

# The Role of the School in Supporting the Education of Children in Public Care

Felicity Fletcher-Campbell, Tamsin Archer and Kathryn Tomlinson  
National Foundation for Educational Research

**Research Report**

**No 498**

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Supporting the Education of  
Children in Public Care***

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ISBN 1 84478 142 9

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## **Acknowledgements**

We are most grateful to all those in local authorities and schools who kindly gave some of their valuable time to share their perceptions and experiences of supporting children and young people in public care through their education. We should also like to thank the project steering group for their insightful comments and NFER colleagues for their assistance.

# Executive Summary

## Introduction

The problems surrounding the education of children in public care are well researched and documented in both research and government literature. It is also an area where there is remarkable and rare consensus among researchers, policy makers, practitioners and importantly, young people themselves, about the central issues. These issues include low attainment and expectations, high mobility and exclusion rates, as well as the need to develop effective multi-agency working to support young people. The *Guidance on the Education of Children and Young People in Public Care* (DfEE and DoH, 2000) highlighted these issues and provided guidance to help local authorities in their role as ‘corporate parents’. This included schools identifying a ‘designated teacher’ to act as an advocate for the children in public care and the development of personal education plans for this cohort.

The impact of the *Guidance* has not been evaluated and the current research aims to highlight examples of success, focusing on support structures that schools have developed for the stability of and the provision for the education of children in public care. In particular, it focuses on the introduction of the role of the designated teacher. This research also establishes the context within which schools are working to support young people in public care, particularly with regard to key transitional points in their lives, and provision for those with additional educational needs.

## Aims of the Research

The overall purpose of the research was to identify best practice within schools in providing children in public care with the support they need to fulfil their potential. Specifically, the aims were as follows:

- to provide in-depth good practice examples of effective strategies that schools are using to support the education of children in public care at key points in their lives, including the point at which they enter care, change school and approach GCSE exams
- to identify which strategies are most effective in raising the attainment of children in public care and how and when those strategies are used to best effect

- to identify which strategies are most effective in reducing the levels of exclusion, truancy and bullying among this group of young people, and how and when these strategies are used to best effect
- to examine the particular obstacles to educational attainment for children in public care with special educational needs, mental health needs and English as an additional language, and identify those strategies that ensure needs are identified and addressed at an early stage.

## **Methodology**

The research was undertaken in three strands. The first strand involved a review of evaluative literature on the education of children in public care since 1998, using the extensive review undertaken by the Scottish Council for Research in Education (Borland *et al.*, 1998) as a foundation document. This review was used to inform the interview schedules developed for strands two and three. The second strand involved interviews in eight local authorities, known by several sources to have relatively advanced practice concerning the education of children in public care. The local authorities represented a spread in terms of geography, authority type and size. Interviews were conducted with the named person (or people) with responsibility for the education of children in public care, in order to explore the local authority's approach to the education of these children and young people and to establish the context in which schools were working, including the resources upon which they could draw. The third strand involved interviews in 20 schools from across the eight local authorities. The schools were known by the local authority interviewees to provide positive educational experiences for the pupils in public care. There were seven primary phase schools, nine secondary phase schools, two special schools and two pupil referral units. Over 100 interviews were conducted in the schools, with the designated teachers for children in public care, headteachers, special educational needs coordinators (SENCOs), and a range of school staff working with the pupils in public care. Interviews were also conducted with a sample of pupils in public care attending these schools and their carers.

## **Key Findings – The Role of the Local Authority**

### **Responsibility for Local Authority Provision**

- Local authority contacts were mostly based in education departments but often had had some experience working in social services settings, which was felt to be an advantage in terms of collaborative work and communication.
- There were two identifiable organisational models for attending to the educational needs of young people in public care: the discrete model (or segregated approach), by which a dedicated team is responsible for a range of functions such as monitoring and direct services and the distributed model (or inclusive approach), by which a small number of people coordinate responses and maintain an overview of interventions but direct services and other functions such as monitoring are provided by other services and embedded within ‘normal’ provision.

### **Local Authority Policy**

- In most of the case study authorities there was a discrete policy document on the education of children in public care: in a few cases this had been subject to review and revision and had been disseminated to all relevant personnel.
- In some cases, practitioners did not perceive that they had a specific policy for this group but referred to well-used and understood guidance documents.
- Increasingly, policy relating to the education of children in public care was distributed among a range of other policy documents within education, the local authority, or the region.

### **Personal Education Plans (PEPs)**

- There was agreement that preparing PEPs for each young person in public care had not been an easy task and that ensuring that such documents were in place was only the starting point: they also had to be appropriate for the young person and helpful for those working with him/her.
- The preparation of PEPs was inhibited by high staff turnover in social services and the constant need to train new staff; and the sheer volume of these documents where the number of young people in public care was large.

- There was evidence of sound development in the design of PEPs, with the inclusion of more useful information and a more ‘user-friendly’ format.
- There was also evidence that the PEPs were used as an opportunity to gather the views of young people.
- In general, PEPs were seen as a strategic activity strengthening corporate parenting.

### **Specific Initiatives to Support the Education of Children in Public Care**

- Local authority interviewees identified a number of national initiatives which benefited young people in public care directly or indirectly. These included: Excellence in Cities, Education Action Zones, Behaviour Improvement Plans, Connexions, Playing for Success, Health Action Zones, Lifelong Learning Partnerships and Quality Protects. Within these, singled out for particular mention were family literacy schemes and information technology provision. Non-government organisation initiatives included the Paul Hamlyn Foundation Right to Read grant.
- At a local level, school transfer schemes, key stage 3 programmes, homework and revision support, mentoring and basic skills support were referred to as valuable.

### **Transition Planning and Admissions**

- All case study authorities recognised the particular difficulties encountered by children in public care moving from one school to another, whether at a ‘normal’ time or mid-term/year.
- Operating the admissions priority given to children in public care relies on the existence of in-care status data, which was not always available at the admissions stage.
- Several of the authorities had discrete programmes for Year 6 pupils while others supported the carers (providing information).
- Some authorities had programmes for pupils at key stage 4, particularly by way of career interviews and additional support in planning for leaving school (which often coincided with leaving care, thus making this transition more difficult for this cohort).

- The exchange of information regarding potential changes of care placement so that educational placements could be properly planned, was considered a critical element in effective provision.

### **Post-16 Provision**

- At 16 responsibility for young people in public care usually switched to the Leaving Care team, thus providing potential difficulties as regards continuity.
- Some authorities had discrete provision to support post-16 education (financial and incentive payments) but most considered that what was available was inadequate.

### **Exclusions**

- All authorities had access to discrete data on the exclusion from school of young people in public care.
- Similarly, most authorities tried to minimise the use of exclusion for this cohort, as they were aware of its particularly deleterious effect; various imaginative and effective preventative strategies were in place in some authorities.
- In most cases there was no discrete provision for young people in public care who were excluded although in some cases there was prioritised access to pupil referral units.
- Reintegration strategies were often more specialised, involving a range of people as appropriate to the young person concerned.
- Where schools had effective reintegration mechanisms, designed with the individual's needs in mind, additional support for a young person in public care was not generally needed.

### **Attendance and Truancy**

- The attendance of young people in public care was monitored discretely although the data was not necessarily monitored as frequently as would be required to take preventative action on non-attendance.
- Four authorities had dedicated educational welfare officer provision for this cohort.

- Some authorities had regular multi-agency meetings to plan strategically for a young person who was truanting or refusing school.

### **Bullying**

- While children in public care were often acknowledged, within general documentation, to be particularly vulnerable to bullying, no authority visited had discrete strategies to counter this bullying although some indicated ways of heightening awareness.
- Teachers suggested that children in public care were prone to bullying (as victim or perpetrator) on account of low self-esteem rather than because of the fact that they were in public care.

### **Celebrating Achievement**

- In the case study authorities, the achievement of children in public care was celebrated either in large-scale, high profile events, or individually, as appropriate to particular cases.
- It was generally acknowledged that the celebration should be of all achievement, including ‘value-added’ and not just of academic attainment as the latter might ignore progress which was remarkable for an individual but not noteworthy according to public ‘norms’.

### **Funding**

- Money to fund discrete support workers was variously acquired through LEA core funding, DfES Standards Fund and Quality Protects money with other sources being tapped locally for particular functions (e.g. ICT training for foster carers provided by a college of further education) or special purposes (e.g. books, computers).
- Most funding was related to specific projects or initiatives and, generally, there was relatively little flexibility to respond to individual needs other than in social workers’ limited discretionary budget.
- Children in public care benefited from the provision of other services, particularly in distributed models of responsibility.

- Additional and special educational needs, and mental health needs, were provided for through regular routes and budgets, though there was sometimes dedicated time (e.g. from an educational or clinical psychologist).

### **Multi-agency Working**

- All those in teams for the education of children in public care worked extensively with other professionals – in some authorities, the teams were multi-disciplinary.
- There were formal structures for liaison at functional and strategic levels, sometimes for all vulnerable young people and sometimes discretely for children in public care.
- In several authorities there was an identified panel overseeing provision for children in public care (operating like a steering group).
- There was rarely a shared database but data were shared by a range of methodologies involving different personnel and services within departments; there was concern about the quality of the resultant data, particularly in terms of accuracy.

### **Local Authority Guidance Materials**

- All case study authorities provided a range of written material relating to the education of children in public care.
- One authority had produced a governors' toolkit.

### **Successes**

- Several of the interviewees commented on improved joint working which was often related to cross-authority commitment to the role of the corporate parent.
- Some of the interviewees attributed these successes to the model of provision for children in public care within their authority.

### **Challenges**

- The following were identified by interviewees as challenges:
  - developing effective and helpful means of defining and measuring 'success' and 'value-added'

- ensuring that all young people in public care had an appropriate educational placement
- creating effective mechanisms for the distribution of information that was timely
- making adequate preparation for, rather than reacting to, placement moves
- ensuring that all eligible young people in public care are entered for end of key stage assessment and GCSE/GNVQ
- maintaining a balance between proactive and reactive work
- managing staff changes at all levels
- managing the perceived slow rate of change within services
- developing strategies to ensure that the corporate parenting agenda was corporately, rather than personality, driven.

## **Key Findings – School Policy and Provision**

### **Policy**

- In some cases, schools claimed that their mission statement was sufficiently inclusive to meet the needs of pupils in public care.
- It was considered that it was best if policy is formulated following good practice;
- In some cases, schools denied that they had ‘policy’ but had, in effect, either excellent guidance documents operating at the functional level or had other documents which accommodated the needs of children in public care.

### **Admissions**

- Children in public care were rarely prioritised within individual schools’ admissions policies except where local authorities stipulated that this be a criterion.
- Some schools said that they prioritised when oversubscribed, if the child was obviously in need.

### **Awareness of Policy among Staff**

- Senior staff in schools were generally familiar with the statutory position and the school’s responsibilities; other staff were not but were familiar with school-based practice and procedures.

- Designated teachers had usually held awareness-raising sessions for colleagues.
- Some SENCOs and headteachers had attended specific training sessions in the authority with the designated teacher.
- A lot of local authority training was linked to other training regarding vulnerable children or child protection.

### **Identified Governors**

- Some of the case study schools had allocated specific responsibility for pupils in public care to an identified governor but the strategy was too new for any effects to have been noted; some schools were doubtful that effects would have been beneficial.

### **National Initiatives**

- There was evidence of the strategic use of opportunities afforded by national initiatives to benefit children in public care. Many references were made to the use of learning mentors.
- The list of specific strategies was almost identical to that cited by local authority officers, such as school transfer schemes and peer mentoring.

### **Funding**

- Locally, there was some discretionary money available via the education of children in public care (ECPC) teams.

### **In-School Support**

- Case study schools all had well developed pastoral structures available for all pupils regardless of whether their support needs were long-term or transient; there was thus a firm and well distributed structure of support and guidance which meant that individual needs could be met and children could exercise their own preferences as to whom to turn to for support.
- Schools monitored support needs and their ability to meet these and turned to external sources of support as necessary; however, in most cases, it was commented that external support (for example, educational psychology time) was limited.

## **Identifying Individual Needs**

- Initial visits, previous records and PEPs were all used to identify the particular profile of needs of individual pupils in public care.
- Sensitive information was informative but usually distributed on a ‘need to know’ basis within schools.

## **The Management of Transitions**

- Schools went to considerable lengths to ease school transfer, particularly where this occurred at non-standard times within the academic year or school term: emphasis was put on appropriate placement in tutor groups and initial support to help the young person settle in socially and academically.

## **Meeting Needs**

- There was evidence that special educational needs, additional educational needs, additional language needs and mental health needs were all addressed through regular support networks available to all pupils; however, schools often prioritised the needs of this cohort and/or boosted normal levels of support.
- All services stressed the limited nature of support – thus this cohort may not have been receiving the optimal level of support for their particular needs.

## **Exclusions**

- Most schools pursued a positive policy of not excluding pupils in public care on the basis of the deleterious effect that this might have on self-esteem and care placements.
- Where exclusions were necessary – for the child’s safety, for example – efforts were made to secure more appropriate provision.
- Schools made efforts to reintegrate effectively and in some cases supervised the child during the period of exclusion in order to reduce the burden on carers.
- Emphasis in the case study schools was on prevention.

## **Attendance and Truancy**

- The attendance of children in public care was monitored in the case study schools and rapid response to non-attendance commonly made.

- It was commented that the attendance of this cohort could, in fact, be higher than the school average because of better tracking mechanisms and the commitment of carers.

### **Bullying**

- Bullying, whether being a victim or a perpetrator, was generally considered to be related to the child's general condition (for example, low self-esteem) rather than directly to his/her legal status of being in public care.
- Schools operated a range of strategies for addressing problems of bullying: most of these were directed to all incidents of bullying rather than being specific to children in public care.
- Most children in public care interviewed felt that they were bullied for a reason other than being in public care (for example, because of appearance); in one case, staff considered that a pupil made herself open to bullying by demanding different treatment from other pupils because she was in public care.

### **Raising the Attainment of Pupils in Public Care**

- Normal monitoring mechanisms were in operation for the academic progress of pupils in public care.
- Designated teachers were often very familiar with the progress of pupils and were able to relate this progress to experiences in public care.
- The cohort was generally entered for public examinations.
- Pupils in public care were often prioritised for careers advice or were given enhanced support for post-16 decisions.

### **Support Activities**

- There was considerable variability in the degree to which children in public care participated in activities outside the regular curriculum: some care-related practices, such as taxiing to school, militated against involvement.
- The intervention of the designated teacher could ensure that pupils were involved in relevant activities.

## **Personal Education Plans**

- At school level, there were difficulties both in ensuring that PEPs were available for all pupils in public care and in separating out advice and support in various plans (e.g. individual education plans for pupils with special educational needs); some interviewees felt that plans could be repetitive and/or just a paper exercise.
- At best, the preparation of the PEP involved a range of people involved with the young person and took the latter's views seriously.
- Only some secondary age pupils were aware of their PEPs; most of these felt that they were useful to record their progress at school.

## **Successes**

- All interviewees considered it important to celebrate the successes of young people in public care and that this celebration should extend to a wide range of achievement and include the concept of 'value-added' and individual progress from a previous point relevant to the young person.

## **Challenges**

- The principal challenge in dealing with children in public care was identified as managing their challenging behaviour.
- There was good awareness that challenging behaviour arose from the young people's previous traumatic experiences, some of which might be known to the school, while other experiences (for example, those of asylum seekers) might only be guessed at.
- School staff found it a challenge making allowances for unacceptable behaviour while giving the right messages to other pupils: this was considered best addressed through discussion of individual differences which affected all pupils regardless of background or abilities.
- The forging of strong relationships with pupils causing concern so that the pupils knew that schools were prepared to support them was considered to be one of the most effective ways of addressing undesirable behaviour.
- Other challenges were identified as lack of corporate support, lack of financial resources, the pressures of adverse external forces.

## **Key Findings – The Role of the Designated Teacher**

### **Profile of Post-holders**

- Most designated teachers had been in post for two to three years though some had reportedly been doing the job for longer in schools where the education of children in public care had been identified as one needing coordination.
- In primary schools, the headteacher commonly took responsibility; in secondary schools, it was usually a member of the senior management team – generally not the special educational needs coordinator.
- In some schools, responsibility was shared to ensure continuity for pupils if one person was unavailable.
- Relevant skills were perceived as: external liaison, pastoral care, and working with disaffected pupils.

### **Training**

- Some local authority training had been delivered to staff from education and social services together.
- Training had generally been available but it was not always possible for all designated teachers to attend and it had not been repeated for those teachers or for newly appointed staff.
- Half the designated teachers interviewed had had no specific training but many relevant issues had been covered in child protection training which they had attended.
- Post-holders considered that they had benefited, or would benefit, from specific training either as a standalone session or within inclusion training.
- All designated teachers interviewed were confident that they knew where to go for help if needed.

### **Functions**

- Designated teachers perceived themselves as responsible for:
  - liaison with other professionals and carers
  - advocacy for the young people
  - maintaining an overview of the young people's progress
  - ensuring the preparation and maintenance of PEPs

- And needing:
  - good relations with staff colleagues
  - good relations with senior managers within education and social services.
- Direct work with young people varied depending on context and appropriateness: generally designated teachers in primary schools had more direct contact with the relevant children than did colleagues in secondary schools, where responsibilities were more dispersed.

### **Others' Perception of the Designated Teachers**

- Headteachers in the case study schools had a very good idea of the role and responsibilities of the designated teacher and of how they needed to support the post-holder.
- Other staff were not always so clear especially where responsibilities were distributed between senior managers.

### **Pupils' Awareness of the Designated Teacher**

- Several pupils interviewed were not aware of the role of the designated teacher but this was not an issue as all pupils said that someone with whom they were comfortable was available to them if they needed support; in some cases, this person was, in fact, the designated teacher, indicating the post-holder's approachability.

### **Carers' Awareness of the Designated Teacher**

- Carers interviewed were aware of the designated teacher but not necessarily on account of the post held: rather, because that person had been particularly supportive or involved with the young person in public care.

### **The Designated Teacher's Multi-agency Role**

- All designated teachers engaged in multi-professional dialogue but with various responses – for some it was easier than for others.
- Some professionals were reported to provide limited support so that pupils' interests were not pursued as rigorously as they might have been.

- There was acknowledgement of the enormous organisational pressures under which social workers operated but, equally, recognition that these often adversely affected young people in public care.
- The variability of practice among social workers was commonly commented on.
- Designated teachers recognised the importance of information exchange but noted that this could draw undue attention to a young person if pursued unnecessarily.

### **Designated Teachers as a Corporate Group**

- There was little evidence that designated teachers commonly met regularly as a discrete group nor that they regarded other post-holders as a support group; contact tended to be limited to transfer events.

### **Designated Teachers' Relationships with Carers**

- There was evidence that most designated teachers made great efforts to establish effective relations with carers and to stress that the school was interested in making the care placement work; however, responses varied.
- Where relationships were strong, designated teachers took advantage of the opportunity to be involved with forward planning of a young person's imminent placement move.

# 1 Introduction

## 1.1 Background

The problems surrounding the education of children in public care are well researched and documented in both research and government literature (see chapter 2). It is also an area where there is remarkable and rare consensus among researchers, policy makers, practitioners and importantly, young people themselves, about the central issues. These issues include low attainment and expectations, high mobility and exclusion rates, as well as the need to develop effective multi-agency working to support young people. The *Guidance on the Education of Children and Young People in Public Care* (DfEE and DoH, 2000) highlighted these issues and provided guidance to help local authorities in their role as ‘corporate parents’. This included schools identifying a ‘designated teacher’ to act as an advocate for the children in public care and the development of personal education plans for this cohort.

The impact of the *Guidance* has not been evaluated and the current research aims to highlight examples of success, focusing on support structures that schools have developed for the stability of, and the provision for, the education of children in public care. In particular, it focuses on the introduction of the role of the designated teacher. This research also establishes the context within which schools are working to support young people in public care, particularly with regard to key transitional points in their lives, and provision for those with additional educational needs.

## 1.2 Aims of Research

The overall purpose of the research was to identify best practice within schools in providing children in public care with the support they need to fulfil their potential. Specifically, the aims were as follows:

- to provide in-depth good practice examples of effective strategies which schools are using to support the education of children in public care at key points in their lives, including the point at which they enter care, change school and approach GCSE exams

- to identify which strategies are most effective in raising the attainment of children in public care and how and when those strategies are used to best effect
- to identify which strategies are most effective in reducing the levels of exclusion, truancy and bullying among this group of young people, and how and when these strategies are used to best effect
- to examine the particular obstacles to educational attainment for children in public care with special educational needs, mental health needs, and English as an additional language, and identify those strategies that ensure needs are identified and addressed at an early stage.

### **1.3 Methodology**

There were three strands to the research: a review of the literature, interviews in local authorities and case studies in a sample of schools. The literature review focused on evaluative literature on the education of children in public care since 1998, using the extensive review undertaken by staff at the Scottish Council for Research in Education (Borland *et al.*, 1998) as a foundation document. The literature review was used to inform the interview schedules that were developed for use in local authorities and schools. Interviews were conducted in eight local authorities, known by several sources to have relatively advanced practice concerning the education of children in public care. For such research, it was considered to be most efficient and effective to work with practitioners who were in the best position to identify good practice. The local authorities represented a spread in terms of geography, authority type, and size. Interviews were conducted with the named person (or people) with responsibility for the education of children in public care during the spring term 2003, in order to explore the local authority's approach to the education of children in public care and to establish the context in which schools were working, including the resources upon which they could draw.

The local authority personnel were also invited to name schools within their authority that they felt had relatively advanced practice concerning the education of children in public care. Each local authority recommended between five and 18 schools: the number in each case reflected size of authority and the officer's knowledge of the relevant schools. In total 73 schools were recommended, including mainstream

primary and secondary schools, special schools and pupil referral units. The research team then selected 20 schools from the list, which represented a range in school phase, size, location, types and levels of performance. The sample included foundation schools, schools within a selective system, specialist schools, Beacon schools, Excellence in Cities schools, rural schools and single-sex schools. These schools were invited to participate in the research and where one declined the offer, another school with similar characteristics was selected from the list. A total of 20 schools participated in this research from across the eight local authorities. They consisted of seven primary phase, nine secondary phase, two special schools (one of which was residential) and two pupil referral units. Over 100 interviews were conducted in the schools, with a range of personnel including the designated teachers for children in public care, headteachers, deputy headteachers, heads of year, class teachers, special educational needs coordinators (SENCOs), teaching assistants, school nurses, education welfare officers (EWOs), social workers and school office staff. Interviews were also conducted with a sample of pupils in public care attending these schools and their carers. In addition to the interviews, documentation was also collected, where available, at local authority and school level. This included copies of policies relating to the education of children in public care and templates for personal education plans (PEPs). It should be noted that this research was predominantly based on the views and experiences of education personnel and was not designed to represent the views of social care staff.

## **1.4 Structure of the Report**

Chapter 2 reviews the literature in the area of the education of children in public care. Chapter 3 focuses on the support for the education of children in public care at local authority level. Chapter 4 describes the policies and provision for children in public care from the schools' view. Chapter 5 examines the role of the designated teacher and multi-agency working, drawing on data from the local authorities and the schools. Finally, chapter 6 summarises the key findings and presents issues for consideration for schools to review their policies and practice regarding the education of children in public care.

Throughout the report, reference is made to the 'ECPC team' (education of children in public care) which refers to an individual or team within the local authority with responsibility for the education of children in public care.

## 2 Literature Review

### 2.1 The Education of Children in Public Care

It has been argued that *'the dismal performance of children in public care is perhaps the longest-running scandal of our education system'* (Slater, 2002, p. 24). Despite children in public care coming overwhelmingly from low income backgrounds and conditions of abuse and deprivation, the experience of care seems to compound rather than ameliorate early disadvantages; indeed being in public care has been described as an *'educational hazard'* (Khan, 1999; Pearce and Hillman, 1998). And the education system has also been shown to worsen the experience of care. Borland *et al.* report that many children *'paint a picture of school experience adding to the turmoil of coming into care, rather than being a potential source of stability'* (Borland *et al.*, 1998, p. 56).

Despite this picture, there is remarkable consistency in the literature on the education of young people in public care regarding the issues faced by those seeking to improve the educational experience. The problems include low attainment, high mobility and exclusion rates, low expectations and poor inter-professional collaboration (Fletcher-Campbell, 1997; Ofsted, 2001). It is notable that, although case study and anecdotal evidence is strong, collective data at local and national level are weak and until recently have been unavailable. Even in authorities with some of the most developed data-tracking practices, the data sets are far from satisfactory (Fletcher-Campbell and Archer, 2003), although it is notable in this context that the DfES have included an indicator for children in public care in the Pupil Level Annual School Census (PLASC).

This literature review briefly surveys the Government's recent policy responses to the problems facing the education of children in public care, before looking in more detail at how these have been implemented and the issues that remain pertinent yet insufficiently examined. It moves on to look at literature specifically concerned with the school, care and local authority environments, before concluding by highlighting the issues that will be addressed by the present research.

The review is based on literature published in the United Kingdom over the past five years, since 1997, in order to build upon the work done by Borland *et al.* in their *Education and Care Away from Home: a Review of Research, Policy and Practice* (1998). The literature was selected from the results of searches of the British Education Index, Current Educational Research in the UK database, NFER's library catalogue and NFER's reference database, using the keywords 'children in public care' or 'looked after children' and 'education'. Although the cut off for the publications was taken as the end of 2002, two significant documents were published in September 2003: the Social Exclusion Unit's report *A Better Education for Children in Care* (SEU, 2003a) and the Government's Green Paper, *Every Child Matters* (GB. Parliament. HoC, 2003). Given the importance of these publications for the education of this cohort, they have been included in this literature review, although the fieldwork was conducted before the publication of these key documents.

It is interesting to note that the majority of the issues which emerged in the first decade of work in the area, since Jackson's (1987) seminal review of the literature that demonstrated how neglected the area was, have persisted up to the present. While there have been significant developments and improvements (for a range of these, see Jackson, 2001), the major challenges have remained, although there is an increased and greatly welcomed, focus on the outcomes of education for this cohort of young people. This was missing in the earlier studies which were concerned with the prior task of identifying what was problematic in the education of young people in the care system.

## **2.2 Government Policy**

Utting's influential report on abuse in children's homes contains few specific recommendations on the education of these children, although it reported '*rigorous representations about the inadequacies*' of education services (Utting *et al.*, 1997, p. 25). McParlin expresses concerns that while Utting's *Children's Safeguards Review* has been enormously useful and is a foundation upon which to build, there are questions as to how the recommendations will be put into practice (McParlin, 1999).

In response to the Utting report, the Government established Quality Protects to reform and regenerate services for children and particularly children in public care. An analysis of the Quality Protects Management Plans notes that most local authorities recognise the inadequacy of baseline data on the educational needs and attainment of children in public care (Khan, 1999). And Slater reports that within weeks of local authorities setting their first targets for attainment of children in public care, a survey revealed that two thirds did not know what results those children achieved (Slater, 2002).

The policy context in which this research was carried out was that of the then Department for Education and Employment and Department of Health's joint *Guidance on the Education of Children and Young People in Public Care* (DfEE and DoH, 2000). This consolidates some of the practices suggested in Circular 13/94 (DfE and DoH, 1994), including the identification of a designated teacher for children in public care in every school and the provision of personal education plans for every child. It also limits to twenty days the length of time a child in public care can be without a school place and requires local authorities to establish and maintain a protocol on the inter-agency sharing of relevant data concerning children in public care (DfEE and DoH, 2000).

The role of *designated teacher* was first introduced in Circular 13/94, which states:

*Head teachers in primary schools and year tutors in secondary schools are in a position to hold a watching brief for all children being looked after in their school or year respectively, to provide advice and guidance in relation to individual children, and where necessary to coordinate the pastoral needs of the children concerned* (DfE and DoH, 1994).

The joint *Guidance* (DfEE and DoH, 2000) notes that the identification of people with a 'watching brief' for this cohort had not been widespread. Additionally, it notes that, while there was evidence that schools with inclusive policies, robust pastoral systems and clear lines of communication with outside agencies are more likely to offer effective support for any child who is 'different', this does not provide sufficient safeguard for children in public care. *'Having a designated teacher, who understands*

*about care and impact of care upon education, in each school is critical to making joint working a reality.'*

The *Guidance* therefore required that:

*Schools should designate a teacher to act as a resource and advocate for children and young people in public care. LEAs and SSDs should coordinate suitable training for them and maintain an up-to-date list of designated teachers in schools in their area (DfEE and DoH, 2000, p. 33).*

These new requirements were cautiously but hopefully anticipated by professionals. Fletcher notes that much of the pressure for revised guidance came from within local authorities, demonstrating a vested interest in '*getting it right*' for children in public care (Fletcher, 1999). A recently completed study into the achievement at key stage 4 of young people in public care indicates that even local authorities known to be relatively advanced in their collection of data have considerable difficulties compiling profiles of children in their care (Fletcher-Campbell and Archer, 2003). The application of other aspects of the *Guidance* has yet to be evaluated and it is hoped that, at least in the case of designated teachers, the present project being undertaken by the NFER for the DfES will provide an indication of their success.

Since the majority of this review was undertaken, in September 2003 the Government published two major documents that should have a major impact on the education of children in public care. The Social Exclusion Unit's report, *A Better Education for Children in Care*, examines the factors affecting children's education and makes recommendations on how best to raise the educational attainment of children in public care (SEU, 2003a). It identifies the five key reasons why children in public care underachieve in education as being: instability of these young peoples' lives; too much time spent out of school; insufficient help with education; insufficient support and encouragement for education in the care environment and a need for more support with their emotional, mental or physical health and wellbeing (p. 20). Progress is said to have been hindered by the following underlying problems: social care staff capacity; weak management and leadership; short of resources and poor planning; systems and structures interfering with joint working; negative attitudes among

professionals and society generally and too much bureaucracy (p. 51). While, as noted, these issues ‘*will be familiar to those working with children in care*’ (p. 51), this publication’s important contribution is its extensive recommendations for action at central and local government levels and detailed strategies for measuring the success of these actions. An associated practice guide includes examples of good practice and contact details in order for others to take these forward (SEU, 2003b).

Several of the recommendations listed in the Social Exclusion Unit’s report are also considered in the Green Paper, *Every Child Matters*, which sets out the Government’s proposals for reforming children’s services, following the public inquiry led by Lord Laming into the death of Victoria Climbié (GB. Parliament. HoC, 2003). Of particular relevance to the subject of this research is the intention to impose a new duty on local authorities to promote the educational achievement of children in public care (p. 68). However, when implemented, other aspects of the Green Paper’s approach to improving outcomes for all children – notably its focus on joining up working practices and services at national and local level – are likely to have a positive impact on the education of children in public care. In particular, the Green Paper’s detailed proposals for information sharing, joint frameworks for assessment and increasing multi-disciplinary working in a number of ways (lead agency responsibility, multi-agency teams, and co-location on child-centred sites) are likely to be significant (pp. 51–64). Other proposals, including the proposal to legislate to create the post of Director of Children’s Services and the encouragement for the development of Children’s Trusts, should also have an impact, in the longer-term, on the education of this cohort.

Much of the concern about the education of children in public care focuses on the ***low level of attainment*** and the high number of young people who leave care with no academic qualifications (DoH, 1999; Jackson, 2000). Within the end of key stage 4 cohort in summer 2002, 41 per cent of all care-leavers achieved at least one A\*–G GCSE or GNVQ, compared with 95 per cent of the total population. Five per cent achieved five GCSEs A\*–C, as compared with 50 per cent of their peers (DoH *et al.*, 2003). The Government set targets for the attainment of children in public care at key stage 4, aiming for 50 per cent achieving one GCSE at A\*–G by 2001 and 75 per cent in 2003. The target of only one A\*–G GCSE has been viewed as lamentably low by

many professionals and contrary to intentions to expect similar attainment of all children (McParlin, 1999; National Literacy Association and The Who Cares? Trust, 1999). It is therefore notable that a new target for children in public care for one year or more was introduced in 2003 to '*substantially narrow the gap between the educational attainment and participation of children in care and that of their peers by 2006*' (SEU, 2003a, p. 73).

**Low expectations** of children in public care have been highlighted as a significant factor in their low attainment (Archer, 1999; Fletcher-Campbell, 1997). The Government's targets go some way towards increasing these expectations.

At the *end of Year 11*, 53 per cent of children in public care remained in full-time education, as compared with 72 per cent of the general population, while 24 per cent were unemployed in the September after leaving school (DoH *et al.*, 2002). In order to support and encourage more young people in public care and care leavers to continue in education or training, Pearce and Hillman (1998) state that support during the summer months between leaving school and taking up new education or training places is often crucial. They suggest that involvement in community activities or work placements during this period '*should be the norm for each care leaver*' and that residential activities, such as those purchased from the Prince's Trust, are cost effective in the long term. Like others, they suggest that financial incentives should be offered to encourage care leavers to participate in further education and training. It should be noted that Education Maintenance Grants are being piloted with this in mind (SEU, 2002, p. 68). Research into the views of young people has shown that managing personal finances is one of the main difficulties faced by care leavers and that they valued the introduction of independent advice provided by mentors, as their experience of care has made them wary of social services (The Prince's Trust, 2003, p. 6).

A further measure of the inadequacy of the education system in providing for those in public care is the high level of **non-attendance** and **exclusion** of children in public care, as mentioned in several wider studies of exclusion. Non-attendance problems have been largely reported only in case studies (but see Evans, 2000), but data on the exclusion of children in public care has been published. It is known that of the 33,800

school-aged children in public care who had been in public care for at least twelve months in the year up to 30 September 2001, 12 per cent missed at least 25 days of school and 1.3 per cent were permanently excluded, compared with 0.1 per cent of all children (DoH, 2002). A survey of ten LEAs in England demonstrated that of the children identified as having been excluded and having been in public care, 70 per cent had substantial problems by the time of the research, compared with 39 per cent of those who had never been in public care (Parsons *et al.*, 2001).

Brodie's (2001) in-depth study of exclusion of children in residential care provides illuminating evidence that exclusion is often seen as both inevitable and desirable by all professionals concerned. By examining exclusion as a process rather than as an unexpected event, she demonstrates that a change in circumstances is usually the starting point for exclusion and the schools in her study were always aware of this change. She notes that good relationships between professionals do not necessarily prevent exclusion; on the contrary, they sometimes facilitate it. Brodie notes the perception held by some social workers that the best support would be provided by removing the child from the classroom situation, in some cases in order to force other bodies to provide services and resources. Fletcher-Campbell (2001) similarly reports that exclusions may, in the long-term, be beneficial to a child's education.

The concept of exclusion embraces several forms, from the official version which is recorded by the school as such, through various 'informal' types of exclusion, including exclusion on admission, planned exclusion and exclusion by non-admission. Brodie asserts that both informal and formal exclusion are generated by schools and that both occur through the same interactions between professionals. Yet the research on exclusions shows some cause for optimism. Parsons *et al.* (2001) note that success is possible for these children, demonstrated by three of their ten successful case studies being of children in public care. They identify the presence of a concerned adult; flexibility of approach and provision; recognition of individual strengths and abilities; the individual taking credit for his or her own achievements and a change of educational provision as factors contributing to positive outcomes for excluded children.

Children in public care have also been identified as particularly frequent *runaways*. Studies have shown that nearly half of those who have been in public care have run away at some point in their lives, because of unhappiness with their care placement, a desire to be living with their family, or the influence of the culture of children's homes (Rees and Smeaton, 2001, p. 9; SEU, 2002, pp. 7–11). A relationship has been identified between running away and school attendance problems and studies indicate that education suffers for other reasons, as runaways do not take books or course work with them and because the limited financial support for 16 and 17 year olds makes it difficult for them to support themselves (Rees and Smeaton, 2001, p. 16; SEU, 2002, p. 67). However, there is some evidence that effective implementation of Quality Protects does decrease the incidences of running away (SEU, 2002, p. 33).

While there has been a tendency in the past to treat children in public care as a homogenous group, it is becoming widely recognised that these children are a *diverse* group, with varying needs (Bhabra *et al.*, 2002; Flynn and Brodie, 2000). Yet there remains limited literature focussing specifically on the education of particularly vulnerable groups. Approximately a quarter of children in public care have statements of *special educational needs* (DoH *et al.*, 2002). Although the literature focussing specifically on the education of these children is limited, provisions are examined within other projects. An evaluation of LEA *behaviour* support plans reports that 90 per cent of the plans examined referred to children in public care, which the authors suggest reflects the high profile given to this group through government initiatives (Kinder *et al.*, 2000). A study of multi-agency working around pupils with emotional and behavioural difficulties also includes several examples of initiatives focussing particularly on children in public care (Capey, 1997). There is limited literature on the *mental health* provision for children in public care and less still on the relationship of these needs to their education, although it has been indicated that education can play a '*crucial role in preventing mental health problems*' (Richardson, 2002, p. 30). There is some evidence that many local authorities are aware of the difficulties in accessing mental health services for this cohort (Khan, 1999; Coles, 2000, p. 101); access to this provision was examined during the case study research.

Borland *et al.* were unable to locate literature on the education of *disabled* children in public care (Borland *et al.*, 1998, p. 35) and the field has changed little five years later. Read and Clements (2001) note that a significant minority of disabled children spend substantial periods of time away from their families and that local authorities should provide extra help to compensate for early deprivation in order to ensure that children in public care have the same rights to education as all. Yet, in the dearth of research on children in public care with disabilities the authors report nothing specific to their education (Read and Clements, 2001, p. 192). It is notable that Morris' sympathetic report into the experience of disabled young people living away from their families, no mention is made of their education (Morris, 1998).

Information on the education of children in public care with *English as an additional language* (EAL) is also extremely scarce and must be gleaned from literature focussing on other issues. In their examination of the needs of disaffected young people in multi-cultural communities, in the context of the introduction of the Connexions service, Craig and Coles (2000) note that a quarter of their respondents had been in public care at some point. While a number of all respondents had felt supported by a key individual, more often this was someone met by accident rather than one professionally assigned. Similarly, the careers service was not seen as particularly helpful and when these disaffected young people were in touch with an agency, it was more likely to be a community voluntary organisation (Craig and Coles, 2002). However, the absence of literature focussing on the education of ethnic minority pupils in public care is notable (see Lee Comfort, 2001).

Unaccompanied *asylum seekers*, who are supported by the care system until they reach 18, constitute a small (2,200 in March 2002) but significant group of children in public care, often with EAL (DoH, 2002). Education has been described as 'crucial' in supporting unaccompanied children; in many cases the education system is the only statutory agency supporting children aged 11 to 14 in settling into their new lives. Although many of the problems they face in accessing education are shared with the general in-care population (including finding places for 15 year olds before they reach 16; schools refusing places through fear of affecting their league table position; racist bullying), young asylum seekers face additional difficulties in their potential need for EAL provision, translation and counselling, as well as anxiety over asylum

applications affecting examinations, and concern about dispersal elsewhere in the country and loss of exceptional leave to remain at age 18 (Bann and Tennant, 2002).

As yet there has been little research focussing particularly on whether ‘*school provides a true asylum – a place where they can feel safe and secure*’ (Walker, 2002, p. 24) and whether the educational needs of this particularly vulnerable group of children in public care are being met. A report on *pupil mobility* in schools finds that pupil mobility *per se* is not detrimental to the quality of education a school can provide, although problems arise when there are very high levels of mobility and of children with particular needs, of which asylum seekers are an example. But it provides little specific analysis of the effect of mobility on the education of those moving, as opposed to the effect on the schools (Dobson and Henthorne, 1999, p. 103). Strand’s examination of the effects of mobility on attainment at the end of key stage 1 demonstrates that although pupil mobility is associated with significantly lower levels of attainment in reading, writing and mathematics, when the impact of factors such as free school meals (FSM) entitlement, SEN and EAL are considered, the effect of mobility is substantially reduced, although still statistically significant. Strand suggests that ‘*the reason a pupil moves school, rather than the change of school itself, is probably the most important factor in relation to attainment*’ (Strand, 2002, p. 75). Similarly, although it has been shown that secondary schools with high levels of pupil mobility tend to have achieved lower results, Ofsted note that the affect of mobility on attainment is difficult to isolate, as it occurs alongside other factors including disrupted family life and those schools with high mobility tend also to be in areas of high social disadvantage (Ofsted, 2001).

### **2.3 The Educational Environment**

The general environment in which any young person is educated is significant to his/her achievement and interacts with any discrete provision or particular needs.

The detrimental effects of low *expectations* of teachers with regard to the academic potential of children in public care have been recognised by several authors (Archer, 1999; Fletcher-Campbell, 1997). It is felt that all agencies should actively promote expectations of progress to further or higher education and provide material support

for these expectations (Pearce and Hillman, 1998). But Elliott's recent research (2002) suggests that while teachers expect children in public care to be unable to meet homework deadlines as consistently as those not in the care of the local authority, no significant difference can be identified in teachers' expectations regarding the academic performance and attendance of children in public care and those cared for by their parents. However, while these results may suggest a change of attitude on the part of teachers, the small sample size and the methodological limitations of the research indicate that further data would be needed before concluding that attitudes have improved nationally (Elliott, 2002).

Beyond their explicit role in enabling educational attainment, schools have a wider role, in the promotion of other aspects of what could be termed 'normality' in the lives of children and young people in public care. Schools form a potential source of *continuity* in otherwise disrupted lives, a factor that has only recently been recognised by many social workers, for whom school placements have in past been a secondary concern to care placements. There is a growing recognition that continuity of school placement can be as important as that of carer and indeed can contribute to the success of both placements (Borland *et al.*, 1998, p. 78; Fletcher-Campbell, 1997; Jackson, 2000). There is also a growing body of literature examining the *resilience* of children in public care, which helps to account for the obvious educational success of some care-leavers, despite their difficult school and home experiences. Several authors have highlighted the positive role of education in promoting resilience and strategies for coping (Borland *et al.*, 1998, pp. 36–38; Flynn and Brodie, 2000).

Sometimes a teacher or other member of educational staff serves as a pivotal adult in providing *support* through making time to listen to and encourage a young person in public care, both in terms of coping with their existing circumstances and in planning for their future in education. For example, in a survey of the views of 80 young people in public care on their educational experience, over half reported that teachers had provided both study-specific and educational support (Harker *et al.*, 2003). But while some young people have identified such a person as invaluable, it has also been shown that providing excessive overt support can be counter-productive. Most children in public care do not want to be treated differently by their teachers or peers and ask that support be provided on an individual basis (Borland *et al.*, 1998, pp. 56–

61; Jackson, 2000, p. 73). As mentioned above, differing expectations in terms of attendance, completion of homework and general attainment ability are detrimental. Schools have also been identified as a valuable source of support with regard to runaways, both in terms of providing specific support to those who feel they have no-one else to turn to through counselling and confidential advice services and by providing information in the course of normal lessons on problems that can lead to children running away (SEU, 2002, pp. 23–27).

The role of *designated teacher*, first recommended by the Government in Circular 13/94 (DfE and DoH, 1994) and confirmed in the recent joint *Guidance*, has been widely welcomed as a valuable addition to the support system for children in public care (DfEE and DoH, 2000). The *Guidance* includes indications as to the designated teacher's role and *Believe in Me*, produced by the National Literacy Association and the Who Cares? Trust (2002), provides valuable practical support for designated teachers and others encouraging literacy amongst those in public care. But as the role has only recently been introduced and training only completed for some within the last year, there is as yet little evaluative work. An Ofsted inspection of 26 local authorities known to have set targets to raise the achievement of children in public care reports that the majority of these LEAs view the designated teacher to be of prime importance and schools have assigned the role to a senior teacher or member of the senior management team (Ofsted, 2001). However, there remain few evaluated examples of good practice by designated teachers and their schools and the current research was intended to go some way towards filling this gap.

## **2.4 The Care Environment**

In her study of exclusions of children in residential homes, Brodie notes that the educational experience of children in *foster care*, who form the very much larger group (66 per cent of children in public care (DoH, 2002)) has largely been neglected (Brodie 2001, p. 23). There is very little literature evaluating the role of the foster carer in the educational attainment of those in their care. Although the National Literacy Association and the Who Cares? Trust have produced a guide for foster carers on encouraging their children's literacy (1999), accessible examples of good practice are minimal. However, there do exist valuable unpublished end-of-project

reports on literacy projects with young people in public care and their families from the Basic Skills Agency and the Community Education Development Centre.

Although more work has been done relating to the education of children in *residential homes* (Brodie, 2001, for example), there remain few examples that may be used to develop good practice. Lindsay and Foley's (1999) report on a residential project which has successfully returned to mainstream schools 97 of its 107 young people, is a notable exception. Six 'touchstones' in their success are identified, including inter-professional respect and teamwork; practical demonstration of the value of each individual; creating a culture in which education is valued; attention to detail in matching child to school and joint planning with the school before the child starts and a determination to handle setbacks without deflection from the key objectives. However, the authors note that their success emphasises the failings of the current systems, including the responsibility of mainstream education to support the needs of all its pupils, and the need for training for residential staff in order to help schools in this task (Lindsay and Foley, 1999).

## **2.5 The Role of Local Authorities**

The concept of 'corporate parenting' has taken root in some local authorities (Fletcher, 1999), but, even in the most diligent, considerable work is still required to ensure that physical care, access to services and general encouragement are not seen as satisfactory limits to this parental responsibility. Rather, like their peers not cared for by the local authority, children in public care require sustained guidance, supervision and high expectations as to their ability to achieve (Bhabra *et al.*, 2002, p. 4; Jackson, 2000).

As Borland *et al.* noted in 1998, '*the most salient message to emerge from young people, inspection reports and research is that progress is dependent on working across department boundaries*' (Borland *et al.*, 1998, p. 93). This demand for **multi-agency collaboration** message is increasingly being heard and evidence is appearing which demonstrates that significant progress is made when work occurs at a multi-agency level (Fletcher, 1999, p. 9; Flynn and Brodie, 2000; Whitbourn *et al.*, 2000, p. 182). In an audit of multi-agency activity, children in public care formed the target

group for the largest number of initiatives surveyed (46, or 21 per cent). As for other projects, funding proved a challenge for those concerned with children in public care, as did information sharing and collection and overcoming professional barriers. Key factors in the success of these particular collaborative endeavours were identified as the commitment of those involved, agreements over funding, good working relationships, focus, clarity and common aims (Atkinson *et al.*, 2001).

A case study of operational and strategic level cooperation between education, social services and (at strategic level) health on the education of children in public care, undertaken as part of the above research project emphasises that inflexible funding structures inhibit innovation. However, multi-agency working makes possible a time-efficient and holistic approach to children's needs, resulting in a coordinated response to those needs (Atkinson *et al.*, 2002, pp. 194–204). Similarly, Fletcher-Campbell's (1997) examination of education support services demonstrates that having 'a foot in both camps' of education and social services is a key factor in providing excellent support, trusted and valued by carers and teachers alike.

However, although Tomlinson (2003) provides a best practice guide to multi-agency working to enable local authorities to develop their practice, specific examples of evaluated successful multi-agency collaboration remain limited. Examples relating to children in public care are often embedded within studies concerned with wider groups, such as pupils with emotional and behavioural difficulties (Capey, 1997). It should be noted that even good multi-agency working does not necessarily improve educational outcomes for a child in public care. Indeed, as Brodie demonstrates, good relationships and consultation sometimes make it easier to exclude children from school who reside in residential homes (Brodie, 2001).

One factor that has been highlighted in an evaluation of successful multi-agency working is the need for clarity concerning the roles and responsibilities of individual practitioners and departments, as well as the need for a common purpose between professionals (Tomlinson, 2003). It was reported in 1998 that *social work* planning had accorded a low priority to educational needs (Borland *et al.*, 1998, pp. 76–78). With the introduction of personal education plans and the 20-day rule, educational considerations have been pushed higher up the social services agenda. Some authors

note that social workers have become more aware of the importance of ensuring school placements are an integral concern when considering a change of care placements (Fletcher-Campbell, 1997; but also see Skuse and Evans, 2001). Yet studies have shown that some social workers are unaware of their local authorities' policies on the education of children in public care, despite the fact that, if excluded, the education of a child in public care is the responsibility of social services (Brodie, 2001, p. 146).

Some guidance has been published for other partners on the local authority's corporate parenting responsibility. Fletcher's guide for elected members, which does not presuppose specialist knowledge but provides a comprehensive checklist of required concerns, is a good example (Fletcher, 1999). The Government's *Guidance on the Education of Children and Young People in Public Care* similarly includes a list of questions for Councillors to ask (DfEE and DoH, 2000). The Who Cares? Trust also published guidance for school governors on the education of children in public care (Fletcher, 1996). More radical are McParlin's suggestions for the contributions that educational psychologists could make to reducing the structural marginalisation of children in public care and to reduce the stigmatisation to which he feels psychologists have contributed (McParlin, 1996).

With regard to disaffected young people in multi-cultural communities, ***voluntary organisations*** often have a significant role to play in supporting the education of young people in public care (Craig and Coles, 2002; Fry, 2001). While, arguably, it is an indication of the shortcomings of statutory agencies that there is a need for such provision, they can provide examples of good practice that may be adopted in the statutory sector. The Who Cares? Trust's recent publication, *Education Matters*, for example, is a detailed resource book providing guidance to all professionals involved in the education this cohort on their and others' roles and suggestions for more effective practice (Hibbert, 2003).

Voluntary agencies have also run projects that complement or build on statutory provision. One well-received initiative is the Who Cares? Trust and National Literacy Association's *Right to Read* project, which aimed to get children in public care and their foster carers and residential workers excited about books. The project was

developed out of a belief that literacy is the bedrock of education and that the best way to improve on these children's literacy is to encourage them to read for enjoyment. The main focus of *Right to Read* involved a pilot study in five local education authorities, including training and provision for creative achievement days; right to read road-shows to advise carers and the establishment of accessible starter libraries of at least 50 books in every residential home (The Who Cares? Trust and National Literacy Association, 2001). Brennan's (2001) report on the success of the project in Blackburn with Darwen mirrors the positive feedback received by the Who Cares? Trust and National Literacy Association from carers and children in the authorities concerned. However, the latter note that the support of senior LEA staff was a critical factor in this success and conclude with recommendations for LEAs including a demonstrated commitment to accessing books; centralised strategies for improving access to books; guidance, training, resources and raised expectations for carers and involvement of the library service in making direct links with residential homes (The Who Cares? Trust and National Literacy Association, 2001, pp. 2–4).

## **2.6 Sharing Good Practice**

The evidence indicates that Borland *et al.* were accurate in commenting that, while further research into the experience of and problems facing children in public care is required, the lessons of previous work must also be applied (Borland *et al.*, 1998, p. 120). While consultations, such as that by Bhabra *et al.* (2002), indicate that there exists a range of knowledge as to '*what works*' in the education of children in public care, such analysis infrequently provides concrete examples of good practice that can be adopted by other agencies. Many have recognised the need for dissemination of such evidence (Flynn and Brodie, 2000). In particular, although guidance has been provided for elected representatives as discussed above, there as yet exists little literature focussed exclusively on the role of schools in promoting the education of children in public care. Nor has much been published on specific provisions for children in public care with special educational needs, in particular those with disabilities or mental health needs; or for those for whom English is an addition language, including those claiming asylum and ethnic minorities more generally. The current research was carried out in order to fill some of these gaps.

## 3 Local Authority Policy and Practice

### 3.1 The Local Authorities

In the course of the research, eight local authorities were visited. These were selected from a long list of authorities that had been recommended by a number of sources as having good practice in supporting the education of children in public care. The eight represent a diversity of geographical region, type of authority (London borough, metropolitan district, unitary authority and shire county), size of authority in terms of number of schools and a range of achievement, special educational needs, attendance and attainment of children in public care. This chapter examines these local authorities' provision for the education of children in public care, in order to establish the context within which the participating schools were working. Appendix 1 contains further information regarding the sample of local authorities that took part in this research in order to put these findings in context.

The individuals interviewed were generally the key contacts held by the DfES Vulnerable Children's team. The majority of these were education officers based in education departments, although several of these posts were partly or fully funded by the social services department. In one authority, the interviewee was an education professional based in social services, which was felt to be a *'very good idea, except that I've probably become an education specialist for social services'*. In another authority, the key contacts were two members of social services staff based in social services. However, several of the interviewees based in education brought with them experience of working in social services departments, which was felt to be useful in their present posts.

Most of the interviewees were senior members of teams of professionals with responsibilities for the education of children in public care. The size of these teams varied, from one person to over five. Their names varied, but Looked After Children's Education Service (LACES), Education of Children in Public Care team (ECPC) and similar titles were common. For the purposes of this report, the term Education of Children in Public Care team (ECPC) is used generically and therefore its use should not be seen as reflecting the usage in any one authority.

### 3.2 Models of Local Authority Provision

A number of models of overall practice at local authority level have emerged through this research. The first of these is the distinction between ‘discrete’ and ‘distributed’ services with responsibility for the education of children in public care. These models were developed by the research team on the basis of the data collected and represent ideal types, rather than matching exactly to the provision in any one authority. In many of the case studies, provision lay somewhere between these two extremes.

In the ‘discrete’ model, one team of professionals is responsible not only for tracking the education of the authority’s children in public care, but also provides many of the additional services in terms of in or out of school teaching, personal education plan (PEP) coordination, coordination of multi-agency meetings and provision for additional educational needs (AEN).

In the ‘distributed’ model, the individual or team in question retains an overview of the educational needs and attainments of children in public care, but additional teaching and other services are provided by other departments and are embedded (although often prioritised) within mainstream provision for all children. In one medium-sized authority, *‘The service decided that we wanted the children to have priority in everything, but not to have a separate service, to some extent. They do have a separate service because they have us.’* Or, as the same interviewee commented with regard to funding, *‘We work closely with other people’s budgets’*. The same was said by others with regard to other issues relating to the education of these young people: *‘I didn’t want to do anything as a single agency so all the training, etc. has been done in a multi-agency way, with health and social services colleagues.’*

In a discussion about provision for excluded children, one interviewee neatly summarised the wider debate over discrete or distributed services for children in public care, saying:

*That’s where there’s an argument about whether you have a specialised service for looked after children, or whether you expect your mainstream provision to*

*support them up with additionality when you need it. If you have a discrete team it actually absolves [other] people of their responsibility.*

However, the research data also provide examples of outstanding support for particular individuals by discrete teams and it is an interesting question whether the distributed model would be able to provide such focused and holistic support. As an interviewee in a discrete team reported, *‘Some people say that as long as there’s a team of people the schools aren’t going to do their bit, but we haven’t found this’*. Yet in circumstances where resources are financially and time limited, it may be more appropriate to embed good practice in the activities of the whole authority, rather than in one potentially resource- and time-restricted team. It is notable that having a discrete team did not necessarily lead to embedded services.

The impact of these two models will be highlighted where appropriate in the body of this report. However, it should be emphasised that the provision for the education of children in public care in the authorities visited rarely fitted completely into one of these models. For example, one interviewee who felt that responsibility for the education of these children needed to be distributed across the authority stated, with regard to the establishment of an Education Psychology Looked After Children (EPLAC) team, *‘that’s why I insisted on a dedicated team – their needs weren’t being assessed if they weren’t in school’*.

In most cases there was rather either an *emphasis* on facilitating the work of other departments (the ‘distributed’ model), or on organising initiatives and provision through the designated service for children in public care (the discrete model). All however had some sort of strategic overview. As one commented, *‘I think that if we can’t do the strategic things, we can’t have a [education of] looked after children service’*. It is also notable that the number of people employed to focus on the education of children in public care does not determine whether the institutional focus follows either the discrete or distributed model. Both were found in authorities where there were only one or two professionals with a remit for supporting the education of children in public care and where there were teams of five or more staff.

A further interesting model evident in two of the local authorities visited was that of the key individual being described as a headteacher. As one explained:

*I've been conceived as the head of a virtual school – we talk about our children in public care as a virtual school and I'm the headteacher. So my role is very much that of a headteacher – I need to know who my pupils are, where they are, that they're attending, how they're getting on, whether their needs are being met, whether they're going to reach their potential – and if there are shortfalls in that, put in plans and interventions to address them.*

Interestingly, this model of a virtual school was found in two authorities at the relative extremes of the discrete – distributed spectrum, in that in one the 'headteacher' had no staff to direct, but worked with other professionals across the LEA, while the other was also the line manager of a team of staff, some of whom provided regular supplementary or sole teaching of their children in public care. Furthermore, one of the authorities was small in size and the other was large (see Appendix 1 for relative sizes of authorities).

### **3.3 Local Authority Policies**

The education of children in public care was reported to be a focus of policy and guidance in all of the authorities visited. In many cases, a discrete document had been written, sometimes resulting from consultation between health, education and social services. In over half the authorities visited, the policies on the education of children in public care were in the process of being revised, either because they were out of date (having been written two years previously) or because the document was 'inherited' by the current post holder and found to be unsatisfactory.

One particularly notable document was a corporate parenting agreement between education, social services and community services. This identified what the authority would do to raise the educational achievement of children in public care and included job descriptions of all professionals involved, performance indicators against those roles and responsibility for monitoring and reporting on these indicators. The

agreement had been distributed to all schools, social workers, foster carers and health professionals and at the time of the research was about to undergo its first review.

It is notable that the interviewee in this authority, having described the agreement in detail, stated that *'We've not really got a policy'*. This reluctance to elevate well-thought-out and practical documentation to the status of *policy* was found elsewhere. In another area, the document in question is known as 'guidance for schools', rather than a policy and is seen as a working document, responsive to adaptation as and when appropriate. *'It is flexible and schools are asked to use it in a way that's good for them'*. As will be seen in chapter 4, some of the schools visited similarly did not see themselves as having a policy, but had written a number of documents based on successful activities or recognised need that reflected practice in the school. This suggests that where good practice drives documentation, rather than vice versa, professionals may be reticent in recognising the latter's value.

The education of this cohort was a focus of other documents; in some cases the *'embed[ding] of the education of children in public care into the policy of every department'* had been more of a focus than developing a discrete policy. This was notably the case in two of the shire counties that could be described as having a 'distributed' model of responsibility for this cohort. In all the local authorities visited, the children in public care were a specific focus in the latest Education Development Plan (EDP), as 'helping under-achieving groups' is one of the key areas required. Other documents in which they were mentioned included Corporate Parenting Implementation Plans and Behaviour Support Plans, as well as education welfare policies, a library services policy, an authority's outdoors policy, in addition to the policies of all departments undertaking school support. Elsewhere the interagency drafting of policy documents had been extended beyond local authority boundaries (see box below).

### **Regional Out-of-authority Placement Protocol**

One interviewee described the protocol drafted by officers from ten neighbouring local authorities regarding notification of placement of a child in one another's authority and the processes to follow if the child needs additional support. Forms have been devised ensuring that the receiving authority obtains all necessary information.

*As it's a statutory obligation for social services departments to inform one another, we assumed that there's a national form. But there isn't. Some authorities were sending all the information you would want and some were just saying so-and-so is coming. So we've picked the best out of everybody's and put together a statutory notification which will be sent [to social services] with copies for health and education.*

The group has also drawn up flowcharts to guide professionals as to what to do if there are unforeseen problems. At the time of the research, the protocol was awaiting the approval of the Directors of Education in the authorities, but it was anticipated that this protocol would '*support a lot of the issues for outside placements*'.

### **3.3.1 Personal Education Plans**

Interviewees in half of the authorities visited stated that ensuring that all young people in public care have a Personal Education Plan (PEP) had been '*extremely tough*' or been done with '*great difficulty*'. It was clear from responses to questions regarding PEPs that this was a matter of concern, both in terms of ensuring that PEPs were in place for the majority of children in public care, but also in ensuring that they were appropriate for the young people and had the support of all agencies.

A number of authorities had undertaken a multi-agency consultation exercise in order to devise the first PEP. In one, a group of 12 professionals from health, social services, education, schools (primary, secondary and special), education psychology and the service for inclusive learning jointly drafted a PEP '*that was about ownership so that everybody felt that it was part of their choice*'. In many authorities, interviewees or their colleagues provided substantial, often multi-agency, training for

social workers, teachers, foster carers and others when PEPs were first launched. Yet in an authority that had undertaken careful prior negotiation, *'we had a threatened strike by social workers about the PEP... it was picked up as a paperwork issue'*.

The role of social workers in the PEP process was identified as an issue elsewhere. In one case, the turnover of social workers was seen as inhibiting progress towards a target of 80 per cent complete PEPs at any one time. Elsewhere, there were *'compliance issues'*, partly resolved by refocusing them as a management rather than an education issue, as part of aspirational care planning for young people. In one authority, with less than 100 school-age children in public care, the ECPC team had taken over almost complete responsibility for PEPs from social services. Each member of the team was assigned a caseload of known children in public care and would either *'chase up the social workers or coordinate [the PEP] ourselves'*, to the extent that the local authority contact address on the PEP was that of the ECPC team. It was noted that *'the PEP is a social services document, but because we deal with the education of looked after children we are always involved in the PEP and it's easier for us to coordinate them, rather than social services'*. (Notably some schools also approached PEPs in this way; see section 4.5.3).

Most authorities, however, followed the DfEE and DoH (2000) Guidance that the initiation of PEPs is the responsibility of social services. A number of systems had been developed to ensure that this was as easy as possible for all professionals involved. One ECPC team offered training to social workers within their team meetings *'because of the difficulty of getting social workers to attend training'* and provided simplified guidance documents. In another authority, with a large number of school-age children in public care, education staff had identified all relevant data that already existed on a central database so the system could *'squirt that information into the PEP'*. As this system had not yet been operationalised across the region, it had been agreed that education administration staff would undertake this aspect of the task in the meantime. In the same authority, electronic versions of the PEP were being developed so that school staff would be able to amend details on a CDROM, rather than retyping the whole PEP if small changes occurred.

Most of the ECPC professionals interviewed had access to a database that included details of whether or not a PEP was in existence for a particular young person, including in some cases the PEP review dates. Some interviewees reported that they requested that social workers and/or schools sent them a copy of the PEP once it was completed; one team had a series of letters to be sent to social workers and teachers depending on what was known about the status of the PEP and the action required (to initiate, complete, send copy, or review the PEP). In other places this was not seen as feasible, given the number of children in public care in the authority or the limited staff time available. Another system in place in some authorities was that the reviewing officer at child care reviews was required to ask for a copy of the PEP and ensure that its status was recorded in the minutes.

In one authority it was reported that *'the initiation by social workers has improved dramatically'* as a result of strategies which report the initiation rate to senior managers in social services – information which was then cascaded to team social workers – and the attendance of ECPC teachers at social workers' team meetings. The interviewee reported that, *'What I wanted initially was to embed it as a process and I think to some extent we have done that. But now what we need to do is make the process of engagement with young people better.'*

Notably, this authority had already undertaken a substantial consultation exercise with young people, employing them as consultants to review the PEPs and completely redesigning and refocusing the PEPs as a result. Two particular desired changes were that the carer rather than the social worker be the person with whom the child discusses the PEP and that there be two separate PEPs for primary and secondary pupils. Following trials in the residential units and by some of the young people with their teachers, the original consultant group and a new reference group of young people had again been involved in consolidating the reviewed PEP.

While this authority was unusual in the extent to which young people had influenced the review of the PEP, several interviewees reported that after a period of operation it was recognised that the PEPs could be improved and they were either in the process of, or had recently completed, a review and redesign of the document. In one case the old version was seen as *'cumbersome'* without providing the necessary information.

In a number of other authorities, moves had been made to develop appropriately targeted PEPs, including versions for early years and reference to P-scales<sup>1</sup> for pupils with special educational needs.

The considerable detail that most interviewees provided regarding the PEPs indicates not only the struggles that continue to ensure that they are completed, but also their perceived value. One interviewee from a small metropolitan authority described them as ‘*a fundamental tool*’ and reported that the Chief Executive also saw them as important and had requested to see some. One particular use was seen as the role of PEPs in accessing children’s views on their education, as will be discussed below (see section 4.6). In general, the local authority insistence on the completion of PEPs seemed to be functioning as an integral part of the system for ensuring corporate parental responsibility for the education of children in public care.

### **3.4 Initiatives to Support the Education of Children in Public Care**

#### **3.4.1 National Initiatives**

Local authority interviewees were asked whether they knew of national initiatives operating in the region that had a particular impact on children in public care. Many were in Excellence in Cities (EiC) areas and links were being made with EiC provision. In particular, mention was made of the existence of Learning Mentors in schools, for some of whom work with children in public care was a priority and the impact of Learning Mentors was particularly clear in some of the schools visited. In half of the authorities visited, interviewees mentioned partnership with the local Education Action Zones (EAZs). In one case, the EAZ had funded a homework support worker for children in public care; in another the local authority was picking up and paralleling initiatives run by the EAZ focussed on children in public care, including family literacy projects (Share and Story Sacks). Several interviewees mentioned links with the Behaviour Improvement Project (BIP), noting that children in public care are ‘one of the high risk categories’ for BIP, and in some cases that the ECPC team was able to access BIP funds. The positive impact of Connexions was also mentioned in this context; this will be discussed further in section 3.6 below.

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<sup>1</sup> [http://www.qca.org.uk/ca/inclusion/index.asp?fp\\_clk](http://www.qca.org.uk/ca/inclusion/index.asp?fp_clk)

Two further national initiatives specific to the education of children in public care were operating in many of the authorities visited. The first of these was the Quality Protects (QP) grant for information technology provision for this cohort, which was mentioned in four of the authorities visited. In one of these authorities it was stated that the programme had not been implemented, but in the remaining three authorities most of the computers bought with this money had been distributed to young people and foster homes. In one, 150 foster carers were said to have PCs and it was hoped that by the end of the year, all secondary pupils in public care would have a laptop computer. A library of software was being built up, which was said to be '*going down a storm*', particularly for young children. In another authority, the computers bought with the QP money were supplemented by laptop computers recycled from the education department, as they were being replaced.

The other initiative mentioned as influential for this cohort was the Paul Hamlyn Foundation's Right to Read grant. Education and library staff in several authorities had applied for, or were in the process of applying for, grants from this fund, which supports 'imaginative projects aimed at improving long term access to books for 'looked after' children and young people and at providing them and their carers with opportunities to read for pleasure'<sup>2</sup>. Plans and past spending of this money included packs of books for care leavers (including cookery and DIY books); supporting carers to teach children under three to read; books and support from the library service and encouraging young people into libraries to become aware of other resources available (including computers, videos and talking books).

Other local manifestations of national initiatives included work with Lifelong Learning Partnerships on training youth workers to work on communication skills with children in public care; Study Support for funding out-of-school activities in residential units; priority access to Playing for Success facilities; collaboration with a Health Action Zone (HAZ) developing a job specification for a clinical psychologist to work with children in public care and preventative work with families undertaken by Child and Adolescent Mental Health Service (CAMHS), educational psychology and social workers in Behaviour Education Support Teams (BEST) school clusters.

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<sup>2</sup> <http://www.phf.org.uk>

In a couple of the areas visited there were said to be no links with national initiatives, largely because EiC and BIP were not operating in these areas. And in general, more detailed examples were provided by schools than by local authority officials of the impact of national initiatives on provision for children in public care.

### **3.4.2 Local Initiatives**

A number of other locally developed activities were described by interviewees. Particularly prevalent were initiatives supporting Year 6 – Year 7 transition, which will be discussed in the following section. Other work included:

- key stage 3 preparation programme, including weekly after-school sessions on stress management, how to relax and study, revision and exam skills
- homework support worker who visited schools or young people's homes after school to support with homework
- mentoring of Years 8 and 9 pupils by sixth form pupils, who had been trained by a learning mentor
- ICT literacy initiative in partnership with the National Literacy Association and a local building society, through which books, computers and personal digital assistants were given to residential units
- a book event held at a branch of WHSmiths, with a local author and a story teller, and £20 worth of books given to all children attending – included carers' foster and own children – was said to be '*a fantastic event.. the first really big success we've had with foster carers and kids*'
- youth workers trained in communication skills by the lifelong learning service, providing temporary basis skills tuition to young people out of school
- additional tuition, revisions guides and computer access for Year 10 and Year 11 pupils in residential units
- Year 2 – Year 3 information gathering exercise which asked Year 2 teachers to identify where children in public care stood in relation to national targets and to predict where they would be in Year 3. Schools were then offered additional funding for extra tuition or learning, literacy or behaviour support for children entering Year 3 '*with a deficit*'

- joint training and support of foster carers by study support in education and family placement in social services on family literacy and basic skills
- joint bid between social services, education and youth services for volunteer mentors of young people in public care.

In two areas, few separate initiatives were run for children in public care. Both of these were of the distributed responsibility model of support for this cohort and had more than 300 school-age children in public care in their authority, and as such it was stated that children in public care were targeted and given priority for existing booster classes, summer schools and transition arrangements. It was explained that this practice was based on preference of the ECPC team and of children in public care themselves, that they were not marked out for special treatment.

## **3.5 Management of Transitions**

### **3.5.1 Educational Transitions and Admissions**

The transition between Years 6 and 7 was a key area of activity for all the authorities visited; indeed in one it was stated that *‘the focus of all our education support work we do for looked after children is transitions’*. In most cases, the ECPC team monitored the provision of secondary school places, either through supporting parents and carers in choosing school places, or through targeting the primary schools to ensure that places had been applied for. A number of the local authority interviewees highlighted the importance of sharing information between the ECPC team, admissions, schools, carers and social workers for all forms of educational transition. This was particularly the case in ensuring that a school place had been applied for and allocated. Several interviewees mentioned that children in public care had category one status for admission to schools and hence were prioritised, but this relied on having information as to who were the children in public care. Establishing data-exchange protocols and practice between departments was one solution to this need.

A number of authorities had run special programmes for Year 6 children in public care, either as a group or individually. One small-sized authority, which worked along the ‘discrete’ model of responsibility for these children, had run an activities programme with learning mentors for the second half of the academic year. The

children met weekly for a range of activities, including drama, art therapy, producing a photo story for the Who Cares? Trust magazine, sports activities and tours of the secondary schools – all aimed to work on *‘those self-esteem issues, feeling comfortable in this huge environment’*. The programme was noted to be difficult and expensive to run, but *‘great fun’*. Carers were said to have noticed an *‘enormous difference’* in the children and learning mentors became more aware of their needs. At the opposite end of the spectrum in terms of our models of responsibility, one ‘distributed’ model (medium-sized) authority focussed on supporting the carers, and ensuring that they knew what their responsibilities were, and what were those of the social worker. All carers and social workers were provided with guidance on admissions to schools, people to whom they could refer to for advice and information on other issues such as transport.

Nearly all the authorities visited had some provision for additional individual support for children in public care likely to experience particular difficulties with transition either between Years 6 and 7, or in the move between schools at non-standard times. In one area, identification of this need began as early as the end of Year 5. In other cases need was identified through the PEPs. Provision included a few extra visits to the secondary school and someone to greet them on arrival; additional in-class support for six weeks and priority access to other transition programmes operating in the authority.

Some authorities had programmes for supporting Year 10 and 11 pupils. In one, the carer of every Year 10 and 11 pupil in public care was contacted to ask whether they would like additional support. Another provided additional tuition for pupils in residential units; GCSE revision guides and computers and intensive careers interviews at the end of Year 10, *‘so that they go into Year 11 thinking that their target is something beyond Year 11 and someone has helped them set that up’*. However, education provision for this cohort beyond 16 was usually not the responsibility of the interviewee, as will be discussed in section 3.6 below.

### **3.5.2 Care Transitions**

The availability of information regarding moves was also a central issue in provision for the education of children in public care at the point of transition into care or

between care placements. In some authorities it was felt that social services and education had good communication on this issue, with social workers informing the ECPC team of placement moves in good time. In some cases this was aided by the fact that a member of education staff attended social services team meetings and placement panels; in others a regular update of care placement information was provided to education, although in at least one case this was recognised to be somewhat inaccurate. Elsewhere, access to this information was more problematic. As one interviewee stated, *‘The first thing is getting good information and that can be a struggle. It does sometimes seem like we’re wading through mud setting up systems to make sure we get that information... We can’t help if we don’t know.’*

In some authorities, whether information was provided to education staff depended on individual social workers. Another interviewee said that, *‘When we know, the system works extremely well. The difficulty is that we don’t always get the information through, or not in time’*. In most authorities, however, there did at least seem to be a system for this kind of information exchange.

One interviewee stated that social workers had moved from a position of assuming that children would move schools when they moved care placements to understanding that a move of school should be avoided unless in the best interests of the child. It was felt that this change of perception was largely due to the work of the ECPC team. Another authority had a Public Service Agreement (PSA) target not to place children in care placements more than 20 miles from the central town, in order to maintain the stability of the school placements.

### **3.6 Post-16 Provision**

In most cases, arrangements once the young people had left care were not the responsibility of the interviewee, but of the local authority’s leaving care team, which in two authorities had been contracted to a voluntary agency. A few interviewees mentioned close liaison with this team, or with Connexions, or the student awards team, but several others said that they knew little about post-care educational arrangements. In most of the authorities visited, Connexions had not yet been operational for long enough to judge whether it was having an impact, although it was

generally anticipated that Personal Advisers would be beneficial to young people in public care. In the couple of authorities where Connexions was fully operational, there was said to be '*very good partnership*', although others also noted that the careers service had previously prioritised young people in public care.

A small number of the authorities visited had programmes supporting employment of this cohort, including a project with a national charity guaranteeing employment for care leavers and a modern apprenticeships scheme for young people in public care. And in several authorities mention was made of financial arrangements to support young people in public care in further and higher education, including incentive payments for staying in education; funded visits to a university-taster week and support in applying to the Buttle Trust, a charity that provides funds for young people in public care who are going on to higher education. However, one interviewee felt strongly that '*We don't give them enough*'. She reported that local authority staff were helping young people with their own time and money, in helping them to move house, driving them to university, or buying them a new pair of shoes. In noting that the authority had only one person to drive young people and their belongings to university, she added, '*We don't do what we would do for our own child*'.

### **3.7 Exclusions**

All interviewees reported that they kept, or had access to, discrete data on the exclusions of children in public care. In the majority of cases another team collated these data and the ECPC team were sent regular updates. In a few cases the ECPC team kept their own database of exclusions, in one case because the central database was known to be out of date. Most interviewees reported that the authority tried to minimise the exclusions of children in public care; two were successful in having no permanent exclusions in recent years. The mechanisms for minimising exclusions included a PSA target, a protocol agreeing an action plan for those at risk, a service level agreement with social services that they will always be present for exclusion hearings for children in public care and alternative educational provision (see below). A number of multi-agency meetings were also mentioned as fora for both preventing exclusions and managing reintegration, often discussing appropriate provision for individuals.

In most authorities there was no separate provision for excluded young people in public care; rather, they usually had access to the authorities' pupil referral units (PRUs) and in some cases this had been prioritised. Some authorities also provided alternative complementary and key stage 4 provision, which were also used to prevent exclusion from occurring. Problems of limited places and the need for the school to contribute towards the cost of the provision were mentioned. Reintegration strategies were generally more specialised, in that ECPC teachers were often involved in casework with individual pupils, either in school or at the ECPC team base. PRU, behaviour support service and education welfare staff were also involved in reintegration strategies in some places. However, it was noted by at least two interviewees that schools do not always want or need additional support for reintegration. *'Sometimes it's just getting good information to schools; if the school can plan and know what the child's needs are, that's what they need'*.

### **3.8 Attendance and Truancy**

All interviewees stated that the attendance of young people in public care was monitored discretely. However, the frequency of this monitoring varied, from termly collection of data from schools or education welfare officers (EWOs), to a twice-daily check by residential units that their children were in school, resulting in a weekly report to the key professional responsible for the education of this cohort. Not all ECPC professionals kept data on the attendance of this cohort on their database; in one case, it was rather recorded on the PEPs. Where there was no system in place to feed data on attendance directly to the ECPC team, monitoring attendance in school was said to be a problem. However, a number of authorities improved attendance of children in public care, one giving the example of sustained support leading to 100 per cent attendance of a pupil who had had 20 per cent attendance for two years.

Four of the authorities visited for the research had dedicated educational welfare service provision for children in public care, ranging from 0.5 to three full-time EWOs, either attached to the ECPC team or as part of the education welfare service. This ranged from one full-time equivalent (FTE) EWO per 43 children in public care, to one FTE EWO per 770 children in public care. In other cases, interviewees reported that they liaised closely with the authority's EWOs, in one case requesting

that they make specific checks on the attendance of children in public care when visiting schools.

In several authorities, regular multi-agency meetings were held either to plan provision for a particular child in a case of truancy or school refusal or to monitor the attendance of children in public care as a sub-group of all vulnerable children in the authority's remit. In one case of the latter, a weekly meeting was held between representatives of the ECPC team, psychology and behaviour service, learning support service, education welfare service, Connexions, youth offending team, social services, child and adolescent mental health, and admissions (education). Every young person in public care, as one of a number of groups of children causing concern, was monitored systematically every term but also immediately when necessary. It was stated that *'part of the remit of that group is to ensure that agencies and services are taking appropriate action'*, so that if there was an issue around attendance, the education welfare service would be asked to ensure that appropriate action and liaison with the social worker were being undertaken.

### **3.9 Bullying**

In none of the authorities visited were authority-wide strategies in place particularly for tackling the bullying of children in public care, but all saw this cohort as being covered by their authority's anti-bullying policy. In some but not all of these policies, children in public care were reported to be mentioned as specifically vulnerable, as they were also in some general guidance and training to schools. Some interviewees indicated routes through which they may be aware of bullying issues, including encouraging social workers to discuss the issue with schools and informal discussions with children by the community paediatrician for children in public care at medical examinations.

### **3.10 Celebrating Achievement**

The achievement of children in public care was reported as being celebrated in two forms: at large-scale, high profile events and in smaller, more individual ways. Over half of the authorities visited had in recent years held high profile awards events. In one case this was a fairly formal annual award ceremony, at which certificates were

presented by the mayor, with senior management from education and social services present along with the young people, carers and parents. Elsewhere a similar county-wide event was held, but based in a theme park or activity centre (such as Centre Parcs), to which children nominated for achievement were invited, along with guests. A morning ceremony at which certificates and gifts were presented – again with an audience of senior local authority figures – was followed by enjoyment of the site’s facilities for the rest of the day. In a third authority, trips to theme parks had been held for children *‘as a treat for them and a way for them to have the peer support and mix with young people with similar background to themselves’*.

Some interviewees expressed ambivalence about such events. In one case, at a regular high profile awards meeting for all children three places were awarded to young people in public care. However, the reason for their nomination – that they had been successful despite the difficulties of being in public care – was not mentioned. *‘It was a very formal evening and the three from care were proud, but I’m not sure it was an ideal event. It was not mentioned that they were in care and nobody seemed to know why they had got an award, so it was rather strange’*. For other interviewees, on the other hand, it was the very highlighting of the children as being in public care that caused concern. They recognised that not all young people wish to be identified as being in the care of the local authority and that achievement may be more appropriately celebrated in ways that mirror practices for all children.

For this reason, some had *‘tried to make the celebration within the normal setting for a pupil’*. This generally refers to individual-level celebration, as well as celebrating achievement in many forms. Such celebration has included the personal follow-up by teachers of GCSE students, not only based on reported results and good luck cards prior to, and personalised letters of congratulations following, exams from the Director of Education. In some authorities a small amount of funding has enabled the introduction of more informal systems of awards, such as gift vouchers being sent to congratulate children for one-off occurrences. One interviewee reported that a child who raised £30 through a sponsored swim had received a letter from the Director of Education with a voucher clipped to it. In another authority a similar scheme was having unexpected benefits, in that as social workers were aware that reports of

individual achievements led to gifts for the children, more information was being passed by social workers to the ECPC team.

In general, and usually with unspoken reference to Government's children in public care attainment targets, several interviewees stressed the need to celebrate achievement in many spheres and not to restrict celebration to attainment. As one noted, *'It's about reaching for potential. But reaching for potential... is the young person who has achieved four A-Cs a failure? Blooming heck not! There has to be some way of recognising value-added.'* Similarly, in another authority it was felt that *'We need a way of measuring progress rather than results. We need a way of capturing more than attainment. At key stage 4 – only 50 per cent of them are even sitting GCSEs – we have to be aware of what else is happening.'*

### **3.11 Funding**

The majority of professionals and teams working on the education of children in public care were funded through a mixture of LEA core funding, Standards Fund (now via the specific Vulnerable Children's grant) and Quality Protects money. A number of professionals who had begun working in this field had initially been employed using Standards Fund or Quality Protects funding, but at the time of the research their posts had been mainstreamed and made permanent. Other sources of funding for ECPC work included the Public Service Agreement (PSA), Behaviour Improvement Project, Heath Action Zone, Education Action Zone, New Opportunities Fund, SRB6 and the local authority's special educational needs non-statutory budget.

Some funding was allocated to specific initiatives. Most significant in this regard was the money obtained from the Paul Hamlyn Foundation for literacy projects and the Quality Protects grant for computers for children in public care and foster carers (see section 3.4 above). Other local initiatives included a full-time ICT assistant funded by Connexions; ICT training for foster carers provided by a further education college; foster carer training funded by the Lifelong Learning department. One authority had a joint budget between education and social services for the funding for transport to school following care placement moves; in another transport following placement

moves was funded by social services. Elsewhere it was stated that agreements were in place as to how such transport would be funded.

No discrete funding for education resources was allocated to carers in any of the authorities visited. In this context, mention was made of either ICT provisions – usually through the QP grant for computers for children in public care – or of literacy projects mostly funded by grants from the Paul Hamlyn Foundation. Although carers and their charges benefited from computers, free books and in one case discounts on WHSmith purchases, none of these initiatives allocated money directly to carers to use as they saw appropriate for educational provision. Some of the authorities visited stated that they did have ring-fenced funds for providing this kind of additionality. In one, £1000 was available for educational resources in two residential units; in another £20,000 had been set aside by social services to expand the skills, potential and self-esteem of children in public care. Elsewhere, where such provision was available – including purchase of revision guides, or sponsorship of school trips – these funds either came from the general ECPC budget, or social services’ discretionary funds.

However, as one interviewee noted, an additional source of hidden funding for the education of children public care was *‘the priority we give across the department, which is not costed’*. Similarly, in another authority, it was stated that the ECPC team *‘work[ed] closely with other peoples’ budgets’*, as all departments are corporate parents. Thus although the amounts of money explicitly allocated to support the education of children in public care may be limited, in many authorities this cohort benefits particularly from other services, particularly in those authorities that fit the distributed model of responsibility.

### **3.12 Provision for Pupils with Additional Educational Needs (AEN)**

The AEN of children in public care were usually provided for through the mainstream provision existent in all local authorities. In some cases, professionals were designated to work specifically with this cohort, while remaining in their own department.

### **3.12.1 Special Educational Needs (SEN)**

In general, the provision available for children in public care with SEN was that available to all children, although the ECPC teams were in some cases able to facilitate access to this provision. Several interviewees reported good working relationships with the SEN team, as evidenced by the involvement of a member of the SEN team in the drafting of a new PEP in one and the prioritisation of children in public care for SEN provision in two others. The existence of a designated educational psychologist for children in public care was reported in only two of the case study local authorities.

### **3.12.2 Mental Health Needs**

The mental health needs of children in public care were also provided for within existent services, although they were often prioritised and/or a professional was allocated to work with this cohort. Six of the authorities visited were reported to employ either a clinical psychologist with specific responsibility for children in public care, or up to three nurses to fulfil this function. These professionals either worked directly with the children or referred them on, for example to others in CAMHS, as appropriate. In one authority a multi-agency team – including a child psychiatrist and a psychologist – were working to prevent children from coming into care. Elsewhere there were moves to recruit and train specialist foster carers to support individual children with complex needs.

### **3.12.3 Pupils with English as an Additional Language (EAL) and Asylum Seekers**

In all of the authorities visited, provision for children in public care with EAL or who were asylum seekers came within the authority's general provision for all children, usually through the Ethnic Minorities Achievement Service (EMAS) or its local equivalent. Members of the ECPC teams were said to work closely with the EMAS, in order to obtain additional support that was not within the resources or expertise of the ECPC team members themselves. In some cases children in public care were reported to be prioritised by EMAS, but some interviewees provided minimal information about the role of EMAS as they had very few children with EAL or asylum seekers in their care in the respective authority.

### 3.13 Multi-agency Working

In all authorities visited the prevalence and importance of multi-agency working was recognised, as indicated by interviewees' statements regarding the successes and future developments for their authorities (see section 3.15.4 below). The ECPC teams themselves were occasionally multi-disciplinary, including teachers, educational psychologists, and EWOs, for example, but in all cases their daily work involved collaboration with professionals across education and social services, as well as health, voluntary agencies, Connexions and others.

A number of forums were reported to exist to discuss the education of children in public care, both in terms of ensuring appropriate provision for individual children facing particular difficulties, as well as strategic level arenas examining authority-wide policies and strategies. The operational forums were often responsible for maintaining an overview of all vulnerable children, of whom children in public care were a recognised group. The strategic forums usually comprised representatives from education, social services and health and others as appropriate, and were often held at Director or Assistant Director level. These similarly often had a wider remit than specifically services for children in public care. In addition, in several authorities there existed a senior manager panel with specific responsibility for the education of children in public care, which oversaw the work of the ECPC team, as well as working strategically in the interests of this cohort.

#### **Pathfinder pilot**

One small-sized authority was running a Pathfinder pilot to integrate services from health, education and social services under a single senior manager, whose job it would be to *'kick open doors at chief officer level and problem solve across the council'*. In this authority it was recognised that although processes known to work elsewhere were in place, they were not always having an impact at individual children's level. It was hoped that the Pathfinder pilot would provide an insight into what was holding back pupils' progress in school.

### **3.13.1 Cross-departmental Data Sharing**

In most cases a shared database between social services and education did not exist. Rather, most ECPC teams had systems for drawing down data from other sources. In some cases other professionals undertook the collation of data. For example, in one authority research and development officers in education matched school, assessment and attainment data to the information on children in public care sent quarterly by social services, before sending this database on to the ECPC team. Elsewhere it was the ECPC team who manually collected data, including directly from the schools.

In many areas, with or without a central database, there were concerns about the quality of the data; in particular, some of the lists of children entering and leaving care were known to be fairly inaccurate. Educational staff did not seem to have encountered problems in obtaining data from social services, although there were some issues over data from health; rather, the problem was the lack of integrated data systems. Some authorities visited were in the process of developing more efficient shared databases.

## **3.14 Local Authority Support for Schools**

### **3.14.1 Guidance for Schools**

Almost all interviewees reported that they gave their schools copies of the *Guidance on the Education of Children and Young People in Public Care* (DfEE and DoH, 2000). Many also provided additional information – sometimes in the form of inserts into this folder – on policies for schools, PEPs, the role of the designated teacher; newspaper articles and publications by other organisations including the Who Cares? Trust. Information on the education of this cohort was also included in newsletters, either in general local authority publications for schools or in those produced by the ECPC team.

### **Governors' Toolkit**

One authority, with a large number of children in public care, had developed a toolkit for school governors, including chapters on policies, tracking pupils, admissions, and exclusions and a self-evaluation questionnaire for governors to use to assess the schools' provision for this group. It was reported to have been well-received, *'although in some places it might have disappeared into the abyss'*. The interviewee felt that if the Government pushed the issues, governors would take more responsibility. Schools in this authority had been encouraged to identify a named governor for children in public care, in part to ensure that someone other than the headteacher was championing their cause.

In most cases no additional guidance was provided on admissions policies, over and above the authority's priority status for admission of this cohort, in some cases over siblings. However, one authority had successfully developed an 'in principle' agreement – accepted by almost all schools – to admit up to two children in public care per year, above normal numbers at non-standard admission times.

Most authorities required schools to provide some information on their pupils in public care. In a minority of cases this information was provided purely through the PEP, but most authorities also requested data from schools in the form of a register of children in public care, or a pro forma. The information requested ranged from a list of children known to be in public care, to data on attainment, attendance, exclusions, support needs and provision.

#### **3.14.2 Good Practice Schools**

Local authority personnel were asked to identify schools that were known to provide positive educational experiences for children in public care. All provided a list of a range of types of school, including primary and secondary, PRUs and special schools. The number of schools recommended ranged from five to 18. However, in over half of the authorities visited good practice was not systematically disseminated between schools. Where it was, strategies included discussion during training sessions and articles in newsletters written by good practice schools. It was noted by one interviewee that it could be counter-productive to praise a minority of schools as other

schools could become resentful. In two other local authorities it was felt more appropriate to provide examples of successful strategies to a school struggling with a difficult case, rather than to distribute general examples. Although all local authorities have developed strategies to share good practice with regard to raising standard of achievement in schools, the research evidence was that these were underused with respect to sharing practice around supporting the education of children in public care and that, for example, link/pastoral advisers might be of more help.

### **3.15 Overview of Local Authority Support**

#### **3.15.1 Monitoring and Evaluation**

Most interviewees described their obligations to provide information for '*the usual battery of targets*', including for Quality Protects, the Education Development Plan, Behaviour Support Plan, Best Value, as well as for inspections by Ofsted, the Audit Commission and the Social Services Inspectorate. The data collated for these purposes were often related to attainment, but also included information on attendance and exclusions, for example. The PEP was seen in many places as an additional mechanism for monitoring the educational provision for this cohort. In some cases this tool was seen to be working well; elsewhere, it was felt that the use of PEPs for monitoring was presently '*aspirational*' and an area for development.

One authority with a corporate parenting agreement between social services and education had a clear system of performance indicators against which to measure progress and officers identified as being responsible for reporting these data. In another authority, the importance of monitoring by other departments or organisations was highlighted, for example of the provision for children in public care without school places. Changes made as a result of monitoring and evaluation activities included the introduction of a team of ECPC teachers; appointment of an EWO specifically for children in public care; the appointment of a senior official with '*a very specific inter-departmental brief for children in public care*' and alterations to celebration activities.

### **Children's Views**

Several interviewees mentioned that the PEP also provided a mechanism for accessing children's views regarding their education and for involving them in planning changes to their educational provision. Elsewhere it was recognised that the PEP had the potential to serve this function, but *'there's a long way to go on this'*. Half of the authorities visited had carried out a consultation with young people in public care. In most of these, young people were employed to undertake the research themselves. In one case this research resulted in a video presentation on schooling issues, made by the young people and presented to local authority members and senior officials. In another, an action plan was developed which included changes to PEPs as discussed above.

Nearly half the authorities had surveyed the opinions of their young people, some using a questionnaire developed by the Who Cares? Trust (Fletcher, 1993). Additional mechanisms for accessing children's views included consultation of an existing social services young people's reference group; training young people to chair their own reviews; a website through which children could contact the ECPC team and the work of a children's rights and participation officer.

### **3.15.2 Successes**

Better joint working around these children was identified in several authorities, particularly between education, health and social services, but also with leisure services. One interviewee from a small, metropolitan authority reported that *'Only three years ago there were real divides between departments in the authority. We are now genuinely a million miles from that'*. Related to this was a cross-authority commitment to the role of the corporate parent, with departments such as housing also seeing themselves as corporate parents. As one interviewee from a medium-sized metropolitan authority stated, *'We have inter-department commitment, interest and awareness among officers'*. Improved attainment and attendance and reduced permanent exclusions of children in public care were mentioned in a couple of authorities; good ICT provision, inter-authority liaison and an admissions protocol were also seen as successes by individual interviewees.

Two key factors were identified as having contributed to these successes. One was a high level of commitment to corporate parenting and raising achievement across the authority, from elected members for Director level officers to teachers in schools and across departments. As one interviewee from education reported:

*I always feel that when you want to do anything that will raise educational achievement, it's like knocking on an open door. There don't seem to be barriers. Nobody's blocking anything. There don't seem to be any politics involved. It's great.*

The second factor – which in some cases was seen as a success in itself – was the existence of a committed, effective and high-profile team supporting the education of children in public care. It is notable that having a discrete team was seen as a key factor in success largely in those authorities which already operated according to the discrete model of responsibility for the education of children in public care, whereas across-the-board (distributed) commitment was highlighted mostly, although not exclusively, in authorities whose practices follow the distributed model.

### **3.15.3 Challenges**

A number of interviewees expressed frustration that despite their work, there remained limited evidence of progress. One expressed dismay that although the ECPC team had only recently been instituted and thus could not be responsible for the previous OC1 return, their work was still being judged by the authority's poor performance according to national indicators. But two other interviewees felt that it was necessary to move away from a specific '*attainment focus*', in order to find better ways of measuring value-added. Another interviewee felt that too many children were not in school or had been excluded and those in school were not attaining as they should. In this context, it was stated that '*the biggest single obstacle is getting children into a school once a school placement has broken down*'.

Three other interviewees mentioned problems associated with obtaining school places for children in public care. In one case this was related to the challenge that schools were reported to be looking at targets and choosing not to include children in public care. Elsewhere the issue was rather that places were simply not available in

particular localities in certain year groups. But in a third authority, the problem of schools' reluctance to give places to this cohort was said to be a challenge but not a difficulty because the ECPC team had succeeded in countering it:

*Because schools look at the fact that there is a team there to support them, they are more willing to take a young person on board, knowing that there are people out there to give them the advice, support and strategies they need.*

A further concern regarding obtaining school places was that the education department was still not being informed of planned care placement moves in time to identify educational provision prior to the move. Care placements were a matter of concern in another sense too, in that in two authorities not being able to recruit enough foster carers led to a high number of young people being placed and educated out of authority, which was both expensive and more difficult to monitor. These challenges are evidence of the interrelated nature of care and educational placements.

A number of other challenges were mentioned by local authority interviewees, including:

- ensuring that all eligible young people are entered for end of key stage assessments, including GCSEs
- the slow pace at which services were capable of change
- not obtaining information in a timely manner
- maintaining a balance between proactive and reactive work
- changes of staff in social services, including of managers
- the corporate parenting agenda being '*personality driven rather than corporately driven*'
- securing dedicated staff in social services to work with children in public care.

Several of these challenges had been overcome by regular contact with schools and '*plugging away at it*'. It was noted in two authorities that the existence of potential support is in itself a motivating factor for schools and that in some cases '*the schools*

*are very happy with a very little amount of money. Someone said to me that it's like loaves and fishes – they can make a little go a long way'.*

#### **3.15.4 Future Developments**

Interviewees foresaw continued development of their authorities' work on the education of children in public care. All spoke in some sense of increasing the interdisciplinary nature of the authority's work. There was variance in how this might be achieved: one interviewee from a discrete model (small-sized) authority hoped for growth in the size of the ECPC team, whereas interviewees from distributed model authorities spoke of '*making everybody accept responsibility as a society*' in explicit contrast to developing discrete teams and of joining up services for vulnerable children, rather than a discrete team for children in public care. However, across the case studies, it was felt that joint working would increase. Specific examples included social services' desire to employ someone with an education background to work on the assessment team; increasing joint working to include using all the voluntary agencies and initiatives; coordination of the various plans for children in public care and consultation on becoming a Children's Trust.

## **4 School Policy and Provision**

### **4.1 Background to Case Study Schools**

Interviews were conducted in a total of 20 schools, to examine the strategies used to support the education of children in public care, in the context of the school's policies and provision. There were seven primary phase schools, nine secondary phase schools, two special schools and two pupil referral units. The schools were selected from a long list recommended by the eight participating local authorities for having relatively advanced practice concerning the education of children in public care, as described in chapter 1. The sample represented a range in school phase, size, location, type and levels of performance. It included foundation schools, schools within a selective system, specialist schools, Beacon schools, Excellence in Cities schools, rural schools and single-sex schools. Appendix 2 contains further information regarding the sample of schools that took part in this research in order to put the findings in context.

Within the schools, interviews were conducted with the designated teachers, the headteachers or deputy headteachers and the SENCOs, as well as with a number of pupils in public care and their carers. The research team also took advice from each school as to whom else it would be most relevant to involve and this resulted in a wide range of staff being interviewed, including the following:

- class teachers
- heads of year/key stage
- classroom assistants/teaching assistants/learning mentors
- SEN support staff/EAL support staff
- school nurses
- education welfare officers
- school social worker/child's social worker
- school governors
- school secretary/administrative staff
- school site manager.

The schools that took part in this research also varied in terms of their school roll. In two of the schools over 90 per cent of the pupils spoke English as an additional language (EAL), one of which had children with 21 different first languages while other schools in the sample had no pupils with EAL. A small number of the schools, particularly those from a London Borough, had high mobility rates. One infant school commented that between 65 and 75 per cent of the children changed from Year 1 to Year 2. Another said that *'The school roll is ever changing'*. In terms of the ethos of the schools, some commented that they had a reputation for being successful, or being inclusive. For example, one primary headteacher said, *'It's generally a very inclusive ethos; we make appointments on that ethos. It's a way of working, a belief, not just a strategy'*. Overall, the schools that participated in this research represented a wide range of characteristics and circumstances. The research team considered this an important factor so that provision for pupils in public care could be illustrated across the range of placement contexts available nationally.

At the time the research was conducted, the number of pupils in public care on roll at each participating school ranged from none to 16. Most schools noted that the numbers tended to stay similar from one year to the next, although there were a few that commented that their numbers fluctuated. There were differing reasons for this. In the mainstream schools, it was those which had a higher number of pupils in public care that commented that the numbers fluctuated. In a special school, the number of pupils in public care fluctuated due to the number for whom the school was providing respite care and who were included in this cohort. In a pupil referral unit (PRU), the population was fluid generally, as the provision was designed to reintegrate the young people back into mainstream school; therefore, the numbers of young people in public care also changed. Commonly, where schools had between one and three pupils on roll who were in public care, they found that the numbers stayed similar, even when the actual pupils changed.

#### **4.1.1 School Policies on the Education of Children in Public Care**

The schools were asked whether they had a discrete written policy on the education of children in public care. Fourteen of the schools said that they did not. One deputy headteacher explained that they had not got a specific policy but felt that the schools' mission statement underpinned the child's right to accessing what best met their

needs. She said *'good-will is what is needed, rather than specific policies'*. Only two of these schools felt that they ought to have a policy but had *'not quite got round to it'*. The remaining six schools indicated that they did have a discrete policy. One designated teacher commented that *'this is something we felt we needed, as the looked after children are now high profile'*. Another designated teacher pointed out that *'you can't write a policy until you have the practice in place'*. She explained that now their practice was firmly embedded, the policy needed revising in the light of their experience.

Following discussions with the interviewees, it emerged that three of the schools that said they did not have a specific policy actually did have specific guidelines that they adhered to, or they had adopted the local authority policy. So, as in the case of the local authorities reported above (see chapter 3), although these schools had not viewed this as a formal policy, it clearly had the same purpose. Four schools noted that children in public care were included in other school policies, such as the inclusion policy and they had therefore decided that a discrete policy was not required. As one headteacher commented, *'I do feel that our ethos and policies, to support and care for children and encompass children with all different kinds of backgrounds and needs, therefore incorporates children in care'*. Overall, it seemed that the schools had considered the value of a discrete written policy on the education of children in public care and had then made a decision as to whether this would help to meet the needs of these pupils in their school.

#### **4.1.2 Effects of Admissions Policies on Children in Public Care**

On the whole, the schools' admissions policies did not prioritise children in public care in any particular way. The main approach taken was to accept every child within the catchment area who required a place until the school reached capacity. As one headteacher of a denominational school explained, *'Our admissions policy is that where there are places we accept children who want to come... we don't have a right to chose who comes here, we work with those who are there'*. This was more problematic with the schools in the sample that were over-subscribed. In these cases, children in public care were sometimes prioritised. A head of year in a grammar school explained how she perceived the situation in her school: *'[The headteacher] tends to have a policy that if a child turns up and their case seems bad enough, she'll*

*have them regardless of numbers*'. This school had admitted a young person in public care mid-year, without an official entrance test, as was normally required, illustrating how the school was prepared to give the young person a chance to succeed. Some of the schools noted that they adopted the local authority admissions policy which prioritised young people in public care and therefore indirectly affected their admissions. Furthermore, one of the PRUs explained that although their admissions policy did not prioritise young people in public care, there was a specific difference in the timescale in that they were required to set up provision for excluded children in public care within six days, rather than 15 days, as was the case for other young people.

#### **4.1.3 Whole-school Guidance and Training**

In terms of guidance on the education of children in public care, there was a distinction between those who were aware of guidance and those who were not. Generally, senior members of staff such as heads of year and external support staff, such as EWOs, were aware of some guidance they could access. Some referred to the national Guidance (DfEE and DoH, 2000) and some referred to guidance from their local authority, particularly from the ECPC team. Some members of staff had received information from the designated teacher within the school. This was generally viewed as useful to a certain extent, as one head of year explained, *'I refer to it as and when I need to'*. But while there seemed to be an awareness at senior staff level, this had not cascaded down to other staff, as no class teachers or teaching assistants indicated that they were aware of any guidance on the education of children in public care. Just two of these interviewees noted that they would know whom they would need to contact for specific guidance, if they felt they required this. This is probably fairly typical of any national policy, as practitioners' focus is on practice.

Schools were also asked about training they had received on the education of children in public care. This was focusing on whole-school training, rather than on specific training for designated teachers. (Designated teacher training is discussed in more detail in chapter 5.) Within the sample of schools involved in this research, there was no consistency as to whether staff had received training on the needs of children in public care. There were schools where some members of staff had received external training provided by the local authority. This tended to be training aimed at

designated teachers, which staff such as SENCOs or deputy headteachers had attended in substitute for the designated teachers. The training had focused on the attainment of the young people in public care and on the development of PEPs.

Generally, the schools had focused on awareness-raising amongst teaching staff. Typically, the designated teacher had supplied information on the needs of these pupils. This was part of the induction to all staff at the beginning of the academic year and sometimes through team meetings throughout the school year. A designated teacher in a secondary school explained that, *'I will always speak on the first day back in September about vulnerable groups, procedures, policies, so that staff are aware, particularly new staff, about who to contact should there be any disclosures'*.

As was the case above, this awareness-raising was often linked to child protection issues. Some schools, particularly those with only one or two pupils in public care, explained that they arranged briefings for all teachers who were involved in teaching a particular child. These meetings could therefore be arranged as and when the need arose. There were a few schools in which it was felt that there was no need for such specific training on the needs of one cohort of children, as the school ethos was to address the needs of all children individually anyway. As one headteacher explained, *'There's been training on the needs of children generally, but not specifically regarding those in care. There are children who are not in care who have greater needs than some in care'*.

In general, the whole-school training depended on the numbers of pupils in public care at the school. In more cases, in-school awareness-raising of the needs of these pupils was the only form of training that staff, other than the designated teacher, had received on the education of this cohort.

#### **4.1.4 Nominated Governors for Children in Public Care**

In order to gain a full picture of the support for the education of children in public care, the headteachers or designated teachers were asked whether their school had a nominated governor for these children. There was a varied response. Six of the 20 schools did not have such a nominated governor and one headteacher added that he did not feel that this would benefit the young people in public care: *'I don't see how a*

*lay person could develop the skills and expertise to have an effect. I think there are other ways of achieving this that relate to self-evaluation and monitoring processes’.* Counter-factual evidence was available from other schools which had identified governor responsibility.

Seven schools noted that they had a nominated governor for SEN and felt that this would include children in public care, either officially as part of their remit, or unofficially when needed. The role of the SEN governor in an infant school had changed:

*It’s only recently been taken on by our governor, who’s our special needs governor...he’s very supportive of the work that the school is doing with these children and he does know them all. He’s seen them in the classroom because he’s been in to observe them in the classroom.*

In two of the secondary schools there were specific links between the governors and the children in public care. In one case, the designated teacher was also the teacher governor, so she provided the direct link between these pupils and the school governors. In another case, the chair of the governors worked in the school’s SEN department and had taken an interest in the young people in public care through this work. There were only two schools that said they had a nominated governor specifically for children in public care. One of these had found this to be beneficial in raising awareness of the issues surrounding the education of young people in public care. However, the other school had a different experience. *‘They only take a nominal interest. They do know what’s going on, but I don’t think it would make a difference if they didn’t know’.* It is interesting to note that the school that highlighted the benefits was in the local authority that had produced a ‘toolkit’ for governors, as described in chapter 3.

There were clearly differing views on the benefits of having a nominated governor for children in public care. As this was often a recent addition, the long-term effects are not likely to emerge for some time. It seems to be a developing role that may need schools and LEAs to advise governors on the ‘appropriate’ questions to ask.

#### **4.1.5 Involvement in National Initiatives**

There were a number of national initiatives that the participating schools were involved with and which were felt to benefit children in public care. These included:

- Excellence in Cities (EiC), particularly the Learning Mentors strand
- Healthy Schools Initiative
- Behaviour Improvement Programmes
- Re-engagement for Learning
- Education Action Zones
- Creative Partnerships
- Values Education Programme.

One primary school explained how their involvement in EiC could benefit some children in public care. *‘We get EiC money and use that to fund learning mentors to support children with emotional barriers to learning.’* As in the local authority interviews, learning mentors were highlighted as having a particular influence on some young people in public care. One learning mentor explained that the young people *‘know they have someone to talk to – it’s a whole new dimension. They would have form tutors, head of year, counsellor, but now there are people whose job it is to do that, so more kids can be seen. It’s a very different relationship – we’re not their teachers. We can be holistic.’*

Some schools mentioned other local programmes that they felt had more benefit for children in public care. These included a range of projects (as mentioned by the local authorities – see chapter 3) such as a transition programme for Year 6 pupils, an alternative curriculum programme for key stage 4, a project promoting higher education for Year 9 to 11 students, a breakfast club, peer mentoring projects and a local behaviour improvement project.

#### **4.1.6 Funding to enhance the Education of Children in Public Care**

None of the interviewees was aware of any specific funding within the school to enhance the education of the young people in public care. However, some schools were able to access small amounts of money from their local authority for specific

activities concerning children in public care. One designated teacher commented that this was an effective way to manage the funding: *'I feel as a minority group it is better keeping any additional funding outside of school, so it is not used for the wrong purpose'*. Another designated teacher talked about school budget and said, *'There is no money tied to looked after children and I think there ought to be'*. Clearly, there were differing opinions relating to the funding issues but, on the whole, the schools noted that they would contact the ECPC team within their local authority if they required support of this kind.

## **4.2 In-school Support Strategies**

One of the key aspects of the support in school for children in public care was the existing pastoral system. For the most part, the schools felt that their pastoral systems *'whole-heartedly'* supported these children. As one designated teacher commented, *'I think it's one of things we take pride in'*. A secondary headteacher explained their strategy for working with children in public care:

*I think it's really around good pastoral care from the head of year and form tutor. Also keeping staff well informed before a child joins the school; also if there will be particular periods that are difficult for them. A lot of liaising with social services is either done through the head of student care [the designated teacher] or through the heads of year. We try to keep in good contact with social services and particularly with the [residential] home they're in.*

Many of the schools highlighted how their pastoral support structures were designed to meet the needs of all children individually. For example, *'I'd like to say that we treat them no differently from any others with individual needs'* and *'I think the main thing is that we're not doing anything different. They are provided with the same support package and curriculum.'*

The pupils themselves had similar views; they felt that the teachers treated them in the same way as other pupils. They felt that their expectations were equal and no differences were made. The emphasis was that any vulnerable child would receive an

individual programme to support his/her needs. In a small group setting, such as a PRU, all staff knew and worked with all pupils, so tailoring support to meet individual needs was part of this package. However, in a large secondary school, the situation was more complex. Below is an example of a typical pastoral structure in a mainstream secondary school, as described by the deputy headteacher.

### **Team Pastoral System**

In order to ensure that all the young people were visible in the school, this secondary school used a number of strategies. The pastoral structure consisted of 'teams' rather than year groups. Each tutor group was vertical, consisting of all five year groups, but only five pupils from each year. Therefore, when new Year 7 students started at the school, each tutor only had five new pupils to get to know and this resulted in the tutors becoming very familiar with their group. Similarly, there was a 'head of team' for every five tutor groups, rather than a head of year. This again meant that each head of team only had 25 new students a year to get to know. The deputy headteacher commented that *'it is easier to build bonds with students in this way'*.

With regard to the specific strategies to support young people in public care, the school had a designated teacher who had oversight of these pupils and raised their profile. The designated teacher worked closely with the heads of teams, to look at the individual progress and needs. The deputy headteacher felt that the designated teacher *'is brilliant at being on our backs to make sure that our paperwork is done, that everyone has been seen and she is really good at advocating for these young people'*. In terms of learning support *'within-school multi-agency meetings'* were held fortnightly. As well as the head of team and the designated teacher, the Connexions Personal Adviser (PA), SENCO, learning mentor, school nurse, careers adviser and the minority achievements coordinator attended. Whole-school issues were discussed, as well as the progress of individual young people, including those in public care. The young people in public care were encouraged to choose a member of staff to act as their 'key worker'. This member of staff, whether a learning mentor or a tutor, kept in close contact with the young person and liaised with the head of team and the designated teacher on behalf of the young person. The head of team also liaised with social services.

Another secondary school had a similar pastoral structure to the one described above in that all children who were ‘vulnerable’ in some way – whether because they were in public care, on the ‘at risk’ register, on the verge of exclusion, having attendance difficulties, or with special educational needs – were allocated a support manager within the school, who would be responsible for coordinating their individual support. They would also be the first point of contact for the young person. This enabled the large secondary school to support the individual needs of all pupils. However, it raises the question as to whether all young people who required the individual support were recognised and allocated a support manager.

Examples of the types of individual support provided for a range of needs for particular young people in public care included additional teaching assistant hours, EWO support, pastoral support programmes, learning mentors, peer mentoring and taxis to exams. One of the learning mentors highlighted that, *‘It’s very important that we don’t identify these kids in the public domain as problem children. There are lots with difficulties, but some with no problems – some have never been in trouble’*.

**Innovative use of existing school staff to support a child in public care who was presenting particular behavioural difficulties**

The junior school found the needs of one particular boy, Simon, very challenging, especially at times such as school assemblies. He liked practical activities and so the headteacher arranged for the site manager to work with Simon on a one-to-one basis for the first half hour of each day. The site manager was responsible for the health and safety of both staff and children and the general maintenance and security of the school. He explained the types of activities that he used to involve Simon in: *‘I used to do anything with him from clearing the playground to making things as projects. I tried to give him things that wouldn’t bore him.’* One of the projects involved making a trolley for the school which Simon then initialled to show he had made it. The school paid the site manager for this additional work with Simon for half an hour a day, totalling £12.50 a week. This work was felt to benefit Simon because the site manager was a positive male role model for him and provided one-to-one support through practical activities. The support was also provided at the time when Simon was most disruptive to his peers.

As well as providing individual support for the children in public care, schools explained that they also closely monitored their progress. After providing the support, *'We would then review and then make further interventions if patterns were emerging'*. If the schools felt that they could not provide the support that a young person required, they would usually liaise with the ECPC team within their local authority. As one designated teacher explained, *'If we had concerns we wouldn't be frightened of referring on, as long as we're talking to one another – this is one of the important things – that we're talking and sharing'*. As described in chapter 3, some of the local authorities were able to provide support teachers or learning mentors to work with individual children in public care, or with small groups. In one school, *'all the looked after children have mentors...and they play a huge part. The mentors I've met have been absolutely invaluable to these kids – to see the rapport that's developed between the children and the mentors!'*

Another important aspect of the support was the input from external agencies. A number of schools highlighted the importance of close liaison with social services and other agencies, including Connexions, the youth service, CAMHS, police and behaviour support service, educational psychology service as well as the carers. Support from the educational psychology service was something that many schools felt was lacking. Two schools referred to educational psychology time as *'like gold dust'*. Even in schools where children in public care were prioritised for this support, there were comments like *'the support is extremely limited'*. However, this did not seem to be the case in all schools, as a few noted that they would use the educational psychology service when they required it: *'if we did have a looked after child who needed this support then we would involve EPs, as we would for any child'* (see section 4.3 for more discussion of the support for children with additional educational needs).

With regard to the social services reviews for children in public care, usually the schools would make sure that a member of staff attended and time was available for this. Often this was the designated teacher for children in public care, or the class teacher for that child, *'whatever is the most sensible thing to do'*. There were cases, however, in which a school had not been informed or invited to a young person's reviews:

*I have to say that one child was having reviews and we'd never been invited. That's an issue. We've tried to build up partnerships – I've actually put it in my school development plan, to build up partnerships with other agencies and that's fine as long as you've got the people to build up partnerships with you on the other side. But it's something that I think is really, really important – that we work cross-agency.*

Overall, the main features of the schools' strategies for supporting children in public care were that they:

- treated each child individually
- did not highlight children in public care as different
- monitored their progress
- received support from their local authority
- collaborated with external agencies.

#### **4.2.1 Identifying Individual Needs**

Some of the schools mentioned that the individual needs of children in public care would be identified when they initially joined the school, particularly to identify whether they required extra support, such as a teaching assistant, to help them settle. For example, in one infant school the designated teacher said,

*The initial visit is really important, to watch them in another classroom... We've found that very, very helpful, to build up a picture of what these children need... The rest is purely by observation – how do they settle in the classroom – we're not into giving them tests.*

Another common means of identifying needs was through the PEPs. This involved setting individual targets that would then be reviewed regularly and appropriate support provided. A designated teacher explained how the PEPs help to identify the young person's needs, because they included input from the young person him/herself, as well as other agencies, then *'Targets are set and this is fed back into our system and reviewed as and when necessary. This could be every six or 12*

*months, or every two weeks, depending on need.'*

Some schools highlighted that they would *'identify the needs as we would for other children with needs... through the normal channels, through work-related issues, attendance issues'*. This also included *'monitoring them and getting to know them and assessing how well they're doing at school'*. The point about getting to know the children seemed to be a key factor in identifying their needs. Many of the designated teachers discussed the individual needs of their young people in public care in great detail. It was this in-depth knowledge that allowed them to plan appropriate support to meet the individual needs of the young people, in liaison with the ECPC team, the social worker and the carer. This also highlights the necessity for stability of school placement, so someone can get to know them.

There were a few cases in which schools were able to 'fast-track' to get the support the young people required. Some noted that they *'try and move very quickly before it's too late'* and they have *'quite a quick response'*. One designated teacher was less comfortable with 'fast-tracking'; *'It's always difficult for me morally for any child to jump the queue. Once they are looked after, looked after children are in many ways safer than other vulnerable ones who are still in the home.'* On the whole, schools were very quickly able to provide additional in-school support, such as learning mentor support. But where the children needed support from outside agencies, such as a statutory assessment for special educational needs, the process took longer. As one school commented, *'A statutory assessment takes a lot of time and can't be done in a day, but there isn't a short-cut mechanism, to give us funding or support in the meantime.'*

#### **4.2.2 Dealing with Sensitive Information**

In general, information on children in public care was dealt with in a similar manner in all the schools visited. In the smaller schools, such as the primary schools and special schools, most staff knew which children were in public care, although further information about specific cases would not be shared with all staff. As one designated teacher reported, *'I am the keeper of confidential information which I'd share as and when necessary with adults involved. This would be class teachers, but*

*they would not be given all the details. It's on a need to know basis.'* Other staff had a similar view:

*We're certainly told what we need to know. If someone comes to us new and they were in foster care then we would know this, but may not know all the background, but we don't necessarily need to know all the information. Whereas if one of the children in our class is taken into care, we would probably be more involved in the process.*

In larger secondary schools, usually only the staff in contact with the young person would know that they were in public care: *'I will provide the year head and more than likely the form tutor with relevant information, but not other staff'*. One designated teacher explained why she felt that the staff needed to know which pupils were in public care, *'Staff know the children in care because the thresholds for action are lower: for example, attendance or if there is a learning issue. Staff need to know in order to action this.'* This shows that if children in public care are prioritised, or monitored differently, then all teaching staff need to be aware of the pupils in this cohort. In cases where the children were treated in the same way as other children, then there was less reason to share information. In most cases though, the information was kept in a confidential file, separate from the main file. One school explained that they mark the general files with a red dot, if further information is held in a confidential file. This way, staff knew that further information was held by the school, but without having immediate access to it.

Other staff were generally satisfied with the processes of finding out which pupils were in public care. On the whole there was agreement that the relevant people were provided with appropriate information: for example, a head of Year 7 was aware of all the pupils in public care in that year, but not in the rest of the school and a learning mentor was aware of the young people in public care with whom she worked and was then provided with some background information on the young people. However, there were a few cases where staff working directly with the children in public care felt that they should have been provided with information on the history of the case. This occurred where there were particularly sensitive cases involving child protection issues, where class teachers felt that they were inadequately informed to deal with

situations in the most appropriate way.

The designated teachers were also asked whether the young people themselves were consulted on who information could be shared with. Some schools felt that this was something that they needed to address, but no issues had arisen at the time. One secondary school interviewee recalled one instance in which, *'the young person was asked if it was okay to say to staff that they had difficulties at home'*. Another school explained that they had talked about this with a young person, but felt they could not give them a choice in the matter, as *'You have to say such and such person has to know about x'*. Some of the designated teachers felt that this decision should lie with the professionals rather than the young person, *'Sometimes it's very obvious that it needs to be confidential – it's a professional decision'*. Furthermore, a primary school that had a particularly sensitive case with a child who had severe behavioural problems, explained that they did not want to acknowledge to the child how much some members of staff knew about his home situation, as they felt this would be detrimental to his integration. Overall, the designated teachers did not highlight any problems in managing the sensitive information within school, although there were some concerns about initially receiving relevant information when a child transferred to the school. Issues regarding transitions are discussed in the subsequent section.

### **4.2.3 Management of Transitions**

There were a number of strategies that the schools used to support pupils transferring from one school to another. Many of the schools had general support structures for the Year 6 to Year 7 transition, in order to support all pupils at the primary to secondary transfer. Schools highlighted that *'these [strategies] would be the same for any child, not just those in care'*. There was also specific provision offered by some schools for children who required extra support to settle in at this time. This included pupils with SEN and those in public care. This section focuses on the additional support provided to the children in public care, rather than focusing on the general strategies put in place. One secondary school offered extra visits to their school for the young people in public care. Another type of support was aimed at the foster carers; a secondary school designated teacher had spoken to the foster carers of children in Year 6 to address their concerns about the transfer to secondary schools in general. Some schools were aware that their ECPC team ran transition groups

specifically for Year 6 children in public care (although they were not all aware what this actually involved).

On the whole, most of the specific provision for children in public care was aimed at those who were transferring mid-year. Commonly, the SENCOs would be involved in assessing the pupils' needs and putting in place appropriate strategies for support. A SENCO in a secondary school explained her role in supporting children with SEN who join mid-year:

*I would ask to spend the first hour on the premises with them, then the head of year would take over to pair them with a mentor. Depending on the year they join the school, there are also the option choices to consider and I would take a lead role in helping to sort these out too.*

For mid-year transitions, many of the schools emphasised the importance of careful tutor group or class placements. As the designated teacher of a primary school said:

*We tried to integrate them and think about where they sit and which classes they go into, as some classes make children more welcome than others. We would assign them with a couple of children who would be welcoming and include them in a social group. Then after they've settled down socially we would start to think about the academic progress and whether they need extra help.*

This strategy of helping the children to settle in socially before focusing on their academic demands were made evident in a number of the primary schools. Others explained that they had set up a part-time timetable to support a child's integration to their peer group. Another important aspect involved liaison with all the appropriate agencies, as a secondary head of year noted, '*We would have good liaison with the school and home involved. I would make sure that there's a PEP and an IEP if appropriate and just day-to-day general support and contact with social services and the home.*' A school social worker in a special school was also involved in the mid-year transitions and explained his role:

*As kids are inquisitive in nature and are likely to ask other kids why they are in foster care, I sometimes do some work around this with individual children, especially when joining the school, to talk about how to manage these questions from children. I also introduce myself to the children and make sure they realise I'm not a teacher – I might take a child out to lunch to get to know them a bit.*

The examples above illustrate that across the schools, many different strategies were used to support the transition of children in public care, particularly where this occurred within the academic year. Some of the examples were unique to the particular schools, whereas others such as peer mentoring and careful class placements were more common across the schools involved. It appeared however, that the management of transitions depended in part, on the resources available at the time.

## **4.3 Additional Educational Needs**

### **4.3.1 Special Educational Needs**

In the vast majority of schools it was stated that the provision available for children in public care who had special educational needs (SEN) was '*exactly the same as for everybody else*'. It was occasionally noted that those involved in an SEN assessment process would be different – carer rather than parent – from other children and that additional people – social worker, member of local authority ECPC team – might be involved. But as far as the provision itself was concerned, there would be no differences for children in public care. Although most interviewees stated that their schools did not assume that all children in public care have SEN, a small number of schools did, however, automatically place these children on the SEN register. It was not immediately clear as to the appropriateness of this response as inclusion on the register, under the terms of the Code of Practice (DfES, 2001) implies a specific intervention rather than merely the need for monitoring. Further investigation is needed into this practice as it could result in false messages being given about a child.

Some schools seemed to have excellent provision for all pupils with SEN, in that they

had a number of learning support assistants (LSAs), teaching assistants (TAs) or learning mentors (LMs) who could be allocated to support children with SEN. It was clear that individual children in public care had benefited from these provisions. For example, a school with over 20 TAs was able to assign two TAs with a responsibility to provide mentoring and in-class support to a child in public care, and additional tasks such as meeting the child from the taxi to ensure she made it into lessons. Elsewhere, young people – particularly those with behavioural and social integration needs – had benefited from the one-to-one support provided by LMs. The deputy headteacher in a school with LMs noted that they were very good at dealing with challenging behaviour, and that as they are not teachers, they are ‘*not automatically the opposition*’ as teachers are, so they gain more trust from pupils. One of the pupils in public care who attended this school commented, ‘*People like me in foster care in other schools can't talk to people. All people in foster care should come here – the mentors are great.*’

In a small number of instances there was reported to be a greater degree of provision for children in public care than for other pupils with SEN. Usually this was as a result of the other processes in a child’s life. Additional provision mentioned in individual cases included:

- greater school support for foster carers than for other parents in accessing SEN services and support through the SEN assessment process
- a small amount of additional support for SEN provided by ECPC team, although all other school-based provisions would have been no different in other circumstances
- if necessary, at care reviews the school requested a SEN assessment, which speeded up the assessment process
- prioritisation by the LEA when schools requested emergency funding, and through the existence of the ECPC team
- being in public care considered as one of the – but not the sole – criteria for prioritisation when resources were limited.

However, it should be remembered that these schools were the exceptions rather than the rule. In most schools, SEN provision for children in public care was the same as that for those living with their parents.

Some interviewees reported on barriers to accessing SEN provision. One of these was the time taken to assess a child as having SEN; another was the limited funding available at school and LEA level to provide support. A number of schools expressed frustration with the limited amount of educational psychologist time that they had been allocated, and the need to think carefully about who would best benefit from this service. But in another school it was noted that a very active educational psychologist came into school regularly, sat on all relevant committees and had hastened referrals to, for example, CAMHS. '*Finding the right person*' to provide the SEN support was reported to be a further barrier to SEN provision on some occasions; another interviewee explained that the relationship between the child and the supportive adult needed to be good. However, several SENCOs felt that they did not encounter barriers to providing for the needs of these children, as comprehensive support strategies were in place.

In general, schools felt that provision for children in public care with SEN differed little, beyond their in-care circumstances, from that for other children. Schools prided themselves on offering support to children based on individual need and for the most part provision was felt to be satisfactory. It is notable that local authority personnel expressed similar understandings of the situation (see section 3.12.1 above).

#### **4.3.2 Mental Health Needs**

The picture of mental health provision for children in public care was more ambiguous than that for SEN support. Some schools reported receiving support through weekly visits from the school counsellor, school nurse, psychiatrist or the LEA's behaviour support service. A number of other sources of provision for mental health needs were mentioned, including clinical psychologists, child and adolescent unit, CAMHS, child and family therapy, school medical officer, speech therapist and a play therapist provided by a voluntary agency.

There were differing views as to whether the fact that a child was in public care made

it easier or harder to access mental health services. As a couple of interviewees noted, in other cases families can be asked to request a referral through their GP, but for children in public care this is not always possible. However, other avenues are available in these cases, including referral through the social worker and by the school itself. One SENCO felt that it was easier to access provision for a child in public care as the school could raise the issue through the Care Review, or call a multi-agency meeting and request support through that. Also, it was noted that parents could be reluctant to accept that their children had mental health needs and therefore not attend appointments. But many other interviewees did not comment on whether being in public care affected access to provision.

In one case the school was not aware that it had the capacity to make referrals, which had held up access to services for several children. This points to another issue: that some school staff stated that they were not knowledgeable about the provision available. In some cases, as for provision for children with EAL and asylum seekers (see below), this was because they had not previously had responsibility for children with mental health needs and therefore had not had reason to access services. But in a number of schools with children with serious needs, provision had not been forthcoming. In one case a social worker had told the school that it was not worth applying for clinical psychology time for a child in public care, as it would not be available. Another deputy headteacher reported having '*pushed and pushed because [the child] was obviously carrying a lot of emotional baggage*', but without success. In another case a school was seeking help for a child '*damaged by trauma*' and who, after a six-month wait, was now '*potentially in real trouble*'.

However, although those who had dealt with cases of mental health need often felt that provision was inadequate, several interviewees also expressed understanding of mental health professionals' '*massive workload*' or stated that, '*This is not criticism because they're overloaded*'. There were also stories of successful provision. One school invited the NSPCC play therapist, who was working with one child in public care, into the school to give staff pointers in how to approach '*unravelling*' or '*sorting out their muddles*' and helping children to self-regulate. This was felt to have been very useful, as most primary school staff did not have expertise in counselling for small children.

Overall, in many schools, support for the mental health needs of children in public care was felt to be sufficient, although in some schools, particularly those that had assisted children with severe needs, there was frustration at the limits to the provision available.

### **4.3.3 English as an Additional Language and Asylum Seekers**

The majority of schools visited had few if any children with EAL or who were asylum seekers; fewer still had children in public care in these categories. As a result, most interviewees reported that they did not know what support was available for this cohort, but stated that they would contact either the Ethnic Minority Achievement Grant (EMAG) team, the specialist teaching service or the traveller education unit in the LEA for advice and additional support. Some stated that they would use existent strategies of support: examining the individual needs of the child and requesting additional support where necessary; the usual monitoring and support, or maintaining close links with foster carers. As one headteacher reported, *'We can accommodate these children... within our normal policies. If we had significant numbers of these children we might have to do something different'*.

In the small number of schools that did have a sizeable proportion of pupils with EAL, some of whom were asylum seekers, there was provision available, in the form of teaching assistants, EMAG teachers or EAL teachers. In some cases other teachers had also been trained in teaching children with EAL. One SENCO in such a school reported that, *'We're a very multi-cultural school and have a lot of resources for EAL children. The whole curriculum is planned with these children in mind.'* Another school was able to access additional funding for refugees, which was spent on in-class support in the child's first language, and trips away. These schools were also aware of the availability of legal advice, translation services and equality services within the LEA. A couple of schools that had had a small number of pupils who were asylum seekers or with EAL, although not in public care, reported that they had been able to access some support, including a specialist teacher for six days. But this provision was said to be insufficient and difficult to access if the school had minimal pupils with these needs. Notably in all schools, the provision available for children in public

care did not differ from that provided for other children.

## **4.4 Behavioural Issues**

### **4.4.1 Exclusions**

Exclusion, particularly permanent exclusion, was an event where the fact that a child was in public care seemed to be significant, even in those schools that saw themselves as treating all children inclusively. In general, it seems that considerable effort was put into avoiding exclusion of this cohort.

Some schools had a policy of not excluding any children in public care. There was awareness that exclusion creates additional problems when education has already been disrupted and that *'the exclusion of a child in public care could be significantly more traumatic, in terms of a rejection'*. One designated teacher felt that children in these situations were often *'testing the boundaries to see, "Do you really want me?"'* Other interviewees noted that where home life was difficult, *'school is where baggage is dealt with'*, and therefore exclusion would not necessarily resolve the problem. In several schools without a formal policy of non-exclusion of this cohort, it was stated that alternatives were sought very rigorously and far more so than for other children. Interestingly, in several cases where interviewees stated that children in public care were treated exactly the same as other pupils in exclusion situations, other comments contradicted this statement and showed that there was an understanding of the particularly serious consequences of excluding a child already vulnerable through being in public care. For example, one interviewee stated that there was no preferential treatment for children in public care, but *'a bit of rule bending,'* including overlooking swearing that was usually an excludable offence.

Where pupils in public care were excluded, several interviewees said that it would be because of a health and safety issue – if the child were a danger to others – rather than for behavioural reasons. Alternatively, if the school had sought additional support and this was not forthcoming, exclusion may have been seen as the only solution. For example, when asked about the school's policy on exclusions of children in public care, one headteacher responded that it was, *'Not to do it, unless we have tried absolutely everything else and only if it is in the child's best interest – in that it would*

*mean that they could access something better than being here.'* Some interviewees stated that exclusion was therefore *'not a punishment'* but an issue of safety or educational provision.

Additionally, where young people in public care were excluded, in several cases the conditions of these exclusions differed from those for other children. For example, in some schools, the child spent the exclusion period in school, in a referral room or exclusion room specifically established for vulnerable young people for whom exclusion from site would be damaging. In one case this provision included a teaching assistant taking the young person off site at lunch times and was undertaken because the carer could not take time off work. This was notably the only child in public care 'excluded' from this school in recent years. In other schools it was stated that exclusion had been delayed longer or had been for a shorter period than it would have been for another child with similar behaviour.

A number of school-based staff, including designated teachers, heads of year and EAL or SEN teachers, reported that they would act as an advocate for the child against the governors or headteacher in cases where exclusion was imminent. Often it was reported that their input was decisive in preventing exclusion, but also that the headteacher was responsive to the views of these professionals. For example, one SENCO stated that, *'We're very, very wary of excluding children in care and usually the headteacher has withdrawn the exclusion if we've gone to say that the child is looked after'*. However, it should be noted that where the headteacher also holds the designated teacher post, it would be difficult for them to advocate for children in public care in this way.

Often preventative work was a key focus for this cohort. In one case, the designated teacher and the EWO with the young person examined the possibility of a managed move, when the school was saying that the risk of exclusion was as high as it had ever been. The process was said to have been *'extremely positive'* as not only did the pupil have a *'period of success'* as he sought a good report in anticipation of the move, but also the potential receiving school's relative lack of welcome indicated the advantages of making the present educational placement work.

Reintegration did not seem to be particularly different for children in public care, except in terms of the people and sometimes numbers of people, involved in reintegration meetings and providing subsequent support. In one school it was mentioned that birth parents as well as carers might be involved; others noted that social services would play a role, as well as other agencies involved in supporting the child. One teacher mentioned that parents are usually asked to come in with the child on the first day following an exclusionary period, but that when children in public care are brought in taxis it is not always possible for the carer to attend with them. Two EWOs interviewed noted that in normal circumstances they would not have a role in reintegration as that was the job of the reintegration officer. However, where a particular relationship had been built up with a pupil in public care, or where the EWO was specifically assigned to work with these young people, they would be involved in meetings and support once the child returned to the school.

#### **Long-term view of reintegration**

In one reintegration case a pupil from one school was resident temporarily in a secure unit, and the SENCO visited him, as it was felt '*important for him to know we were still there and the place here when he returned*'. The secure unit had never previously had such a visit from school staff and the pupil in question returned to the school and repeated Year 11. This case illustrates the value of school staff having a long-term view of their responsibilities towards the young people.

Some of the pupils interviewed reported that they had been excluded; the information they provided on the incidents ranged from not having known why it happened, to a developed response which indicated that the young person had learnt alternative behavioural strategies to avoid repeating the incident and hence the exclusion. Approximately two thirds of the pupils spoken to said that they had never been excluded, but these data may not be representative given the way in which young people were selected for interview. Several foster carers had little information about whether their foster child had ever been excluded, or lacked details of exclusions known to have occurred previously. Two had found out about the event from the child and had then '*had to put a jigsaw together*' to understand the circumstances. One commented that the child's social worker was so unforthcoming that '*she could*

*work for the secret service*’, and exclusions were one issue about which several carers felt they could have benefited from more background information. This relates to the more general problem that carers were often not provided with adequate educational information prior to taking the children, as one carer commented, *‘you get very limited information on the forms you get when you get the child which really annoys me because they’re telling you nothing really’*.

#### **4.4.2 Attendance and Truancy**

In almost all schools, it was stated that the attendance and truancy matters relating to children in public care were dealt with in the same way as any other child. Strategies mentioned included the school telephoning home on the first day of non-attendance; senior teachers talking the issue over with parents or carers; and home visits by EWOs in the case of persistent truanting. Additionally, in many schools it was felt that attendance of this cohort was similar to that of *‘any other random group of children’* and that there were no particular issues regarding the attendance of children in public care. However, in these and other schools, mention was made of several factors relating to their in-care status that meant it was either easier or harder to ensure that the child attended regularly.

Several interviewees noted that the attendance of children in public care could be better than that of other children. Reasons mentioned for this included:

- transport being provided, either by taxi or school bus: *‘it’s good because they’re brought’*
- carers being *‘much better at sticking to the rules!’*, possibly because they were aware that they were being monitored
- the school being the one place where children in public care have stability, and hence their active choice to attend regularly
- children in public care being easier to track because social services could be contacted immediately, while for other children parents are not always available
- better records in schools for children in public care, therefore it being easier to contact the responsible adult

- some children's homes and foster carers being good at contacting the school to inform them if a child was not going to attend that day.

In a minority of cases the attendance of young people in public care was highlighted as an issue greater than for other pupils. In one school truancy was a problem, where children were living in a residential home which was reported to lack an educational supportive environment in which they were encouraged to attend school daily, or in which peer pressure meant that it was easier to conform than attend school. Another interviewee mentioned the problem of some children in public care having difficulty getting up in the morning, due to habits gained in the parental home. However, it was also noted that children not in public care also have this problem and that the problems were often greater prior to children being placed in a care environment; *'the vulnerability is removed because of the parental situation'*. One further difference in this respect was that carers may not use physical force to get children out of bed. This was mentioned as a factor by an assistant headteacher, but also by a carer who said that, *'The trouble is he knows his rights and all we can do is keep asking him to get up'*.

Although some schools did monitor the attendance of children in public care, either for their own purposes or because requested to by the local authority, many stated that the attendance of this cohort was monitored in the normal way. Notably however, many of the latter interviewees had a good grasp of the attendance histories of the individual children in public care with whom they worked and were involved in strategies to ensure attendance of these children. These included first day telephone calls to foster carers and residential units if the child was absent, followed by immediate contact with social services; or a home visit by an educational welfare officer if the absence was repeated on three occasions.

Interviews with carers and pupils demonstrated a range of attitudes to school, including children who showed their eagerness to attend by always being ready for the school bus and being upset at having to miss classes if needing to attend the dentist, or pride at their certificates for attendance. Other pupils, or the carers said that they would have a day off occasionally, or they did not like school or particular lessons and thus to avoid attending. Occasional mention was made by carers and

teachers of the need to be flexible in order to allow young people to attend contact sessions with family members. However, in general the interviews with carers and young people provided no conclusive data as to whether these children were more or less likely to *'bunk off'* than their peers because they were in public care. It seems that overall attendance was not a particular issue for most children in public care in the case study schools and in fact was marginally better for this cohort than for other pupils at these schools.

#### **4.4.3 Bullying**

School-based interviewees were asked whether they thought that children in public care were more vulnerable to bullying or being bullied than other children. Some stated that they did not think so; others said that they had no experience of this, or that the school had no data and were therefore reluctant to make definitive statements. However, the majority of interviewees felt that this cohort was more vulnerable to bullying and/or being bullied than other children and they gave a variety of insightful explanations for their views.

In many cases bullying or being bullied was related to a child's general vulnerability. Several interviewees mentioned the problem of some children in public care having low self-esteem. One stated that bullying or being bullied occurred *'mainly because bullies tended to work on low self-esteem and looked after children tend to have low self-esteem'*. Some children in public care were said to have *'a perception of bullying... it's almost a thin skin'*. On the other hand, other comments suggested that *'they often get a reputation without even trying. Any child with odd behaviour becomes a threat to other children sometimes'*. One interviewee reported on some children exhibiting attention-seeking behaviour because of their past experiences. Several school-based interviewees reported that they did not tell other children that a pupil was in public care, but that the pupils sometimes disclosed information themselves that left them vulnerable to bullying. In other schools though it was said that *'it's never been an issue with children knowing'* about others being in public care, in one case apparently because many of the children at the school did not have the same surname due to parents remarrying. Several people mentioned aspects of what one named the *'provocative victim'* – the child who provoked negative attention either through *'being not very nice to other pupils'* or by using their status as *'in care'* to

mark themselves out as different. Notably, the circumstances that were said to give rise to children in public care being bullied were similar to those that resulted in the child in question being a bully themselves. As one designated teacher noted, '*At a certain stage it becomes difficult to say which way around*', that is, whether the child in public care was being bullied or bullying others.

Often in the case study schools, the bullying incidents were not directly resultant from the label of being in public care. Rather, in general what led to bullying was said to be an individual's characteristics, but these were frequently felt to be related to the circumstances that led to the child being in public care. For example, children were said to have been bullied because of their height, weight, or unclean appearance, where home circumstances had left them not properly cared for or poorly fed. A number of members of staff mentioned that some children in public care bullied or were bullied because they had difficulties forming friendships with peers. In this context, a small number felt that these pupils responded better to adults. The difficulty in forming friendships relates to other comments regarding these children's lack of social skills, reported across the spectrum from infant to secondary schools. Both bullying and responding to other children's bullying behaviour was suggested to be due to an ignorance of how better to deal with the situation, or a lack of understanding as to what was acceptable or unacceptable behaviour.

Schools' reported strategies for dealing with bullying included use of a circle of friends, social time, peer mentoring, a box for encouraging children to share information about bullying and involvement of an educational psychologist or the behaviour support service. In most cases these were said to be the provisions made for any bullying situation, rather than just for children in public care. One headteacher reported that, in line with the school's anti-bullying policy, in the case of incidents they gathered lots of information, recorded data and looked for patterns. The parents of both the perpetrator and the victim would be brought into school, to discuss what had happened and the school then worked with both the parents and the children to resolve the situation. A circle of friends might be instituted to support the perpetrator, with the victim being given support elsewhere. This is a good example of a school very aware that provision is needed on both 'sides' of an incident.

In many of the cases where carers reported that there had been incidents of bullying, they had talked the issue over with the child's teacher, which in some instances was seen to bring about a resolution. Several carers mentioned that their foster children had been bullied. Some had minimal information about the events; in one case the carer stated that it would have been helpful to know about previous incidents of bullying. A few mentioned talking with the child's teacher about incidents. Some carers talked of disputes between siblings, or between groups of children who went from *'being best friends to hating each other'*, although this could be perceived as quite 'normal' behaviour of children and young people. It was not clear in these circumstances that the behaviour could be described as bullying, or particularly that related to their being in public care.

Almost all pupils interviewed were aware that at least some of their peers knew that they were in public care. In some instances they reported that they had told their friends themselves; in others, the fact that they arrived in a taxi was said to be known by others. Most children did not mind their peers having this knowledge and most did not feel that they had been bullied because they had been in public care. The minority of cases in which it was stated that other pupils treated them differently included one pupil who had been bullied who stated that it was because of his weight, rather than because of his home situation; an infant child who said that *'sometimes they don't let me join in their games'* and a third who stated that when others called him names he told his foster carer. A fourth pupil stated that she was not really happy with other children knowing that she was in public care because *'they take the mick'* and the school putting them in detention was said not to help. Notably regarding this pupil, members of staff expressed the opinion that she made herself vulnerable by telling others that she was in public care.

These comments show that the nature of bullying is a complex issue and one to which many – though not all – children in public care are subject. Such behaviours result not necessarily from the label of being in public care, but from aspects of a child's situation or character which are often associated with, or have developed as a result of, their home circumstances. A simplistic but perhaps apt summary would be that children in public care are vulnerable in general and hence in some cases vulnerable

to bullying or being bullied in particular, but this bullying is not necessarily because they are in public care.

## **4.5 Raising the Attainment of Children in Public Care**

### **4.5.1 Monitoring Progress**

Some schools explained that the progress of pupils in public care was monitored through the normal channels, in that ‘*All pupils are monitored, assessed and progress recorded*’. Other interviewees said that they monitored these pupils individually, often through their PEPs. As one designated teacher explained:

*I monitor them and I have termly meetings with the [ECPC team] and we look at their academic achievements and record their national curriculum levels, reading ages, spelling ages, and maths ages. We look at supporting those who are under-achieving and those with specific learning problems. We look at putting in programmes for them.*

On the whole, the schools tended not to monitor the young people in public care as a separate cohort, because most schools only had a few pupils in public care and therefore it was more appropriate to monitor each pupil individually.

One school felt that they had a particular problem with the progress of pupils in public care in Year 11. As the deputy headteacher explained, ‘*We hang on to them until the middle of Year 11, but then they start kicking against it and drop out*’. This school had recognised a point at which there was a problem and was starting to try and address this. What was evident from all the interviews was the extent to which the designated teachers in particular could discuss in depth the individual progress of the young people in public care, throughout their time at the school. One designated teacher had noticed a difference in the attainment for those who had recently experienced trauma, for example, those who had gone into care during secondary school and those who had experienced trauma over a long period and as a result had developed their own strategies to cope with this.

## **Entry for Exams**

The secondary schools were asked whether they had policies for entering the young people in public care for GCSE examinations. Some highlighted that they would positively discriminate, by providing resources to these young people and others in need, to support them at key stage 4 and to ensure that they were then entered for their exams. One deputy headteacher stressed that, *‘We do everything possible to ensure academic achievement’*. Other schools indicated that, *‘The policy for entering children for exams is the same for all children, but we track children in public care more carefully’*. This particular school felt it would be beneficial to collect data and review this every term, for the pupils in public care. One of the secondary schools explained that all pupils who had completed the relevant coursework were entered for the exams. However, this school noted that there had been an incident where:

*We did actually mess up with one child in public care this year – they hadn’t completed some coursework and social services weren’t aware of this and felt that had they known earlier they could have done something about it. I think they were probably right as well, we probably slipped up.*

This illustrates the importance of inter-agency collaboration, particularly between the schools and social workers, to ensure that these young people do not *‘slip through’*. Interestingly, this particular school did not have a prominent designated teacher. Some of the tasks often allocated to a designated teacher were shared amongst the heads of year. This suggests that where there was not one person advocating for these young people, it may be more likely for incidents similar to the one described above to occur. The role of the designated teacher and multi-agency working are discussed in more detail in chapter 5.

## **Post-16 Provision**

Approximately half of the secondary schools in the sample interviewed noted that they prioritised young people in public care for careers advice or access to the Connexions service. As one designated teacher reported, *‘The Connexions worker and I try to prioritise need... by looking at vulnerable groups’*. The young people in public care were either prioritised as a separate cohort or with other vulnerable young

people, such as those with SEN. This resulted in earlier, or more frequent, careers advice.

Post-16 planning often began in Year 9 and continued through to Year 11. Many schools commented that they *'get very good support from Connexions'* and that part of the provision for the young people involved visits to local colleges. One school, that did not mention young people in public care as a priority for careers advice, explained that they had two young people in public care who *'just went into the sixth form as everyone else did'*. It was usually the designated teacher and the head of year who were involved in helping the young people plan for post-16, together with the SENCO for those with SEN.

#### **4.5.2 Support Activities**

There was inconsistency across the schools as to whether the young people in public care participated in the available support activities. Some explained that they did take part, or at least that it depended on the individual: for example, at one school, one pupil had involved herself in a homework club and some sports activities, whereas another pupil in public care had not. Other schools explained that the young people could take part if they wanted to, but had chosen not to. There were a number of schools, however, that noted that the biggest barrier to the young people's participation in support activities was transport. In some cases this was due to the rural setting of the school, making it difficult for all pupils to take part in after-school activities; as one interviewee stated, *'I would say the greatest barrier at this school is getting the children home – there aren't any late buses, so taking part in sporting activities after school can be difficult for pupils, but not specifically those in care.'*

In other cases, the barrier seemed more specifically because the young people were in public care, as one secondary school explained with one pupil in public care, *'His living situation hampers that. He is taxied here and there, so that is hampered... care homes are not flexible about times for collecting pupils.'* There were some schools that actively encouraged the young people in public care to take part in activities, by making sure they were aware of what was on offer, *'we do what we can, grasp what they say they're interested in'*. They also arranged alternative transport specifically for these young people when this was an issue, through discussion with the social worker and the taxi company. One PRU went a step further than this by supporting

the carer: *'On one occasion the carer was having a lot of difficulties with a young person in the evening, so I contacted the area youth service and they targeted him for a swimming club...and picked him up and took him to that.'* This illustrates how a young person and his carer were supported on an individual basis, through the designated teacher collaborating with appropriate outside agencies.

#### **4.5.3 Personal Education Plans**

Schools' involvement in the PEPs for their pupils in public care varied considerably. In some schools the designated teacher was primarily involved – from supporting the young people in their contributions, through to coordinating the whole process. Only one designated teacher indicated that he was not involved in the PEP process; in this case, the responsibility lay with the heads of year. In some schools the PEPs were completed by the class teacher or the person who knew the pupil the best; *'it really depends on who works most closely with that pupil'*. In some instances this was the SENCO; in others, it was the class teacher. Support assistants also had input in some cases, by liaising with the staff involved and contributing to the target setting. On the whole though, most schools participating in this research recognised that they should have input to the educational sections of the PEP, including the target setting.

The allocation of overall responsibility for coordinating the PEPs caused some confusion. Some schools felt that the PEPs should be initiated by social services, although, as one designated teacher said, *'this is a bit of a grey area'*. This designated teacher had contacted other local schools to try and clear up the confusion. He explained that one school had said they were involved in the PEPs, but the other was not, because they too felt this was the responsibility of social services. Some schools commented that the process was slow and that they did not always receive copies of the completed PEPs once the information was sent to social services. One designated teacher felt her role in the PEPs was to chase up the social workers. *'It should be initiated by the social worker and my responsibility should be to keep knocking on the door to make sure they do it, but I don't always get an answer'*.

As well as the confusion regarding the initiation of the PEPs, in some schools there was also confusion between the different plans – the PEPs, the Individual Education Plans (IEPs) and the Pastoral Support Plans (PSPs). For example, a few interviewees

provided information regarding the IEPs, rather than the PEPs. However, others were conscious of the need for the plans to link together, as a teacher from a special school commented:

*I think it's important that the plans interlock to be successful. All children here have an IEP and the PEP will be a lot of repetition of this. But there will be other things that are personal to the kids in care that wouldn't be included in an IEP.*

In this case there was a clear understanding of the role of PEPs, alongside that of the IEPs, but this was not always the case; some felt that the PEPs were just 'a paper exercise'. As one interviewee commented:

*I don't know that PEPs really make that much difference to be honest. The PEP for a looked after child is that you'll do what you normally do for other children, so why do you need to fill a form in about it? We contribute to the PEP, but it's the social workers' ultimate responsibility to do this.*

The process by which a PEP was completed also varied. In some instances, all the relevant parties met, including the young person, their carer, the social worker and the relevant teacher, and the young person's progress was discussed, reviewed and targets set. In other cases the PEP was passed to each representative to complete their section, but one designated teacher said:

*I'm not happy with the system for this. I would like everyone to meet and sit down together to draw up the action plan for the year [for the PEP], rather than it just being a paper exercise. It would be better if it was more like the SEN plans.*

It seems that until the schools have a greater understanding of the PEPs and a process for initiating and maintaining them, the benefits of the PEPs may not be recognised.

Interestingly, nearly all of the carers interviewed were aware that their child had a PEP. However, their involvement in the reviews and the extent to which they felt this was useful did vary. One carer highlighted the benefits of the PEP: *'It's nice to know what they're aiming for, because it is a worry, as his parents, to know what they're going to do in the future. So for someone to take some of this burden off us is brilliant.'* In other cases the carers were aware of the PEP, but had minimal involvement: *'It has been set up, but I wasn't really involved. It was done between the social worker and the head. I do have a copy.'* On the whole, the carers were aware of the PEPs and had copies of them, but usually felt that they had not been involved in the process.

In terms of the pupils who were interviewed, the majority were not sure what a PEP was, nor were they sure whether they had one. However, a small number of the pupils (all of whom were secondary age) did know that they had one. They made some positive and negative comments about the PEPs. One young person said, *'Because I'm in care I've got a PEP... it's useful because I have it every six months and I said that I wanted to learn to play the violin and now I'm going to get lessons from September every week'*. This young person was aware that the reason she had a PEP was because she was in public care and she had also used the review as an opportunity to express her views. She was also able to identify by name the people involved in her PEP reviews: her social worker, the designated teacher, her carer and the ECPC teacher. Another two young people also felt that the PEPs were useful for two reasons: first because they talked about what they had achieved and, second, because targets were set. There was also one sixth-form pupil who was adamant that the PEP was *'not at all helpful'* and felt it was *'just another document'*. She explained that she did not like having to have everything written down formally.

Overall, school staff, carers and the young people themselves highlighted some of the benefits and the disadvantages of the PEPs, from their perspectives. Some clearly had a good understanding of the processes for drawing up the PEPs and reviewing them; however, this was not the case across the board and there were some cases where appropriate systems to manage PEPs did not yet seem to be in place.

## 4.6 Overview of School Support

### 4.6.1 Monitoring and Evaluation

In almost all schools visited, additional mechanisms had not been developed for monitoring and evaluating the educational provision for children in public care. Rather, existing data gathered through school- and care-related systems were used to track the performance of and provision for this cohort.

Many school interviewees reported that monitoring and evaluation strategies for these young people were no different from those for other pupils. The systems in place included termly gathering of assessment data, annual reports and parents' evenings. However, as many of this cohort had SEN or were placed within the SEN remit there were additional SEN monitoring mechanisms in place that children in public care fitted into. One headteacher mentioned that the SENCO had a '*watching brief*' for monitoring these children academically and that the pastoral team, including the SENCO, head of student care, designated teacher, child protection coordinator and learning mentors, monitored individual pupils. Special schools and PRUs in particular tended to have more detailed systems for monitoring the performance of their pupils, including the target setting requirements of Individual Education Plans (IEPs) and systems for regularly recording and rewarding learning and behaviour targets.

Being in public care added an additional layer of monitoring through the requirements made of schools by outside agencies. One aspect of this was the PEPs and care reviews in which schools had an input. In one school it was said that there were more meetings concerning and hence greater monitoring of, children in public care as the local authority ECPC team '*want to know how things are going*'. Overall, however, the focus was on standard school monitoring, particularly as in many cases the number of children in public care in the school was felt to be too small to warrant discrete monitoring as a group. Rather, some designated teachers felt they were adequately aware of the needs and progression of individual children in public care without formal monitoring and evaluation systems.

## **Children's Views**

Access to children's views was similarly partly facilitated through mechanisms available to all children – including school reports, parents' evenings and Year 9 subject selection meetings, as well as activities particular to individual schools. In one special school, each child's key worker and class teacher would meet with them regularly each week. In addition, however, if a child had pressing issues, time would be made to talk about them, if necessary with the headteacher. In a PRU the headteacher reported having a '*whiteboard conversation*' with a young person who '*wasn't very good at opening up*' but was able to write answers on the board. One of the issues identified was the lack of consultation about what he wanted. With the child's permission, the headteacher shared this information with his social worker.

However, the circumstances of care again provided additional opportunities for discussion with the young people. Several interviewees mentioned that the PEPs were used to access children's views on their education. It was noted that the PEPs have to be written with the young people in question and include a section on their views, including their achievements and their targets. As one designated teacher stated of the young person's involvement in PEPs, '*If they don't buy into it, it is very difficult*'.

Several designated teachers also reported that they spoke to children in public care prior to their care reviews. One reported that she wrote down what the child said and if the child gave permission, shared this information at the review, in order to save the child from having to speak at the meeting in case they felt dis-empowered. Another designated teacher ensured that the young person knew that she would be at the reviews, so that she could say if she was not happy with this in advance.

Many schools seemed to involve the young person in the decisions regarding their educational provision where appropriate, through the PEPs and other standard school mechanisms. However, in some cases it was felt to be inappropriate for the school to involve children in planning changes to their educational provision, for example for a young person to be aware that extra resources were being put in for her in order to avoid labelling and any negative effect on her social relationships. In an infant school, the designated teacher felt that any consultation regarding, for example, a new school should rather be undertaken by the foster carers or social workers. Conversely,

another infant school had reintegrated a child who *'had expressed a desire to move back'* to that school, after a move of school following a care placement change. In most cases however, these decisions did not seem to relate specifically to their in-care status.

#### **4.6.2 Successes**

All interviewees were asked what they felt their schools' successes were, with regard to children in public care. This section summaries those responses. Many interviewees reported on successes relating to individual children in public care and of these, keeping the young people in mainstream schooling was seen as a key success. A large number of interviewees felt that children in public care benefited from the inclusive ethos of their schools and the manner in which they had been integrated into their schools. Flexibility, of staff and of curriculum, was mentioned in this context, as well as the ability to meet individual needs. In part, this relates to another frequently mentioned success, that of making the children feel secure through providing a stable environment and ensuring that they felt valued. In some schools this was said to be achieved through praise, or by creating a culture in which children in public care *'are allowed to be treated slightly differently. Other children see these children as part of the year group but with something special'*. However, a greater number of interviewees felt that the fact that these children were *not* marked as different, or even known to be in public care, was a particular success. For example, one designated teacher saw the fact that no-one was aware that two young people who went through to sixth form were in public care to be a particular success. *'They are just like any other child and they don't stand out in any way'*, or *'they become ordinary members of the school'* were typical comments in this regard.

Establishing good relations, particularly with carers, was also seen to be a success and a factor in success. As one headteacher stated in this regard, *'What works well for looked after children works well for all children'*. Some interviewees also mentioned good joint working with outside agencies as a success. Although many successes were down to the commitment, flexibility and quality of school personnel, these were in part maintained through slightly more structural aspects of the ethos of the school, including consulting with and communicating decisions to all staff and having a well briefed designated teacher.

Successes for individual children included, in some instances, academic achievement; for example, children staying on through Year 11 and achieving GCSEs. More frequently mentioned, however, were '*social successes*', including improving the self-esteem of these young people. Other social successes included a growth in the ability to form and maintain friendships; recognising the difference between right and wrong; the ability to speak confidently and appropriately and gaining respect for and positive relationships with adults. A further success was the alternative provision arranged to meet the needs of particular young people, including work placements, vocational qualifications in college and activities with non-teaching school staff.

In general, therefore, interviewees across schools showed remarkable agreement in what was considered to be a success for these young people. The factors that had led to these successes were not always easy to distinguish, as they were seen as successes in themselves and have therefore been discussed above.

#### **4.6.3 Challenges**

All interviewees were asked what they felt their schools' main challenges were, with regard to the education of children in public care. This section summaries those responses. The main challenge mentioned in a large number of interviews was dealing with the behavioural difficulties of some children in public care. One stated that, '*I think the challenge is always the behaviour, because the aim of the behaviour is to challenge*'. Such behaviour was seen to stem from their emotional needs as a result of traumatic experiences. As one interviewee stated, '*children in public care have far greater 'baggage' and intensive personal issues*'. The unknown histories of unaccompanied asylum seekers were specifically mentioned in this regard. The sometimes violent behaviour resulting from behaviour problems was mentioned in several schools as being a particular difficulty. In general dealing with these emotional and behavioural difficulties was said by several interviewees to be very emotionally draining for staff. One headteacher noted that, had a difficult period with one child continued for much longer staff would probably not have been able to cope, it would have affected the other children and the child would have probably had to leave the school. Another headteacher reported on the negative impact on people's personal lives of the stress involved in responding to these young people's needs. On

occasion, teachers mentioned a feeling of impotence despite the energy and emotion invested in these children. These issues in turn led to the challenge for headteachers of keeping up staff morale and the difficulty of convincing them that they could take on another vulnerable child.

A related challenge that was mentioned several times was the need to strike a balance between giving leeway to a disturbed child, yet still being fair to other pupils. Non-teaching staff mentioned the difficulties of saying to teachers, *'Whatever it is, please let it go,'* although it was also noted by this interviewee that relations with the teachers meant that they generally did *'let it go'*. But ensuring this required, as a designated teacher put it, *'a continuous process of making sure everybody realises daily that they're so vulnerable – they must alter the goalposts'*. A number of interviewees recognised the need to stretch the rules as children in public care did not know how far to push them, as they did not know how to deal with the care expressed by staff in schools, *'as they've never had it before'*. The impact of this requirement for flexibility and seemingly different standards for these children on other pupils was a concern. In one school, it was felt that this was partially overcome as the school had lots of children with SEN and therefore the other children accepted difference. *'It's easier to get difference accepted when there are so many 'different' pupils.'*

There were some concerns regarding interaction with social services. One teacher's perception was that social services seemed to finish work at four o'clock in the afternoon, which was the only time school staff had to make telephone calls. There were also concerns about limited communication from social services and discomfort about review meetings in which matters other than education were inappropriately discussed in the presence of school professionals. The impact on education of a high turnover of social workers was also raised as a challenge, as new staff did not know the circumstances of particular school placements.

Additionally in this context, one teacher stated that, *'The better you are at building a relationship with the child, the more damage it is likely to cause when you move on'*. This of course has implications for young people's relationships with school staff too, particularly when the school or care system requires that a young person move on. In some cases concerns were expressed about young people's mental preparation for

moves that were expected as they were part of the care system: the likelihood of leaving a foster carer at 16 and the threat, for unaccompanied minors, of having to leave the country at 18. But other movements were also said to present challenges and, in particular, the unexpected care placement changes, which in some cases were still reported to be undertaken without sufficient regard for the educational placement.

Some interviewees reported that they had not experienced any challenges with regard to the education of children in public care. Others highlighted the fact that some young people in public care present no particular concerns, or that the challenges mentioned above apply to all vulnerable children. However, most interviewees felt there were challenges, of which those mentioned above appeared the most frequently. Additional concerns mentioned by more than one individual included:

- feeling impotent in the face of external factors
- a lack of funds, or difficulties getting agencies to agree funding strategies
- a lack of support in the home environment, particularly in residential homes where even when young people want to succeed, they are surrounded by others who do not want to
- lack of support resources, both to support children generally and for children in public care in particular.

Where interviewees reported on strategies for overcoming all these challenges, for the most part the approach was one of '*not giving up*', consistently communicating and working as a team.

#### **4.6.4 Future Developments**

Many saw the future in terms of a continuation of current, inclusive and responsive, practice. This was particularly the case in schools that saw themselves as dealing with the needs of children individually and flexibly, rather than having specific practices for children in public care. Another area for development was the monitoring and evaluation of the provision for and achievements of children in public care. And a third area mentioned for both continuation and development was improved communication and liaison with other agencies, particularly with social

services, but also with health – particularly mental health – professionals and voluntary agencies. One interviewee reported that over 20 years as a special needs teacher she had been frustrated at the lack of links made with other agencies. However, in the past five years the difference in this area was seen as ‘*phenomenal*’. She added, ‘*I’m hoping that it will just continue to improve and that there will be procedures in place to enable us to work effectively*’.

Several interviewees felt that developments in this area would depend on whether the school admitted increased numbers of children in public care in coming years. In particular, several noted that were they to have many more young people in this cohort they might develop a policy specific to them. However, with regards to policies, some interviewees felt that a rigid policy was unnecessary. For example, one head of year stated, ‘*It will continue to be flexible. If the policies were strict, we wouldn’t be in the position that we are in now. Understanding – that is what we’re trying to do – we don’t want to write anything too prescriptive.*’ However, some interviewees felt an important progression would be the development of either a discrete policy or the inclusion of children in public care in a new SEN policy.

For some, increased staff awareness was an area for development (although in some cases this was predicated on an increased children in public care population). As one headteacher stated:

*We need to make sure staff are aware of the children in public care statistics and why it is so important to support those children and do whatever can be done. It can be very hard having challenging pupils in the class and teachers’ attitudes can show this, but if they understand the issues then their attitudes change.*

A related issue was a request for more information regarding a child’s educational and social history, usually from social services. Several interviewees said that there was a need to provide greater opportunities for additional curriculum activities, in terms of encouraging their involvement in after-school activities and a social skills group and summer work placements, as well as provision of alternative – including vocational – curriculum. Also mentioned was the need for greater support for children’s mental

health needs, as well as a desire by two schools for a withdrawal area available for use by all vulnerable children, not only children in public care.

## 5 Designated Teachers and Multi-agency Working

The DfEE and DoH (2000) *Guidance on the Education of Children and Young People in Public Care* stated that ‘schools should designate a teacher to act as a resource and advocate for children and young people in public care’ (DfEE and DoH, 2000). It was expected that the designated teacher would act as a resource for young people, as well as for carers and parents, social workers and other teachers, school governors and support staff. The post-holder was expected to:

- act as an advocate for young people in public care
- access services and support
- ensure that the school had and supported high expectations of this cohort
- ensure the swift transfer of educational information between agencies and individuals
- ensure that each child in public care has a Personal Education Plan (PEP).

The Guidance suggested that it may be appropriate for designated teachers to have a wider remit for all children receiving assistance from social services, but also that they needed to be flexible, as some children may choose to talk to another member of staff. Local authorities were expected to support the role of designated teacher by providing training and by keeping an up-to-date list of all designated teachers, both in order to establish a network of designated teachers and to assist other authorities that have placed children in their area (DfEE and DoH, 2000, pp. 32–33).

This chapter focuses on how the role of the designated teacher was perceived by the designated teachers themselves and by other school staff; examines who the designated teachers are and how they were selected for this role; and includes a description of the training offered to designated teachers and the training they would like, before making preliminary suggestions as to the impact they have had in schools. The final section of this chapter examines the designated teacher’s liaison with other agencies.

## **5.1 Who are the Designated Teachers?**

Designated teachers in the case study schools were most often appointed approximately two to three years ago (following the DfEE and DoH Guidance, 2000). All schools did have a designated teacher but the arrangement within the school structure varied across schools, as will be highlighted in this chapter. Most schools said that designated teachers were appointed as a result of their LEA prompting them to do so and making this a requirement of all schools. There were a few schools that noted that a member of staff had unofficially taken on this role before this time, because of their previous experience of working in this area, or due to their contact with the pupils who were in public care.

The local authority personnel interviewed explained who the designated teachers were in the schools in their authority. In the primary schools it was often the headteacher. As one headteacher of a small primary school commented, *'all roles seem to fall to the headteacher'*: in such schools there is a limited number of staff to whom to delegate responsibilities, particularly in the light of the need to allocate curriculum coordination responsibility. In the secondary schools the post-holder was often a member of the senior management team, for example – an assistant headteacher or head of key stage 3. On the whole, the post-holder was not the SENCO, although there were a few exceptions. In one secondary school there was only one boy who was in public care and he had SEN, so the SENCO had taken on the role of designated teacher. In another school a decision had been made for the designated teacher role to be separate from the SENCO role as the designated teacher explained: *'the children in public care should not be seen as an SEN issue, it needs to be seen more widely'*. Generally, the designated teacher role was held by someone in senior or middle management.

## **5.2 How were the Designated Teachers selected?**

Although there was some consistency across the schools as to whom the designated teachers were, exactly how each of the participating schools had selected the member of staff was unsystematic. In general, there did not seem to have been careful discussions within the schools concerning who the designated teachers should be. Most schools explained that there was no formal application process: the role was

taken on in addition to other roles, such as the statutory role of child protection coordinator. As one designated teacher explained: *'The position I hold is assistant headteacher and I'm in charge of student care. Alongside the work of child protection it seemed quite logical that I took on the responsibility for children in care'*, however this raises the question as to whether it is appropriate for the child protection coordinator to hold the designated teacher role. Only two of the case study schools noted that the role of designated teacher was written into their job description when they took up a post in the school. In one junior school where the role of designated teacher was shared between both the headteacher and the deputy headteacher. The deputy headteacher explained that:

*This means there's continuity if one of us is out of school... it also means that if there are any significant problems, there's someone who we can immediately discuss it with. We're also both child protection – we're both things jointly because they often overlap.*

As most of the designated teachers were reasonably senior members of staff, they were likely to have considerable teaching experience. Aside from this, the designated teachers were also asked whether they felt they had any specific skills or experience relevant to the role of designated teacher. Their responses included the following comments:

- dealing with multi-agency teams
- knowing other agencies and services available
- involved in child protection
- experience of pastoral care
- listening and counselling skills
- problem-solving abilities
- organising the paperwork
- working with disaffected young people and under-achievers.

The designated teachers highlighted a wide range of skills and experience that they felt were relevant to their role. These focused on the liaison aspect, direct work with pupils, and the organisational aspect of the role.

## **5.3 Designated Teachers' Training**

### **5.3.1 Training offered to Designated Teachers**

The local authority personnel interviewed were asked about the training provided to designated teachers. Some of the local authorities had provided multi-agency training, aimed at teachers and social workers, while others applied a 'drip-feed' approach to training for schools. It was acknowledged by the local authorities that although training had been offered to designated teachers, not all were able to attend and some would have taken on the role since the initial training was offered.

The designated teachers also commented on the training they had attended in relation to children in public care. Approximately half of the designated teachers who were interviewed said that they had not had any specific training relating to children in public care. These designated teachers were from schools in a range of local authorities taking part in this research. One designated teacher was aware that there had been training, run by the local authority, but he was unable to attend the session and had not viewed it as a priority because the only child in public care in the school was just about to leave the school. Many of those who had not attended specific training highlighted the fact that they had learnt about procedures and specific information from multi-agency working. Many had also attended child protection training. The designated teachers who had received training relevant to their role gave a wide range of descriptions. This included training on:

- personal education plans
- the DfEE and DoH (2000) Guidance on the Education of Children and Young People in Public Care
- attainment of children in public care, relating to government targets
- role of the designated teacher (and other personnel in and out of school)
- transition issues
- mental health of children in public care.

Overall, the designated teachers had found the training useful and appropriate to their situation. One designated teacher of a junior school commented that the training was interesting rather than useful because it had dealt with issues of school leavers at age 16 and was therefore aimed more at the secondary schools.

### **5.3.2 Training Designated Teachers would like**

Many of the designated teachers commented that if they felt they needed training, they would turn to the ECPC team within their authority for support. As one designated teacher commented *'they are always available for advice, consultation and extra-support – it's a very close relationship'*. One designated teacher of an infant school felt that she required training on the needs of children in public care and on the specific support available. She said, *'I did manage to get some extra funding to support the reintegration of one girl in care, but this was only because I found out it might be possible through some colleagues – no-one told me.'* This designated teacher also commented that for schools with only one or two children in public care, attendance at such specific training may not be high. She suggested that training could be incorporated into a wider framework, such as inclusion training. Other suggestions for training included information on how social services operate and conflict resolution, as one designated said, *'I'm dealing with the interests of other people who are in conflict – it's very difficult...I don't know how you could train for that, but it's a massive part of the job – the conflict can be vast'*. One of the interviewees highlighted the need for training when a new designated teacher is appointed:

*I think for new people coming in as designated teachers, then they need some good training. It can't just be a label that's tacked on to someone; there's got to be understanding of all of the structure and how it inter-relates with everything else.*

## **5.4 Local Authority Support for Designated Teachers**

In section 3.14.1, the guidance for schools provided by the local authorities was examined. This section deals specifically with the support and guidance identified by designated teachers as provided by the local authorities.

Interviewees were asked about the guidance they had received from their local authority on the education of children in public care. Some referred to the national Guidance (DfEE and DoH, 2000) and some stated that the local authority provided policy documents. More importantly perhaps, nearly all designated teachers said that there was someone within the local authority, or a document that they could refer to, if they needed advice. One designated teacher made the following comment about the contact within the local authority: *‘I get great guidance and support – she got us extra funding, she makes things happen. I can always phone her’*. Only two designated teachers said that they were not aware of any guidance on the education of children in public care.

The designated teachers were also asked specifically about the support they received from the local authority. Nearly all referred to either a named person within the authority with responsibility for children in public care, or to the team with responsibility, often depending on whether the provision for these children was provided by a discrete team or distributed across the authority, as discussed in chapter 3. One school noted that they worked directly with social services, rather than through the team with responsibility for children in public care and one of the designated teachers interviewed felt that they did not receive support from the local authority. The designated teachers could highlight many benefits of the local authority provision:

*I feel that if there are difficulties there are people I can refer to. The provision that [this authority] provides across the board, including [the ECPC team] is good, because it networks well. It really is child-orientated and provision for support is there.*

## **5.5 The Role of the Designated Teacher from the School Perspective**

### **5.5.1 Designated Teachers’ Views**

Designated teachers generally viewed their role in relation to the tasks undertaken. They tended to mention the communication aspect and said they liaised with children’s carers, school staff, the social workers and other external agencies, as well

as with the children themselves. They saw themselves as the contact point for the pupils in public care and for the outside agencies involved. They also noted that they were the pupils' representative in school – an advocate for those children in public care. They would aim to support the needs of the pupils, as one secondary school designated teacher said, *'to give them every chance of success'*. Designated teachers also felt it was their responsibility to keep an overview of the children in public care in the school. This included monitoring their academic progress and their social situation, as well as ensuring the paperwork, including the PEPs, was up-to-date. Some designated teachers felt they were a source of advice for their colleagues and aimed to increase the understanding that other school staff had of the issues surrounding the education of children in public care, by feeding relevant information through the school. This is how one designated teacher of a junior school described her role: *'It's being someone who is there and holds the strings together and is the bridge between the placing authority, the child, the carers and sometimes the natural parents.'*

Some designated teachers attended the children's review meetings whereas others shared this responsibility with other teaching staff who worked closely with particular children. Even when the designated teacher had not personally attended the reviews, they would be aware of discussions that had taken place. What did seem to differ was the extent to which the designated teacher was involved in direct work with pupils in public care. In smaller schools the designated teachers were likely to have contact with the children in public care on a daily basis, whereas in a large secondary school there may be many members of staff working with a particular young person and the designated teacher may only intervene if there was a particularly pressing issue, or if they are seen to be the most appropriate member of staff to assist the young person. Most of the designated teachers who were interviewed viewed themselves as facilitators of other people's actions. As one designated teacher said, *'It's ensuring that the looked after children have the correct provision that they require on an individual basis and that the school fulfils the role with all the respective parties'*.

Most also viewed themselves as advocates for the young people, if the need arose. For example, one designated teacher explained that he advocated for a young person in public care when she had particular issues to deal with outside of school: *'with one*

*girl I did take a mediation role in terms of informing other staff for the reasons for her behaviour'. This encouraged her teaching staff to make allowances for her behaviour at this time. However, in a PRU setting, the designated teacher did not feel that she needed to advocate for the children: 'I don't have to advocate – I don't have to fight the corner for children in this environment because everybody has that approach.'*

One of the headteachers of a primary school who took on the designated teacher role explained that he did act as an advocate for the child who was in public care, but also noted that he had a responsibility for all the children in his school. This raises the question as to whether headteachers are in the best position to fulfil the designated teacher role, given their wider responsibilities. The designated teacher of a secondary school summed up how he viewed his role: *'The overall responsibility is to make sure the right things happen, but I would work with other staff, particularly the heads of year, to ensure this happened.'* Many designated teachers viewed themselves as a key part of a *team* supporting these vulnerable children.

### **5.5.2 In-school Support for Designated Teachers**

Generally, the designated teachers felt that they were supported in their role by senior management. Many of the designated teachers were members of senior management themselves and were thus in a position to raise issues at meetings when the need arose. Those that were not senior managers seemed to feel supported and noted that they were given time for this role and that decisions regarding children in public care were made as a team. One designated teacher explained how the role was incorporated into the senior management structure in her school, which was a typical operational structure:

*As head of key stage 3 I'm part of the senior management team, so I'm also the link back in and I feed into the management meetings. I keep the other teachers aware, both on the management side and on the teaching side. I work in the classrooms linking with the class teachers and also linking through to management...the headteacher can also help if I'm concerned about support from social services for a particular pupil in care, he can put the pressure on.*

### 5.5.3 Views on the Role of the Designated Teacher from Other School Staff

The headteachers interviewed who were not also designated teachers were asked about their views on the role of the designated teacher and how it fitted in the school structure. Headteachers' views on the role were very similar to those of the designated teachers themselves. Their descriptions of functions included the following:

- liaising with staff in school
- liaising with external agencies
- instigating multi-agency meetings
- being an advocate for the children in public care
- understanding their difficulties
- monitoring their progress and curriculum needs
- keeping an overview.

In these cases the headteachers felt that their role, as headteacher, involved supporting the designated teachers. As one headteacher commented, *'I see my role as protecting him, watching out for his workload and what he's being asked to do.'* Headteachers also commented about the amount of non-contact time that the designated teachers had. Usually no specific time was allocated for this particular role, but many designated teachers had some non-contact time during the week. One headteacher commented that she worked closely with the designated teacher on issues regarding the children in public care and said *'the fact that we share the commitment and ethos helps'*. The headteachers were very positive about the effects of having a designated teacher for children in public care. Generally they thought it had helped to raise the profile of children in public care within their schools and that it had helped to meet the needs of the children. One of the deputy headteachers of a secondary school gave her views on the role of the designated teacher:

*I think it's absolutely fundamental, you can have your pastoral leader, but you need someone who's got the expertise and experience. It's nice to know there is one person there – I think it makes the whole thing work better and more*

*efficiently, both on our behalf and the behalf of the child and the outside agencies involved.*

Although the headteachers seemed very positive about the effects of having a designated teacher for children in public care, in some schools knowledge of the designated teacher role was not shared across the teaching staff. For example, one head of year in a secondary school had confused designated teachers with those in the local authority ECPC team. She did not seem to be aware that a designated teacher existed within the school. In other cases, the title ‘designated teacher’ was not used, but teaching staff were aware of the member of staff who had responsibility for children in public care. One headteacher described the role of one of his assistant headteachers: ‘[he] *has overall responsibility for ensuring that the school caters for children who are in public care, but we don’t use the title designated teacher*’. In this particular secondary school, the key stage managers and assistant key stage managers, with support from the administration managers, took on some of the tasks that a designated teacher may do elsewhere, including coordinating the PEPs and liaising with the social workers and carers. The assistant headteacher looked at the overall strategies and kept an overview of those in public care, rather than working directly with the individual pupils. In this case, the designated teacher role was distributed between the assistant headteacher and the key stage teams.

In many of the schools other staff, including class teachers, learning support assistants and education welfare officers, explained that they would have frequent contact with the designated teacher in their school. Sometimes this was due to their generic role: for example, a head of department in a special school said, regarding his contact with the designated teacher, that: ‘*I would say we have contact most days, although we wouldn’t necessarily be talking about the children in care every day.*’ In other cases, staff described their contact with the designated teacher as for this specific purpose. For example, an EWO whose remit was specifically children in public care in one area of the authority described his contact with the designated teacher of the local PRU:

*[She] chairs the meetings on looked after children and it would be [her] who passes names on to me and speaks to me if she’s got concerns about a*

*youngster. The means of communication is usually pretty sound. The contact with her is because she's the designated teacher, so she's likely to have the relevant information, or take the information on, if it's a referral from me.*

This EWO for children in public care seemed very clear on which member of staff he should contact (i.e. the designated teacher) in the schools he covered. The designated teachers tended to work closely with the class teachers in the primary schools and with the form tutors and heads of year in the secondary schools, to support the pupils in public care.

#### **5.5.4 Pupils' Contact with Designated Teachers**

The role of the designated teacher seemed to become less clear-cut from the pupils' perspective. The schools did not label the designated teacher as such for the sake of the pupils. Only three of the schools said that they had told the children in public care who was the designated teacher and in these schools it had been done using child-friendly language. Most of the schools made use of the general pastoral systems to support the pupils in public care and felt that these pupils would talk to their class teacher or form tutor in the first instance, if they had a problem. The class teachers would then pass information on to the designated teacher. One designated teacher of a secondary school reflected on how the young people in public care might perceive him: *'The kids know me and I'm the one who attends their PEP meetings and does the organising for [the ECPC team] visits to the school and sanctions trips for them and attends presentation evenings.'* In this case, the pupils might associate the designated teacher with these tasks, but would not refer to him in this way. Most schools noted that they tried to ensure that every pupil had some member of staff with whom they felt comfortable talking. One designated teacher, who was also the deputy headteacher of the secondary school, explained that he would not be the first point of contact for the young people in public care: *'the young people wouldn't necessarily see their circumstances as the reason for their problem, so they would look to their head of year'*. This designated teacher felt that the young people would follow the usual school procedures of talking to their form tutor or head of year, if they were concerned about something, as the issue might not relate to their care situation.

A total of 22 pupils who were in public care at the case study schools were asked whether they felt there was anyone in school to whom they could talk in confidence. Almost all the pupils interviewed said that there was someone in school they could talk to. A few of the interviewees said that they would rather talk to their friends. When asked who they would speak to, approximately half of the pupils gave the designated teacher's name as the person (or one of the people) they could talk to in school. Their reasons included that they could trust this person and they were easy to talk to. This suggests that the designated teachers had built up relationships with those pupils, to the extent that the pupils would turn to them specifically for support.

### **5.5.5 Carers' Views on Support in School**

The carers of these pupils all felt there was someone in the school they could talk to, to discuss the children's education. In nearly all of the cases, the name of the designated teacher was mentioned but as with the pupils, none of the carers acknowledged that this was because they were the 'designated teacher'. As one carer said, *'the lady who had a lot to do with [X] would help us, [X] got on well with her'*.

### **5.6 Liaison with Other Agencies**

Given all that is known about the importance of multi-agency collaboration to meet the needs of vulnerable young people, the case study interviews all investigated the degree to which individual personnel engaged with other professionals either within their own profession (e.g. teacher to teacher) or with other agencies. Where such working was effective, interviewees were very positive. For example a designated teacher who was also the school's SENCO said:

*Lots [of contact]! It's part of my job. The crucial thing for meeting the needs of children is a multi-agency approach. I've worked so hard to get it moving. We're the one co-ordinating it. It works best when social services allow us to co-ordinate with them ... the key is ... personalities – in any area. I've chatted to two or three [other agencies] today; this is fairly common. They're accessible, communicative, value your contribution.*

### **5.6.1 The Place of Multi-agency Cooperation in Young People's Personal Development**

Consistency among adults working with a young person is invariably of critical importance to that young person's well-being and progress. For example, one adult can have more of an influence than others on a young person. The fact that a child knows that a certain adult will be told of his/her poor behaviour can be a check on that behaviour and support others as they help the young person with it. A learning support assistant, for example, had daily contact with a boy's carer whom he did not like knowing of his misbehaviour at school. Knowing that misbehaviour would be reported helped to '*keep him under control*'. It should be pointed out here that positive, as well as negative, comments were reported back. A headteacher said that the school could often modify a foster carer's negative perception of a child by reporting the child's achievements and good behaviour.

In other cases, it was felt to be important that sensitive information was shared appropriately so that there can be mutual understanding of the particular stresses on a young person at a particular time. One headteacher who had designated teacher responsibility commented that social services wanted information from schools, but they were not prepared to give information to schools. He cited the example of a girl turning up to school when her father had been accused of sexual abuse: '*How is the school supposed to react to this if they do not know what is going on?*'

### **5.6.2 The Identification of Deficiencies in 'Corporate Parenting'**

One of the difficulties with 'corporate parenting' is that the different agencies may each do what is required of them but no more. There was some evidence, from interviews with the young people, that, of all agencies, schools were regarded as being prepared to '*go to the end of the road*' with difficult young people. A SENCO in one secondary school reflected:

*I do wonder if they're getting support for their own self-esteem and identity. I've been dismayed by the two I've worked with who've been in residential units. Both feel that people do it for a job. And I feel this too. It's no wonder that they're stroppy. I'm not laying blame but it's a huge issue. We try to work with a child and meet their needs emotionally. Also physically: [X]*

*comes in scruffy and this makes her a loser with her peers. And there is never one person to deal with – the key worker keeps changing. Sometimes they come in to collect her because she's poorly and they're clearly not pleased to be there.*

Another designated teacher had not been impressed when she engaged in multi-professional activity:

*I was horrified at the way things were handled. The chair of the review meetings was different in each case and we spent the first 45 minutes reviewing the case, although the only person who didn't know the case was the chair. They should have read up on it before the meetings. I was also not happy about the decision-making process within social services. We were trying to get alternative accommodation for the young person but they suggested accommodation ... which we did not think appropriate. So we used our own contacts to find out about [an alternative].*

### **5.6.3 Functional Barriers in Social Services Departments**

Designated teachers were quick to point out that they fully recognised the pressures under which social services personnel worked, particularly those caused by heavy case loads, understaffing, high rates of staff turnover, shift working and lack of replacements in the event of staff sickness or maternity leave. However, these organisational pressures caused additional difficulties in communication, collaboration and rapid response to ease things for the young person, as one interviewee stated:

*They [social services] are very poor with the Year 11 child – I think she's had so many social workers – continuity was a big issue'. Another similarly commented that, 'You can phone social services about a particular child and they do not know who the social worker is.*

Staff turnover and reorganisation inhibited potentially supportive relationships.

*On the whole, they're very supportive but fully stretched. My main frustration with social services is that you just start to build up a relationship then people move on or change teams. It must be very hard for the children because this is another constant in their life that keeps changing.*

Elsewhere, the distribution of responsibility meant that there was no one appropriate available for a young person at a critical time:

*There was a day when we had to send a boy home because he was being so destructive. The foster carer was unable to collect him; the social worker was not in because she only works part-time. Social services said that they had no one else available so I said to them, 'This is a looked after child, so who is taking parental responsibility?' – I was quite stroppy with them. In the end they did get two people from the family centre to collect him. I felt that there was no support for us. His present social worker has been very supportive but she only works part-time.*

Where staffing is in short supply, as in cases such as this, joint working – such as someone going in to school to support the young person so that the school feel able to retain the child in school – is impossible. And, while it is understandable that there cannot be undue 'slack' in the system to allow for speedy action in such situations, nevertheless, the adverse effect on the young person cannot be ignored. There were also consequences on schools' preparedness to maintain a young person if things get too difficult and they cannot get ready access to advice. One headteacher said that she had to use her husband, who happened to be a designated teacher at a neighbouring school, as a source of guidance on one occasion when she could not get a response from social services: *'I wanted to make sure I was doing the right thing .... NSPCC and social services rang back but it would have been too late.'*

The variability among professional groups was also commented on. Some social workers, for example, would inform the designated teachers about changes in a young person's care placement, while others would not: *'some are effective, and some aren't'*. Another designated teacher praised one particular social worker, commenting that this person was *'highly embarrassed by her superiors' lack of understanding'*.

#### 5.6.4 The Basis of Collaboration

Often, inter-professional collaboration took place only on a ‘need to know’ or ‘as necessary’ basis, rather than a group getting together to plan positively for a young person and ensure that the gaps were filled. The head of a key stage at a special school reported that:

*We have the social worker who is attached to the school and he works with these lads a lot. I have met some of them and spoken to them at times but not frequently. The contact is there as and when it’s required – for example, we’ll meet up at review meetings.*

This contrasted with what might be considered a ‘standing committee’ model. A designated teacher described an embryonic one:

*We started a steering group at the beginning of this year. It wasn’t specifically targeting looked after children but involved the various services – learning support unit, behaviour support team, looked after children education support services – so there was a thread. We have informal breakfast meetings once a term ... We don’t share ideas – it’s not that developed yet.*

While it was not always obvious that the ‘need to know’ principle was sufficient, there was a clear danger that young people were unnecessarily singled out by being the centre of undue attention.

*A good thing for looked after children in that there are a number of adults working on behalf of the young person so if I’m worried about a looked after child’s attendance, I can share this with other professionals, including the [specialist support team], education welfare service etc. But we also have to be careful about overkill so if a child is late to school once, do they get in trouble with all the different people – for example, their carer, the school, the education welfare officer, their social worker, the specialist support team? It might be a bit much!*

And a deputy headteacher remarked, *'We treat our looked after children as we treat any children really and I think this is how it should be. I don't think they should be made into special cases, although if they need it, then they get it, but not for the sake of it.'*

### **5.6.5 The Facilitation of Multi-professional Working**

There were facilitators to multi-professional working. Various strategies were in operation at various schools. For example, things were eased where there was someone with experience of multiple professional contexts. A school social worker remarked:

*Where issues arise with a fostering system, you need to talk to the child's social worker but also communicate with the family placement workers and sometimes the fostering agency too. So this can be tricky but having been a field worker I know most of the family placement workers so this helps. I know the pressures and stresses so I know how best sensitively to get to the goal.*

The situation was also greatly eased where respective responsibilities were acknowledged and a corporate approach to the promotion of education was taken.

*Social services now seem much more inclined to support children in alternative education programmes. Social workers are more accountable now if a child is not in education. Key workers in children's homes have a much more active role because they are now accountable... I've seen a massive change in the ethos of key work teams [over the years].*

In another example, a school had allocated responsibility for liaison with other agencies to the designated teacher with the result that action was taken when contact was made.

*All heads of year were doing the social services bit – it was very messy. I needed to be the conduit. We don't have other people calling social services ...*

*If I call them they will always act. If we advocate, we need a bit of clarity – we're taken very seriously.*

The overall ethos of the school affected its motivation to communicate with other agencies. A local authority officer said that:

*If the receiving school is one of those with an inclusive approach they will do the driving. I think that probably does happen. I am aware it does go on – in one secondary particularly, they look out for them more than other children.*

### **5.6.6 Communication between Designated Teachers**

There seemed to be a lack of communication among designated teachers within an authority across the case study schools. Contact only seemed to be made for necessity, for example, at transfer. However, one authority was in the process of developing a social services-schools partnership and the initial meetings organised for the sharing of good practice, dissemination of information and updating on policy and practice were appreciated by the designated teachers who had experienced them. As has been pointed out elsewhere (section 5.1), a number of headteachers, deputy headteachers and SENCOs were designated teachers. They thus tended to see other designated teachers in their 'other role'-related meetings and, indeed, the education of children in public care could be an agenda item at these meetings. In one authority, for example, the primary school headteachers had discussed writing PEPs in a local headteacher meeting as they all happened to be the designated teachers for their respective schools. These schools were reported to work well together anyway, being within close proximity to each others and accustomed to working collaboratively.

In one urban authority, a designated teacher commented that she thought that the majority of people in the EBD network meeting were probably designated teachers. In another, the idea of a network meeting for designated teachers had been abandoned on the grounds that the initial training meetings had been poorly attended. Elsewhere, a designated teacher commented that:

*The only time I might have contact with other designated teachers is if there's a managed move from school to school – then the designated teacher would be*

*involved. There is no working group across the authority but perhaps this is something we should look at.*

And the manager of a specialist team for children in public care remarked that it would be nice if designated teachers communicated with each other *'but I don't have evidence that they do!'* In places, the existence of designated teachers did not seem to ease the transfer of data to support a child's school placement move. Having said that, one designated teacher explained that she did not communicate with other designated teachers, *'It's difficult speaking to teaching staff as they are always teaching when you call ... We have found it difficult to get all the school records for some children in public care, especially if the children have moved around a lot.'*

### **5.6.7 Communication with Carers**

Schools' contact with carers was generally good; as one designated teacher stated, *'Some become close friends; I have total admiration for what they do'*. Special schools usually operated a home-school diary mechanism so that parents and carers were aware of the child's experiences during the day and the school was aware if incidents in the evening or before school in the morning might influence a child's responses at school. Indeed, because of the complex needs of their pupils, special schools were generally confident and proactive with regard to communication with other professionals. The designated teacher in one special school explained:

*With any pupil we make regular contact with home at least on a weekly basis ... we make sure that all the relevant people have the information so all the agencies are talking together. The reason we keep regular contact is to break down the issues, because so many parents and carers have been in the situation where the school phones out of the blue and they know it's something negative. So keeping the regular contact and building up the relationship means that we are feeding the positive information too... For social workers we have an incident book in school and file notes and once a month we send copies of these to them and then they get the full picture. Because sometimes there may be issues in school that are relatively minor, but to make sure the social workers get the whole picture they get copies of this, so we don't get to*

*the stage where there's an exclusion and the social worker isn't aware of any problems.*

All schools used the phone frequently to contact carers, particularly in relation to regular systems for improving attendance. One secondary school, for example, operated a first day non-attendance phone-home policy: the school secretary would call the foster carer and then inform the social worker, unless the carer said that s/he would do this. Generally, carers were treated exactly the same as parents with respect to parents' evenings and discussion about pupils' progress, though interviewees reported that the response was variable. In particular, they felt that carers could neglect children's emotional needs even if they were providing well for their physical needs.

Several schools went to considerable trouble to engage carers in the education of the young person for whom they were caring. One headteacher pointed out that some carers might have had negative experiences in their own school days and thus find it difficult to relate to the school and '*to make the partnership work*'. The school had to be careful not to intimidate such parents and to make them feel really welcome – something that was often easier with young children as nursery staff commonly chatted to parents on a day-to-day, informal basis and going into the classroom was a 'normal' occurrence for parents and carers delivering and collecting young children. Similarly, the designated teacher in a PRU said that they tried to make contact with the carer(s) immediately:

*To create as open a dialogue as possible. We would make it clear that we are not just an educational provision but we want to help the placement succeed. We also try and make it open for them to tell us if they've had a really trying morning with a child and equally we will ring them to promote good news as well as when there are issues.*

There was evidence of school staff (which included school social workers) going to great lengths in order to support a young person and engage in forward planning, rather than reacting to critical events in the child's life. For example, a designated teacher commented that in one case they knew of a potential care move two or three

months in advance *‘so we could look at what would best suit his needs and the school was able to contribute to this decision-making’*. This particular young man had suffered extreme crises in his life and was described as *‘extremely damaged’* and having been *‘pushed from pillar to post’*. The boy clearly appreciated the support given at school. The designated teacher remarked that, *‘Since he’s left the school he’s popped back a few times and he’s really happy in his new placement and although he’s 16 he’s staying there and doing a training course and is doing really well.’*

## **5.7 Overview of the Designated Teacher Role**

The role of the designated teacher had become fundamental in many of the participating schools. There was generally consensus as to what the post-holder did, although there was still some confusion at class teacher level. The main aspects of the role involved liaising with other staff and external agencies, keeping an overview of the progress of the pupils in public care and acting as an advocate for those children, if the need arose. There was variation as to the extent to which the designated teacher took on all the tasks involved and the extent to which the tasks were shared with other key staff such as the heads of year. On the whole, where the post-holder felt supported by the senior management team within the school, they were able to work effectively to support the education of the children in public care. Interviewees also highlighted the importance of multi-agency working and the data provided examples of good practice in this field as well as areas for development.

## **6 Key Findings and Issues for Consideration**

In the following, the key findings are reported (bullet points) and then, where appropriate, the issues for policy-makers and practitioners are discussed.

### **6.1 The Role of the Local Authority**

#### **6.1.1 Responsibility for Local Authority Provision**

- Local authority contacts were mostly based in education departments but often had had some experience working in social services settings, which was felt to be an advantage in terms of collaborative work and communication.
- There were two identifiable organisational ‘models’ for attending to the educational needs of young people in public care: the discrete model (or segregated approach), by which a dedicated team is responsible for a range of functions such as monitoring and direct services; and the distributed model (or inclusive approach), by which a small number of people coordinate responses and maintain an overview of interventions but direct services and other functions such as monitoring are provided by other services and embedded within ‘normal’ provision.

Each model has its advantages and disadvantages: there is the danger that a discrete team can remove responsibility from where it should rest if the young person is to be given the opportunity of optimal support in as ‘normal’ a context as possible; but the distribution of responsibilities can result in ‘buck-passing’ and individuals doing the minimum, rather the maximum, for the young person. The latter may work best if there is a strong tradition of inclusive education in an authority and all schools are experienced in, and committed to, meeting individual needs. Where this practice is less well developed, the discrete model may be more appropriate, at least for a time, in order to ensure that there are adequate advocates for, and focused attention on, the education of children in public care. The reality may be that the optimal position has a degree of eclecticism but it is suggested that such should be strategic and conscious (that is, designed to be appropriate for the particular authority) rather than having arisen without a particular rationale.

### **6.1.2 Local Authority Policy**

- In most of the case study authorities there was a discrete policy document on the education of children in public care: in a few cases this had been subject to review and revision and had been disseminated to all relevant personnel.
- In some cases, practitioners did not perceive that they had a specific policy for this group but referred to well-used and understood guidance documents.
- Increasingly, policy relating to the education of children in public care was distributed among a range of other policy documents within education, the local authority, or the region.

An inclusive approach to the education of children in public care suggests that all local authority policy will consider their needs (as, for example, all policy considers the needs of disabled students). However, there is the danger of losing an overview, and of practice, led by policy, becoming fragmented; it is not easy to review fragmented policy.

### **6.1.3 Personal Education Plans (PEPs)**

- There was agreement that preparing PEPs for each young person in public care had not been an easy task and that ensuring that such documents were in place was only the starting point: they also had to be appropriate for the young person and helpful for those working with him/her.
- The preparation of PEPs was inhibited by high staff turnover in social services and the constant need to train new staff and the sheer volume of these documents where the number of young people in public care was large.
- There was evidence of sound development in the design of PEPs, with the inclusion of more useful information and a more ‘user-friendly’ format.
- There was also evidence that the PEPs were used as an opportunity to gather the views of young people.
- In general, PEPs were seen as a strategic activity strengthening corporate parenting.

Authorities need to ensure that the production, quality and use of PEPs is given priority and that social work managers monitor the position and ensure that training is given as necessary.

#### **6.1.4 Specific Initiatives to Support the Education of Children in Public Care**

- Local authority interviewees identified a number of national initiatives which benefited young people in public care directly or indirectly. These included: Excellence in Cities, Education Action Zones, Behaviour Improvement Plans, Connexions, Playing for Success, Health Action Zones, Lifelong Learning Partnerships and Quality Protects. Within these, singled out for particular mention were family literacy schemes and information technology provision. Non-government organisation initiatives included the Paul Hamlyn Foundation Right to Read grant.
- At a local level, school transfer schemes, key stage 3 programmes, homework and revision support, mentoring, and basic skills support were referred to as valuable.

There is an increasing corpus of support available for a range of educational needs both within and outwith the school context. The challenge as regards the education of children in public care is to ensure that at a strategic level their needs are taken into account at the planning stage so that first, these initiatives are identified and, second, that the young person has access to them and is not barred by his or her care status (e.g. unable to stay after school because of the needs of the foster family or routines in residential units).

#### **6.1.5 Transition Planning and Admissions**

- All case study authorities recognised the particular difficulties encountered by children in public care moving from one school to another, whether at a normal time or mid-term/year.
- Operating the admissions priority given to children in public care relies on the existence of in-care status data, which was not always available at the admissions stage.

- Several of the authorities had discrete programmes for Year 6 pupils while others supported the carers (providing information).
- Some authorities had programmes for pupils at key stage 4, particularly by way of career interviews and additional support in planning for leaving school (which often coincided with leaving care, thus making this transition more difficult for this cohort).
- The exchange of information regarding potential changes of care placement so that educational placements could be properly planned, was considered a critical element in effective provision.

While career interviews and advice are routinely available to all young people, authorities need to consider whether young people in public care have access to them and, if they have, whether they are able to implement advice given (for example, worries about living accommodation or the financial situation may inhibit young people from pursuing further education and training).

Likewise, the administrative handover, with relevant information and records of educational achievement and aspirations, needs to be efficient so that leaving care teams are fully conversant with and knowledgeable enough to respond to young people's previous educational careers. Those responsible for educational placements need to consider whether the schools under consideration have adequate arrangements for mid-year transfer. All authorities should consider the potential benefits of designing packages of support around all transitions for young people and their carers to help improve stability.

#### **6.1.6 Post-16 Provision**

- At 16 responsibility for young people in public care usually switched to the Leaving Care team, thus providing potential difficulties as regards continuity.
- Some authorities had discrete provision to support post-16 education (financial and incentive payments) but most considered that what was available was inadequate.

The issue of post-16 provision exerts downward pressure insofar as some young people in public care are worried about leaving care and post-16 arrangements during Year 11, when most of their peers are able to concentrate on their GCSE examinations without such additional pressures. Authorities should consider if post-16 funding is adequate to enable young people to make maximum use of educational opportunities at this critical time. They should also consider whether the transfer to Leaving Care Teams and therefore a new social worker, is in the best interest of the young person if he/she is continuing in full-time education and/or in their foster placement.

### **6.1.7 Exclusions**

- All authorities had access to discrete data on the exclusion from school of young people in public care.
- Similarly, most authorities tried to minimise the use of exclusion for this cohort, as they were aware of its particularly deleterious effect; various imaginative and effective preventative strategies were in place in some authorities.
- In most cases there was no discrete provision for young people in public care who were excluded although in some cases there was prioritised access to pupil referral units.
- Reintegration strategies were often more specialised, involving a range of people as appropriate to the young person concerned.
- Where schools had effective reintegration mechanisms, designed with the individual's needs in mind, additional support for a young person in public care was not generally needed.

Those responsible for educational placements should take into account a school's practice as regards exclusion and discuss with the school the strategies adopted to prevent exclusions and to support a young person in the event of exclusion.

### **6.1.8 Attendance and Truancy**

- The attendance of young people in public care was monitored discretely although the data was not necessarily monitored as frequently as would be helpful to take preventative action on non-attendance.

- Four authorities had dedicated educational welfare officer provision for this cohort.
- Some authorities had regular multi-agency meetings to plan strategically for a young person who was truanting or refusing school.

Authorities and schools should consider whether they need to take swifter action than usual in the event of the non-attendance of a young person in public care. They should also look at strategies to prevent non-attendance such as tighter scrutiny of attendance and earlier intervention.

### **6.1.9 Bullying**

- While children in public care were often acknowledged, within general documentation, to be particularly vulnerable to bullying, no authority visited had discrete strategies to counter this bullying although some indicated ways of heightening awareness.
- Teachers suggested that children in public care were prone to bullying (as victim or perpetrator) on account of low self-esteem rather than because of the fact that they were in public care.

School bullying policies need to ensure that the particular needs and vulnerabilities of pupils in public care are addressed as part of their general consideration of vulnerable pupils.

### **6.1.10 Celebrating Achievement**

- In the case study authorities, the achievement of children in public care was celebrated either in large-scale, high profile events, or individually, as appropriate to particular cases.
- It was generally acknowledged that the celebration should be of all achievement, including ‘value-added’ and not just of academic attainment as the latter might ignore progress which was remarkable for an individual but not noteworthy according to public ‘norms’.

The important factor was that young people in public care should routinely gain recognition of their achievements from ‘significant others’ and that these positive achievements should be made as public as appropriate in individual cases in order to dispel popular assumptions about the ‘deficiencies’ of this cohort.

#### **6.1.11 Funding**

- Money to fund discrete support workers was variously acquired through LEA core funding, DfES Standards Fund and Quality Protects money with other sources being tapped locally for particular functions (e.g. ICT training for foster carers provided by a college of further education) or special purposes (e.g. books, computers).
- Most funding was related to specific projects or initiatives and, generally, there was relatively little flexibility to respond to individual needs other than in social workers’ limited discretionary budget.
- Children in public care benefited from the provision of other services, particularly in distributed models of responsibility.
- Additional and special educational needs and mental health needs were provided for through regular routes and budgets, though there was sometimes dedicated time (e.g. from an educational or clinical psychologist).

While budgets were available to support the needs of children in public care and many sources were cited, authorities might like to consider strategies for streamlining these and ensuring an equitable distribution so that support did not depend on individual schools’ particular involvement in initiatives or the specific knowledge of individual designated teachers. The research suggested that authorities should adopt a strategic approach based on reliable and up-to-date data on the needs of the relevant cohort.

#### **6.1.12 Multi-agency Working**

- All those in teams for the education of children in public care worked extensively with other professionals – in some authorities, the teams were multi-disciplinary.
- There were formal structures for liaison at functional and strategic levels, sometimes for all vulnerable young people and sometimes discretely for children in public care.

- In several authorities there was an identified panel overseeing provision for children in public care (operating like a steering group).
- There was rarely a shared database but data were shared by a range of methodologies involving different personnel and services within departments; there was concern about the quality of the resultant data, particularly in terms of accuracy.

Most practitioners whose responsibilities include collaboration with other professions no longer have to be convinced of the need for multi-agency work. But there is still a need for authorities to consider how best to embed expectations in all whose cooperation is needed in order to ensure corporate provision for all the cohort.

### **6.1.13 Local Authority Guidance Materials**

- All case study authorities provided a range of written material relating to the education of children in public care.
- One authority had produced a governors' toolkit.

### **6.1.14 Successes**

- Several of the interviewees commented on improved joint working which was often related to cross-authority commitment to the role of the corporate parent.
- Some of the interviewees attributed these successes to the model of provision for children in public care within their authority.

### **6.1.15 Challenges**

- The following were identified by interviewees as challenges:
  - developing effective and helpful means of defining and measuring 'success' and 'value-added', with regard to attainment
  - ensuring that all young people in public care had an appropriate educational placement
  - creating effective mechanisms for the distribution of information that was timely
  - making adequate preparation for, rather than reacting to, placement moves

- ensuring that all eligible young people in public care are entered for end of key stage assessment and GCSE/GNVQ
- maintaining a balance between proactive and reactive work
- managing staff changes at all levels
- managing the perceived slow rate of change within services
- developing strategies to ensure that the corporate parenting agenda was corporately, rather than personality, driven.

These challenges will have different profiles in different authorities and there may be other challenges which affect authorities which were not involved in the present research. It is suggested that in some cases these challenges might best be addressed on a regional basis, particularly as there was evidence that some schools are providing places for children in the care of other authorities.

## **6.2 School Policy and Provision**

### **6.2.1 Policy**

- In some cases, schools claimed that their mission statement was sufficiently inclusive to meet the needs of pupils in public care.
- It was considered that it was best if policy is formulated following good practice.
- In some cases, schools denied that they had ‘policy’ but had, in effect, either excellent guidance documents operating at the functional level or had other documents which accommodated the needs of children in public care.

School managers might like to scrutinise their policy documents to decide if present material does accommodate the needs of pupils in public care or whether some discrete guidelines, related to the particular needs of this cohort, are necessary in order to develop or maintain effective practice in the school.

### **6.2.2 Admissions**

- Children in public care were rarely prioritised within individual schools’ admissions policies except where local authorities stipulated that this be a criterion.

- Some schools said that they prioritised when oversubscribed if the child was obviously in need.

The School Admissions Code of Practice (DfES, 2003) now gives children in public care priority criteria. Authorities need to ensure that they scrutinise their own admissions data in order to identify possible structural barriers to appropriate educational placements for children in public care.

### **6.2.3 Awareness of Policy among Staff**

- Senior staff in schools were generally familiar with the statutory position and the school's responsibilities; other staff were not but were familiar with school-based practice and procedures.
- Designated teachers had usually held awareness-raising sessions for colleagues.
- Some SENCOs and headteachers had attended specific training sessions in the authority with the designated teacher.
- A lot of local authority training was linked to other training regarding vulnerable children or child protection.

While there may be very few children in public care in any one school, yet awareness of good practice and policy is essential for that minority. Senior managers in schools need to develop strategies for the maintenance of expertise in the midst of many competing staff development demands.

### **6.2.4 Identified Governors**

- Some of the case study schools had allocated specific responsibility for pupils in public care to an identified governor but the strategy was too new for any effects to have been noted; some schools were doubtful that effects would have been beneficial.

The development of effective special educational needs governors has been dependent on good training and development within schools. It is suggested that potential

specialist governors for the in-care population need similar training and guidance in order to be helpful to the school.

### **6.2.5 National Initiatives**

- There was evidence of the strategic use of opportunities afforded by national initiatives to benefit children in public care. Many references were made to the use of learning mentors.
- The list of specific strategies was almost identical to that cited by local authority officers (see section 6.1.4 above).

The use of national initiatives, including strategies to promote inclusion, to support the needs of children in public care gives a degree of ‘normality’ to provision for this cohort and is to be encouraged. However, there is the danger that responsibility can be too distributed so that any specific needs of these children are lost sight of.

### **6.2.6 Funding**

- Locally, there was some discretionary money available via the ECPC teams.

Local authorities might wish to consider establishing local databases of sources of support for the education of children in public care.

### **6.2.7 In-School Support**

- Case study schools all had well developed pastoral structures available for all pupils regardless of whether their support needs were long-term or transient; there was thus a firm and well distributed structure of support and guidance which meant that individual needs could be met and children could exercise their own preferences as to whom to turn to for support.
- Schools monitored support needs and their ability to meet these and turned to external sources of support as necessary; however, in most cases, it was commented that external support (for example, educational psychology time) was limited.

The importance of the effect of the general ethos, management and organisation of a school on the way it can address the needs of individual pupils cannot be overemphasised. There was evidence that schools which had highly developed structures to identify and meet individual needs in a range of ways had little additional to do to meet the specific needs of children in public care. It is suggested that a school's overall profile and strengths are considered when decisions about a child's educational placement are being made.

### **6.2.8 Identifying Individual Needs**

- Initial visits, previous records and PEPs were all used to identify the particular profile of needs of individual pupils in public care.
- Sensitive information was informative but usually distributed on a 'need to know' basis within schools.

Senior managers need to ensure that information is effectively handled so that appropriate information is distributed without unnecessary stigma, or assumptions being associated with a particular pupil.

### **6.2.9 The Management of Transitions**

- Schools went to considerable lengths to ease school transfer, particularly where this occurred at non-standard times within the academic year or school term: emphasis was put on appropriate placement in tutor groups and initial support to help the young person settle in socially and academically.

Arguably, school transfer is more traumatic for children in public care than for many of their peers, as it represents another change and loss of established relationships. Some children in public care experience multiple transitions over a shorter period than children in settled families. Schools should take this into account in helping such children settle in and ensure that they liaise with carers and other relevant agencies. Schools may have to develop particular initiatives to support these young people.

### **6.2.10 Meeting Needs**

- There was evidence that special educational needs, additional educational needs, additional language needs and mental health needs were all addressed through regular support networks available to all pupils. However, schools often prioritised the needs of this cohort and/or boosted normal levels of support.
- All services stressed the limited nature of support – thus this cohort may not have been receiving the optimal level of support for their particular needs.

While provision is available for a range of needs experienced by pupils in public care, the overall efficacy may be limited by overall resources available; positive discrimination, by gaining access to additional support, may thus be a duty which the corporate parent should fulfil in order to remove disadvantages from being in the care system. Corporate parenting should involve effective advocacy to ensure that additional support is accessed.

### **6.2.11 Exclusions**

- Most schools pursued a positive policy of not excluding pupils in public care on the basis of the deleterious effect that this might have on self-esteem and care placements.
- Where exclusions were necessary – for the child’s safety, for example – efforts were made to secure more appropriate provision.
- Schools made efforts to reintegrate effectively and in some cases supervised the child during the period of exclusion in order to reduce the burden on carers.
- Emphasis in the case study schools was on prevention.

### **6.2.12 Attendance and Truancy**

- The attendance of children in public care was monitored in the case study schools and rapid response to non-attendance commonly made.
- It was commented that the attendance of this cohort could, in fact, be higher than the school average because of better tracking mechanisms and the commitment of carers.

### **6.2.13 Bullying**

- Bullying, whether a victim or a perpetrator, was generally considered to be related to the child's general condition (for example, low self-esteem) rather than directly to his/her legal status of being in public care.
- Schools operated a range of strategies for addressing problems of bullying: most of these were directed to all incidents of bullying rather than being specific to children in public care.
- Most children in public care interviewed felt that they were bullied for a reason other than being in public care (for example, because of appearance). In one case staff considered that a pupil made herself open to bullying by demanding different treatment from other pupils because she was in public care.

Bullying strategies in schools should address all occurrence of bullying but teachers may have to be sensitive to the fact that some pupils are especially susceptible on account of their life experiences.

### **6.2.14 Raising the Attainment of Pupils in Public Care**

- Normal monitoring mechanisms were in operation for the academic progress of pupils in public care.
- Designated teachers were often very familiar with the progress of pupils and were able to relate this progress to experiences in public care.
- The cohort was generally entered for public examinations.
- Pupils in public care were often prioritised for careers advice or were given enhanced support for post-16 decisions.

Schools need to ensure that normal tracking mechanisms need to take account of the fact that some children in public care may need a greater than normal degree of support and additional curriculum intervention in order to meet norms expected of their peers, for example accessing study support.

### **6.2.15 Support Activities**

- There was considerable variability in the degree to which children in public care participated in activities outside the regular curriculum: some care-related practices, such as taxiing to school, militated against involvement.
- The intervention of the designated teacher could ensure that pupils were involved in relevant activities.

Schools and especially designated teachers need to collaborate with carers and the young people themselves to ensure that they gain access to as rich a curriculum as possible and is appropriate to their preferences and abilities.

### **6.2.16 Personal Education Plans**

- At school level, there were difficulties both in ensuring that PEPs were available for all pupils in public care and in separating out advice and support in various plans (e.g. individual education plans for pupils with special educational needs); some interviewees felt that plans could be repetitive and/or just a paper exercise.
- At best, the preparation of the PEP involved a range of people involved with the young person and took the latter's views seriously.
- Only some secondary age pupils were aware of their PEPs; most of these felt that they were useful record to their progress at school.

The preparation of PEPs has developed since they were first introduced; however, while some were obviously effective, social service managers need to ensure that monitoring mechanisms are in place to allow all social workers to realise their responsibilities in contributing to the educational planning process.

### **6.2.17 Successes**

- All interviewees considered it important to celebrate the successes of young people in public care and that this celebration should extend to a wide range of achievement and include the concept of 'value-added' and individual progress from a previous point relevant to the young person.

It is important that all involved with young people in public care are aware, and routinely celebrate, their progress and achievements even if these appear to be minor according to other norms.

### **6.2.18 Challenges**

- The principal challenge in dealing with children in public care was identified as managing their challenging behaviour.
- There was good awareness that challenging behaviour arose from the young people's previous traumatic experiences, some of which might be known to the school, while other experiences (for example, those of asylum seekers) might only be guessed at.
- School staff found it a challenge making allowances for unacceptable behaviour while giving the right messages to other pupils: this was considered best addressed through discussion of individual differences which affected all pupils regardless of background or abilities.
- The forging of strong relationships with pupils causing concern so that the pupils knew that schools were prepared to support them was considered to be one of the most effective ways of addressing undesirable behaviour.
- Other challenges were identified as lack of corporate support, lack of financial resources, the pressures of adverse external forces.

The profile of challenge will vary according to individual circumstances and the nature of the environment. However, schools need to develop strategic action plans to meet these challenges: there was evidence of such action being incorporated in some school action plans (for example, to develop multi-agency links) and it is suggested that this is a positive way forward.

## **6.3 The Role of the Designated Teacher**

### **6.3.1 Profile of Post-holders**

- Most designated teachers had been in post for two to three years though some had reportedly been doing the job for longer in schools where the education of children in public care had been identified as one needing coordination.

- In primary schools, the headteacher commonly took responsibility; in secondary schools, it was usually a member of the senior management team – generally not the special educational needs coordinator.
- In some schools, responsibility was shared to ensure continuity for pupils if one person was unavailable.
- Relevant skills were perceived as: external liaison, pastoral care, and working with disaffected pupils.

Schools might like to consider the particular qualities needed for an effective designated teacher and appoint appropriately – as had been done in the case study schools – rather than considering it just another coordination task.

### **6.3.2 Training**

- Some local authority training had been delivered to staff from education and social services together.
- Training had generally been available but it was not always possible for all designated teachers to attend and it had not been repeated for those teachers or for newly appointed staff.
- Half the designated teachers interviewed had had no specific training but many relevant issues had been covered in child protection training which they had attended.
- Post-holders considered that they had benefited, or would benefit, from specific training either as a standalone session or within inclusion training.
- All designated teachers interviewed were confident that they knew where to go for help if needed.

Authorities need to consider how to maintain training for designated teachers, both those in post and those newly appointed.

### **6.3.3 Functions**

- Designated teachers perceived themselves as responsible for:
  - liaison with other professionals and carers
  - advocacy for the young people

- maintaining an overview of the young people’s progress
- ensuring the preparation and maintenance of PEPs
- And needing:
  - good relations with staff colleagues
  - good relations with senior managers within education and social services.
- Direct work with young people varied depending on context and appropriateness: generally designated teachers in primary schools had more direct contact with the relevant children than did colleagues in secondary schools, where responsibilities were more dispersed.

#### **6.3.4 Others’ Perception of the Designated Teachers**

- Headteachers in the case study schools had a very good idea of the role and responsibilities of the designated teacher and of how they needed to support the post-holder.
- Other staff were not always so clear especially where responsibilities were distributed between senior managers.

Designated teachers were dependent on the cooperation of colleagues in order to fulfil their responsibilities most effectively. Schools might, thus, wish to consider the structures in place to support the role, particularly with regard to training needs.

#### **6.3.5 Pupils’ Awareness of the Designated Teacher**

- Several pupils interviewed were not aware of the role of the designated teacher but this was not an issue as all said that someone with whom they were comfortable was available to them if they needed support; in some cases, this person was, in fact, the designated teacher, indicating the post-holder’s approachability.

Pastoral systems in schools should ensure that all pupils have access to adults who can help them as and when they need help. The designated teacher should monitor accessibility for children in public care particularly closely.

### **6.3.6 Carers' Awareness of the Designated Teacher**

- Carers interviewed were aware of the designated teacher but not necessarily on account of the post held: rather, because that person had been particularly supportive or involved with the young person in public care.

It is critical for carers to have a point of contact in the school with the necessary authority to make decisions about a young person, secure support or to effect change. It is up to the school to decide the most effective contact point for individual carers.

### **6.3.7 The Designated Teacher's Multi-Agency Role**

- All designated teachers engaged in multi-professional dialogue but with various responses – for some it was easier than for others.
- Some professionals were reported to provide limited support so that pupils' interests were not pursued as rigorously as they might have been.
- There was acknowledgement of the enormous organisational pressures under which social workers operated but, equally, recognition that these often adversely affected young people in public care.
- The variability of practice among social workers was commonly commented on.
- Designated teachers recognised the importance of information exchange but noted that this could draw undue attention to a young person if pursued unnecessarily.

While designated teachers may be keen to collaborate with other colleagues, they are dependent on an effective response and cannot achieve the necessary outcomes without mutual respect for the task. Relevant managers must ensure a clear delineation of expectations and means of monitoring the realisation of these.

### **6.3.8 Designated Teachers as a Corporate Group**

- There was little evidence that designated teachers commonly met regularly as a discrete group nor that they regarded other post-holders as a support group; contact tended to be limited to transfer events.

Area facilitators and ECPC teams might like to consider means of strengthening local networks to support designated teachers.

### **6.3.9 Designated Teachers' Relationships with Carers**

- There was evidence that most designated teachers made great efforts to establish effective relations with carers and to stress that the school was interested in making the care placement work; however, responses varied.
- Where relationships were strong, designated teachers took advantage of the opportunity to be involved with forward planning of a young person's imminent placement move.

Those responsible for training and working with foster carers in social services teams need to stress the support that designated teachers can offer carers and the fact that the teachers can offer insights into managing and working with the pupil that might help the carers at home.

## Appendix 1 Data on sample of local authorities

The following tables provide information on the local authorities that took part in this research. Table 1 shows the range of local authority types; table 2 gives an indication of the size of the authorities; table 3 provides information on the approximate number of school age children in public care in the local authorities and table 4 gives an indication of the key stage 4 attainment of all young people in the local authorities.

**Table 1 Range of local authority types participating in research**

| <b>Types of local authorities:</b> | <b>Frequency</b> |
|------------------------------------|------------------|
| Shire County                       | 3                |
| Metropolitan District              | 2                |
| Unitary Authority                  | 2                |
| London Borough                     | 1                |
| <b>N = 8</b>                       |                  |

**Table 2 Size of local authorities participating in research**

| <b>Size of local authorities: (based on number of secondary and special schools)</b> | <b>Frequency</b> |
|--|------------------|
| Small (between 10 and 30 schools)  | 4                |
| Medium (between 31 and 50 schools)   | 3                |
| Large (between 51 and 70 schools)  | 1                |
| <b>N = 8</b>   |                  |

*Source: PEARSON EDUCATION LIMITED (2002). Education Year Book 2002/2003. London: FT Prentice Hall*

**Table 3**      **Number of school-age children in public care in participating local authorities**

| <b>Number of school-age children in public care in local authorities:</b> | <b>Frequency</b> |
|---|------------------|
| Less than 100   | 1                |
| 100 – 199   | 4                |
| 200 – 299   | 1                |
| 300 – 399   | 1                |
| 400 plus  | 1                |
| <b>N = 8</b>  |                  |

*Based on children in public care for at least 12 months, from the year ending 30 September 2002  
Source: <http://www.doh.gov.uk/public/oi2002/oi2002%20.pdf>*

**Table 4**      **Key stage 4 attainment in participating local authorities**

| <b>% of all year 11 children achieving 5+ GCSEs/GNVQs A*–Cs in 2002</b> | <b>Frequency</b> |
|---|------------------|
| 30% – 39%   | 2                |
| 40% – 49%   | 2                |
| 50% – 59%   | 3                |
| 60% – 69%   | 1                |
| <b>N = 8</b>  |                  |

*Source: [http://www.dfes.gov.uk/performancetables/schools\\_02.shtml](http://www.dfes.gov.uk/performancetables/schools_02.shtml)*

## Appendix 2 Data on sample of schools

The following tables provide information on the schools that took part in this research. Table 5 gives an indication of the size of the 20 schools; Table 6 gives the key stage 4 attainment of the participating secondary schools.

**Table 5**      **Size of participating schools**

| <b>Numbers of pupils on roll:</b>     | <b>Frequency of schools</b> |
|---------------------------------------|-----------------------------|
| <b>Primary phase</b>                  |                             |
| 100 – 199                             | 1                           |
| 200 – 299                             | 2                           |
| 300 – 399                             | 3                           |
| 400 – 499                             | 1                           |
| <b>Total primary phase</b>            | <b>7</b>                    |
| <b>Secondary phase</b>                |                             |
| 500 – 699                             | 2                           |
| 700 – 899                             | 1                           |
| 900 – 1099                            | 3                           |
| 1100 – 1299                           | 2                           |
| 1300 – 1499                           | 1                           |
| <b>Total secondary phase</b>          | <b>9</b>                    |
| <b>Special schools and PRUs</b>       |                             |
| 15 – 49                               | 2                           |
| 50 – 99                               | 1                           |
| 100 – 200                             | 1                           |
| <b>Total special schools and PRUs</b> | <b>4</b>                    |
| <b>N = 20</b>                         |                             |

*Source: <http://www.dfes.gov.uk/performance/tables/>*

**Table 6**      **Key stage 4 attainment in participating secondary schools**

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| <b>% of all year 11 children achieving 5+ GCSEs/GNVQs A*–Cs in</b> | <b>Frequency</b> |
|--|------------------|
| <b>2002</b>  |                  |
| 20% – 49%  | 6                |
| 50% – 79%  | 1                |
| 80% – 99%  | 2                |

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**N = 9**

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*Source: [http://www.dfes.gov.uk/performancetables/schools\\_02.shtml](http://www.dfes.gov.uk/performancetables/schools_02.shtml)*

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Produced by the Department for Education and Skills

ISBN 1 84478 142 9  
Ref No: RR498

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