

Improving Lives Summary Report

1.	Date of meeting:	4th December 2018
2.	Title:	Early Help - Children Missing from Education
3.	Directorate:	Children & Young People's Services (CYPS)

1. Background

- 1.1 The Local Authority has responsibility to ensure that Children Missing from Education (CME) are identified, reported and tracked, so that efforts are robust to locate children and where appropriate suitable educational providers can be found.
- 1.2 The term CME refers to children of compulsory school age who are **not on a school roll**, and who are not receiving a suitable alternative education. A suitable education can be approved via alternative provision or appropriate Elected Home Education.
- 1.3 Section 436A of the Education Act requires that local authorities make arrangements to establish the identities of children residing in their area who are not receiving a suitable education. The duty does not apply to children who are registered at a school and who are not attending regularly; this is addressed via attendance monitoring and Persistent Absence (PA) work.
- 1.4 The Early Help Service has held responsibility to ensure that protocols are adhered to when a child is known to have left a Rotherham school and the child or a destination school cannot be tracked. The CME Lead officer as well as Early Help Attendance Leads have a responsibility to support schools with the identification of children missing in education.
- 1.5 Each Local Authority has the responsibility to employ a CME Officer and Rotherham has a named officer, an Operational Manager who oversees the work and a Head of Service Strategic Lead. In addition, all Early Help Locality Teams adopt attendance and CME related issues as 'everybody's business' so that home visits and enquiries pertaining to a child missing from education can be directed by the CME Officer and associated manager and that actions can be carried out swiftly and effectively across localities. Locality workers carry out home visits and enquiries with schools to assist in CME provision to broaden awareness and ensure integrated approaches. Early Help Attendance Leads also support this area of work during their interaction with schools and Early Help localities.
- 1.6 As part of Phase two and three of the Early Help Strategy (2016-2019), Cabinet agreed in October 2018 the recommendation to move the CME function from Early Help into Education and Skills. This is a priority so that the appointed CME Officer can work more closely with education colleagues in the future. This is important in further aligning CME processes to wider education processes such as School Admissions and Elective Home Education.
- 1.7 Extensive work has taken place over the previous two years to enhance data capture, reporting and activity on CME in Rotherham.

2. What's Working Well?

Data:

- 2.1 In quarter two there were 177 children (from 97 families) classified as new CME referrals which highlights a reduction when compared with the previous quarter (188 children/97 families.) Of the 177 children that opened in quarter two, 92 children (51.9%) have been known to have previous episodes of CME that were closed, which again shows a declining trend from last month. This highlights that some children have recurrent issues with CME. Evidence suggests that this recurrence is largely due to families being transient and then returning to Rotherham intermittently rather than key concerns related to vulnerability and/or safeguarding issues.
- 2.1 At the end of the reporting period there were 146 active cases that remained open to CME which highlights a 30% reduction from quarter one.
- 2.3 There were 256 resolved cases in quarter two, which shows a significant increase on quarter one when 134 cases were resolved in the period. *NB Cases of CME need to remain open until the child is found or until all enquiries have been exhausted and this can mean that cases remain open for extended periods.*
- 2.4 13.7% of children within the CME cohort were eligible for Free School Meals. This data was asked by elected members to be added to the scorecard in order to ascertain if there are high levels of children in this cohort that are entitled to free school meals and evidence suggests that this is not the case.
- 2.5 There were 89 new referrals from primary schools and 88 new referrals from secondary schools in the reporting period highlighting an even split. The distribution across year groups is also relatively even and therefore evident that there are no specific year groups where CME is more of a problem than others.
- 2.6 As part of the work to enhance the reporting on CME the service has built in outcome codes to the recording system that were not previously available for analysis. Historically CME reporting was focused around 'open and closed cases' with a lack of reporting on the different outcomes that can be apparent at the outset and/or closure. The service is now capturing outcomes data and of the 256 children that were closed to CME in the quarter, 46 (16% of children) were found and transferred to admissions and tracking (i.e. reclassified from CME as the service identified that they were no longer missing.) Tracking of these children is important as a child can become CME and then move back to Rotherham and apply for a new school. 75 children (29%) were closed as they were found and another Local Authority subsequently accepted responsibility for them. 21 children were found in a school within another Local Authority and 29 children (11%) were found having taken up a new place at a school in Rotherham. 22.5% of children were closed as a result of all possible enquiries being exhausted and 12% were verified to have left the UK. 2 children (0.8%) were classified as being educated at home following CME enquiries.
- 2.8 The majority of the children 'found' in another LA, either in a school already or in the applications process are proportionately distributed around the South Yorkshire area (Doncaster, Barnsley, Sheffield), there is no particular, predominant area in other areas of the UK where children are found.

3. What are we Worried About?

- 3.1 Of the newly identified cases of CME, 82.5% of children were from the central area of Rotherham at the time of the referral. The Central locality of Rotherham has consistently higher rates of CME and this is largely due to the mobile and transient nature of families living in the central locality and those in particular from Eastern Europe and this is associated with travelling back to, or back and forth from, the country of origin to the UK. This can have a financial impact on both schools and council services due to the additional resource required to support CME. Schools are funded following a census each October and this then dictates their per capita spend for the following year. When a school has high numbers of CME that are not present/ on role at the time of the census they are awarded reduced settlements, only to find that their CME children can return weeks later. This occurrence does not then attract further funding and schools need to work within a financial deficit for the rest of the year.
- 3.2 The majority of children CME were classified by ethnicity as Roma by their parents (40%) and a further 36% were unclassified. Parents do not have to complete ethnicity as mandatory and many choose not to do so which is their right. There were less unrecorded ethnicity classifications than in quarter one (36% on quarter to compared to 43% in quarter one. Schools report anecdotally that perceived stigma associated with the Roma ethnicity has been reported by some parents as being a reason for declining to provide ethnicity information. Recent negative articles in the national press are potentially associated with this standpoint.
- 3.3 It is important to note that it cannot be assumed that those parents who reserve their right to provide ethnicity information at school admission stage are from the Roma community as this information is not known and information above related to perceived stigma is anecdotal.
- 3.4 Elected members have shared concern related to the demographics associated with CME and requested more detailed information to ascertain where the predominant number of families that result in CME referrals have lived.

4. What are we going to do about it?

- 4.1 The Early Help Head of Service with responsibility for CME has negotiated a new form that has been introduced in October in conjunction with the School Admission Service to include in all applications for a school place, to try and encourage more parents to complete the ethnicity information. This was agreed by RMBC Information Governance colleagues, however, it is important to acknowledge that this element remains a voluntary aspect when applying for a school place in Rotherham.
- 4.2 Within schools/education there is work taking place to better understand the needs of Roma families in more detail and ensure that services maximise working and shared approaches. Early Help is supporting this work.
- 4.3 As a means of a suitable response to negative press, the Early Help Service is working with colleagues in RMBC Communications Team to publish good news stories about our positive work with Roma families in the locality in order to assist with reassurance in the community. This will be completed in quarter 3.
- 4.4 More detailed locality information has now been added to the quarterly scorecard that details localities across the early help reach areas. This was actioned in October 2018 and can be seen in figure a) below:

Fig a) Children referred as CME in Period by resident locality - 2018	Q1	Q2

Central	Clifton	146	46
	Oakwood/Town Centre		21
	Wingfield		1
	Winterhill		43
	CENTRAL TOTAL		146
North	Dalton/Thrybergh/Rawmarsh	16	10
	Wath/Swinton		12
	NORTH TOTAL		16
South	Aston and Brinsworth	25	9
	Maltby and Wickersley		9
	Wales and Dinnington		9
	SOUTH TOTAL		25
No Locality Registered/Outside Area		1	17
Grand Total		188	177

- 4.5 Free School Meals analysis has now been captured and included in the quarter two scorecard in response to the request by elected members for this information in September 2018.
- 4.6 Following Cabinet's approval to move CME into Education & Skills work is now underway between the Head of Service Early Help and Head of service Education & Skills to plan the transition. A handover meeting is planned for December and implementation of this transition is expected in January 2019. The two service areas will continue to work closely together to ensure that this important agenda is supported in an integrated way.
- 5. Name and contact details**
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