	P4:	P4:	P4:	P4:
	P5: 2-3pm - at Home	P5:	P5:	P5:	P5:	P5:
Weekly Timetable - No of Teaching Hours Allocated (Week 2 of 6) (Week 2 for schools operating a 2-week timetable) Total Hours per week:						
<p><i>Include subjects taken when student is in school or receiving provision.</i></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:
Parent Signature:			School Signature:			Date:

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

Weekly Timetable - Number of Teaching Hours Allocated (Week 3 of 6) <small>(Week 2 for schools operating a 2-week timetable)</small> Total Hours per week:						
<p><i>Include subjects taken when student is in school or receiving provision.</i></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: 9-10: Music at school	P1:	P1:	P1:	P1:	P1:
	P2: 10-1: Maths at School	P2:	P2:	P2:	P2:	P2:
	P3: 11:20-12:20: 1-1 intervention	P3:	P3:	P3:	P3:	P3:
	P4: 12:20-3:20- Online AP at home	P4:	P4:	P4:	P4:	P4:
	P5: 2-3pm - at Home	P5:	P5:	P5:	P5:	P5:
Weekly Timetable - No of Teaching Hours Allocated (Week 4 of 6) <small>(Week 2 for schools operating a 2-week timetable)</small> Total Hours per week:						
<p><i>Include subjects taken when student is in school or receiving provision.</i></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:
Parent Signature:			School Signature:			Date:

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

Weekly Timetable - Number of Teaching Hours Allocated (Week 5 of 6) (Week 2 for schools operating a 2-week timetable)							Total Hours per week:
<p><i>Include subjects taken when student is in school or receiving provision.</i></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: 9-10: Music at school	P1:	P1:	P1:	P1:	P1:	
	P2:10-1: Maths at School	P2:	P2:	P2:	P2:	P2:	
	P3: 11:20-12:20:1-1 intervention	P3:	P3:	P3:	P3:	P3:	
	P4:12:20-3:20- Online AP at home	P4:	P4:	P4:	P4:	P4:	
	P5: 2-3pm - at Home	P5:	P5:	P5:	P5:	P5:	
Weekly Timetable - No of Teaching Hours Allocated (Week 6 of 6) (Week 2 for schools operating a 2-week timetable)							Total Hours per week:
<p><i>Include subjects taken when student is in school or receiving provision.</i></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:	
Parent Signature:			School Signature:			Date:	

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

Who will the pupil be with when not at school?

Low Medium High

Where will the pupil be when not at school?

Low Medium High

Which school representative will be responsible for the pupil during school hours when not at school? (This

Low Medium High

includes regular check-ins for safeguarding)			
Potential for increased safeguarding risks, e.g. exploitation, exposure to substance misuse, domestic abuse		Low Medium High	
Is there a risk the Pupil will engage in criminal activity?		Low Medium High	
Is there a risk of substance misuse?		Low Medium High	
Is there a risk of Child Sexual Exploitation?		Low Medium High	
Is there a risk of exploitation or radicalisation?		Low Medium High	
Other:		Low Medium High	
Signed: (member of staff completing risk assessment)		Date:	Do attendees agree to the part-time timetable? (if a risk is identified and measures cannot be taken to mitigate them, then a part-time timetable should not be considered) Yes <input type="checkbox"/> No <input type="checkbox"/>
Signed: (Parent or Carer)		Date:	
Student Signature: (where applicable)		Date:	

Part-Time Timetable Re-Integration Plan

Pupil		D.O.B:		Year Group	
School		Diagnosis			
Supported Provision/s	<input type="checkbox"/> SEN Support <input type="checkbox"/> EHCP <input type="checkbox"/> No SEN				
Agencies Involved	<input type="checkbox"/> SAS <input type="checkbox"/> EP <input type="checkbox"/> SALT <input type="checkbox"/> Early Help <input type="checkbox"/> LAC <input type="checkbox"/> CIN <input type="checkbox"/> CP <input type="checkbox"/> EHC-Coordinator <input type="checkbox"/> Other – Please name:				
Start date of PTTT		Notes:			
Current Attendance					
Hillingdon Attendance Support Team informed of PTTT	Proforma <input type="checkbox"/> Yes <input type="checkbox"/> No Leap <input type="checkbox"/> Yes <input type="checkbox"/> No				
Date of Plan					
Reasons For The Part-Time Timetable: <i>Please tick all that apply. NB: A part-time timetable should not be used to manage a pupil's behaviour.</i>					
<input type="checkbox"/> Medical Needs		<input type="checkbox"/> Plan to address poor attendance			
<input type="checkbox"/> Mental Health Needs		<input type="checkbox"/> Pregnant / Young Mother			
<input type="checkbox"/> Delayed Reception Intake					

Pupil Information – School and Home

Strengths / Interests:		Preferred Activities:	
What is going well? (Brief notes)	SCHOOL	HOME	
What are we concerned about? What are the barriers to school attendance? (brief notes)			
What Strategies/ provision have been put in place?			
Key Adults:			

Re-integration Plan			
Long-term Outcome:			
Action Steps	Consideration of the Pupils developmental needs (For example, sense of belonging and self-esteem, emotional and sensory needs, coping strategies, communication and social skills and access to learning and the curriculum)	Person/s Responsible:	By When:
Step 1			
Step 2			
Step 3			
Step 4			
Step 5			
Step 6			

OTHER (for example, changes to the environment, staffing, drop off and pick up)

		Person/s Responsible:	By When:
Date of review:		Proposed end date of PTTT:	

Part-Time Timetable Re-Integration Plan – REVIEW # _____

Pupil		D.O.B		Year Group	
School		Diagnosis			
Supportive Provision/s	<input type="checkbox"/> SEN Support <input type="checkbox"/> EHCP <input type="checkbox"/> IF <input type="checkbox"/> EYIF <input type="checkbox"/> No SEN				
Agencies Involved	<input type="checkbox"/> SAS <input type="checkbox"/> EP <input type="checkbox"/> SALT <input type="checkbox"/> EYSEN <input type="checkbox"/> Early Help/ Social Care <input type="checkbox"/> EHC-Coordinator <input type="checkbox"/> Other – Please name:				
Start date of PTTT		Review Meeting Attended by:			
Current Attendance					
Hillingdon AST updated on changes to PTTT	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Date of Review					

Re-integration Plan – REVIEW			
Long-term Outcome:			
Action Steps	Consideration of the Pupils developmental needs (For example, sense of belonging and self-esteem, emotional and sensory needs, coping strategies, communication and social skills and access to learning and the curriculum)	Person/s Responsible:	By When:
Step 1			
Step 2			
Step 3			
Step 4			
Step 5			
Step 6			

OTHER			
(for example, changes to the environment, staffing, drop off and pick up)			
		Person/s Responsible:	By When:
Date of next review:		Proposed end date of PTTT:	

Re-integration Plan – REVIEW – AMENDED /NEW Action Steps

Long-term Outcome:			
Action Steps	Consideration of the Pupils developmental needs (For example, sense of belonging and self-esteem, emotional and sensory needs, coping strategies, communication and social skills and access to learning and the curriculum)	Person/s Responsible:	By When:
Step 1			
Step 2			
Step 3			
Step 4			
Step 5			
Step 6			

Amended/ new action OTHER			
(for example, changes to the environment, staffing, drop off and pick up)			
		Person/s Responsible:	By When:
Date of next review:		Proposed end date of PTTT:	

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:

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"/>

