

Support to School Service

Impact of 2014-2015 Service Plan

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| Priority | Children Missing Education |
| Summary Impact report | <p>Action 1 – Development of corporate culture around inclusion and CME</p> <ul style="list-style-type: none"> • Explicit corporate commitment to CME now evident across the department (evidenced by monthly CME Monitoring Meeting now in place and internal services now strategically aligned around cross service provision for CME – see space ship diagram) • Service Director for Education, Standards and inclusion leading on the implementation of the strategy. (evidenced by Action Plan monitoring at monthly monitoring meeting and also by DLT. In addition, CME data reported monthly to CFCSLT performance meeting) • Director’s Report to Governors distributed (evidenced by the completion of CME report for Autumn term 2014 governing body meetings and mediated at the September 2014 Heads and chairs Briefings. CME also the focus of a workshop at the March 2015, Governor Conference which had a focus on vulnerable children) <p>All actions completed and evidenced by a developing departmental culture which places vulnerable children and families at the centre of relevant service/team plans. As a consequence of this developing culture, there has been increased challenge of schools, particularly secondary academies in relation to issues around CME by both operational officers working directly with schools as well as group managers and the service director).</p> <p>Since the 2014-2015 Action Plan was drafted (March 2014), there has developed a corporate commitment to advocating for CME and challenging schools where poor practice and ‘grey exclusions’ have been identified. Analysis has identified secondary schools whose practice is of particular concern and meetings between senior officers, including the Service Director and academy sponsors or Executive head teachers have taken place.</p> |

Action 2 – Development of a Nottinghamshire CME Policy

- A CME Policy was developed in partnership with key internal partners informed by consultation with all schools (evidenced by inclusion of policy consultation through the primary and secondary Headteacher Summer 2014 term briefings (6 primary events and 1 secondary event).)
- The CME Policy mediated with key stakeholders including the Dioceses, school based teachers and senior leaders and internal teams such as HRET, Ed Psychs, SEND. In addition, the policy has been mediated with and discussed at the Governors' Board, Primary Trust Board, Secondary Trust Board, Place Planning and Admissions Board Chaired by Cllr Peck, Termly Diocesan Meetings chaired by Cllr Peck

Action 3 – all services to incorporate CME into 2014-2015 Service Plans

The Service plans for 2014-2015 were reviewed and the following teams incorporated key actions within their respective 2014-2015 service plans:

- Quality Assurance(Jon Hawketts)
- Targeted Support and Youth Justice (Laurence Jones)
- Admissions and Fair Access (Marion Clay)
- Children's Social Care (Amanda Collinson)

Group Managers have also been held to account for CME through the monthly Monitoring meeting chaired by Service Director for Education, Standards and inclusion.

Action 4 – Present guidance to schools regarding CME

Guidelines and advice to schools was distributed during the spring and autumn terms as planned. As a result of the focus on CME, the Fair Access Officer, working in partnership with the Children Missing officer, reviewed the guidance to schools regarding missing children and the process for reporting them to the LA.

In addition, the advice regarding the context in which statutory school aged pupils could be removed from a school register, was also confirmed again with schools. Evidence of impact has been seen in significantly increased challenge by relevant officer, including advisers in relation to the illegal

removal of children from registers. When officers become aware of such illegal removal from registers, actions are taken as a matter of urgency. There is some evidence that school leaders are accepting the challenge of operational officers as a result of the increased support of the most senior officers.

As a result of knowing the CME cohort in more depth and the analysis undertaken to identify the barriers impeding the admission and full attendance and access of their full entitlement at school, the Education Psychology Service has developed new guidance, training and are in the process of implementing a new process in relation to anxiety related nonattendance. (this action to be carried forward to 2015-2016 CME Plan)

Action 5 - Analysis of CPC and CIN Plans

This action is ongoing. As a result of the work being completed by information and systems for the Ofsted Annexe A analysis, information is collected from both Framework and Capita 1 identifying children who are currently subject of a CIN or CPP where non-attendance or non-access to education are issues. These cases are then directed to the relevant teams by the information and systems team. However, this action is ongoing and will be a key action in the 2015-2016 CME Action Plan.

Action 6 – Tracking and reviewing of pupils not on a school roll or accessing full time provision

A tracking system is now in place to capture high and medium concern cases. An individual pupil monitoring sheet now captures key information from all services including CSC. This sheet also presents a clear chronology that allows senior officers to monitor difficult cases and agree actions to be allocated to group managers and other senior officers. These actions are monitored at the monthly monitoring meeting.

In addition, the Information and Systems team now collect from schools termly a list of pupils who are not accessing their full educational entitlement. This data collection also requests information about the school based plans to ensure the child returns to a full entitlement in a timely and appropriate manner. This information is monitored on a termly basis at the monthly monitoring meeting and where there is a lack of clarity about the school's plan for individual pupils to return to

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| | <p>full time education, this is appropriately challenged. (Key actions to be carried forward to 2015-2016 will include the further development of systems that will allow the sharing of pupil level data related to admissions, and full entitlement.)</p> <p>Action 7 – Governance and monitoring arrangements</p> <p>There are clear monitoring arrangements in place to monitor CME throughout the year. Rather than bi monthly, the CME monitoring meeting is chaired by the Service Director for Education, Standards and Inclusion on a monthly basis April 2014-April 2015. (This monthly meeting will continue throughout 2015-2016)</p> <p>Key strategic meetings around the CME agenda have also included the strengthening of the AVC Meeting which is also now chaired by the Service Director. This has harnessed key services from education, health, and CSC and has also included school representatives. The further development of the Vulnerable Children Education Commissioning group has also emerged during the year to allow key services to identify high concern cases to agree a multi-agency plan ‘pooling’ their existing resources thus ensuring the best value of limited resource.</p> |
| Impact | <p>Children Missing Education (See Appendix – Bev to capture impact data for the 2014 - 2015)</p> <p>In July 2014, there were 329 children identified as missing education. This included children on a roll but not accessing their full entitlement. In February 2015, 347 children and young people were identified. Whilst a direct comparison between July and February cannot be made because throughout this period, the criteria was being developed and refined. However, as of April 2015, there is a shared understanding of the criteria for inclusion which includes:</p> <p>Red – These are children without a school place and/or not accessing appropriate full time provision and where support teams have been unable to progress the case.</p> <p>Amber – These are children with an appropriate plan in place but their provision is below 11 hours</p> <p>Green – These are children and young people with over 15 hours of support and are then monitored</p> |

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| | <p>for 3 months with the expectation that there will be an increase of hours.</p> <p>Children without a school place and monitored by the fair Access team (Appendix 2 comparative COOs data 2013-2015)</p> |
| Actions that should be carried forward to 2015-2016 | <ol style="list-style-type: none"> 1. Anxiety related non-attendance guidance to be mediated with internal partners and schools, particularly secondary school absences 2. To further develop a greater understanding within CSC of the importance of securing a plan for education before closing a case open to CSC. |
| Possible key development priorities for 2015-2016 | <ol style="list-style-type: none"> 1. To further refine the monitoring of vulnerable children and young people subject to a CIN or CPP to ensure that social workers inform the relevant Fair Access officer where there are concerns about education. 2. Approximately 12% of the cohort is in the primary phase. To further develop the work of the primary behaviour partnerships to develop early intervention to address early behaviours. In addition, further improve the transition of vulnerable primary aged pupils at the point they move into key stage 3. 3. To continue to work with all school and academies to ensure they continue to develop good practice in relation to supporting vulnerable learners to access appropriate education by monitoring attendance, referring appropriately to Targeted Support and other services, share information early when there are concerns. and strategies to avoid 'grey exclusions'. 4. Continue to work with governors 5. To further develop good practice to support pupils with anxiety related issues 6. To develop further learning for internal services to further strengthen the processes for CME 7. Further refining the data collection and expand the sharing of this information across teams 8. Further develop LA action in relation concerning part time timetables |
| Other reflections | CME has made a significant contribution to the safeguarding of vulnerable children. |

