

**Review of Children Missing from Education (Scotland)  
Service: September 2006-April 2007**

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<b>Contents</b>	<b>Page</b>
Executive summary	3
1. Introduction	5
2. Background	6
3. Phase 1 - Initial observations on Children Missing from Education (Scotland) service operation, September 2006	11
4. Phase 2 - Further observations on Children Missing from Education (Scotland) service operation, September 2006 – April 2007	16
5. Interface with Scottish and non-Scottish services and organisations	20
6. Children Missing Education in England	25
7. Stakeholder views on Children Missing from Education (Scotland) service development and policy	30
8. Local authority Children Missing from Education policies and procedures	32
9. The future role of Children Missing from Education (Scotland) service	34
10. Conclusions	35
11. Recommendations	39

## **Review of Children Missing from Education (Scotland) Service: September 2006-April 2007**

### **Executive summary**

In 2003 Ministers in Scotland and England became concerned about systems of transferring information. This followed the case of Danielle Reid, who was found dead in Inverness after her parents informed a Highland school that she would be moving to England. It was acknowledged that there was a need for a system which not only identified children who were missing from the Scottish education system but one which would establish procedures for tracing them and re-engaging them with education.

In partnership with local authorities Children Missing from Education (Scotland) (CME(S)) was established in 2005. At the same time a system for the managing of data files of children who had stopped attending school was being developed. Guidance relevant to children/young people missing from education was published in 2005 within *Safe and well: Good practice in schools and education authorities for keeping children safe and well (Safe and Well)*.

This review was commissioned to evaluate how the service had developed during its first two years and its interface with local authorities and other services involved with children who go missing from schools. The review findings are based on:

- discussions with Scottish Government staff;
- examination of case files;
- analysis of stakeholder views; and
- analysis of a small sample of local authority policies.

While the findings are not definitive they should provide a basis for further action.

The national service in partnership with local authorities has demonstrated success. A significant number of children have been traced and re-engaged with education often within very short periods of time. Many of the cases were complex and required considerable investigation. Service objectives are ongoing; the provision of detailed guidance for local authorities, systems and procedures for inter-agency collaboration, agreements for information transfer and collaborative working on a UK-wide basis now require to be progressed. Progress towards appropriate service systems for monitoring of activity, planning, record-keeping and data collection was to an extent limited by changes in staffing and staffing levels.

The review found that the guidance in *Safe and Well* was not being applied consistently across local authorities. One noticeable disparity was in the remits and responsibilities of the CME contacts, explaining perhaps the variations in practice and the quality of information received. At times this contributed to delays and complications at national level in the tracing of children.

Local authority policy implementation is well underway but rates of progress differ across the country. Some authorities have developed comprehensive policies. Based on the small sample it was possible to identify policy elements which would lend themselves to effective practices and procedures such as statements on authority responsibility, procedures for pre-5 children or for child protection concerns. For the most part authorities did not have systems in place to monitor those children whom CME(S) had been unable to locate and for whom local authorities retain responsibility.

CME(S)'s success in locating children and their families was affected by the degree of interdisciplinary working in local authority areas. In some cases the lack of a co-ordinated approach did not allow for early identification and provision of support to vulnerable families, exchange of information between services, co-ordinated risk assessments, strategies to support re-engagement or the onward transference of quality information to the national service.

The contribution of health and the police to the national tracing service has been particularly valuable. However some practice issues require to be resolved at both local and national levels.

The review found that involvement with families who had particular social or lifestyle factors or who belonged to particular cultural groups was time-consuming and complex, but especially so when families had itinerant lifestyles or travelled across borders. The latter proved especially difficult for the national service and local authorities. While aspects of the UK Government Department for Children, Schools and Families (DCSF)\* statutory guidance for local authorities in England to identify children not receiving education might assist with aspects of practice development in Scotland, it does not address issues regarding cross-border working.

The review could not explain why currently the quantity of missing from education referrals varies significantly across authorities. The School to School (S2S) Transfer System and School Clearing House will support CME(S) in identifying children who are missing from school. Within the new Scottish Government's ScotXed Unit/CME(S) structure the importance of CME(S)'s interface with local authorities cannot be underestimated.

The report makes 24 recommendations. A key recommendation is the setting up of a multi-disciplinary consultative or Steering Group to consider the contents of this report and to guide the development of national and local services for children missing from education, via the continuation of the CME(S) service.

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\* Formerly the Department Education and Skills (DfES)

## 1. Introduction

Children Missing from Education in Scotland (CME(S)) was established in January 2005 as a national service to support the transfer of information between schools and local authorities and the tracing of school-aged children who go missing from education. It was fully operational by August 2005.

The service has developed in consultation and collaboration with local authorities across Scotland. Close links have been formed with other agencies, independent schools and with designated CME contacts in local authorities in England and Wales.

From the start it was determined that the system would be subject to a process of ongoing review since it would be difficult to anticipate the level of tracing required and associated service developments.

A service review was commissioned in September 2006.

At the time of commissioning, initial proposals and staffing had changed, *Safe and Well* had been issued and many developments had taken place at both national and at local authority levels.

The development of the Scottish Government's secure School to School (S2S) Transfer System and its launch would have an impact on CME (S) as might the review of *Children Missing Education in England and Wales (2006)* and future proposals for statutory guidance in England.

With this in mind the review would:

- look at CME (S)'s current performance;
- CME(S)'s impact on national and local policy development and procedures;
- factors which could affect the future direction of the service; and
- suggest areas which might require re-visiting or further development.

and the review methodology would include:

- a degree of involvement in active casework;
- discussions with CME (S) staff;
- initial analysis of CME(S) procedures and operation;
- examination of case files and the CME(S) data base;
- in depth analysis of complex case files;
- analysis of local authority policies and procedures; and
- analysis of initial consultation with local authorities and other stakeholders.

From the outset it was agreed that the care and welfare and protection of children was fundamental. Appropriate action would be taken if during the course of the review concerns arose about practices or procedures which were putting children at risk.

This report contains an executive summary, background information, a review of CME (S)'s progress and interface with local authorities and other services, factors affecting future service development, conclusions and recommendations. Supporting information is set out in appendices 1 to 16.

## **2. Background**

On 26th August 2002 five years old Danielle Reid started at Crown Primary school in Inverness. Her mother informed the class teacher on her second last day at school on 8<sup>th</sup> October 2002 that she and Danielle would be moving to Manchester. Her body was discovered in Inverness on 7<sup>th</sup> January 2003.

Dr. Jean Herbison, a consultant paediatrician and lead clinician for child protection with Greater Glasgow NHS Board, was commissioned by Highland Child Protection Committee to undertake an independent review into all the circumstances surrounding her death. The report, *Danielle Reid, Independent Review Into the Circumstances Surrounding Her Death*, contained 68 general and service-specific recommendations. Recommendation 11 urgently sought the establishment of proactive systems to ensure the adequate tracking of vulnerable children while recommendation 41 asked for a robust national system to be set up to timeously track the transfer of pupil records in the United Kingdom. Scottish Ministers noted the recommendations and the background to them.

The then Scottish Executive's ScotXed Unit was at the same time in the process of developing an electronic "school to school" (S2S) data transfer system to ensure a procedure for managing data files of children who had not arrived at a destination school after leaving a previous one.

An electronic data transfer system, leading to a 'lost' pupil database had been developed in England and Wales in 2003. By 2004 the database had grown from around 9,000 pupils to over 20,000 pupils. The system did not include follow up procedures to locate missing children nor a process for flagging records to indicate child protection concerns. It did not appear to be tenable or acceptable in terms of child protection.

A system to deal with children identified as missing from the Scottish education system was clearly required and following consultation with education authorities and child protection committees in January 2005 the Scottish Executive (now Scottish Government) established the CME(S) service with an aim of ensuring that action was initiated at local and national levels to trace children. The small team, based within the Scottish Government's Support for Learning Division consisted of a Director, Project Officer and Administrator. The Director and Project Officer were both secondees. In the first instance funding would be provided by the Scottish Government for 3 years.

The initial proposal was to create a central body which would act as a clearing house to assist local authorities to develop:

- local and national co-ordination of efforts to track children whose whereabouts were not known by schools or authorities and to co-ordinate specific actions regarding children about whom there were child protection concerns;
- the practice of flagging records of children where child protection concerns had been identified; and
- appropriate practice in the transfer of pupil records.

Review at a very early stage caused significant changes to be made to the first two proposals to ensure better protection for children:

- whether there were existing child protection concerns or not all children with the exception of Gypsy/Traveller children were to be referred to CME (S) within a four week period of becoming “missing from education”. In all cases where there were existing child protection concerns, including Gypsy/Traveller children, referral to CME (S) should be urgent to ensure priority action; and
- the flagging system was not introduced. It became evident that the seriousness of each case could only be judged in joint discussion between CME (S) and the referring local authority. Any child with whereabouts unknown was deemed to be potentially at risk.

*Safe and Well*, which describes good practice in child protection in education and when children go missing from education, was distributed to local authorities and other involved agencies.

CME (S)’s role is described as a supportive, co-ordinating and liaison role aiming to work with education authorities and schools in the exchange of information across Scotland and other parts of the UK. It has a remit to:

- promote the use of systematic procedures in schools and education authorities and enhance practice in transfer of records;
- develop good practice when responding to a child or young person becoming missing from an education service;
- promote consistent practice in local areas to locate and engage children; and
- enable effective inter-authority and cross-border location and transfer of information.

and to assist with:

- transferring information;
- tracing and locating children; and
- tracking information where children arrive in a new location with limited or false information, to assist authorities to provide support effectively.

Children ‘missing from education’ *are children and young people of compulsory school age who are not on a school roll or being educated otherwise (at home, privately or in an alternative provision). They have usually not attended school for a substantial period of time (usually agreed as 4 weeks, or considerably less for vulnerable children) (Safe and Well).*

**Service objectives were set and progress towards them within the first year was as follows:**

**1 “Develop detailed guidance to aid transfer of information and follow up procedures in schools and authorities”**

- a CME(S) section was contained within *Safe and Well* with sections on information transfer, guidance on the tracing and locating of families, guidance on effective local procedures, flow charts for good practice, background explanations as to why children go missing, search request referral and exemplar transfer forms and a useful contact list;
- a CME(S) project leaflet was produced; and
- policy and procedures for Gypsies/Travellers was published and disseminated.

**2 “Develop national agreements and procedures to aid the transfer of information between authorities and assistance across authorities for follow-up; and with other parts of the UK and other countries.”**

- all local authorities had a named designated CME(S) contact in place;
- CME(S) procedures, good practice guidance, liaison and referral arrangements with CME(S) and internal local authority systems for tracing children were agreed in consultation and collaboration with the designated CME(S) contacts and local authorities;
- the CME(S) section in *Safe and Well* promoted the requirement for all local authorities to have robust procedures and policies in place for children missing from education;
- requests from local authorities to contribute to the development of their “children missing from education” policies had been accepted by CME(S);
- requests by CME(S) to DCSF to provide LEA/CME contacts list England and Wales had been accepted; and
- requests by CME(S) to the Northern Ireland Education and Library Boards to provide CME contacts had been accepted.

**3 “Develop agreements and procedures in line with national developments on data-sharing and education IT systems.”**

- a CME(S) database - compliant with the Data Protection Act – was commissioned and in use;
- an agreement had been reached with SEEMIS (a company who provide a Management Information System (MIS) used by Scottish schools and local authorities) and local authority users for CME(S) to access information centrally; and
- consultations had also been held with Pearson Phoenix, another MIS supplier to schools and local authorities in Scotland, regarding tracking procedures and information sharing.

**4 “Develop relationships, systems and procedures for inter-agency collaboration in support of follow-up action and information sharing.”**

- in conjunction with ACPOS a short life working group had produced an ACPOS/CME(S) Joint Memorandum of Understanding;
- in conjunction with the NHS/Child Protection Nurse Consultants a Missing Family Alerts/CME(S) protocol has been produced;

- in conjunction with Scottish Women's Aid a Scottish Women's Aid/CME(S) agreement was being trialled. A protocol was currently out for consultation;
- in collaboration with gypsy/traveller agencies a Gypsy/Traveller protocol had been produced;
- in conjunction with the Scottish Council for Independent Schools (SCIS) agreement had been reached in relation to referring and tracing children from the independent sector;
- in conjunction with the National Asylum Seekers Service (NASS) and other asylum groups agreement had been reached in relation to information sharing;
- early scoping work with the Care Commission on an early years policy and procedures had begun; and
- consultations and awareness-raising events to discuss procedures and related issues had been held with other agencies and organisations including Shelter, Save the Children, Home Education bodies, the Scottish Children's Reporter Administration (SCRA), the Children's Panel Advisory Group, the Pupil Inclusion Network Scotland and the National Missing Persons Helpline.

**5 *“Take action to share information and initiate follow-up activity when necessary, co-ordinating inter-authority and inter-agency communication and action at national level.”***

- in addition to the related protocol and policy work outlined above CME(S) had successfully traced 204 children between August 2005 and July 2006.

**6 *“Provide training and consultancy to support local development of systems and procedures in authorities and to support their development of these in schools.”***

CME(S) had committed to a programme of consultancy and training:

- an awareness raising national seminar had been held in August 2005 to launch the project;
- three one day regional training events had been held in October and November 2006;
- 3 half day training events had been held in December 2006 for Attendance/Education Welfare staff;
- a CME(S) local authority co-ordinators' meeting had been held in May 2006;
- on request, local authority Child Protection Committees had been visited and presentations delivered;
- consultations and meetings had been held with ACPOS, NHS/Child Protection Nurse Consultants, Scottish Women's Aid, gypsy/traveller agencies, SCIS, NASS and other asylum groups, Shelter, Save the Children, Home Education bodies, SCRA, the Children's Panel Advisory Group, the Pupil Inclusion Network Scotland and the National Missing Persons Helpline; and
- advice was ongoing to local authority or CME(S) personnel.

**7. *Put in place appropriate systems for monitoring of activity, appropriate record keeping and data protection policies within the service.”***

- a CME(S) database had been developed and was in use;
- record keeping procedures were in place; and
- a data protection paper had been produced.

**8. *“Put in place mechanisms for monitoring of national activity on information transfer and***

***follow up within and between authorities.”***

- electronic and paper based record keeping was in place and showed referral numbers, date of referral, referring issues, referring local authority, authority where pupil found, and number of families involved; and
- information, action and receipt letters were generated by the CME(S) data base.

***9. “Demonstrate the impact of the service and evaluation of activities and processes with ongoing self-evaluation and quality assurance.”***

- the number of requests for searches from local authority areas was increasing;
- local authorities were aware of CME(S)’s purpose by the inclusion of the CME(S) section in *Safe and Well* and by awareness raising events, training events and CME(S) newsletters;
- a wide range of agencies continued to engage with CME(S);
- the development of internal procedures and protocols for children missing from education was underway in local authorities;
- CME(S)’s success of tracing families and of children re-engaging with education had been demonstrated, with 97% of cases resolved to date;
- feedback from evaluation forms from awareness raising events and training events had been analysed; and
- ongoing consultation with local authorities and other agencies had been shown to influence CME policy and procedures e.g. ACPOS/CME(S) Joint Memorandum of Understanding.

***10. “Engage with and support any further national developments on transfer of information and follow-up in other sectors.”***

- the Child Protection Steering Group within the Scottish Government was aware of the purpose of CME(S) and how the proposed new statutory guidance on information sharing would affect future developments;
- the Director of CME(S) sat on the School to School Project Board and the School to School UPI Task Group;
- the Director of CME(S) would promote CME(S)’s remit with the ScotXed Forum;
- the Director of CME(S) had ensured that the data base build with Real Time Engineering was compliant with CME(S) procedures; and
- The CME(S) role would widen and diversify on becoming the administrator for the School to School Clearing House.

The review report which follows was commissioned in September 2006, to evaluate current service development and its interface with local authorities. It would inform policy direction and procedural and organisational development for both the remainder of the programme and the future direction of the service.

### **3. Phase 1- Initial observations on Children Missing from Education (Scotland) service operation, September 2006**

By September 2006 the CME(S) service consisted of the Director and a part time Administrator. Reduction had been brought about by career advancement and sickness. A new Project Officer had been appointed but had not yet taken up post. Discussions were underway about a new additional post to create linkage with the S2S Transfer System. An element of this post would be administrative. For operational reasons the service had moved its base twice within a one year period.

At a time of significant demand on the service a preliminary study into CME(S)'s procedures and operation was undertaken. Initial comments were arrived at through participation, observation, discussion and examination of case files and data bases:

#### **Internal operating procedures**

The *Safe and Well* handbook describes good practice in child protection and when a child/young person goes missing from education. It describes the aims of CME(S), its remit and roles and that of local authorities who maintain responsibility for local practice and procedures. CME(S)'s role is to support that responsibility. There was a perception that some local authorities, having once referred a case to CME(S) were reluctant to remain engaged. Communication breakdowns were not uncommon resulting in CME(S) taking on more responsibility than the remit required. This was done with the best of intentions to ensure the safety of children. It did however put additional pressure on the system at a time when it was operating below capacity. Little time was available for development, evaluation and planning.

The combined affects of staff change and absence, difficulties in filling posts and changes in location did not allow the service to develop as quickly and as systematically as might have been expected. For example procedural steps necessary for the tracing process had not been written down. Day to day running of the service depended solely on the presence of the Director and the Administrative Officer. When for any reason this was not possible the service was unable to fulfil its remit, cases backed up and pressure on the service increased. Desk-top procedures would have ensured that other personnel could have taken over some of the tasks in an emergency. Additionally procedures could have provided a practice baseline against which case procedures could have been evaluated.

It is to CME(S)'s credit that it continued to demonstrate considerable success in the tracing of children despite ongoing pressures.

## **CME(S)'s future role**

CME(S)'s aims were stated as being both about policy and operation. While some policy work had been undertaken the focus of CME(S)'s work had been mainly towards its operational function. It was acknowledged that greater emphasis might be required on policy work.

As CME(S) was to become the administrator of the S2S Transfer System, monitoring the work of the School to School users directly, it was expected that CME(S) would be relocated to a site best suited to the delivery of the School to School Clearing House administrative function. This was necessary to ensure that electronic data could be stored and accessed securely out with the Scottish Government's own intranet. It was not clear at this point how operational and policy aims could be reconciled.

## **Interface with local authorities/CME contacts**

A considerable amount of CME(S) time was taken up by the need to check information provided by some local authorities. Many referral forms were incomplete, provided information which was later found to be inaccurate or which did not distinguish between fact and opinion.

All local authorities had been asked to provide CME(S) with the name of their designated local authority CME contact who would assist with national searches. As requested in *Safe and Well*, the local authority/CME contact should if possible be the same person as the designated child protection officer. Where this was not possible, staff had to be made aware of this and the respective roles of the two people.

It was apparent that there was a huge disparity in local authority responsibilities held by the contacts. This could explain why there were differences in quality of interaction and communication as well as in the information provided. All of this impacted on CME(S)'s ability to set in motion the national search process.

## **Interface with local authorities, provision of information and risk assessment**

In terms of the Children (Scotland) Act 1995 children missing from education are "in need" and may be considered as children most requiring protection. In the best interests of the missing child the gathering and processing of quality information at local authority level is essential in risk assessing and determining the relevant course of action.

*Safe and Well* urged "education authorities and their partner agencies (to) develop proactive practices to assess the level of risk of families disappearing from view" and "...where a child has become missing from education, those families who know the child and family will be asked to risk assess the case....."

Observation of practice, examination of referral forms, case files and the CME(S) data base showed considerable variation in the degree of contact between education and other authority services in seeking information or making a risk assessment. CME(S) found it necessary to routinely check the breadth of information provided, the degree of multi-agency involvement and the extent of risk assessment which had been done.

As suggested in *Safe and Well*, “a named person in the local authority co-ordinates the progress of local searches and is the contact person for CME (Scotland) to give and receive information” and “The named contact in the education authority will be asked by CME to confirm that local searches have been undertaken in conjunction with other local services”. In some cases there was very little evidence of a co-ordinated approach. This may be why CME(S) regularly had to seek additional information from social work and/or housing staff to expand on that already provided by the local authority CME contact.

In fairness to local authorities *Safe and Well* does not provide specific guidance on the role and remit of the local CME named person or the standard of evidence which is required. Those regularly involved in the area of child protection are skilled in risk assessment but guidance on risk assessment in a missing from education context may be required.

## **Interface with other agencies**

### ***Police***

A Memorandum of Understanding between the Association of Chief Police Officers in Scotland (ACPOS) and CME(S) had at that point been issued to all of Scotland’s eight constabularies. It aimed to ensure consistency of police practice across Scotland and articulated the need for joint working and partnership arrangements with CME(S). When CME(S) had exhausted all of their own enquiries the Memorandum would be activated “*without exception*” and contact with a Senior Duty Officer at a Force Call Centre would result in the referral being treated as a police missing person enquiry.

Although implementation of the Memorandum was at an early stage, CME(S) had experienced inconsistency in response to their referrals and had concerns that they were being down graded by an individual force’s own risk assessment procedures or by the receiving officer’s unfamiliarity with the protocol.

The *Memorandum of Understanding* is attached as appendix 10 in the supporting papers.

### ***Health***

Information on a child is gathered and recorded at birth, first by a midwife and then by a child's health visitor. When the child enrolls at school, responsibility for updating information is transferred to the school nurse or to designated education staff in nurseries, primary and secondary schools. When a child or young person registers with a GP, health information is brought together to form a medical record. This moves with the child throughout their life.

It is surprising that information received by CME(S) showed little evidence of health colleagues being routinely involved during the information gathering process at local level. In particular

there seemed to be very little contact with school and community nurses, even on an informal basis.

CME(S) had reached an agreement with NHS/Child Protection Nurse Consultants who were piloting a Missing Family Alert system. When CME(S)'s own enquiries had been exhausted a search request could then be made. A Missing Family was defined by Health as one "*which has disappeared from a known location within a health board area and for whom there may be concerns of significant harm for the children in respect of unmet need, vulnerability or abuse.*" While it was clear that the NHS system could assist CME(S) with some children it could not provide assistance for children where there was no "*significant harm*".

Although the agreement was highlighted in the CME(S) Newsletter, of August 2006, it also became apparent that not all local authority/CME designated contacts were familiar with CME(S)'s involvement in the pilot initiative.

The *Missing Family Alert Protocol* is attached as appendix 11 in the supporting papers.

### ***Independent schools***

Although CME(S) was established to support local authorities when children go missing from education, the service also accepted referrals from the independent school sector. Agreement was reached with SCIS, in relation to the referring and tracing of children. The group was also involved in the consultation process. The launch of the S2S Transfer System would necessitate change to both *Safe and Well* and CME(S) procedures.

### ***Early years***

Discussion had already begun on the need for a pre-5 protocol. The Care Commission had undertaken to establish with service providers their procedures for when a child's attendance discontinued.

### ***Diverse groups***

CME(S) regularly accepted referrals for children from many diverse groups including those from Gypsy and Traveller, Migrant Worker, Asylum Seeker backgrounds as well as children in families fleeing from domestic violence or abuse. From observations and case discussions it became apparent that CME(S) was aware of the particular sensitivities associated with these groups and the resulting case complexity.

Within a short period of time CME(S) had produced *Keeping in Touch- Gypsy and Traveller Children: good practice when there are concerns for Gypsy and Traveller children's safety and wellbeing if they lose contact with schools* but no arrangements had been made to evaluate its effectiveness or to monitor policy implementation. Similarly a Scottish Women's Aid/CME(S) agreement was being trialled and an information sharing agreement with NASS had been reached.

CME(S) was well aware of the many areas which would require both organisation and policy development but were restricted by staffing and time limitations.

*The Keeping in Touch- Gypsy and Traveller Children: good practice when there are concerns for Gypsy and Traveller children's safety and wellbeing if they lose contact with schools* is attached as appendix 12 in the supporting papers.

### ***Non-Scottish contacts***

By April 2005 more than half of the referrals to CME(S) came from other countries in the UK or were for children moving from Scotland to other parts of the UK. These referrals were particularly time-consuming, challenging and frustrating because of the service operating systems unique to these other areas. While for example it was relatively simple to establish if a young person was recorded on the Pearson Phoenix or Seemis MIS system, it was not possible to check similar systems in other parts of the UK. Neither had a protocol been established to do this.

CME(S) had succeeded in putting together a summary list of designated CME contacts in England and Wales and had contacts for the Education and Library Boards in Northern Ireland. With a few notable exceptions co-operation on information exchange was inconsistent and at times poor depending solely on goodwill.

A summary of key issues "*Initial observations on CME(S) operation, September 2006 key issues*" is attached as appendix 1 in the supporting papers.

The key issues identified confirmed that there was a need to examine more closely:

- case work complexity;
- stakeholder views on the development of CME(S) and policy;
- local authority CME policies and procedures;
- the future role of CME(S).

As cross-border issues were having a significant impact on the workload of CME(S) the new statutory procedures for children missing education in England would also be examined to see how this might affect future working.

Written internal procedures were produced as a matter of urgency and the Domestic Abuse section was given to Scottish Women's Aid for comment.

*Responding to Referrals-Guidance for CME(S) Staff*, are attached as appendix 2 in the supporting papers.

#### **4. Phase 2 – Further observations on Children Missing from Education (Scotland) service operation, September 2006 – April 2007**

As part of the continuing review a small sample of case files and database entries were examined in greater detail to substantiate or invalidate areas which had emerged from initial observations and to identify any other issues which might arise. One very complex and ongoing case was studied in particular detail.

##### **Case work complexity**

When a young person goes missing from education, tasks associated with information gathering, risk assessment and information transfer can often be demanding and time-consuming for local authorities and partner agencies.

Referral to CME(S) may bring greater support for the local authority but it also brings with it an element of additional responsibility for the authority. The CME contact must be readily available to answer or redirect questions and be accessible when decision-making is required.

Although there appeared to be elements of the local authority partnership which might need to be addressed the effectiveness of the relationship was clearly demonstrated by the number of children who had been located:

	<b>Total family referrals</b>	<b>No. of Children</b>	<b>Children located</b>
<b>Session 2005/06</b>	157	210	204
<b>Session 2006/07</b>	55*	78	75
<b>Total</b>	<b>212</b>	<b>288</b>	<b>279</b>

*November 2006*

*\*The figure for 2006-7 only reflects referrals between August and November 2006.*

A small number of children had not been located by November 2006. This usually involved families who had moved to live abroad without notifying the relevant school(s). In such cases after further investigation and liaison with the referring authority, a decision not to refer the children to the police as missing persons would have taken place. This would have been based on the referring authority's assessment regarding the welfare and protection needs of the children concerned.

## Diverse groups

Many cases are complex from the outset because of family dynamics or social or lifestyle factors. When young people belonging to a family from one or more of the following broadly defined groups (*Safe and Well*), they may be more at risk of going missing from education than their peers:

Children/young people belonging to families who:

- are homeless and living in temporary accommodation, house of multiple occupancy or bed and breakfast;
- are fleeing from domestic violence/abuse;
- are involved in the witness protection programme;
- are involved in fraud, social difficulties and crime;
- do not return from holiday;
- belong to gypsy or traveller groups;
- for cultural reasons require extended visits to their country of origin;
- have been undergoing long term medical or emotional problems;
- are asylum seeking or failed asylum seekers;
- are immigrant and/or itinerant workers.

Children who belong to the latter groups are of increasing concern and it would be a positive move to increase dialogue with groups representing them.

Children are particularly at risk of going missing from education:

- at the outset of their educational life when they fail to start appropriate provision;
- when they move with their family into another area;
- when they and their family are newly arrived in Scotland;
- when the family is under stress of some kind.

Each of these categories provides their own particular complexities.

Families may not wish to be found, may change their names, move quickly from place to place within the UK and perhaps even move abroad. Sometimes very little information is held by authorities or agencies on either the child or the family because of the transient pattern of their lives. Where families have a particular immigration status or are newcomers to the UK tracing can be particularly difficult.

In the process of conducting enquiries and in contact with family members and friends of the missing families, CME(S) has been careful to describe the service's purpose as one of ensuring the transference of school records rather than a tracing service based within the Scottish Government. This has been done to minimise possible negative reactions and lack of co-operation and in the best interests of the child. Further discussion is required on how this sits with the Scottish Government's aim of being "open and accountable" and about possible support from an informed public.

Depending on their circumstances some parents may not see re-enrolment at school as a matter of urgency even if previously their children had been good attendees at school. Indeed if the children are nearing school leaving age the family may not see the relevance of returning them to education.

Children may be withdrawn from school to be educated at home, to travel abroad, to go on extended holidays for cultural reasons or because “moving on” is part of their lifestyle and culture. Children in all of these categories may indeed be safe and well but this cannot be determined until they are seen to be so.

The review did not set out to explore the complications specific to all diverse groups. The following examples however should provide some insight of the complexities involved.

### *Itinerant families*

*Good Practice Guidance for Gypsy and Traveller Children* had already been produced and disseminated to all local authority/CME contacts. Procedures specific to this group were to be followed except where there were care and welfare or child protection concerns.

Many other families have itinerant lifestyles and children may be enrolled in several schools – sometimes under different names. Because of the transient nature of contact with some families it is often difficult for schools to decide whether absence from school is for cultural or other reasons. Delay in initial reporting not only adds to case complexity but can put children at risk.

Pertinent background information may not always be readily available. For example, a new school may have no knowledge of current care and welfare concerns simply because the family has moved on and the system has not caught up. Should such a family move to another part of the UK, move between local authorities, not register with a GP and not enrol their children in schools the tracing task can become extremely complex.

All of these difficulties could be seen from case files.

### *Home education*

Parents have the right to home educate if their children have never been enrolled in local authority provision or if they have chosen to withdraw their children from education. Under these circumstances local authorities must be informed. Some parents may withdraw children for home education and be unaware of the need to communicate this to local authorities.

There is no duty on parents to enrol a child in an authority’s educational provision by simply moving into another education authority area (Education (Scotland) Act 1980, sections 30, 35 and 37(i) and (ii)) even when that child had previously been enrolled in another authority school.

The child by definition is not ‘missing from education’ but this is a grey area for both the referring authority and CME(S) and requires urgent clarification.

Further complexities apply if the child had previously been enrolled in a school in another part of the UK. Even if there had been no previous care and welfare or child protection concerns, the relocation can make the investigation of any referral particularly sensitive for CME(S).

### ***Families fleeing from domestic violence or abuse***

When a place of safety has been found by a family fleeing from domestic violence or abuse, women are keen to ensure that their safety and that of their child has not been compromised. This can happen in an exchange of information between the child’s previous and new school and can lead the abuser to the new contact address.

To prevent this happening CME(S) and Scottish Women’s Aid agreed procedures for when a family moves to one of their refuges. Personnel acting on behalf of the family will contact CME(S) to act as a secure post box for transference of pupil records. The link is therefore broken between the past and future.

In line with the procedures agreed, CME(S) will:

- contact the new authority to ensure that the child is enrolled or about to be enrolled in one of their schools;
- contact the named CME contact in the previous local authority to say that the child is safe and well and asking them to send on to CME(S) the child’s record by registered delivery without divulging the name of the new authority or the new school;
- explore with them if there are any other concerns e.g. child protection concerns;
- send on the pupil records by registered delivery to the new school where the child will be given a new Scottish Candidate Number (SCN) since the child can be traced if this is not done;
- ask Women’s Aid to remind the parent to refuse permission for the new school to make contact with the old (thus re-establishing the link).

While undertaking any search procedures CME(S) may discover that there are issues around domestic abuse. Under these circumstances it is not for CME(S) to make contact with other family members as this could inadvertently compromise the safety of the child. CME(S) has to proceed with extreme sensitivity and this in itself can lead to a delay in tracing the child.

The Domestic Abuse section can be found in *Responding to Referrals-Guidance for CME(S) Staff* in appendix 2 in the supporting papers.

## 5. Interface with Scottish and non-Scottish services and organisations

Further examination of case files showed the following:

### *Health*

The CME(S)/NHS Missing Family Alert agreement was working well. There had been initial concerns about the strict application of the NHS's definition of "concerns of significant harm" in relation to a missing family, and how this would impact on any other children whom CME(S) wished to trace:

*"one which has disappeared from a known location within a health board area and for whom there may be concerns of significant harm for the children in respect of unmet need, vulnerability or abuse"*

In practice the definition of "concerns of significant harm" was being interpreted more loosely. This allowed for many families and their children to be traced.

### *Police*

There had been initial concerns about the application of the ACPOS/CME(S) Joint Memorandum of Understanding. While inconsistencies in the application of the Memorandum across Scotland were borne out by further examination of case files the following issues also arose:

- not all police contacts were wholly familiar with the terms of the Memorandum and may not have been integrating their own guidance on actions for missing person enquiries with that of the agreed protocol;
- liaison arrangements were not always firmly established or fully understood by both parties;
- CME(S) file information was often not easily transferable being in both paper and electronic formats.

However a more fundamental complexity emerged. When a missing child has been located it is particularly important for contact details to be passed to the referring authority as quickly as possible. Delay in doing so may lessen the opportunity for appropriate support to be given by the new authority with, in the worst case scenario, vulnerable families moving on again.

The purpose of the Memorandum was *to establish an agreed working framework between the Association of Chief Police Officers in Scotland and Children Missing from Education (Scotland) in circumstances where children (and their families) go missing within the education system of Scotland.* This infers that details regarding contact should be passed back to CME(S) who will then relate this to the referring authority. Particular difficulties arose during school holiday periods or at weekends when CME(S) staff could not be contacted.

Since local authorities retain responsibility for the missing child, arrangements with ACPOS to do so should be clarified.

### ***Social work***

When a child goes missing social work may already be involved with the family. In these circumstances their knowledge of the family and their contribution to risk assessment is vital. It was unclear from much of the information given to CME(S) the extent of the liaison and working arrangements with social work departments.

Social work knowledge of the family is especially important when families move away from a local area during school holiday periods. Their staff may be the first to become aware of this happening. Unless the young person is considered to be at risk and unless local authority multi-agency CME protocols are in place referrals may not be made until after the holiday period has ended and schools have resumed. Any delay in reporting a child as missing can seriously complicate tracing procedures.

A local authority “missing education at risk” register similar to that suggested in *Statutory guidance for local authorities in England to identify children not receiving education, 2007*, as well as appropriate communication pathways, could go some way to resolving this complexity.

When families move between authorities and across borders – often within a short period of time – the involvement of an authority’s social work department and timeous communication of that to CME(S) and the referring authority can be particularly problematic.

### ***Cross-border working***

Where information suggests that a family has left Scotland for another part of the UK it is sometimes possible to trace the family if a possible relocation area(s) has been identified. Co-operation of the identified local authority is at the moment based on good will. It is currently not possible to access a centralised school database although future developments may make this possible in England. The School to School system has proposed that cross-border centres would be beneficial in identifying children who subsequently enrol in a new school out with Scotland.

When the child is not enrolled in school there remains the potential for that person not to be traced. In those circumstances referral to the police may be made using the ACPOS/CME(S) Joint Memorandum of Understanding.

When it is thought that the child has moved to other parts of the UK local authorities are expected to retain responsibility for being alert to any new information and for taking any subsequent action required. This includes contact with CME(S) who will have kept the case open and on file. In practical terms local authorities must have arrangements and/or guidance in place to gather and pass on appropriate information. There have been cases where local authorities were aware of the missing person’s whereabouts in other parts of the UK but had not communicated this information.

Between April 2005 and November 2006 more than half of the referrals received by CME(S) were for children moving from Scotland to other parts of the UK or for children thought to be moving to Scotland. With the latter group the majority of referrals were of a “fishing” or

“blanket-type” request. CME(S) has endeavoured to co-operate with requests but the quality of information provided is often poor, lacking specifics and thorough searches are not then possible.

In summary cross border-working is particularly time-consuming and challenging.

### **CME (Scotland) recording and results interpretation**

For the greater part of this review CME(S) was operating well below capacity and importantly with a nominal 2 hours daily of administrative assistance provided by a member of the Support for Learning Division. During this time a very high level of referrals were received. Paper and electronic filing systems were used. The review has shown that there were some inconsistencies and omissions while transferring information between the two systems leading to the chronology of events being difficult to follow in some cases. Because of staff familiarity with the cases at no time did this appear to compromise the safety and welfare of children.

CME(S) had also become concerned about the terminology and classification used in data collection and how this could be open to misinterpretation. For example:

- “referrals” could apply to all applications *received* by CME(S);
- “referrals” could also apply to all applications *accepted* by CME(S) after internal criteria had been applied;
- a family could be “located”, information passed back to the referring authority to pass to the new education authority and CME(S) left unaware as to whether enrolment had ever taken place;
- “not found” cases are kept open in CME(S) files, passed back to the referring authority, with no updates on changed circumstances communicated to CME(S);
- “not found” could apply to a child known to have gone abroad.

CME(S) found that there was a need to keep data on additional categories of missing children. For example for children belonging to groups such as immigrant workers or asylum-seekers, those who became home-educated, and for those who could not be located but for whom police involvement was deemed unnecessary.

As seen in *Case Information Update*, appendix 3 in the supporting papers, some very minor revision has been done during the course of this report but much still remains to be done.

## **Local authority working**

*Safe and Well* describes good practice in child protection in education and when a child/young person goes missing from education. The CME section supplements local guidance and requires the involvement and co-operation of other local authority services such as social work and housing and that of health, police and voluntary organisations.

In the best interests of the missing child the gathering and processing of quality information is essential to risk assess and determine the relevant course of local action. Associated tasks can often be demanding and complex, placing considerable responsibility and accountability on the CME contact person. Although all local authorities have a designated CME contact, with the successful tracing of children demonstrating the extent of the commitment given, the role remit and responsibilities of the named person varied considerably across Scotland.

Analysis of case files confirmed that the role and responsibilities of the named CME person had a direct affect on cross and inter authority communication and interface with CME(S). This contributed to delays and complications in the tracing of children.

There was also a wide range in quantity of referrals. Without further detailed analysis it is impossible to conclude why variations were so large. It could be, for example, that low referral rates indicate effective management of prevention or tracing of children who go missing but it could also indicate a lack of awareness of children who were missing. On the other hand high referral rates could indicate a diligent and thorough approach but could also indicate over-referral, with insufficient checks being carried out at local level. Once the S2S Transfer System is launched, pupils who remain unmatched into a destination school will be considered for referral to CME(S) after a 4 week period. As local authorities will continue to have responsibility for referring to CME(S) directly and out with the system timeframe it should be possible to determine the underlying reasons connected with referral variation.

Cases can become complex too if, for whatever reason, there are difficulties with interpretation of the guidance or its implementation at local level. Where case work was particularly slow or complicated, difficulties were found to be associated with:

- time delays;
- communication within and across local authorities and to CME(S);
- organisational procedures;
- multi-agency working;
- care and welfare /child protection issues.

## **Child protection issues**

CME(S) procedures, good practice guidance, liaison and referral arrangements and related issues were agreed in 2005 after consultation and collaboration with local authorities, and organisations including Shelter, Save the Children, Home Education bodies, SCRA, the Children's Panel

Advisory Group, the Pupil Inclusion Network Scotland and the National Missing Persons Helpline. Child Protection Committees were also consulted.

*Protecting children and young people: Framework for Standards* sets out what each child in Scotland can expect from professionals and agencies to ensure that they are adequately protected and their needs met. Children and young people who are missing from education or at risk of going missing from education are recognised as being vulnerable and in need of support.

Review of cases has shown that in some instances:

- local authorities referred cases to CME(S) when local child protection procedures should have been followed in the first instance;
- information received by CME(S) did not include reference to previous child protection concerns or investigations;
- when in the course of a search CME(S) uncovered child protection concerns there was a reluctance by local authorities to follow internal child protection procedures.

Child Protection Committees have a strategic function in that they are “..... the primary strategic planning mechanism for inter-agency child protection work in each area. In undertaking this function it will work together effectively with other planning structures whose activities affect the protection of children, within and between agencies.” (*Protecting Children and Young People: Child Protection Committee Guidance, 2005*)

As the key local bodies for developing and implementing child protection strategy across and between agencies Child Protection Committees are expected to perform the crucial functions of:

- producing and disseminating public information;
- continuous improvement; and
- strategic planning.

If CME(S) has been unable to establish the whereabouts of children missing from education it is not known whether these children are indeed safe and well. The file is kept open by CME(S) but with local authorities retaining responsibility. In some of the cases examined there appeared to be a misunderstanding about this.

In the same way that Child Protection Committees have an overview of information relating to children and young people on the Child Protection Register it would be valuable to begin debate about a possible monitoring function for children missing from education.

The National Strategic Planning Day included chairs of Child Protection Committees, some of whom had taken on this function, receiving reports of children missing from education in their area.

## **Early years**

The following current definition excludes children who are not of compulsory school age: “*Children are defined as missing from education when they have not attended school for a*

*substantial period of time, usually agreed as 4 weeks, or shorter where children are considered as being vulnerable. They must also be of compulsory school age, are not on a school roll or being educated otherwise (at home, privately or in an alternative provision)”.*

In searching for a school-age missing child CME(S) can become aware that a pre-5 child who previously had been attending an early years provision had also gone missing and would include that child in the search for school-aged children. In so doing CME(S) ignores the definition of a missing child.

Some local authorities have recognised and addressed this complexity by including Early Years procedures in their local CME guidance. Many have not. Legal clarification and Scottish Government guidance would support CME(S) as well as local authorities. In the meantime it is encouraging that the Care Commission has undertaken to ask all child-care providers about their own procedures.

## **Summary**

A review into some of the complex issues associated with tracing the whereabouts of children has established that there are particular issues which contribute to the complexity of cases. Further examination and discussion with all relevant stakeholders is necessary to provide a resolution.

*Key themes arising from the review of case work complexity* is attached as appendix 4 in the supporting papers.

## **6. Children Missing Education in England**

In 2002 DCSF set a target to ensure that by 2005 systems were in place in each local authority to identify and track children missing education or at risk of doing so with the intention of placing a statutory duty on all local authorities in England and Wales by 2007.

The DCSF definition for children missing education was “*all children of compulsory school age who are not on a school roll, nor being educated otherwise (e.g. privately or in alternative provision) and who have been out of any educational provision for a substantial period of time (usually agreed as four weeks or more)*”. Local authorities were required to name an individual responsible for receiving details of children found to be missing and for brokering support for them with the most appropriate agencies. This was to be done in accordance with *Identification, Referral and Tracking* guidance (2003).

The non-statutory guidance *Identifying and maintaining contact with Children Missing, or at risk of going missing, from Education, 2004*, provided a practical model of 22 process steps to help with implementation and included a ‘self evaluation checklist’. Local authorities could use the checklist to monitor progress in the following areas:

- Strategic management and leadership;
- Networks and points of contact;
- Information systems;
- Provision brokering services; and
- Effective pupil tracking systems.

Research on the guidance was commissioned in 2006 to ascertain what progress has been made, to assess how effective the guidelines had been in helping local authorities develop systems and procedures, and to make recommendations for development and improvement. The findings would support the preparation of the statutory guidance.

As part of the ongoing CME(S) review, a comparison of the DCSF research findings and CME(S) implementation and guidance was submitted in November 2006:

*Children Missing Education, Experiences of Implementing the DfES Guidelines: comparison with CME implementation and Safe and Well/ CME Guidance, November 2006* is attached as appendix 5 in the supporting papers.

The Education and Inspections Act 2006 received Royal Assent on 8 November 2006. Included in Part 1 of the Act was the new duty on local authorities to identify children not receiving education and the new guidance, *Statutory guidance for local authorities in England to identify children not receiving education* was published in February 2007.

A summary of *Statutory guidance for local authorities in England to identify children not receiving education* is attached as appendix 6 in the supporting papers.

### **Scottish and English systems and guidance: comparison and comment**

Many search requests to CME(S) are for children thought to have moved outwith Scotland and a significant number of search requests come to CME(S) from other parts of the UK. Current data (*Case information update* in appendix 3 in the supporting papers) shows the extent of CME(S)'s involvement. The figures mainly apply to referrals from local authorities in England. Difficulties that CME(S) has encountered with cross-border searches have been highlighted previously.

Comparison of the two systems and their guidance was undertaken to inform possible service development and policy direction. This is particularly important with the planned launch of the S2S Transfer System with its broad aims of:

- ensuring that any pupil under school leaving age leaving a Scottish school enrolls at another school; and
- enabling the electronic transfer of pupil details between schools where such a facility is not currently available.

During the course of this review it was proposed that the operation of CME(S) should transfer to the ScotXed Unit within the Scottish Government and merge with the School to School system to

provide an integrated service assisting local authorities with their data sharing. Policy aspects will remain with Support for Learning Division within the Schools Directorate. As outlined above the Scottish School to School Clearing House will enhance the capability for CME(S) to trace children who go missing from education.

### ***DCSF and CME(S) aims***

Both systems aim to identify, track and support children at risk of/or missing from education, and have provided guidance for local authorities to support implementation.

With the advent of the School to School Clearing House Scotland will have a national system for identifying pupils who are not in education. Names will automatically be sent to CME(S) who will conduct a national search. In contrast the English system relies on local authorities to place names on a Lost Pupil data base in the event of their own searches being unsuccessful.

### ***Statutory powers***

Section 436A of the Education and Inspections Act 2006 (England) places a duty on local authorities to make arrangements to enable them to establish (as far as it is possible to do so) the identities of children residing in their area who are not receiving a suitable education. It also requires local authorities to put in place arrangements for joint working and appropriate information sharing with other local authorities and relevant partner agencies which come into contact with families with children.

In contrast there is no similar statutory power in Scotland but under section 22 of the Children (Scotland) Act 1995 there is an existing duty on local authorities to ‘safeguard and promote the welfare of children in their area who are in need by providing a range of and level of services appropriate to the children’s need’. Children who are missing from education are deemed to be vulnerable.

In most Scottish local authorities, structures are already in place which allow for the support needs of children and families to be discussed on a multi-agency basis. Structures, names and operations may vary around Scotland but the multi-agency group can support children and families where attendance at school is giving concern. In line with the early intervention proposals in Getting it Right for Every Child (GIRFEC) there may be a role for these multi-agency groups to monitor or provide support to families where it is considered that the children might be at risk of missing education.

### ***Definitions***

The definition in the DCSF statutory guidance for children missing education is:  
*all children of compulsory school age who are not on a school roll, nor being educated otherwise (e.g. privately or in alternative provision) and who have been out of any educational provision for a substantial period of time (usually agreed as four weeks or more).*

The *Safe and Well* CME definition places more emphasises on vulnerability in that

*Children ‘missing from education’ are children and young people of compulsory school age who are not on a school roll or being educated otherwise (at home, privately or in an alternative provision). They have usually not: attended school for a substantial period of time (usually agreed as 4 weeks, or considerably less for vulnerable children).*

### ***Tracking systems***

The DCSF statutory guidance is about individual local authorities having “effective systems in place to identify children who are not in education”. As part of the process steps in “Track and Reconcile Movements” the local authority will conduct an internal search before making enquiries of other local authorities in England. If the child is not subsequently found to be in education local authorities are “encouraged” to upload the pupil information file (known as Common Transfer Files) to the Lost Pupil Database which acts as a secure web store and provides a facility for local authorities to download pupil information should this be required.

In comparison, if a pupil from a Scottish school remains unmatched into another, the S2S Transfer System will pass the pupil information to CME(S) for follow up after an “acceptable “ period of time, usually taken as 4 weeks unless there are concerns. The system also allows for additional information which could assist CME(S) to be registered.

Although the S2S Transfer System will not alter local authority procedures for raising cases with CME(S) (including urgent referral where there are care and welfare or child protection concerns), it will significantly enhance the capability of CME staff to locate children missing from education.

### ***Cross-border working***

As part of its remit CME(S) may contact English local authorities on an individual basis when information suggests this should be done. Since there is no agreement on what information can be shared most local authorities (and schools within them) are reluctant to respond to CME(S)’s enquiries.

The DCSF statutory guidance does not provide advice on contact with local authorities outside England or with CME(S) as a national tracing service. Given that contact has been established and is ongoing between the Director of CME(S) and his counterpart in England this is perhaps surprising.

It does however warn against the use of “blanket” enquires to other local authorities. Since it is not unusual for CME(S) to receive this kind of request it may be that some of CME(S)’s current difficulties associated with lack of information from authorities in England could be addressed.

### ***Guidance on multi-agency standards***

In the DCSF statutory guidance all services within local authorities are asked to measure progress towards standards by using the *Children not receiving an education Progress Checklist: Self*

*Evaluation (1.4)* and, in appendix 14 in the supporting papers, *Criteria for local authority standards, DfES, 2007*.

*Safe and Well* does not provide standards but by reference to the *Framework for Standards* which were developed for all agencies and professionals who work in the protection of children, both directly and indirectly, they are implied. Moreover, in their integrated Children's Services inspections, HMIE employ quality indicators from *How well are children protected and their needs met: self evaluation and quality indicators* which are based on the *Standards*.

*Safe and Well* is not only promoted as guidance "for staff, schools and education authorities in the care and welfare of children and child protection" but lists *Standards* which have been "customised" for education staff. Although the need for partnership working and multi-agency collaboration at all levels is advised throughout, *Safe and Well* may require to be updated with greater emphasis on the need for multi-agency working and the multi-agency standards which already exist.

### ***Policy development***

Advice on policy development is given in section 2 of the DCSF statutory guidance. Subsections deal with:

- Why do children go missing from education?
- Vulnerable groups;
- Potential vulnerability due to high mobility;
- Pupils excluded from school;
- How to consider police involvement;
- Reducing the risk of children not receiving education.

The CME section of *Safe and Well* provides good information for all of the above and the contents should support policy development at local authority level. Local authorities might feel that further guidance on policy making is required.

The DCSF guidance *Developing a policy for children not receiving education* is attached as appendix 13 in the supporting papers.

### ***Process systems***

Both the DCSF Statutory guidance (section 3) and *Safe and Well* give similar advice on process systems for "maintaining contact" with children in education. This can be about seeking further information about an enrolled child/young person or setting in motion the tracing process.

Responsibility for referring a child as missing rests with education in *Safe and Well*. In contrast the DCSF statutory guidance places a duty on all agencies within local authorities to work together when a child is missing from education and to ensure communication, exchange of information and routes to notify of a "child missing" (3.2.6-3.2.17). The multi-agency approach recognises that when a child goes missing from education it is as part of a family unit and that in many cases the education services are not best placed to initiate the tracing process. This is

especially relevant during holiday periods.

### ***Enquiries to other local authorities***

The DCSF statutory guidance defines the roles and responsibilities of local authorities. Sections 3.3.4-3.3.10 place responsibility on local authorities to make contact with other local authorities when a child is missing from their area.

In the main CME(S) currently undertakes this task on behalf of local authorities but the S2S Transfer System will in future identify for Scottish local authorities when a child has enrolled in another local authority school in Scotland.

### ***Support on re-enrolment***

*Safe and Well* suggests that “Action must be taken at school and education authority level to ..... try to re-engage them with services” and in the section *Children arriving with incomplete information*, emphasis is placed on the need for fullest information to be available “to help schools to plan their support”. Limited guidance on how to give that support is included in the section *When a child is located-follow-up procedures*.

The DCSF statutory guidance (3.6) is more specific in that it calls for an “assessment and intervention plan, that takes into account the reasons the child or young person has become disengaged from education, (which) will assist the process of successful reengagement” and goes on to say “a lead professional should help ensure that the actions identified in the assessment process are fully co-ordinated”.

In a multi-agency context guidance on who should be the lead person for multi-agency support for children re-engaging with schooling should be clarified for Scottish local authorities and *Safe and Well* updated accordingly.

*A Summary Comparison of the Scottish and English systems and guidance* is attached as appendix 7 in the supporting papers.

## **7. Stakeholder views on Children Missing from Education (Scotland) service development and policy**

CME(S) was established as a national service to support local authorities to develop policies and procedures for children who go missing from education and to provide assistance to them in the tracing of children. A training element was also included in the remit.

Much has been achieved by the national service since it began in 2005. CME(S) has demonstrated success through the tracing of children, by the development of guidance and protocols and importantly by ongoing consultation and communication with stakeholders.

The importance of on going consultation and communication with stakeholders was recognised at

the outset when local authorities and other stakeholders were involved in the proposals for the establishment of the national service. It continued with the launch of the service in August 2005, the delivery of regional and staff training events, bespoke presentations to involved agencies including child protection committees and the production of quarterly news letters. Importantly CME(S) provides a very accessible and responsive support service to designated local authority contacts.

As part of the review process a strategic business planning day was held with all local authorities, chairs of child protection committees and other key agencies in March 2007. The purpose was to give an update on what had been achieved over the first period of the CME(S)/local authority partnership, to inform the internal review, to identify what more was required to support local authorities and partner agencies and to look at possible directions for the future.

Key points arising from the evaluation forms and the working groups were:

1. CME(S)'s role in tracing children and families was valued;
2. support for "missing from education children" was a multi-agency responsibility;
3. local authorities were clear about their responsibilities in relation to children missing from education but would welcome national guidance:
  - to support the development of local policies, protocols and procedures;
  - to clarify the roles and responsibilities of those involved with missing children;
  - on assessing the risk to children missing from education or vulnerable to missing education; and
  - on working with diverse groups and children under school age.
4. information systems populated by multi-agency partners were key to identifying and supporting children at risk or who were vulnerable;
5. the Scottish Government should
  - consider the need for a multi-agency consultative group;
  - consider the need for a national framework;
  - ensure that the missing from education agenda was linked into other policy areas;
  - ensure that future data sharing work such as the S2S Transfer System be co-ordinated with health and social work;
  - assist with the sharing of good practice and should consider how best to support authorities in taking developments forward;
  - explore if there was a role for child protection committees;
  - gather data on different categories of children who have gone missing; and
  - engage with other parts of the UK regarding children who are missing.

Feedback from the strategic business planning day paralleled themes which had already been identified during the review, albeit from a different perspective. For example, where CME(S) had concerns about the quality of interface with local authority designated contacts, the quality of information received and the scope of local searches, local authorities felt that current guidance

was not sufficiently extensive to support activities at local level particularly on roles and responsibilities.

Furthermore, while CME(S) had identified and begun to develop some specific policy areas impacting on practice such as cross border issues, early years services, asylum seeking and refugee families and links with health, social work and police there was clearly a need to further develop specific policies in relation to these and for more to be done to support both strategic and operational development at local authority level.

Where examination of CME(S) case files had suggested there was a considerable variation in the degree of multi-agency involvement, perhaps the need to do so had not been given sufficient emphasis. Indeed it was even suggested that the service's name "children missing from *education*" had contributed to this.

In summary, while CME(S)'s role was valued and local authorities were clear about their responsibilities, they clearly suggested that there was now a need for a national framework of guidance to take things forward. This would include the role and responsibility of agencies other than education in supporting children missing from school. A multi-agency consultative or steering group could provide the required co-ordinated support and direction and oversee national policy including development and guidance.

The full analysis of the feedback from the working sessions is attached as:

- *Group Feedback from Planning Session 1* in appendix 8a in the supporting papers; and
- *Group Feedback from Planning Session 2* in appendix 8b in the supporting papers.

## **8. Local authority Children Missing From Education policies and procedures**

*Safe and Well* describes good practice when a child goes missing from education and suggests that;

- local authorities have in place written procedures for children transferring school, absence management and for situations when children become missing from education;
- a multi-disciplinary approach is taken to risk assess vulnerable, missing or relocated children to determine (and where possible deliver) the relevant course of action required, and the nature of any child protection concerns;
- when children are missing and whenever necessary, the local authority's child protection guidelines are followed;
- the local authority will search across their area prior to a referral to CME(S) to co-ordinate searches across Scotland (and beyond where appropriate);
- a named person in the local authority co-ordinates the progress of local searches and is the contact for CME(S) to give and receive information; and
- children who are missing from education are recognised as being vulnerable and in need of support.

While the Children Missing from Education guidance supported the development of protocols, procedures and guidance at local level there was no clear picture of what progress had been made nationally. Therefore to contribute to the review of what had been achieved over the first period of CME(S), local authorities (32) were invited to provide their current documents. This would contribute to future developments arising from the strategic business planning day. Of the 27 authorities who confirmed that policies/procedures/guidance were available, 12 submitted documentation.

A number of policies appeared strong in that:

- the document title would specify it was for children “missing” from education;
- the content would make specific reference to the “missing from education” guidance in *Safe and Well*;
- a definition would be included for children who were missing from education;
- specific reference would be made to local authority responsibility and be clearly defined;
- specific reference would be made to the care and welfare of children and links to child protection;
- the importance of multi-agency working would be highlighted and clarified;
- specific reference would be made to quality assurance and monitoring and recording procedures;
- specific local authority guidance or reference to *Safe and Well* would be given for search responsibilities and associated tasks and detail who would undertake them at local level;
- guidance would be given on risk assessment;
- procedures would clearly specify time intervals for the reporting of missing children to the designated CME local authority person;
- specific links would be made to other council policy areas such as attendance, care and welfare and child protection; and
- the documentation addressed the needs of particular groups such as travellers or early years and pro-formas in *Safe and Well* had been tailored to suit local requirements and or arrangements.

It is encouraging that in a relatively short period of time almost all local authorities have confirmed they have policies or guidance in place and that from those seen systematic procedures and good practice is being developed.

## **9. The future role of Children Missing from Education (Scotland)**

To some extent CME(S) has successfully delivered on its specified remit. The main focus of its work has been at an operational level where it has greatly assisted local authorities with procedures associated with the tracking and tracing of families. To a lesser degree it has begun to develop some areas of policy which impact on practice such as gypsy traveller children and domestic abuse as well as securing protocols with health, police and Women's Aid. Complex policy areas associated with, for example, cross-border issues and asylum seeking and refugee families have also been identified.

CME(S) has carried out a two-fold role; one associated with the operation of the national service and its interface with local authorities and the other associated with the promotion of systematic procedures and development of consistently good practice.

CME(S) currently responds to tracing requests, initiated by local authorities, for children missing from schools. With the launch of the ScotXed S2S Transfer System, CME(S) will additionally be involved in resolving any other children automatically identified as missing by the Transfer System. While significantly enhancing the capability of CME(S) staff to locate children missing from education it is estimated that S2S Transfer System will significantly increase CME(S)'s workload.

As CME(S) will be the administrator of the S2S Transfer System it has recently been proposed that as a service it will transfer to ScotXed and merge with School to School staff to provide an integrated service assisting local authorities. This arrangement with its established management structure should also address concerns raised earlier regarding lack of development planning and personal support.

Changes to existing CME(S) staffing will be required with the ending of the Project Director's secondment and of the Project Officer's fixed-term post. The review acknowledges the importance of staff who are familiar, knowledgeable and experienced in child protection and child welfare issues working in the area of "children missing education" and would recommend that final decisions on staffing acknowledge the importance of staff who are able to support local authorities on a day to day basis. The value of CME(S)'s interface role with local authorities should also be recognised.

This internal review has shown that an increased emphasis on policy areas which impact on practice as well as the promotion and development of systematic procedures and good practice in local authorities is now required. Such action would be well-timed given HMIe's recent announcement that future Services for Children Unit inspections would include case reading samples for children at risk of missing education and an examination of policy on day to day practice.

The need for linkage into other policy areas within the Scottish Government has also been identified during this review and by feedback from stakeholders. The proposed separation of policy from service operations with policy remaining within the Support for Learning Division as

part of the child protection and pupil welfare in education remit should enable this and assist with the required developments.

With the afore-mentioned changes imminent, consideration should now be given to the need for a multi agency steering group to oversee national policy, to develop specific policies in relation to issues which impact upon CME(S) and to respond to issues arising including the contents of this review.

A proposal for membership of the steering group is attached at appendix 9 in the supporting papers.

## **10. Conclusions**

Within the space of two years much has been achieved by CME(S):

- a significant number of children and their families have been traced and re-engaged with education;
- detailed guidance to support the transfer of information and follow up procedures in schools and authorities has been produced;
- local authorities have a named designated contact in place;
- training and consultancy has been ongoing;
- the development of internal procedures and protocols for children missing from education is underway in local authorities;
- the development of the S2S Transfer System has been considerably influenced by CME(S)'s involvement; and
- the service is valued by local authorities and other agencies involved in the tracing of children and families who are missing.

It was not possible at the start of the programme to determine what the demand on the service might be nor to predict the effect on systematic service development brought about by changes in staffing and location. An earlier focus on written internal procedures, systems for monitoring of activity, record keeping and collection of data would have been desirable

The impact of the S2S Transfer System on CME(S) or the potential for conflict between policy areas and operational areas could not have been predicted at the start. The imminent separation between operation and policy is appropriate and will allow for development in both areas.

CME(S) has established a good working relationship with local authorities and agencies with whom they have come into contact. To a degree this has influenced the development of services at local levels and it is important that this continues under the umbrella of ScotXed.

Although CME(S) will become the administrator of the S2S Transfer System, it will continue to act as a national tracing service for local authorities and with an extended remit to independent schools. It is important that guidance is updated to reflect CME(S)'s enhanced role.

While the new School to School/CME(S) operational arrangement will provide some advantages

in the tracing of children who move across borders it will not on the whole resolve the complexities associated with the absence of a cross-border protocol. A cross-border protocol would significantly contribute to the tracing of children who are deemed to be vulnerable and clarify CME(S)'s involvement when cases are referred to them.

A very good working relationship has been established with local authorities but at times CME(S)'s capacity to trace missing children has been affected by procedural and organisational difficulties in agencies and local authorities. The consequence of this can be seen, for example, by delays in referring children as missing or delays in responding to CME(S) for information, by reluctance to engage with CME(S) on decision-making, by the provision of insufficient or incorrect information or by the apparent lack of multi-agency communication or involvement. The disparity in remits, responsibilities and support for local authority CME contacts may go some way towards explaining this.

Outline guidance on local authority responsibility was given in *Safe and Well*. It does not appear to have been sufficient to adequately support authorities with policy development or to ensure consistency across Scotland.

Practitioners in each service who are involved with children missing from education work to their own practice standards as well as the multi-agency *Framework for Standards*. A checklist (*Progress Checklist: Self Evaluation for measuring progress towards standards*) for children not receiving an education in England was provided for English authorities in the 2007 guidance *Statutory guidance for local authorities in England to identify children not receiving education*. If additional guidance for Scottish local authorities is undertaken, examination of the implementation of this section in the DCSF statutory guidance could be worthwhile.

*Safe and Well* provided outline guidance on issues and complications relevant to families who had particular social or lifestyle factors or who belonged to particular cultural groups. Stakeholders are clear that more detailed guidance is now required to assist in dealing with sensitive issues which might arise from "missing from education" investigations. This is particularly so where children are from families seeking asylum, or migrant workers, or have itinerant lifestyles. Case involvement has shown that existing guidance the *Good Practice Guidance for Gypsy and Traveller Children* may require revision to ensure that these young people are fully protected and their needs met. The national service would also benefit from increasing the extent of its involvement with representatives of diverse groups and to develop protocols for involvement in the tracing process.

Particular difficulties have arisen for referrers and for CME(S) when a young person who has been withdrawn from school for home education has subsequently gone missing. While there may be no existing welfare or child protection concerns, the ongoing welfare of the missing child cannot be assumed until they are located and found to be safe and well. Legal and procedural clarification is required.

In the same way arrangements for the tracing of children who are not of compulsory school age but who cease to attend pre-school education or childcare provision are unclear for both CME(S) and local authorities. Commendably some local authorities have confirmed their corporate

responsibility for such a child, providing the definition of a “missing or non-attending child” in a pre-5 setting and the related guidance. Others may prefer to await national guidance.

Children who go missing from education do so because an adult in charge has made this decision for them. Factors associated with diverse groups may make the possibility of a family moving on more likely with some children more at risk of missing education than their peers. Often, services other than education are best placed to have knowledge of these significant factors and of support which might lessen the possibility of such moves taking place. Together with education services, identification of “at risk” families should be possible as should co-ordination of preventative support strategies. CME(S) case involvement has shown that without co-ordinated multi-agency support the located, but still vulnerable families, often go missing again even within very short periods of time. Guidance to support the family and child’s successful reengagement with services as well as who should be the lead person for multi-agency support could be considered worthwhile.

The responsibility for children missing from education cannot therefore lie solely with education. The insertion of “education” in the national tracing service’s name as well as *Safe and Well’s* subtitle “.....A handbook for staff, schools and education authorities” may have contributed somewhat to differences in the extent of local authority multi-agency involvement.

All agencies in England have responsibility for children missing from education and have a duty to work together. The building blocks for joint working are already in place in Scotland but more remains to be done in the context of children missing from education. It would be worthwhile to keep a watching brief on how the DCSF duty in practical terms translates into working practices. This could assist future Scottish developments.

As suggested in *Safe and Well*, joint working is particularly important in ensuring that assessments of risk have been effectively undertaken at local level and to determine the appropriate action required. On occasions case involvement has shown this to be wanting. References to previous child protection concerns or investigations have been omitted from information supplied to CME (S) and cases have been inappropriately passed to CME(S) instead of following local child protection procedures in the first instance.

Under section 22 of the Children (Scotland) Act 1995 there is a duty on local authorities to “safeguard and promote the welfare of children in their area who are in need”. Children who are missing from education are included in this category. While local authorities are at different stages of “providing a range of and level of services appropriate to the children’s need” in the specific context of children missing from school it is less clear what procedures are in place to maintain responsibility for the monitoring of children whom CME(S) has been unable to locate. Child Protection Committees, with their responsibility for producing and disseminating public information, may feel they should be aware of the numbers of children in their area who remain missing from education.

The contribution of health and police to the national tracing service has been particularly valuable.

The NHS (Scotland) pilot Missing Family Alert Protocol now recognises that “in respect of non-attendance at school there will be welfare concerns for the missing young person” and that it is appropriate for CME(S) to request a search on the basis of CME(S) searches being unsuccessful. Several children have been successfully located using the protocol arrangement. While joint working is evident at national level it is of concern that this is not reflected at local level. Schools in particular do not appear, even on an informal basis, to routinely seek information from school or community nurses;

The ACPOS/CME(S) Joint Memorandum of Understanding has worked well with many children speedily located. While there have been inconsistencies in the application of the Memorandum issues related to the exchange of information and communication with CME(S) should be easily resolved. The current framework does not appear to acknowledge sufficiently the referring authority’s ongoing responsibilities in that there have been difficulties associated with communication pathways and delays in passing on information especially when more than one local authority is involved.

Some personnel working in local authority services and practitioners in other services as well as family members contacted by CME(S) for information remain unaware that CME(S) is a tracing service based within the Scottish Government and unfamiliar with its aims. While it is for authorities to consider how this could be done within their own spheres of influence it is the Scottish Government’s responsibility with its aim of being “open and accountable” to determine how this is communicated to members of the public with whom the service has to become involved.

The review has concluded that the implementation phase of Children Missing from Education has been successful. Much has been achieved: a national service has been established; guidance has been produced; local authorities have a CME contact; local authorities have developed or are developing local CME policies and procedures; protocols have been produced; contact lists have been developed across the UK; and most importantly children have been found and successfully re-engaged with education.

The review has identified what is now required at different levels to take the service forward including:

- work on local authority responsibilities, policies and procedures for children who go missing from education;
- a co-ordinated multi disciplinary approach; and
- an enhanced role for the Scottish Government in providing national policy guidance and sharing of best practice.

While the review was underway it became clear that to provide an integrated service to assist local authorities with their data sharing it was necessary for CME(S) staff to transfer to ScotXed and merge with the School to School team. Policy on children missing from education will remain within the Support for Learning Division while responsibility for procedures and interface with local authorities will remain with CME(S).

Acknowledging the development that is required and at a time of internal change the future

direction of the service and its interface with local authorities can best be met with the support of a multi-disciplinary consultative or steering group. The summary of recommendations which follow should provide a framework for their discussions and actions.

## **11. Recommendations**

The **Scottish Government** should give consideration to putting in place arrangements for a multi-agency Steering Group to discuss the findings of this review, to consider if this report could be used as a basis for the future development of the CME(S) service and to respond to any future issues arising.

Working in partnership, **the Steering Group and the Scottish Government** should consider:

1. if appropriate systems are in place to support service delivery, ongoing communication with stakeholders, monitoring and evaluation of associated activities and for record keeping and collection of data;
2. how best to communicate CME(S)'s role and remit to local authorities, to other relevant agencies and to members of the public with whom CME(S) may be involved;
3. how to ensure that appropriate arrangements are in place to guarantee that CME(S) service developments are co-ordinated with developments in other policy areas within the Scottish Government;
4. how to ensure that within the new CME(S)/ScotXed working arrangements CME(S)'s distinct interface function with local authorities will continue and develop;
5. how to ensure that arrangements are in place for monitoring of existing protocols with police and health;
6. how to ensure that discussion is taken forward with ACPOS regarding issues surrounding implementation of the Joint Memorandum of Understanding;
7. the development of a protocol with Women's Aid on the basis of the existing working agreement is taken forward;
8. if the current definition for children missing from education should be broadened to include children who are not of compulsory school age;
9. if discussions with other parts of the UK on the complexities and perceived need for a cross-border protocol should be commenced;
10. if national guidance to support local authorities with the development of policy, protocols and procedures is required with some degree of urgency;

11. if there is a need to clarify and promote the role and responsibility of agencies other than education in supporting children missing from education;
12. if guidance is required to support multi-disciplinary working including identification of “at risk” children and the co-ordinated delivery of support for prevention and follow-up;
13. if a change of service name is required to promote multi-disciplinary involvement;
14. if there is a need for national guidance on the roles, remit and responsibilities of designated CME contacts in local authorities with some degree of urgency;
15. how best to support local authorities to develop information systems to identify families at risk of removing children from education;
16. if there is a need to provide guidance for local authorities on working with diverse groups such as families who seek asylum, families from migrant working groups, families who have itinerant lifestyles and for children who are not of compulsory school age;
17. if there is a need to provide guidance to support the risk assessment of children missing from education or vulnerable to missing education;
18. how to ensure that the guidance in *Safe and Well* is updated to reflect any changes required;
19. how to make arrangements for the sharing of good practice and policy;
20. if there is a need to clarify the complexities regarding home education;
21. if there is a need to discuss with Child Protection Committees in their strategic capacity how children who have not been located by CME(S) can best be monitored at local authority level;
22. how to ensure that arrangements are in place for CME(S) to communicate to local authorities identified practice concerns including those related to child protection;
23. if there is a need to hold a future review on CME(S)’s operation and function within the new ScotXed framework; and
24. if policy and guidance and developments for children missing from education in other parts of the UK could assist with the review recommendations and the development of CME(S) as a national service.

**Review of Children Missing from Education (Scotland)  
Service: September 2006-April 2007**

**Supporting Papers**

**Jennifer Stark**

## **Review of Children Missing from Education (Scotland) Service: September 2006-April 2007**

### **SUPPORTING PAPERS**

Appendix 1. Initial observations on CME(S) operation, September 2006: key issues

Appendix 2. Responding to Referrals-Guidance for CME(S) Staff

Appendix 3. Case Information Update

Appendix 4. Key themes arising from case work complexity

Appendix 5. Children Missing Education, Experiences of Implementing the DfES Guidelines: comparison with CME implementation and Safe and Well/ CME Guidance, November 2006

Appendix 6. Statutory guidance for local authorities in England to identify children not receiving education: summary

Appendix 7. Summary comparison of the Scottish and English systems and guidance

Appendix 8a. Strategic Business Planning Day, 27 March 2007 - Group Feedback from Planning Session 1

Appendix 8b. Strategic Business Planning Day, 27 March 2007 - Group Feedback from Planning Session 2

Appendix 9. Steering Group - Children Missing from Education

Appendix 10. Memorandum of Understanding between Association of Chief Police Officers in Scotland and Children Missing from Education (Scotland)

Appendix 11. NHS Missing Family Alert (separate attachment)

Appendix 12. Children Missing from Education (Scotland) - Keeping in Touch – Gypsy and Traveller Children

Appendix 13. DfES : Developing a policy for children not receiving education

Appendix 14. Criteria for local authority standards, DfES, 2007

Appendix 15. DfES: Practical model of process steps

Appendix 16. Bibliography

### **Initial observations on CME(S) operation, September 2006: key issues**

CME (Scotland) had demonstrated effectiveness by;

- its success in tracing children missing from education;
- having a named local authority/CME contact in all Scottish local authorities;
- the development of protocols and procedures:
  - the ACPOS/CME (Scotland) Joint Memorandum of Understanding
  - the Gypsy/Traveller protocol
  - the NHS/ Missing Family Alert/CME (Scotland) agreement
  - the Scottish Council for Independent Schools (SCIS) referring and tracing agreement
  - the National Asylum Seekers Service (NASS) information sharing agreement
  - the Scottish Women's Aid/ CME (Scotland) agreement

However:

#### **CME (S) internal operating procedures**

- CME (S) was understaffed in September 2006;
- little time was available for development work, evaluation and planning;
- written operational procedures had not been produced; and
- local authority responsibility for children missing from education in their own areas appeared to require restating.

#### **CME (S)'s future role**

- greater emphasis would be required on policy.

#### **Interface with local authorities**

- there was a huge disparity in the posts held by local authority/CME contacts. This impacted on CME(S);
- quality of information from local authority/CME was very variable;
- there appeared to be considerable variation in the degree of multi- agency working for both exchanging information and making risk assessments;
- in some cases there was very little evidence of a co-ordinated approach to local searches;
- *Safe and Well* did not provide specific guidance on the role and remit of the local CME named person or the standard of evidence required; and
- guidance on risk assessment may be required in a missing from education context.

#### **Interface with other agencies**

- CME (S) had experienced an inconsistency of response to the application of the ACPOS/CME (Scotland) *Joint Memorandum of Understanding*;
- under the search criteria of NHS *Missing Family Alert system*, CME(S) could not request searches for all children missing from education to be undertaken;

- there was little evidence of schools actively seeking information from health colleagues;
- *Safe and Well* guidance and CME(S) procedures would need to be updated to include independent schools;
- there was no protocol or guidance for early years;
- there were particular complexities associated with diverse groups;
- existing protocols required evaluation; and
- cross border working was especially time consuming and complex.

### Responding to Referrals-Guidance for CME(S) Staff

The Children Missing from Education (Scotland) pilot (CME) was established in 2005 by the Scottish Executive to **support** the action that should be taken at local authority and school level when children go missing from education. As defined in “*Safe and Well-A Handbook for Staff, schools and Education Authorities* CME’s role is to:

- promote the use of systematic procedures in schools and education authorities and enhance practice in transfer of records;
- develop good practice when responding to a child or young person becoming missing from an education service;
- promote consistent practice in local areas to locate and engage children; and
- enable effective inter-authority and cross-border location and transfer of information.

and to **assist** with:

- transferring information;
- tracing and locating families; and
- tracking information where children arrive in a new location with limited or false information, to assist authorities to provide support effectively.

CME(S)’s role therefore is clearly detailed as a supportive, co-ordinating and liaison role working **with** education authorities and schools to exchange information across Scotland and with other parts of the UK and it is worth noting that a case can be passed back **at any time** to the referring authority if CME considers that the quality of the local search is questionable or if information comes to light on which the referrer is best placed to act.

With the exception of **opening or closing** a referral the internal CME response can vary depending on the information available at the time of referral and/or information or circumstances which may come to light during the searching process. The following procedures are therefore intended merely as a guide and reflect current practice which may be subject to change.

Good practice dictates that cases should be discussed with colleagues on an ongoing basis and not just when uncertainties about search procedures or other concerns arise. This will allow for the sharing of perspectives and experience.

Every step of the search process should be recorded in the CME database and/or in the paper file as appropriate. It is good practice to differentiate the recording of opinion and fact.

## Standard steps for opening a referral

Do the following:

Has the CME 'request for a national search' form been used?

If **NOT**, contact the referrer and ask them to resubmit using the form. At the same time, if the referral has not come from the designated CME/ LA contact, check if the referral has been made with their knowledge.

Is the missing person a gypsy traveller and there are no care and welfare or child protection concerns listed on the referral form?

If **YES** then phone the CME/LA contact to **DECLINE** the **referral**, explaining your decision is in keeping with the published guidance *Keeping in Touch-Gypsy/Traveller Children*. Urge the referrer to get back in touch if care and welfare and/or child protection concerns arise-see **Responding to Referrals, Child Protection Concerns-p10**

Have the fields in the CME form been completed with adequate information provided?

If **NOT**, then proceed as follows based on the information that you have been given.

If you feel that the information shows that referrer can start/continue the search without CME involvement then respond to them by declining the referral, explaining your decision but urging them to re-refer if child protection or care and welfare concerns arise or their own searches are not successful.

All sections of the referral form must be completed. You may fill in these sections over the phone with the referrer or ask them to complete them and resubmit the referral.

You might feel that you need more information before you formally accept the referral-in other words you need to tease out what has already been done or could be done. You have to make a decision. as to whether you should phone or email the CME LA contact and ask for the required information. or to go directly to the initial referrer into the local authority who might, for example, be a head teacher or a welfare officer. People in the latter group can often be contacted more easily. You would always phone the CME/LA contact if there was a serious lack of information or if there were child protection concerns –see **Responding to Referrals, Child Protection Concerns-p10**

What kind of information am I looking for?

Start by going through the form.

- try to get information where information fields are blank
- clarify the details recorded on the form
- tease out if before referral the referrer/CME contact has conducted the local search with reference to the checklist on *Safe and Well/CME Guidance Annex C* and the *Guidance notes-Annex E*
- ask questions. for example:
  - Who are the emergency contacts?
  - Who/what are child's friends and hobbies? Do they belong to any clubs?
  - the move-was it unexpected? Was there a significant incident prior to the recording of the unexplained absences/ going missing from education?
  - the house -is it a council house?
  - the house - is it up for sale and who is selling it?
  - the neighbours - have they been spoken to?
  - when was the last time the family made contact, who made it and how was it made?

The above list is not intended to be exhaustive but should you accept the case you will have a better understanding about how to proceed and who to contact.

Always ask about the family background.

- did the child get on with their parent(s)?
- are contact details available for grandparents and would it be wise to contact them?
- did any other adults live in the house other than the parent(s)?
- if found, what is the parental ability to get the child into a new school?
- the names of any agencies involved with the family and if there are named people you should contact
- the GP's name or practice

The above list about the family is not intended to be exhaustive but should you accept the case you will have a better understanding about whether future contact should be made with family members.

You should **never** contact family members if:

- There are child protection concerns
- If you are given reason to believe that a crime or alleged crime has been committed
- If there are concerns regarding domestic abuse-see **Responding to Referrals, Domestic Abuse p11**

If you have decided to **ACCEPT** the referral do so by:

- entering details on CME data base
- generate an official acceptance letter from CME data base to CME/LA contact or referrer
- order a file via NETIMPRESS and log

## Expanding the Search Process

### Scottish-based enquiries:

What now?

It is worthwhile at this stage to speak to the CME/LA contact to:

- check if any new information has become available since the referral form was sent in or since the last time you spoke. You may wish to use the categories listed on p3 *what kind of information am I looking for?*
- **check if there are any child protection concerns- see Responding to Referrals, Child Protection Concerns-p10**
- 

There are Child Protection concerns. What do I do?

Refer to **Responding to Referrals, Child Protection Concerns-p10**

There are no child protection concerns so what happens now?

Ask the CME contact to conduct searches as discussed and to get back to you. Try to agree a timescale for response.

So I just wait till they get back to me?

No-you will be following up other leads and so with regard to prioritisation of case load you will take the initiative and contact the people, service/agency areas or telephone numbers on the referral form e.g. head teacher, emergency contact number (all of this of course if safe to do ). When making contact with non professionals it is important to introduce yourself as an agency who has an interest in passing on records rather than as a person based in the Scottish Executive who is conducting a "Missing Children" search. This is necessary since you don't want to alarm anyone unnecessarily, or jeopardise safety such as where there is a domestic abuse concern or unwittingly complicate future procedures, for example if the police have to become involved.

What else might I do?

If the house is now vacant and it is a council house speak to the Housing department. Alternatively if the house is up for sale contact could be made with local area estate agents. They will have contact details for the house seller and possibly the area to which they are moving. Ask them to pass a message onto the family asking them to get in contact with you about transferring school records.

My searches and/or the additional searches by the CME/LA contact have found where the family has moved to or might have moved to - what do I do now?

If searches have shown that the child may be in another LA area in Scotland then contact the CME person for that area, ask them to conduct a local search of their schools and possibly other agencies and get back to you. If an address is known but the child is not enrolled in a school ask for an Educational Welfare Officer to call.

The child has been found in a local school- what do I do now?

t See procedures **Standard Steps for the Closing of a Referral-p8**

The child is not in school but believed to be in the identified the area -what do I do now?

The following are options:

- if the child is at a known address the local CME contact should ask their Welfare Service to call
- the local CME contact should ask for local searches to be done by housing or health (with regard to prioritisation of case load you could consider if you should do this)

If the child has been found follow the procedures **Standard Steps for the Closing of a Referral-p8**

The child has not been found. What do I do now?

To some extent this depends on the extent of safety and care and welfare concerns for the child's and if the child is still considered to be in Scotland. **If there are child protection concerns at any time refer to "Responding to Referrals, Child Protection Concerns" –p10**

Otherwise all or some of the following can be tried:

- using the process available within the CME data base system email all LAs to conduct a search of their school data bases and get back to you. Set a response date, use the list to check off responses as they come in and place in front of pupil file
- search SEEMIS
- make contact with the target area if known

The child has been found in Scotland

Follow the procedures - **Standard Steps for the Closing of a Referral-p8**

There is good reason to believe the child has moved to another country in the UK how do I proceed?

It depends. If the information points to a specific location:

- make contact with the designated CME/LA person (England & Wales & Northern Ireland) and ask them to provide contact details for someone you can speak to about a search of their schools and/or Welfare Services. You may be asked to follow up your request by fax or email in order to prove your identity or to complete that LA's referral form.
- continue the search procedure with your contacts as you would for Scotland bearing in mind that there exists no formal agreement for non-Scottish contacts to co-operate with you.
- widen your search to LA areas bordering the previously given area if you have reasons to do so.

If the information does **not** point to a specific location:

Speak again or revisit the source where the information came from. Blanket searches across all LA areas in England Wales cannot be completed.

The child has been found

Follow the procedures - **Standard Steps for the Closing of a Referral-p8**

What if there is **good reason** to believe that the child has moved abroad and there is evidence for this?

.If there are any:

- health, social, religious or cultural issues such as forced marriage (see *Safe and Well A-Z*). to suggest that the child is at risk of harm
- the child is already on the child protection register or subject to a child protection enquiry or investigation
- the child is “looked after or accommodated”
- the child is involved in a crime or the subject of a crime

then contact should be made with the police immediately following procedures in “A Memorandum of Understanding between the Association of Chief Police Officers in Scotland and Children Missing from Education (Scotland)”.

In addition the designated CME contact or local representative must be informed.

If there are no such concerns and all the evidence points to the child and family having moved abroad then CME (Scotland) must refer the case back to the LA. CME (Scotland) has no jurisdiction abroad and so it is for the LA to decide the next steps. which may still involve the police.

Generally what do I do if the missing child is found to be from a migrant worker family or asylum-seeking or refugee family?

This area is currently under review but

### **Migrant Worker family**

Follow procedures as you would for all children to get them back into school or even into school for the first time. Bear in mind that families may arrive in Scotland from overseas and be unaware of services (including education) or how to access services in their local area. They may not be clear of the legal duties of parents in Scotland regarding the education of their children particularly where this differs in their country of origin. If this is the case-once a child is found- the local authority will assist the family with the process. Enquiries should be made about local communities to which they may have belonged and which could be asked for information regarding their whereabouts. Also, the family may have intimated how long they were intending to stay in the area.

Where these are the circumstances the local area police should be contacted as well as the designated CME contact or local representative.

### **Asylum seeking or refugee families**

Follow procedures as you would for all children to get them back into school or into school for the first time. Asylum seeking families are most often accommodated in Glasgow when housed in Scotland. However, if granted leave to remain some families prefer to move to areas of England where there are communities from their home country. Families granted leave to remain, whether for a specific time or indefinitely, are entitled to move anywhere in the UK. They are likely to enrol their children in school. Families not granted leave to remain or who believe their appeal may be unsuccessful may move to avoid detection and deportation. They are less likely to enrol their children in school.

Further information about specific families may be obtained from Maria McCann at the Glasgow Asylum Seekers Service and Martin McCann at NASS. They should be called when a referral is made.

No matter what the circumstances what do I do if a child cannot be found?

Get back to the designated CME LA contact who referred the child and decide on the next steps which could be to refer to the Police using the ACPOS/CME joint memorandum of understanding. You will have been in regular contact with the CME LA contact throughout the search process so they should be aware of the thoroughness of your search. Now confirm formally that:

- the child has not been found
- it is the local authority's responsibility to continue to be alert to new information and to take action
- on any new leads. This will include contact with CME
- CME will keep the case open and on file

You should update the CME data base and ensure the paper file is up to date and placed in the correct cabinet

### **Standard Steps for the Closing of a Referral**

#### **Proceed by**

- providing the new school with the contact details of the previous school and asking them to make contact so that pupil records can be sent on. You may want to contact the previous school to tell them that this will be happening in order to speed up the process.
- updating the CME data base
- use the CME data base to generate the "case closed" letter to the referrer
- ensure paper file is up to date and placed in correct cabinet

What if the details need to remain confidential and cannot be passed on to the initial referrer?

Use the 'child locate confidential' letter in the CME database to inform the referrer that the child is safe and well, and accessing education. It informs them that the information about their location must remain confidential. You may wish to follow this up with a phone call.

### **For Non-Scottish-based search requests**

Follow procedures as for Scottish-based requests bearing in mind the complexity of local government arrangements elsewhere and that there exists no formal agreement for non-Scottish contacts to follow CME procedures or requests. In most non Scottish case referrals will have been made by an Education Welfare Officer.

## Responding to Referrals - **Child Protection Concerns**

The safety and well-being of a child is paramount. From the beginning of the CME (Scotland) search it may be known that the child or their siblings are:

- on the Child Protection Register
- have been on the Child Protection Register
- subject to a ongoing child protection investigation

Alternatively during the search and information-sharing process knowledge about the above or emerging child protection concerns may come to the fore. Children who are Missing from Education and “in need” in terms of the Children (Scotland) Act 1995 may be considered as children requiring protection. Obviously where there are concerns surrounding abuse or possible abuse the level of concern and therefore intervention is heightened.

**I have received a referral where there are existing child protection concerns**

Contact the CME LA referrer immediately. It is extremely important to: ascertain the level of risk to the child. Local procedures for child protection should have been followed, a risk assessment should have been undertaken and you should be fully informed in order to take the search forward if this is required. You will need to know:

- - is, or has, the child, been on the CP Register?
  - is the child subject to an ongoing investigation?
  - if a concern is it shared by more than one agency and has it been taken forward under local CP procedures?
  - is there is concern about siblings?
  - is the abuser believed to be missing with the child or in possible contact with the child?
- agree with the referrer who will speak to the Social Work Department and/or Police contacts if they are already involved. They should know that CME’s assistance has been sought. If the Police are involved it may be that they will ask you to desist at this point. In this event and with regard to the ACPOS/CME Memorandum of Understanding, CME should be kept informed of progress.

CME's involvement is still required. What do I do now?

- Check out the extent of the search at local level and/or national level –see **Expanding the Search Process, p4-8**
- If it is agreed that CME should still be involved make contact with the people, service areas or telephone numbers on the referral form e.g. head teacher, emergency contact number. Remember that, apart from Social Work and Police contacts others may not be aware that there are CP concerns. **Under no circumstances must you divulge your knowledge of this** and therefore a sensitive and discreet approach is required.
- Proceed as for **Expanding the Search Process, p4-8**

Is there anything else I can do?

Yes and as a **last resort** contact can be made:

- on an informal basis and for advice with the Lead Nurse/Child Protection in individual Health Board areas
- formally with the designated contacts and groups within the NHS Missing Family Alert system. Emails can be sent by accessing using the CME data base.

What if the missing child is a gypsy/traveller child?

If the referring school feels that an absence is unexpected or the family have moved on unexpectedly they should have carried out a risk assessment in order to consider the level of concern (see *Children Missing from Education(Scotland)/ Keeping in Touch-Gypsy/Traveller Children* and *Safe and Well/ Children Missing from Education/Safe and Well A-Z/Gypsy and Traveller children*). This risk assessment would include any knowledge of child protection concerns and, local procedures should have been followed. If it is decided that CME should assist in the search this should be done as detailed above.

# **Children Missing from Education (Scotland) working with Scottish Women's Aid**

## **Responding to Referrals –Domestic Abuse Concerns**

Children Missing from Education (Scotland) is a national project to support schools and local authorities track and trace children who have disappeared from view from education (and other services).

Following a number of recent high profile cases, schools now have in place robust absence management policies and procedures to record attendance and to provide guidance on actions to be taken in cases of absence and non-attendance.

Parents/carers are requested to inform the school when their child is absent. However, where there is no information given then the relevant teacher will take action to find out the circumstances of the absence.

Such actions may include: contacting home by telephone or letter; talking to other children in the class, contacting emergency contacts; and requesting home visits from education welfare staff or other agencies or services working with the family.

Each local authority has a named 'Children Missing from Education' (CME) contact member of staff. When a child cannot be located by the school or education welfare staff the CME contact in the local authority is informed. This referral is expected to happen within four weeks of a child becoming missing from education and sooner if there child protection or care and welfare concerns.

The CME contact has responsibility to co-ordinate the local authority search which involves searching databases for education, housing and social work. They also ensure the usual checks have been made with friends, relatives, neighbours and any services for children and families.

When the CME contact is satisfied that the child is no longer resident in their local authority and cannot be located they then refer the child onto CME (Scotland). CME (Scotland) supports local authorities by co-ordinating national searches across local authorities in Scotland and initiating searches into England, Wales, Northern Ireland and Eire.

In some cases, when CME (Scotland) has completed exhaustive checks in local authorities and is unable to locate a child, or where child protection concerns become apparent, then CME (Scotland) may refer the case to the relevant police force. They will then consider implementing a missing person enquiry. During an investigation the police and CME (Scotland) work collaboratively towards identifying the whereabouts of the child.

**The above procedure is used for all children who leave a school within Scotland with no clear destination school. CME (Scotland) will only close a file when it is satisfied that the child is no longer missing from education.**

CME (Scotland) acknowledges that there are occasions when a child and his/her family have to suddenly leave their home. One such occasion may be when there are domestic violence issues. It is clear that the family may fear being traced to their new location through information given to the school. Therefore, some families choose not to inform the school of their destination or allow the new school to trace back to retrieve school records. However, as outlined above the school and local authority will attempt to trace the child and will eventually refer to CME (Scotland) if the child cannot be located

When CME (Scotland) undertakes a search for a child it might not be known if there are issues regarding domestic abuse and thus the normal search and contact process might inadvertently compromise the safety of the family. If at any time therefore during the search process concerns about domestic abuse arise, family members should not be contacted. Women's Aid (Scotland) who can be contacted at any time for advice could also assist CME (Scotland) by alerting them when a family with school-aged children arrives in one of their refuges.

If a child and his/her family seek the support of Scottish Women's Aid then the following procedure can be used to prevent the need for tracking and tracing to occur.

Domestic violence has been defined as "Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality." This includes issues of concern to black and minority ethnic (BME) communities such as so called 'honour killings'.

Parents may choose to leave a partner taking their children with them- leaving no contact details- sometimes choosing to live with another family member or a friend. Alternatively they may move to a refuge such as those provided by Women's Aid.

When a place of safety has been found, women are keen to ensure that their safety and that of their child is not compromised by any exchange of information between the previous and the new school which could lead the abuser to a contact address. At the same time, in order to provide continuity of support for the child, it is vital that educational records are passed on.

Since most contacts come directly from Women's Aid personnel, CME and Women's Aid (Scotland) have agreed the following to be the correct procedures when, CME (Scotland) in effect, acts as a secure post box thereby breaking the link between the past and the future.

## **Responding to Referrals-CME internal procedures**

With the parent and/or Women's Aid worker you need to clarify first if the previous education authority has **not** to be told of the whereabouts of the family. If they can be, then there is no requirement for these special "domestic abuse" procedures to be followed. Then you will have to explain that as, the link between past and future will not be broken, CME cannot take responsibility for the whereabouts of the family becoming known.

Once you are satisfied that these are special procedures are called for, ask for

- the names and dates of birth of the school age child(ren)
- the details of the previous authority and school(s) attended and the new education authority and school(s) (if known at this point)

CME will then:

- contact the **new** authority to ensure that the child is enrolled or about to be enrolled in one of their schools
- contact the named CME LA contact in the **previous** local authority to say that the child is safe and well and asking them to send on to CME the child's record by registered delivery. **Do not divulge the name of the new authority or the new school.**
- explore with them if there are any other concerns e.g. child protection concerns. If there are refer to **“Responding to Referrals, Child Protection Concerns” –p10**
- send on the pupil records by registered delivery to the **new** school where the child will be given a **new** Scottish Candidate Number (SCN). This is necessary to ensure the child's safety as a child can be traced using a SCN number
- ask Women's Aid to remind the parent to refuse permission for the new school to make contact with the old (thus re-establishing the link)
- close the referral by
  - updating the CME data base
  - using the CME data base to generate the “case closed” letter to the referrer without disclosing the child's whereabouts
  - ensure the paper file is up to date and placed in the correct cabinet

Please note:

- that all of the above procedures will be under review because of the proposed School to School electronic data exchange
- that all of the above procedures may also apply in any circumstances where it is necessary to safeguard the anonymity of the family- in the Witness Protection Programme –for example.

## Appendix 3

### Case Information Update

	<b>Total family referrals</b>	<b>No. of Children</b>	<b>No Children located</b>
<b>Session 2005/06</b>	157	210	204
<b>Session 2006/07</b>	131	193	189
<b>Total</b>	<b>288</b>	<b>403</b>	<b>393</b>

*May 2007*

### Key themes arising from case work complexity

#### Working with diverse groups

- particular complications are encountered when a child's non-attendance is connected with cultural, social or lifestyle values or factors;
- it can be difficult for schools to decide whether absence from school is for cultural or other reasons;
- families with itinerant lifestyles such as migrant workers present significant tracing difficulties;
- families with itinerant lifestyles and requiring family support present significant difficulties for social work involvement during the searching process;
- education may not be seen as a priority and there may be confusion or lack of knowledge about the law and education;
- tensions can arise between care and welfare and protection of children issues and diversity appreciation; and
- involvement with home educated children can be complicated and requires clarification.

#### Interface with Scottish and non Scottish organisations

- the CME (S)/ NHS Missing Family Alert agreement was working well;
- implementation of the ACPOS/CME(S) Joint Memorandum of Understanding varied across Scottish police force areas;
- Scottish police liaison arrangements with CME(S) was variable;
- transference of CME(S)'s paper and electronic file information to police could be problematic;
- police and local authority liaison arrangements were not always clear;
- Scottish local authority arrangements to allow social work to communicate knowledge of families missing with school-aged children during school holiday times was variable;
- searching for children who move from Scotland is time-consuming and problematic;
- CME(S) requests for searches of local authority databases in England, Wales and Northern Ireland and subsequent feedback is extremely variable; and
- non- Scottish referrals significantly add to CME(S)'s workload.

#### CME (Scotland)

- service function is affected by lack of administrative support time;
- record keeping and electronic recording showed inconsistencies;
- terminology and classification of data can be problematical and open to misinterpretation; and
- current data collection does not provide an accurate picture of CME(S) involvement.

## **Local Authority working**

### *Time delays*

- referring of cases to the local CME contact can be delayed even when there are care and welfare concerns;
- schools holiday periods interrupt the referral process;
- referrals to CME (Scotland) are not always made within 4 weeks (or earlier if there are child protection concerns);
- investigation of possible contact addresses by local staff can take too long;
- passing of information between services in the same local authority area or to services across local authority areas can be variable;
- response by local authorities to CME(S) requests for updates can be variable; and
- response by local authorities to CME(S) requests for database searches can be variable.

### *Communication*

- provision of information updates to CME (S) is variable;
- quality of pupil information supplied to CME (S) can be variable; and
- accessing school information during holiday periods both by designated CME persons and by CME(S) can be problematic.

### *Organisational procedures*

- reporting of children missing from education to local authority CME contacts can lack consistency;
- information given to CME (S) can be inaccurate or non-evidence based;
- quality of local authority searches appears variable;
- ownership of cases during and after the tracing process is variable; and
- response times in conducting a search of local authority databases and communicating results to CME(S) are variable.

### *Care and welfare /child protection*

- following of local child protection procedures in the context of children missing from education can be variable;
- ownership of local child protection procedures once the national tracing procedure is underway can be variable;

- flagging up of care and welfare concerns, previous child protection concerns or investigations top CME(S) can be variable;
- local authority monitoring of children who have not been found requires examination;
- difficulties arise when CME (Scotland) is asked to trace a pre-school child; and
- local authorities require clarity on procedures for dealing with pre-school missing children.

### ***Multi-agency working***

- information submitted on referral forms can suggest lack of interagency working;
- information on multi-agency assessment of risk not routinely provided to CME(S);
- strategies for early identification of families at risk of going missing with their children appear to be inadequate;
- care and welfare support to prevent found families from disappearing again appear to be inadequate; and
- centralised local authority knowledge of families with children at risk of missing education would be an advantage.

**Children Missing Education, Experiences of Implementing the DfES Guidelines: comparison with CME implementation and Safe and Well/ CME Guidance, November 2006**

The DfES research measures local authority progress towards the Government’s expectation (Every Child Matters: Change for Children) that by December 2005 every local authority should have systematic arrangements in place to identify children missing from education, so that suitable provision can be made for them, drawing on the non-statutory guidance issued in July 2004. The research was comprised of a quantitative audit and qualitative survey involving interviews with nine local authorities and key stakeholders.

**DfES Definition of Missing Children:** *all children of compulsory school age who are not on a school roll, nor being educated otherwise (e.g. privately or in alternative provision) and who have been out of any educational provision for a substantial period of time (usually agreed as four weeks or more)*

**Safe and Well Definition of Missing Children:** *Children 'missing from education' are children and young people of compulsory school age who are not on a school roll and are not being educated otherwise (at home, privately or in an alternative provision). They have usually not attended school for a substantial period of time (usually agreed as 4 weeks, or considerably less for vulnerable children).*

DfES relevant sections	CME implantation and Safe and Well guidance	
<p><b><u>1.2 Research Findings in appendix 1</u></b></p> <p><b>Effectiveness of Guidance</b>  <i>All of the authorities taking part had made a start on putting systems and procedures in place and with one exception (a small authority where the number of Children Missing Education cases was said to be small), all were at least working towards implementing of the 22 process steps.</i></p>	<p>All LAs have nominated CME contacts with expectations that procedural guidance is being implemented. No evaluation of pace of implementation has been done.</p>	<p>Should this now be considered?</p>
<p><i>Local Authorities were more likely to have achieved implementation where there</i></p>	<p>All LAs have provided a named CME contact. There appears to be a large variation in the posts and remits held.</p>	

DfES relevant sections	CME implantation and Safe and Well guidance	
<i>was a CME contact in place</i>		
<p>The least likely process steps to have been achieved were: a written policy</p> <p><i>regular monitoring of the numbers of children missing education in a LA (to be done by elected members)</i></p> <p><i>monitoring of pace at which children moved back into provision</i></p>	<p><i>Safe and Well</i> Guidance strongly recommends this is required. As yet the national position is not known.</p> <p>Currently school management information systems have data on long term absences. LAs should have systems to record children who have been taken off the roll but not in education. The national electronic S2S transfer system will show all children who are missing i.e. not matched into a school.</p> <p>While <i>Safe and Well</i> Guidance makes reference to good practice in supporting re-integration no monitoring of pace was indicated in <i>Safe and Well</i>.</p>	<p>Should this be done?</p> <p>COs of LAs, Police and Health are accountable for child protection services... Should routine monitoring of children missing from education be considered?</p> <p>Is guidance on this required?</p>
<p><b><u>Developing the Guidelines-changes required from research</u></b> <i>The research identified what respondents considered to be major omissions in the parties involved in Children Missing Education:</i> <b><u>1.4.1 The Exclusion of Independent Schools</u></b></p>	<p>Independent schools <i>were</i> not issued with the guidance but LAs could undertake to do so for those in their areas. Independent schools have been given the opportunity to opt into the S2S project should they be able to or wish to.</p>	<p><i>Safe and Well</i> guidance will require to be updated and CME contacts established.</p>

DfES relevant sections	CME implantation and Safe and Well guidance	
<p><u>1.4.1 Elective Home Educated Children</u></p> <p>1.4.1 <u>Defining Children Missing Education:</u> <i>Research found “there was confusion around the definition of children “at risk of missing education”</i></p> <p><i>Police and social work tended to have different interpretations of what was a missing child</i></p> <p><u>1.4.2</u> <i>The quality and extent of stakeholder relationships varied</i></p> <p>1.4.2 <i>Issues with Data protection hindered the sharing of information</i></p>	<p>Representatives for Home Educated Children were consulted for the guidance Although the CME definition of a missing child excludes those who are home educated in practice searches have been done.</p> <p>Scottish LAs are not required to “identify and monitor the educational status of children in ‘at risk’ groups.</p> <p>Practice has shown that police and health have different interpretations of a missing child. The NHS/Missing Family Alert system will accept referrals from CME (S) where there are CP concerns</p> <p><i>Safe and Well/CME</i> guidance recommends interagency working especially with sharing of information. This has not been evaluated. The draft bill associated with GIRFEC implementation will require all stakeholders to share information.</p> <p>CME(S) has found this to be a problem while conducting cross border searches</p>	<p>This area requires legal and procedural clarification.</p> <p>Should further guidance be given on this area?</p> <p>While a Police Memorandum of Understanding exists further talks with ACPOS are required.</p> <p>Further talks with Health are required to discuss support for all children. A protocol would be of benefit.</p> <p>Is there now a need to evaluate this nationally, provide examples of good practice and/or update the guidance?</p> <p>Should a protocol of understanding be considered with other UK areas?</p>

<b>DfES relevant sections</b>	<b>CME implantation and Safe and Well guidance</b>	
<p>1.4.5  <i>Effective Pupil Tracking Systems</i>  <i>A S2S system has been set up in England but LAs are not required to use it. This presents a difficulty</i></p>	<p>All Scottish local authorities will be involved in S2S transfer.  Independent schools in Scotland will also be able to opt in dependent of their MIS and ability to communicate securely</p>	

### **Statutory guidance for local authorities in England to identify children not receiving education: summary**

#### **Who and what is it for?**

The guidance is for English local authorities. Its purpose is to ensure that:

- children missing from education can be identified quickly with effective tracking systems in place;
- all parties involved with a child notify a named person(s) when a child is identified as not receiving education; and
- action is taken to provide children with a suitable education and support once they are located.

#### **What does the duty do?**

It:

- applies to children of compulsory school age who are not on a school roll, and who are not receiving a suitable education otherwise than being at school (for example, at home, privately, or in alternative provision);
- compliments and reinforces existing duties for the monitoring of school attendance but does not apply to children who are already registered at a school and who are not attending regularly;
- requires local authorities to “make arrangements to enable them to establish (so far as it is possible to do so) the identities of children residing in their area who are not receiving a suitable education”;
- requires local authorities to put in place arrangements for joint working and appropriate information sharing with other local authorities and relevant partner agencies which come into contact with families with children; and
- does not apply to children who are being educated at home.

#### **How will the duty be implemented?**

Guidance on the duty requires local authorities to set standards in 5 areas to ensure effective

systems are in place to identify children who are missing education as well as any agency support which might be required once they have been found.

The five areas are:

- Strategic Management and Leadership;
- Networks and Points of Contact;
- Information Systems;
- Provision Brokering Services; and
- Effective Pupil Tracking Systems.

Questions have been provided for each standard area to assist local authorities in deciding what needs to be done to meet minimum standards.

	<b>N, W, A or E</b>
<b>Strategic Management &amp; Leadership</b>	
Does the LA have a <b>written policy</b> (1) agreed with partners concerning children not receiving education?	
Are the arrangements for identifying children not receiving education embedded within the LA's <b>children's trust governance and strategic planning arrangements</b> (2) and the cross-cutting arrangements for safeguarding and inter-agency co-operation to improve wellbeing of children?	
Is there <b>regular monitoring</b> (3) of the processes/numbers by Senior Management, Elected Members and Children's Trust partners?	
<b>Networks &amp; Points of Contact</b>	
Has the LA <b>identified the key stakeholders</b> (4) to provide information about children/young people without educational provision in the area?	
Has the LA provided and publicised <b>notification routes</b> (5) for all key stakeholders?	
Does the LA have a <b>named contact</b> (6) point to receive details about children not receiving education?	
Are there <b>clear responsibilities</b> (7) for this role or those to whom the duties are delegated?	
<b>Information Systems</b>	
Does the LA maintain a <b>database</b> (8) of children not currently in education, including those new to the area or country?	
If so does the database include <b>fields</b> (9) such as: date child/young person referred in; date of assessment, if necessary; date form of provision determined; date moved into provision.	
Does the LA <b>monitor the numbers</b> (10) of children/young people in the authority who are not receiving education?	
Does the LA have <b>processes in place</b> (11) to monitor the educational status of children in recognised vulnerable groups?	

	<b>N, W, A or E</b>
Are there clear <b>access rules and procedures</b> (12) to ensure fair/safe data processing?	
<b>Provision Brokering Services</b>	
Does the LA have <b>clear processes</b> (13) for securing the support of other agencies where it is needed e.g. for welfare or health reasons.	
Does the LA have an <b>agreed process</b> (14) for securing educational provision for children once found?	
Does the LA <b>monitor the pace</b> (15) they move into provision?	
Does the LA have the <b>information systems in place</b> (16) to allow access to up to date information concerning availability of school places and availability of places with alternative providers?	
<b>Effective Pupil Tracking Systems</b>	
Does the LA <b>keep a record</b> (17) of children who have left educational providers (school and alternative provision) without a known destination?	
Does the LA <b>follow up children</b> (18) at regular intervals until they are registered with a new provider?	
Does the LA have <b>an agreed system</b> (19) with schools concerning children leaving provision?	
Does the LA <b>support and encourage</b> (20) schools to transfer files via s2s?	
Does the LA have <b>an identified officer</b> (21) as database administrator for s2s with responsibility for the Lost Pupil Database?	
Does the LA <b>upload to and download from</b> (22) the Lost Pupil Database?	

**No: N**

(Not previously identified, but discussions have now taken place and a plan has been produced)

**Working Towards: W**

(Achieved some of what is expected, identified some gaps, discussions have taken place and a plan has been produced)

**Achieved: A**

(The LA can provide evidence to support positive responses to the questions below and plans are in place to review their policy/processes/systems to move towards “Embedded” status)

**Embedded: E**

(The LA can demonstrate that the policy/processes/systems have been in place for a period of time and have been reviewed)

The evaluation checklist for the status of “achievement” in any standard is shown in *-Criteria for local authority standards, DfES, 2007- Appendix E*

## **How will the new duty be monitored?**

As part of their existing Joint Area Review/Annual Performance Assessment, “Outcome: Staying Safe: Key Judgement 2.5” Ofsted will continue to look for evidence in the area: *Services are effective in establishing the identity and whereabouts of all children and young people 0-16.* Evidence must show:

- there are secure procedures and monitoring systems for ensuring that all children and young people 0-16 are known to the health and education services;
- targeted services bring children and young people who they support to the attention of the education department when the children and young people are not attending education or training;
- there are secure arrangements for sharing information when children and young people 0-16 move across areas, including unknown destinations.

## **What processes will be required to ensure standards are met?**

The guidance identifies key processes which should be in place to:

- receive information about a child;
- check if place of education already known;
- log details on database;
- locate and contact family;
- determine child’s needs;
- identify and access available provision and places;
- monitor attendance for all provision; and
- track and reconcile movements.

The steps within these processes are outlined in *Practical Model of Process Steps-* Appendix F

## **Is advice given on developing a policy?**

Local authorities are requested to consider and address the following areas while developing a policy for children not receiving education:

- reasons why children go missing;
- groups of children/young people who may be especially vulnerable;
- groups of children/young people who have the potential to be vulnerable due to high mobility;
- pupils excluded from school;
- consideration of police involvement; and
- reducing the risk of children not receiving education.

The full [Statutory](http://www.everychildmatters.gov.uk/resources/IG00202/) Guidance can be accessed by clicking on the hyperlink or at <http://www.everychildmatters.gov.uk/resources/IG00202/>

### Summary comparison of the Scottish and English systems and guidance

- both systems are for identifying, tracking and supporting children at risk of/or missing from education. The DfES and *Safe and Well* guidance support local authorities towards this;
- the Education and Inspections Act 2006 (England) places a duty on local authorities to make arrangements to enable them to establish (as far as it is possible to do so) the identities of children residing in their area who are not receiving a suitable education. There is no duty on Scottish local authorities;
- the Scottish definition for children missing from education includes a reference to vulnerability;
- the tracking systems are not comparable. When English local authorities have failed to trace a pupil they are *encouraged* to place the name on the Lost Pupil data base. In contrast the names of pupils who are not enrolled in a Scottish school will automatically be held in the School to School Clearing House while CME(S), a national support service to local authorities, will start a national search on their behalf;
- the School to School Clearing House will identify all Scottish pupils at a glance who have not been enrolled in school. In contrast the Lost Pupil data base is dependent on local authorities populating it;
- both systems do not address cross-border issues although the School to School system will hold details of children known/thought to have relocated to England;
- the DfES guidance outlines 5 areas where standards are required and provides guidance towards achievement. Working towards the Framework for Standards is implied within *Safe and Well* but does not provide specific standards or guidance for children missing from education;
- the Statutory guidance contains a self evaluation checklist on progress towards implementation of the 5 standard areas. *Safe and Well* guidance does not in any detail provide standard criteria for the areas involved with children missing from education;
- both sets of guidance give general advice on supporting policy development;
- the Statutory guidance places an equal duty on all services within local to ensure communication, exchange of information and routes to notify of a child who is missing. In contrast responsibility for referring a child as missing rests within education services;

- the Statutory guidance defines the roles and responsibilities of local authorities. when making contact with other local authorities. when a child is missing from their area. This is not defined in *Safe and Well*; and
- In contrast with *Safe and Well* the Statutory guidance is specific on plans which should be in place to support enrolment when a child has been located.

### Strategic Business Planning Day, 27 March 2007

#### Group Feedback from Planning Session 1

*“With regard to Children Missing from Education what are the key elements of effective local authority policies, procedures and practice? ”*- consider the key elements required at the following levels;

1. school
2. local authority designated/CME contact
3. local authority strategic
4. with other services/organisations and stakeholders in local authorities
5. across local authorities

#### **GROUP FEEDBACK**

1. At **school level** the key elements of effective local authority policies, procedures and practice were the need for clear:

##### School procedures which

- are based on local authority guidance and the national steer
- are simple and clear
- define the context for missing children
- address differences between attendance, child protection and welfare issues but ensure linkage is made
- clarify school accountability and responsibility
- require a named responsible and senior person in each school – preferably with responsibility for child protection
- set the time limit for when a children missing from education school search should begin (this was suggested as being very short even where there were no previous concerns)
- set the time limit for the duration of school searches
- clarify the breadth of the search
- address issues of parental rights and responsibilities
- address issues of early intervention support and re-engaged with school support
- address issues around transition periods(pre-school/school and secondary transfer)
- address issues of keeping children on the school register thereby affecting attendance targets

- linked to any personal contact or automated calling systems
- build in quality assurance measures

Local authority policies and guidance on

- families who are suspected of deliberately “hiding” children
- families who home educate
- children attending schools outwith the local authority
- travelling families
- asylum seekers
- home education
- Early Years

Best practice guidance (local authority and Scottish Executive) which address:

- record keeping
- confidentiality
- assessment of risk
- travelling families
- asylum seekers
- home education
- role of Welfare/Liaison Officers including involvement in pre-school establishments

Training opportunities made available to:

- compliment implementation of local authority policies and guidance is made available
- share best practice within and across authorities
- share best practice with multi-agency partners involved in information sharing and the missing from education search process

Management information systems which:

- are populated by multi-agency partners
- can be used to inform school assessments of need and risk
- include information on Looked After Children

Parental involvement to ensure

- parents are involved as stakeholders to inform the development of policies and guidance

- guidance on attendance matters, school and authority tracing procedures is available, communicated and understood. Parental responsibilities are clearly unambiguous

Multi-agency involvement discussion, protocols and guidance required

- for information sharing and communication to schools of early identification/risk concerns (especially with Health partners)
- for the identification and provision of early intervention and re-integration support for families as well as children in schools
- around who should be the identified /responsible adult in Early Years Centres

2. At **local authority designated/CME contact level** the key elements of effective local authority policies, procedures and practice were the need for:

Scottish Executive to provide support by:

- establishing a multi-agency consultative group or forum to consider a National Framework for children missing from education
- considering enhanced guidance on the role and remit of the LA/CME contact
- considering the provision of a framework or guidance on risk assessment
- collating and sharing examples of best practice
- considering statutory legislation to provide further support to education
- considering how IT systems of Police, Health, SW and Housing link with each other and with education
- providing national data on all “found” families to flag early intervention should the family relocate again

Local authorities to support the LA/CME contact by

- ensuring the role, remit and responsibilities of the LA/CME contact are defined and unambiguous
- ensuring information-sharing and search protocols are established
- ensuring monitoring is in place at all levels and throughout all services
- ensuring procedures are in place for practice consistency for all involved with children and families who go missing
- providing guidance on recording of referrals and actions taken
- ensuring that policies, procedures and guidance address home education, migrant workers and families who move abroad

- addressing issues regarding administrative and legal support for the LA/CME contact
- establishing links with representatives of local Women's Aid
- establishing systems to identify "at risk" children and families
- establishing databases for pre-school, referrals and recording of actions taken
- discussing with police how they can become involved when families move abroad

Training opportunities to be made available:

- to support the LA/CME role
- for CME contacts to meet with other LA/CME contacts so that best practice complex issues can be shared and addressed

The involvement of partner agencies to ensure:

- information is shared
- databases are established for the sharing of information
- the quality of LA/internal searches
- key contacts are established within the local authority
- key contacts are established outwith the local authority and in England
- multi-agency support is provided to children and families
- opportunities for meetings –critical to getting things done

3. At **local authority strategic level** the key elements of effective local authority policies, procedures and practice were the need for:

Strategic buy-in and leadership:

- acknowledging the responsibility of the corporate parent
- demonstrating multi-agency involvement
- demonstrating linkage between strategy and operation
- demonstrating linkage to the Charter and Framework for Standards
- ensuring linkage with other local authorities and the residential sector
- ensuring resources are made available
- ensuring the strategic role and remit is clarified and communicated to all
- ensuring management information and transfer of information systems are in place
- addressing home education and migrant workers

Partnership working which:

- is not piecemeal

- works through the Integrated Services framework
- works with partners to agree risk thresholds
- promotes the need for agreed terminology
- joint monitoring of decisions made and actions taken
- acknowledges the need for monitoring of children/families at risk of moving away from education
- considers the role of Health in Early Years and home education
- considers how Early Years are brought into attendance/missing education policies
- makes resources available for joint training and initiatives

Engagement with the Scottish Executive on discussions:

- for a National Framework for children missing from education
- about home education
- for additional support for development and implementation
- about a role for Child Protection Committees

4. With **other services/organisations and stakeholders in local authorities** the key elements of effective local authority policies, procedures and practice were the need to consider:

A role for child protection committees which:

- acknowledged their non-operational role
- difficulties where CPCs were involved with more than one local authority
- considered a monitoring role
- considered how management information could inform planning
- could provide opportunities for national monitoring

Engagement with other stakeholders to:

- ensure co-operation during the tracing process
- ensure provision of information
- ensure guidance for independent schools was appropriate
- clarify the role of the local authority/CME with independent schools

5. Across **local authorities level** the key elements of effective local authority policies, procedures and practice were :

Protocols

- ensuring the original authority's responsibility until the child/young person was

enrolled in the new authority

- clarifying the interface with English Authorities, for example by asking for PPRs

Engagement with the Scottish Executive about:

- the need for a national directive/guidance on procedures when more than one authority is covered by a single Child Protection Committee
- the need for a national directive/guidance addressing issues of lack of overlapping boundaries
- differing standards for registration for Looked After Children and Child Protection

6. Other points arising were the need to:

- build links with immigration services
- have good practice examples for attendance
- revisit the guidance on gypsy and traveller children
- have guidance on families moving abroad
- have guidance on when to discontinue the search process
- have accurate data for all “missing” groups to inform planning and service developments
- consider a single tracing system thereby making risk assessment easier
- engage with communities to promote their responsibility for children missing education
- have national guidance for quality assurance
- have a system for follow-up of cases
- explore a joint child protection framework

### Strategic Business Planning Day, 27 March 2007

#### Group Feedback from Planning Session 2

*“When all local authority searches have been exhausted, what are the key elements of effective CME (Scotland) and local authority joint working?”* - consider

1. what needs to be done?
2. who needs to do it?
3. how best should local authorities and CME (Scotland) work collaboratively, communicate with each other and follow through?
4. what should the continuing local authority role be and who retains responsibility for the child?
5. what further support and guidance is required?

#### **GROUP FEEDBACK**

1. **What needs to be done** to ensure effective CME (Scotland) and local authority joint working when all local authority searches have been exhausted?”

##### With the referrer

- consider if the local search could be widened
- agree what needs to be done and who should do it
- consider if “soft” information could be used
- agree communication and monitoring strategy

##### at local authority level:

- identify a lead person for multi-agency information gathering, decision-making and actions required
- agree risk thresholds
- agree common definition of “vulnerability”
- agree recording and monitoring procedures
- examine interface between role of child protection personnel and CME/Co-ordinator
- agree respective roles and responsibilities
- address tracing issues with regard to school holidays

with multi-agency partners:

- clarify individual search parameters
- agree service level involvement
- agree requirements for referral to police
- agree confidentiality and information-sharing protocols and steps
- address the issue of data sharing partnerships
- link the SCN with the KI number
- develop a framework for identification and monitoring of vulnerable children

at Scottish Executive level:

- review data protection legislation
- consider national protocols on information-sharing
- provide guidance on record keeping
- provide guidance on criteria of search requirements
- provide a more comprehensive referral form
- consider how the Benefits Agency can provide more support
- provide guidance on issues associated with approaching/ asking friends for information
- provide guidance on timeframes for search “disengagement”
- consider need for an independent agency to co-ordinate lists of missing children/families from all services
- examine other models of good practice
- provide an annual forum
- provide constructive appraisal on local policies
- provide case study exemplars
- examine role of child protection committees, Chief Officers and elected members

2. **Who needs** to ensure effective CME (Scotland) and local authority joint working when all local authority searches have been exhausted?”

Local authorities to:

- retain responsibility for tracing the missing child/young person
- ensure LA/CME time allocation is appropriate
- explore linkage with Child Protection Committees
- examine Welfare staffing and their remits
- explore if Health visitors are the key to identifying children who are not enrolled

in school

- examine the role of administrative support remits

CME (Scotland) to:

- clarify ongoing search responsibilities
- examine criteria for referrals to Police and to communicate procedures to local authorities
- consider how to involve communities

Local authorities and CME (Scotland) jointly to:

- decide procedures for ongoing involvement
- review and monitoring procedures

Scottish Executive to:

- consider how to link into GIRFEC agenda

3. **How best should local authorities and CME (Scotland) work collaboratively, communicate with each other and follow through** to ensure effective CME (Scotland) and local authority joint working when all local authority searches have been exhausted ?

Local authorities and CME (Scotland) jointly to:

- engage in 2-way case evaluation
- acknowledge that safeguarding and tracing is not always possible
- establish inter-agency Forums and Training Dialogue

CME (Scotland) to:

- establish data on children from overseas e.g. countries of origin, numbers and destinations
- establish those who have previously been in education
- provide guidance on follow through for children who are being home educated
- clarify changes that School to School will bring

Scottish Executive to:

- consider additional resources to support local search requirements
- consider additional resources to support ongoing search responsibilities

Local authorities to:

Establish arrangements for monthly monitoring

4. **What** should the continuing local authority role be and **who** retains responsibility for the child to ensure effective CME (Scotland) and local authority joint working when all local authority searches have been exhausted?

local authority

- should retain responsibility
- guidance will be required regarding timeframe
- need to consider how “soft” information e.g. family has moved abroad will affect time frame
- issues around Service families
- examination of a common retention systems for records and sharing with other agencies e.g. Health

CME (Scotland) to:

- ensure that CME information links into the Health/Missing Family Alert pilot

Scottish Executive to:

- consider how service databases on missing families can be linked into CME (Scotland) and local authority data bases

5. What **further support and guidance is required?**

Guidance on:

- European links
- migrant workers
- CME and child protection linkages
- standard for local searches
- standards about timeframes and responsibilities
- cross-border working

Support

- communication within Scottish Executive on data development
- continuation of CME (Scotland)
- a National Framework for children missing from education
- National Protocol covering all children in all educational sectors

- consideration of a draft Services Bill link
- sharing practice from other areas regularly
- ring-fenced resources
- public awareness-raising campaign

### **Steering Group-Children Missing from Education**

#### Steering Group Members-proposals

Membership of the Steering group could include representatives of:

- ADES
- ADSW
- CPC Chairs
- COSLA
- ACPOS
- NHS/Missing Family Alert
- Independent schools/ SCIS
- HMIE
- Care Commission
- SEED Support for Learning and ScotXed (CME/ S2S)

The following organisations could also be considered for representation, or for contact on specific development issues. They include:

- Women's Aid
- Commission for Racial Equality (inc. Gypsy Traveller and Asylum/ Refugee issues)
- Save the Children (re. Gypsy Traveller and Asylum/ Refugee issues)
- STEP (Gypsy Travellers)
- Scottish Refugee Council
- Glasgow Asylum Seekers Project
- National Asylum Seekers Service (NASS) (Home Office agency)

In keeping with the Children's Charter consideration should be given on how best to represent the views of children on the Steering Group. Save the Children were involved with the development of the Charter.

In the spirit of the Commissioner for Children and Young People (Scotland) Act 2003 it would be worthwhile to consider if there is scope to involve the young adults reference group (14-21 years) which reports to the Scottish Commissioner for Children and Young People (SCCYP) policy team.

Links could also be made with DfES and the Welsh Assembly regarding national policy and cross border issues.

**Memorandum of Understanding**  
**between**  
**Association of Chief Police Officers in Scotland**  
**and**  
**Children Missing from Education**  
**(Scotland)**  
**regarding**

'Children Who Go Missing From Education'



**SCOTTISH EXECUTIVE**

## Table of Contents

1. Introduction and Background
2. Working Definitions
3. Duty to Share and Exchange Information
4. Roles and Responsibilities of the Education Establishments and Children Missing from Education (Scotland) (CME) to monitor and report Missing Children
5. Roles and Responsibilities of the Association of Chief Police Officers in Scotland (ACPOS) and the Scottish Police Service in Investigating Missing Children
6. Signatories to the Memorandum of Understanding
7. Appendices:-
  - Appendix 1 – Local Contact Details for the Scottish Police Forces
  - Appendix 2 – Policy Context
  - Appendix 3 – Relevant Legislation – Education
  - Appendix 4 – Relevant Legislation – Police
  - Appendix 5 – Guidance on the Management, Recording and Investigation of Missing Persons 2005 (Centrex/ACPO)

### Section 1 – Introduction and Background

1. Scottish Ministers have set out a high-level **vision** for all children and young people in Scotland which states:-

***“Our ambition for the children of Scotland is they should be ambitious for themselves and be confident individuals, effective contributors, successful learners and responsible citizens. To achieve our vision, children need to be safe, nurtured, healthy, achieving, active, respected,***

***responsible and included”***

2. The Association of Chief Police Officers in Scotland (ACPOS) and Children Missing from Education (Scotland) (CME) are partners in this Memorandum of Understanding and fully support this vision statement. We believe that the protection of children is paramount and that children should get the help they need when they need it and that our provision of service should therefore be based on needs and risks.
3. The purpose of this Memorandum of Understanding is to establish an agreed working framework between the Association of Chief Police Officers in Scotland and Children Missing from Education (Scotland) in circumstances where children (and their families) go missing within the education system of Scotland.
4. For the purposes of this document the education system of Scotland will include all local authority and independent schools which provide an education setting for all children under the age of 16 years and will include those children under school age, including the pre-fives.
5. This Memorandum of Understanding aims to allow the sharing and exchange of all relevant information in such cases, but does not affect the existing statutory functions and/or activities of the Association of Chief Police Officers in Scotland and Children Missing from Education (Scotland) and does not amend any existing policies, practices and/or procedures which may already be in existence locally and/or nationally.
6. This Memorandum of Understanding does however support our joint working and our partnership working arrangements but is not a contract and is not legally enforceable. It will come into effect after approval by both partner agencies and will be subject to review on a six monthly interval. Such reviews will be carried out jointly by ACPOS and CME.
7. This Memorandum of Understanding aims to ensure consistency across Scotland in terms of how these matters are dealt with and/or investigated.

## **Section 2 – Working Definitions**

1. For the purposes of this Memorandum of Understanding a child is defined as a person under 16 years of age. This is further supported by **The Children (Scotland) Act 1995** which defines a child as:-
  - (i) a child who has not attained the age of 16 years; or
  - (ii) a child over the age of 16 years who has not attained the age of 18 years and in respect of whom a supervision requirement is in force; or
  - (iii) a child whose case has been referred to a Children’s Hearing by

virtue of a Supervision Order issued in England, Wales or Northern Ireland, and for the purpose of the application of those chapters to a person who has failed to attend school regularly without reasonable excuse, includes a person who is over 16 years of age but is not over school age.

2. Irrespective of the above definition, for the purposes of this Memorandum of Understanding **children** (and their families) **“missing from education”** are defined as children **under the age of 16 years** who are not on a school roll and are not being educated otherwise (at home, privately or in an alternative provision). They have **usually** not attended for a substantial period of time (usually agreed as 4 weeks, or considerably less for vulnerable children). However, each individual case requires that a robust initial assessment is carried out in order to identify vulnerability, needs and more importantly risk.
3. The definition of **“missing from education”** reflects the definition of a Missing Person per the ACPO/ACPOS Manual of Guidance for the Management of Missing Persons who are defined as:-

***“A missing person is anyone whose whereabouts are unknown whatever the circumstances of disappearance. They will be considered missing until located and their well being established”***

### **Section 3 – Duty to Share and to Exchange Information**

1. The principles and the need for closer working/partnership working/collaborative working have been well articulated in recent years in a succession of national inquiry reports into child protection and in particular in a number of high profile child deaths and significant cases. Children and young people, by their very nature are amongst the most vulnerable in our society and agencies and individual professionals have an individual and collective responsibility to provide a duty of care to them.
2. In providing that duty of care, there is also a duty to share and exchange information, particularly in terms of child protection and in these circumstances there should be no barriers to the sharing and exchanging of information so that a proper assessment can be made to identify vulnerability, needs and most importantly risks, so as to inform an appropriate course of action.

### **Section 4 – Roles and Responsibilities of the Education Establishments and Children Missing from Education (Scotland) to monitor and report Missing Children**

#### **Children Missing from Education (Scotland)**

1. **Children Missing from Education (Scotland) is a national project to track and trace children (and their families) who become missing from education.**

**This project is funded by the Scottish Executive and is based at Scottish Executive, Support for Learning Division, Victoria Quay, Edinburgh EH6 6QQ**

**tel: 0131 244 1510 fax: 0131 244 7943.**

**The Office is staffed between Monday and Friday during normal office hours only.**

**e mail: [cmescotland@scotland.gsi.gov.uk](mailto:cmescotland@scotland.gsi.gov.uk)**

2. Children Missing from Education are those children (and their families) defined above as per point 2.2.
3. Following a number of recent high profile cases, schools now have in place robust absence management policies and procedures to record attendance and to provide guidance on relevant actions to be taken in cases of absence.
4. Parents/carers are requested to inform the school when their child is absent, however, if there is no information given, the class teacher (primary) or guidance teacher (secondary), will take action to find out the circumstances of the absence.
5. Such actions may include: contacting home by phone or letter, asking other children in the class, contacting emergency contacts or requesting a home visit from home link staff. Further information will be gathered from other services or agencies involved with the child or family.
6. Schools have in place practices and procedures to prevent and tackle truancy and condoned absence. Most local authorities have education welfare officers or home link staff who work with children, families and schools where attendance is an issue.
7. Each local authority has a named CME contact member of staff. When a child cannot be located by the school or home link staff, the CME contact in the local authority is informed. CME (Scotland) maintain a current contact list for the CME contacts across the local authority areas.
8. The CME contact has responsibility to coordinate the local authority search which involves searching databases for education, housing and social work. They also ensure the usual checks have been made with friends, relatives and any services for children and families. Further more specific and defined guidance has recently been provided to the local education authorities in the Safe and Well guidance document.
9. When the local authority CME contact person is satisfied that the child is not in their local authority and cannot be located, they should initiate a referral to CME (Scotland). CME (Scotland) only take referrals for children whose location is unclear: they have disappeared from view and have not been found despite a search within their home local authority.

10. CME (Scotland) co-ordinate national searches across local authorities in Scotland and initiate searches into England, Wales, Northern Ireland and Eire.
11. The diagrams below are in the Education Guidance “**Safe and Well**”, Scottish Executive, 2005. This Guidance also provides education staff with a check list/aide memoire for them to make reference to when investigating missing children within education.
12. **Figure 1** illustrates the usual course of action taken when a child is absent from school.
13. **Figure 2** illustrates the procedures followed when a child is transferring school.

Fig 1

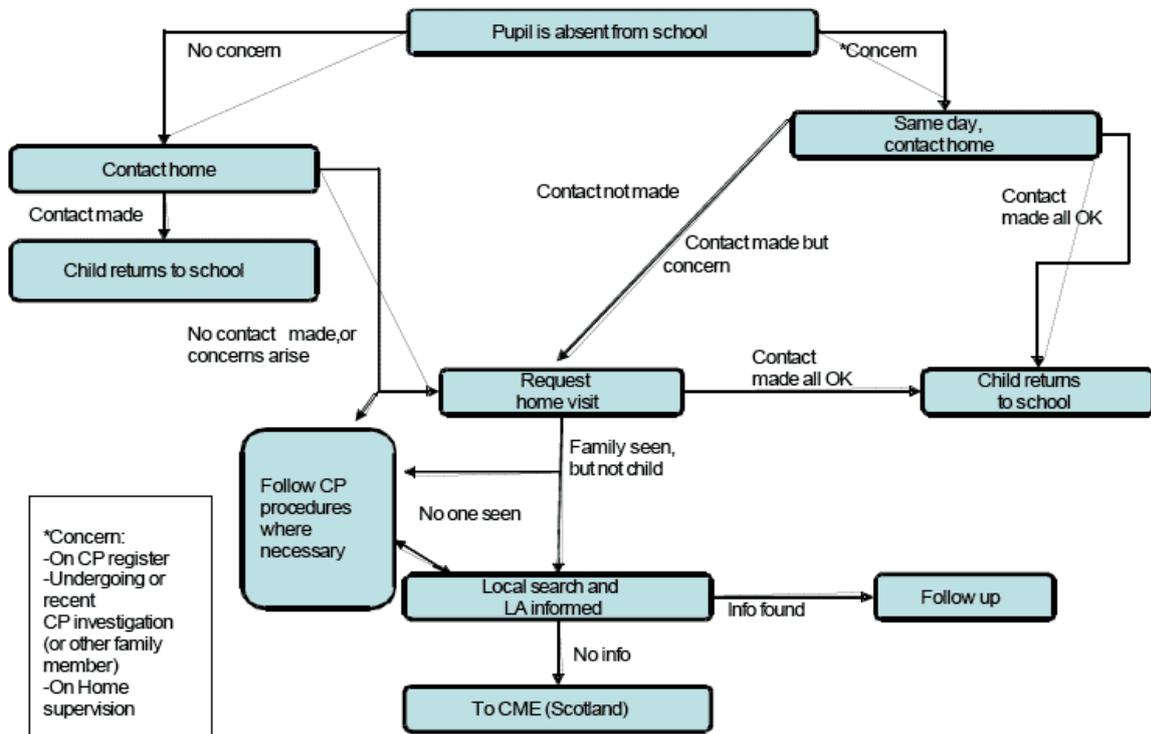
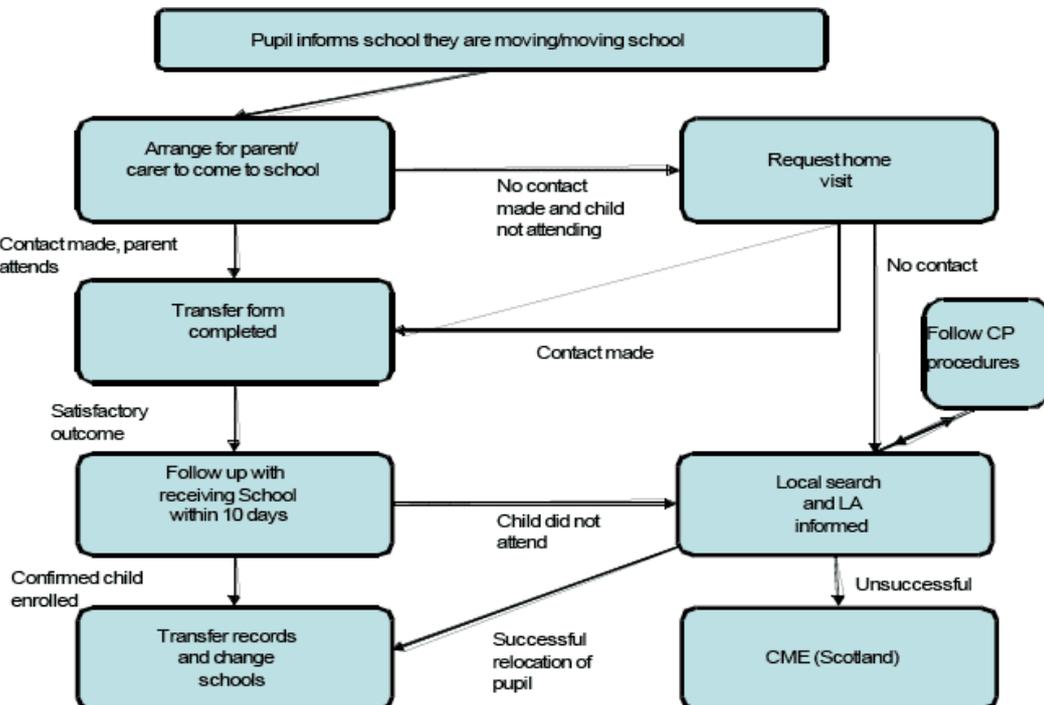


Fig 2



14. A search carried out by CME (Scotland) involves a range of actions including:-

- Gathering detailed information from the referrer, school and any other agencies regarding the child and family;
- Providing advice and guidance regarding deeper searches;
- Identifying the most likely geographical areas that the child/family could be;
- Requesting searches of a range of databases (education, social work, housing) in local authorities across Scotland, or other countries in the UK and Eire;
- Initiating a search from the NHS;
- Co-ordinating transfer of information about children and families;
- When a child is located, requesting follow up action to support the child into education (and other) services.

15. Contact will be made to the Police when:-

- Exhaustive checks in local authorities have proved unsuccessful;  
and/or
- Information regarding the child or the family indicates there are child protection concerns.

16. CME project staff will:-

- Contact the CME named contact in the local authority from where the child was referred to inform them that they are involving the Police;
- Make contact (during office hours only) with the Duty Inspector at the Force Control Room/Contact Centre in the appropriate Police Force to report the details of the child missing and initiate this Police Missing Persons protocol;
- Provide the Police with the necessary information, together with local authority contact details from where the child is missing;
- Follow up this information with written information by way of e mail/fax.

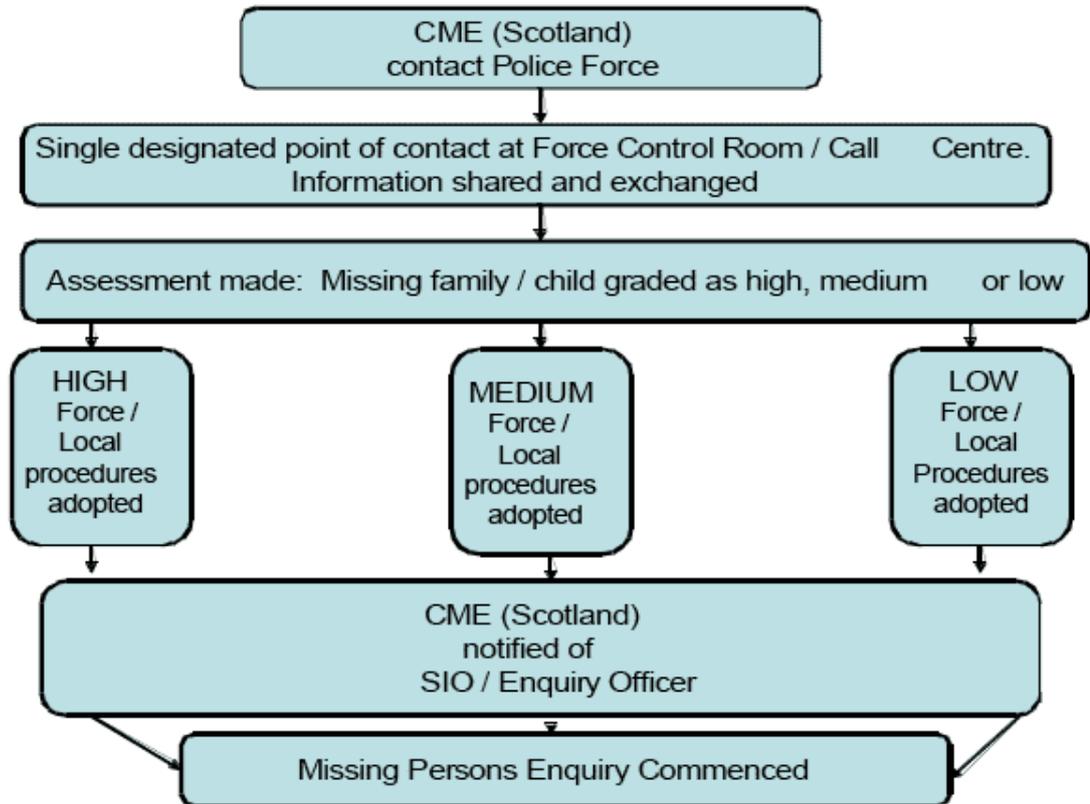
## **Section 5 – Roles and Responsibilities of the Association of Chief Police Officers in Scotland (ACPOS) and the Scottish Police Service in Investigating Missing Children**

### **Association of Chief Police Officers in Scotland and the 8 Forces**

1. Traditionally the police service has been the primary agency with responsibility for a making enquiry to trace those individuals who are reported missing, either by their family, friends or interested parties. The primary objectives of the police have been to verify the well being of the individuals involved and to confirm that they have not come to harm during their period of absence.
2. A number of high profile cases throughout the United Kingdom have, in recent years, focussed public attention on the way that the police service responds to missing person reports. Significant pressure may be placed on the police by the media and wider public, particularly when the subject of an enquiry is a child.
3. The primary guidance to police staff throughout the United Kingdom on procedures towards missing persons is issued by CENTREX. These are the '**Guidance on the Management, Recording and Investigation of Missing Persons 2005.**' (See Appendix 5)
4. At the core of this guidance is the risk assessment information towards classifying missing persons into three categories – **HIGH, MEDIUM and LOW.**
  - **HIGH RISK** – The risk posed is immediate and there are substantial grounds for believing that the subject is in danger through their vulnerability; or may have been the victim of a serious crime; or risk posed is immediate and there are substantial grounds for believing that the public is in danger.
  - **MEDIUM RISK** – The risk posed is likely to place the subject in danger or they are a threat to themselves or others.
  - **LOW RISK** – There is no apparent threat of danger to either the subject or the public.
5. Through this process, information is assessed towards implementing similarly graded action plans towards tracing the missing person.
6. Notwithstanding, in all cases where children are reported missing there is, due to the very nature of their vulnerability, a risk of physical or emotional harm. Tracing children who are reported missing is therefore an imperative on all agencies involved in their care and protection. Missing children enquiries cannot be managed by the police service alone. Only through positive action with other agencies can effective action be taken towards ascertaining a missing child's whereabouts.

7. All forces in Scotland will have their own guidance on actions towards missing person enquiries. Many of the police guidance follow similar themes on risk assessment and action plans. Notwithstanding these, there is an onus towards better collaborative practice in the manner in which children are identified, protected, and supported within education. This memorandum clarifies this position towards clearer understanding of roles and responsibilities where children are reported missing from education.
8. In the event that CME (Scotland) have exhausted their own enquiries they will make contact with the initial police designated point of contact for the policing area (force) where the child/family resides. In most instances this will be the Senior Duty Officer in Charge of the Force Call Centre and/or Control Room.
9. CME (Scotland) will make clear that they wish to make a report under the shared "Memorandum of Understanding between ACPOS and Children Missing from Education (Scotland)". Thereafter a full explanation of the circumstances and all pertinent information will be shared. This will be confirmed in writing either by e mail/fax. **In all such cases it is anticipated these reports will be treated as missing person enquiries, without exception. It is anticipated that the number of referrals and/or report will be minimal. Good practice within Forces would suggest that the Family/Child Protection Unit be informed when such reports are received.**
10. The initial police designated point of contact, after assessing all the information will, in line with local force procedures, decide on a course of action. This will include decisions on grading the missing child/family and deciding on the course of investigation. On the report being received the investigation will be **allocated** for investigation in line with force procedures. CME (Scotland) will be notified as to the identity of the allocated enquiry/investigating officer who will then be responsible for that investigation.
11. During the investigation, the police and CME (Scotland) will work collaboratively, information will be shared and regular communication between the two agencies will assist towards identifying the whereabouts of the child/family.
12. In the unlikely event there are no grounds for implementing a missing person enquiry this will also be recorded on police command and control facilities. If after discussion with the local police, the decision is made not to instigate the matter as a missing person enquiry CME (Scotland) will be informed. It is anticipated that at this stage there will be few if any such circumstances when this will occur.

Fig 3



## Section 6 – Signatories to this Memorandum of Understanding

Signature .....  
On behalf of Children Missing from Education (Scotland)

Signature.....  
On behalf of the Association of Chief Police Officers in Scotland)

Date of Signing .....

## Appendix 1

### Local Contact Details for the Scottish Police Forces

- The Duty Inspector, Force Call Centre, Central Scotland Police, Police Headquarters, Randolphfield, Stirling FK8 2HD

**Telephone 01786 456000**

- The Duty Inspector, Force Call Centre, Dumfries and Galloway Constabulary, Police Headquarters, Cornwall Mount, Dumfries DG1 1PZ

**Telephone 01387 252112**

- The Duty Inspector, Force Call Centre, Fife Constabulary, Police Headquarters, Detroit Road, Glenrothes Fife KY6 2RJ

**Telephone 01592 418888**

- The Duty Inspector, Force Call Centre, Grampian Police, Police Headquarters, Queen Street, Aberdeen AB10 1ZA

**Telephone 0845 600 5700**

- The Duty Inspector, Force Communications Centre, Lothian and Borders Police, Bilston Glen Industrial Estate, Dryden Road, Loanhead, Edinburgh EH20 91Z

**Telephone 0131 311 3131**

- The Duty Inspector, Force Control Room, Northern Constabulary, Police Headquarters, Old Perth Road, Inverness IV2 3SY

**Telephone 01463 715555**

- The Duty Inspector, Force Call Centre, Strathclyde Police, Police Headquarters, 173 Pitt Street, Glasgow G2 4JS

**Telephone 0141 532 2000**

- The Duty Inspector, Force Call Centre, Tayside Police, Police Headquarters, PO Box 59, West Bell Street, Dundee DD1 9JU

**Telephone 01382 22320**

### Policy Context

*'Protecting Children – A Shared Responsibility' – Scottish Office, 1998*

*'Protecting Children' – Lord Advocate's Guidelines, 1998*

*'For Scotland's Children' – Scottish Executive, 2001*

*'It's Everyone's Job to Make Sure I'm Alright' – Scottish Executive, 2002*

*'A Partnership Agreement for a Better Scotland' – Scottish Executive, 2003*

*'The Children's Charter' – Scottish Executive, 2004*

*'Protecting Children and Young People – Framework for Standards' - Scottish Executive, 2004*

*'Safe and Well' – Scottish Executive, 2005*

*'Getting it Right for Every Child' - Scottish Executive, 2005*

### Ministerial Vision

Scottish Ministers have set out a high-level **vision** for all children and young people in Scotland which states:-

*"Our ambition for the children of Scotland is they should be ambitious for themselves and be confident individuals, effective contributors, successful learners and responsible citizens. To achieve our vision, children need to be safe, nurtured, healthy, achieving, Active, respected, responsible and included"*

To achieve this vision, children need to be:-

- *Safe: Children and young people should be protected from abuse, neglect and harm by others at home, school and in the community.*
- *Nurtured: Children and young people should live within a supportive family setting, with additional assistance if required, or, where this is not possible, within another caring setting, ensuring a positive and rewarding childhood experience.*
- *Healthy: Children and young people should enjoy the highest attainable standards of physical and mental health, with access to suitable healthcare and support for safe and healthy lifestyle choices.*

- *Achieving: Children and young people should have access to positive learning environments and opportunities to develop their skills, confidence and self esteem to the fullest potential.*
- *Active: Children and young people should be Active with opportunities and encouragement to participate in play and recreation, including sport.*
- *Respected and responsible: Children, young people and their carers should be involved in decisions that affect them, should have their voices heard and should be encouraged to play an Active and responsible role in their communities.*
- *Included: Children, young people and their carers should have access to high quality services, when required, and should be assisted to overcome the social, educational, physical, environmental and economic barriers that create inequality.*

This vision and the principles above underpin national policy which dictates that all children and young people have the right to be cared for and protected from harm and to grow up in a safe environment in which their rights and needs are respected. ACPOS and CME (Scotland) support and endorse this philosophy

The welfare of all children and young people is paramount and this is further endorsed by the child centred principles contained within The Children (Scotland) Act 1995, which remains the main piece of current legislation relative to the care and protection of children and young people in Scotland.

Following on from the Scottish Executive's child protection audit and review report (2002) entitled "**It's everyone's job to make sure I'm alright**" which identified the importance of collaborative partnership working and the need to share and exchange information, the Scottish Executive published (2004) **Protecting Children and Young People : The Charter** and **Protecting Children and Young People : Framework for Standards**.

**The Charter** not only sets out what children and young people felt was important to them and what helped them feel safe and secure but also included a number of pledges by government in response and identified what action was needed by professionals and agencies.

The **Framework for Standards** developed this further and translated these commitments into practice. In particular the **Framework for Standards** identified a number of important working principles all of which are transferable to this particular aspect of work.

This strong policy base supports and underpins the clear duty of care both ACPOS and CME have in ensuring that children get the help they need when they need it. It also demonstrates the need for this Memorandum of Understanding/Protocol to ensure that clear, consistent national procedures are agreed and in place between ACPOS and the CME which are reflected in working practices across the 8 Forces of the Scottish Police Service

### **Relevant Legislation – Education**

#### **The Education (Scotland) Act 1980 and The Standards in Schools etc Act 2000**

- Children are entitled to receive an education which is appropriate to their age, stage and development so that they can reach their potential;
- The local authority has a duty to provide education for the children who live in their area;
- It is the parents duty to make arrangements for their child to receive education. This may be in a local authority school, an independent school or at home.

#### **The Children (Scotland) Act 1995**

- Places a duty on local authorities and schools to safeguard and promote the welfare of children in need in their area;
- Places a duty on the parent (or person with parental responsibilities) to safeguard the child and this includes ensuring that they receive education.

#### **The Education (Additional Support for Learning) (Scotland) Act 2004**

- Recognises the broad range of children who may require support for their learning – this includes children who have experienced an interruption in their learning;
- Promotes the need for effective, rapid transfer and sharing of information and the co-ordination of services.

## Appendix 4

### Relevant Legislation – Scottish Police Service

#### The Police (Scotland) Act 1967

##### Statutory Duties of Police Officers

The following section deals with the statutory responsibilities and functions placed on police officers and are clearly set out in the Police (Scotland) Act 1967, which states:-

It shall be the duty of constables of a police force:-

- (a) to guard watch patrol so as to:-
  - (i) prevent the commission of offences;
  - (ii) preserve order;
  - (iii) protect life and property.
- (b) where an offence has been committed, to take all such lawful measures and make such reports to the appropriate prosecutor as may be necessary for the purpose of bringing the offender with all due speed to justice
- (c) to serve and execute any lawful warrant, citation or deliverance relating to any criminal proceeding and duly endorsed by the court
- (d) to attend any court of law for the purpose of giving evidence.

The police role should not impinge upon the function of any other agency, authority or civil process that the police routinely come into contact with.

All police officers have a dual responsibility to:-

- (a) to investigate crime and thereafter report to the Procurator Fiscal; and
- (b) make referrals to the Reporter to the Children's Panel in relation to children who may require compulsory measures of supervision.

Officers should not lose sight of the foregoing statutory duties and those contained within the Children (Scotland) Act 1995. The duty to protect life and property extends to a duty of care and protection for the most vulnerable in our society, including children and young people.

## United Nations Convention on the Rights of the Child

Legislation and practice in child protection are underpinned by principles derived from Articles of the United Nations Convention on the Rights of the Child, ratified by the UK Government in 1991. These principles are:-

- each child has a right to be treated as an individual;
- each child who can form a view on matters affecting him or her has the right to express those views if he or she so wishes;
- parents should normally be responsible for the upbringing of their children and should share that responsibility;
- each child has the right to protection from all forms of abuse, neglect or exploitation;
- so far as is consistent with safeguarding and promoting the child's welfare, public authorities should promote the upbringing of children by their families; and
- any intervention by a public authority in the life of a child must be properly justified and should be supported by services from all relevant agencies working in collaboration.

## The European Convention of Human Rights (ECHR) /The Human Rights Act 1998

Missing person enquiries are conducted within the legal parameters specified by common law in terms of a duty to provide care and protection and within a mixture of legal conventions, case law, internal law in terms of ECHR and domestic laws, for example the Human Rights Act 1998.

The rights and freedoms of the Convention that may be particularly relevant to the investigation of missing persons include:-

- **Article 2 Right to Life**  
This places a positive responsibility on the police service to respond effectively to all reports of missing persons so as to identify those cases that require more attention to minimise the number of cases that end in loss of life or harm to individuals;
- **Article 8 Right to Respect for Private and Family Life**  
When investigating the circumstances of any disappearance or appointing an Investigating Officer/Family Liaison Officer, cognisance must be taken of the intrusion involved into the private life of that individual or family. Of particular note are those situations where an individual disappears deliberately; the right to do so should be respected but it must be balanced with the rights of the child, young person, family and the wider community.

In general terms these rights should only be interfered with where the action is prescribed by law and it is necessary in a democratic society for reasons of:-

- Public safety;
- Preventing disorder and crime;
- Protecting health and morals;
- Protecting the rights and freedoms of others.

### **The Data Protection Act 1998**

All those involved with children are likely to hold personal information about them, including sensitive personal information. The Act covers how personal information about living, identifiable people is to be protected. All organisations that hold or process personal data must comply. The Act requires that data is gathered and processed fairly, is held securely and is used solely for the purpose for which it was collated.

### **The Children (Scotland) Act 1995**

This is the main piece of legislation relevant to the protection of children in Scotland and its main principles are:-

- The welfare of the child is the paramount consideration when his or her needs are considered by Courts, Children's Hearings and Local Authorities.
- No Court should make an Order relating to a child and no Children's Hearing should make a supervision requirement unless the Court or Hearing considers that to do so would be better for the child than making no Order or supervision requirement at all.
- The child's views, taking appropriate account of age and understanding, should be taken into account where major decisions are to be made about his or her future.

## Appendix 5

### Guidance on the Management, Recording and Investigation of Missing Persons 2005 (Centrex/ACPO)

This document can be accessed online at:

[http://www.acpo.police.uk/asp/policies/Data/missing\\_persons\\_2005\\_24x02x05.pdf](http://www.acpo.police.uk/asp/policies/Data/missing_persons_2005_24x02x05.pdf)



SCOTTISH EXECUTIVE

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**MISSING FAMILY ALERT**  
**(e-Version)**  
**JULY 2006**

# CONTENT

Page 3 Scottish Executive Letter – Dr Rosie Ilett, Child & Mental Health Unit, Health Department

Page 5 Protocol

Page 11 Procedure – Children Missing Education

Page 14 Process – NHS 24

Page 17 Process - Scottish Ambulance Service

Page 19 Procedure - Practitioners Services Department

Page 20 Response – Police

Page 21 Procedure – Accessing Information from Inland Revenue

Page 23 NHS Distribution & Contact Details

Page 25 CME Contact Details

- Appendix 1 - Children Missing From Known Address Form (MKA1)
- Appendix 2 - Missing Family Alert Form (MFA1)
- Appendix 3 - Raising a Missing Family Alert (Flow Chart 1)
- Appendix 4 - Distribution Following Receipt of a Missing Family Alert (Flow Chart 2)
- Appendix 5 - Children Missing Education Form (CME1)



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Health Department  
Child and Maternal Health Unit

NHS Child Protection Advisors/  
NHS Missing Family Alert Contacts

Copy to: Caldicott Guardians  
Child Health Commissioners  
Chief Executives, NHS Boards  
Chairs, NHS Boards  
Chief Constables  
Others, list available on request

**Directorate of Healthcare Policy and Strategy**

St Andrew's House  
Regent Road  
Edinburgh EH1 3DG

Telephone: 0131-244 2704

Fax: 0131-244 4775

Sarah.Corcoran@scotland.gsi.gov.uk

<http://www.scotland.gov.uk>

6 July 2006

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Dear Colleague

**MISSING FAMILY ALERTS PROTOCOL – PILOT**

I am writing to advise you about the proposal for a pilot of a more formal system for tracking the movements of vulnerable families. As you are aware, NHS Child Protection Advisors across Scotland operate an informal method of information-sharing to track the movements of vulnerable families, particularly where there are child protection issues. This pilot formalises that process and will run for a period of one year.

The attached paperwork has been developed by Sandie Young, the NHS Child Protection Advisor in NHS Highland and describes the methods by which you should inform others - once all other potential information sources within education, police, social work etc have been exhausted - when there are concerns that a family you are working with may have gone missing. Although the numbers are extremely small, we hope this system will formalise current practice and ensure that information about missing families is shared more quickly and systematically across the NHS, and in certain cases, with other agencies.

We ask that you immediately start using the protocol and attachments. The protocol will be reviewed after 6 months and again at 12 months and continually monitored by Sandie Young. The protocol will be reviewed in the light of comments received and we hope to issue final guidance in the autumn of 2007. No originals or copies should be sent to the Scottish Executive Health Department as has been the case before. This causes unnecessary delays and breaches confidentiality.

If you require any further details about the protocol, please contact Sandie direct at [Sandie.young@hpct.scot.nhs.uk](mailto:Sandie.young@hpct.scot.nhs.uk) or Sarah Corcoran in the Child and Maternal Health Unit on 0131 244 2704, [Sarah.Corcoran@scotland.gsi.gov.uk](mailto:Sarah.Corcoran@scotland.gsi.gov.uk) .

We look forward to receiving comments on the protocol and attachments in due course.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Rosie Ilett', with a stylized flourish at the end.

**Dr Rosie Ilett**  
Head of Unit

## MISSING FAMILY ALERT- PROTOCOL

### 1. Introduction

It is clearly identified in the Children's Charter and the Framework for Standards issued by the Scottish Executive in 2004, that all children have the right to be cared for and protected from harm and that those working with children and their families have an essential duty of care towards them.

The purpose of the Missing Family Alert (MFA) process is to locate children who have disappeared from view and for whom there may be concerns of significant harm<sup>1</sup> in respect of unmet need, vulnerability or abuse.

An alerting system exists within NHS Scotland to circulate information about such children and their families. The aim of this protocol however is to enhance the existing system, to provide standardised criteria for raising a missing family alert and the subsequent distribution of that alert.

The management of releasing confidential patient information within the NHS is the responsibility of the Caldicott Guardians. Compliance with the general principles; "justification of release of information... use of minimal information... restricted access on a need-to-know basis... cognisance of the law and professional responsibility" as laid down by the Caldicott Committee is essential. The raising of a MFA will ultimately be the responsibility of the Caldicott Guardian within a health board.

The nominated senior nurse for child protection within each health board will implement the MFA process. The nominated nurse will be the nurse consultant for child protection, or a senior child protection advisor where there is no nurse consultant appointee.<sup>2</sup> The Caldicott Guardian may devolve responsibility to the nurse consultant for raising a MFA.

It is the responsibility of the Keeper of the Register, in the Local Authority, to trace "missing" children whose names are on the Child Protection Register. However if information about such children comes to the attention of health professionals in the first instance, contact with other agencies, such as social work or police should be made promptly.

### 2. Definition of Missing Family

This is a family who has disappeared from a known location within a health board area for whom there may be concerns of significant harm for the children in respect of unmet need, vulnerability or abuse. This includes risks to unborn children.

### 3. Rationale and References

"Personal information disseminated by Health Boards/Trusts about missing families should be clearly justified on the basis of the individual case, and subject to scrutiny by the Guardian; a mechanism should be in place to ensure this."

*Protecting Children: A Shared Responsibility. Guidance for Health Professionals. Scottish Executive (2000)*

"If there is concern that a child may be at risk of significant harm this will **always** override a professional or agency requirement to keep information confidential....This includes sharing information prior to the birth of a child to ensure protective plans are in place from the moment of birth."

*Sharing Information about Children at Risk: A Brief Guide to Good Practice. Scottish Executive (2004)*

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<sup>1</sup> Significant harm will be determined by professional judgement based on an assessment of risk.

<sup>2</sup> The senior nurse for child protection nominated by each health board will be referred to throughout as the nurse consultant.

“Duties to protect children are enshrined in law for some agencies, particularly the police and social work. However everyone involved in working with children has a fundamental duty of care towards them. Agencies such as health and education as well as the police and social work services must recognise the risks children face.”

*Framework for Standards. Scottish Executive (2004)*

“Our pledge to the children and young people of Scotland who are at risk of abuse and neglect is that you will:

- get the help you need when you need it;
- be seen by a professional such as a teacher, doctor or social worker to make sure you are alright and not put at more risk;
- be listened to seriously, and professionals will use their power to help you... and those helping you will:
  - share information to protect you;
  - work together effectively on your behalf;
  - rigorously monitor services to continually improve how and what is done to help you”.

*Children’s Charter. Scottish Executive (2004)*

“Staff must consider carefully the need to process personal data fairly and lawfully and should not do so until various conditions are met, such as compliance with a legal obligation or for the administration of justice for the exercise of functions conferred by any statute, for the exercise of functions of a Government Department or for the exercise of any other function of a public nature exercised in the public interest Schedule 2.”

Data Protection Act (1998)

#### **4. Concerns that a Family May Be Missing**

NHS personnel with concerns that a family is missing should contact the child protection nurse with responsibility for their locality/area of work. All reasonable and practical efforts should be undertaken to locate the family. This should include discussion with other health professionals and interrogation of IT systems such as Community Health Index (CHI), Standard Immunisation Recall (SIRS) and Patient Administrative System (PAS)

Contacts in other statutory agencies may also be able to assist, e.g. housing, social work, police and education.

Preparatory work within the health board area to locate the family should be documented on the NHS Scotland Children Missing from Known Address Form (MKA1)<sup>3</sup>.

If a family remain missing the nurse consultant within the health board, in collaboration with the Caldicott Guardian should agree the appropriateness<sup>4</sup> of raising a NHS Scotland Missing Family Alert Form (MFA1)<sup>5</sup>.

NB. It may be that there is an agreed protocol between the Caldicott Guardian and the nurse consultant within a health board, to devolve responsibility to the nurse consultant for raising a MFA1. In such an instance the nurse consultant will decide the appropriateness of raising a MFA1.

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<sup>3</sup> Appendix 1 - The child’s name and action taken to locate the child and family are detailed on the MKA1. Once completed, the form should be filed in the child’s records and a corresponding entry made on the chronology sheet/record.

<sup>4</sup> Appropriateness will determined by professional judgement based on an assessment of risk.

<sup>5</sup> Appendix 2 – MFA1

## **5. Raising a Missing Family Alert<sup>6</sup>**

Once a professional decision has been taken to raise a MFA1, the nurse consultant raising the MFA1 should circulate it to each health board in Scotland, including NHS 24, the Scottish Ambulance Service (SAS) and to Practitioner Services in Aberdeen<sup>7</sup>. Additional circulation to other United Kingdom countries<sup>8</sup> will be based on knowledge of the family. There is no system to include countries outwith the UK. Concerns about the protection of children believed to have left the UK should be discussed with the police.

In recognition of the Data Protection Act (1998) and the general principles of the Caldicott Committee, minimal but pertinent information will be transcribed onto the MFA1. The nurse consultant and caseload holder for the family will retain the detailed information to further advise colleagues should the family be located.

The following checklist may be helpful:

- The nurse consultant raising the MFA1 should ascertain the concerns and complete the NHS Scotland Missing Family Alert Template (MFA1).
- The nurse consultant and named contact on the MFA1, from the health board raising the alert, should retain the detailed clinical and social information/records until the MFA1 has date-expired or the missing family have been found
- A copy of the MFA1 should be placed in the child health records held by the caseload holder, e.g. Health Visitor/School Nurse and an entry made on the chronology sheet/record.
- The MFA1 should be circulated to all health boards within Scotland; this must include NHS 24, SAS and also Practitioner Services, Aberdeen.
- Based on information available, distribution may be necessary to other UK destinations. Contact details for child protection nurses for specific UK destinations can be located in the current Directory of Community Nursing.

## **6. Family Located**

It is the responsibility of the nurse consultant who raised the MFA1 to advise all health boards, NHS 24, SAS, Practitioner Services and others on the original circulation list when the family have been located. This should be done by completing the appropriate section<sup>9</sup> on the original MFA1 and re-circulating it.

## **7. Distribution following receipt of a Missing Family Alert<sup>10</sup>**

On receipt of a MFA1, nurse consultants within Scotland will distribute the alert to appropriate disciplines within their health board. Staff disciplines will be identified by the known risks to the child/ren as detailed on the MFA1. However distribution should always include all accident and emergency departments and all senior, specialist or designated nurses for child protection.

The nurse consultant should ensure that staff disciplines receiving a MFA1 are aware of their responsibilities in trying to locate such families.

Should the family be located the NHS personnel must be made aware of their responsibility to advise the nurse consultant in their own health board in addition to informing/contacting the named person in the health board raising the alert to ascertain additional information and to request health records.

The nurse consultant must retain a copy of the MFA1 and Distribution (Flow Chart 2) as a file/audit copy; this will serve as both an audit trail and an aide memoir should the family be located.

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<sup>6</sup> Appendix 3 - Flow Chart 1

<sup>7</sup> A detailed list of nominated nurse consultant, their addresses and the address of Practitioner Services, NHS 24 and SAS will be distributed with this protocol

<sup>8</sup> Contact details can be found in the current Directory of Community Nursing

<sup>9</sup> Family found details can be entered in the appropriate box on the bottom left hand corner of the MFA1

<sup>10</sup> Appendix 4 - Flow Chart 2

NHS staff disciplines having received an alert must be notified if the family is found within the 3 months alert period; they will then destroy their copy of the MFA1.

### **8. Children Missing Education (CME) (Scotland)**

Children Missing Education (CME) (Scotland) is a national project to track and trace children who become missing from education. The rationale and operational guidelines for the project can be found within Safe and Well, Scottish Executive (2005).

When education and CME (Scotland) searches have proved unsuccessful and there are concerns regarding the child/ren's welfare in respect of non-attendance at school and additional concerns in respect of unmet need, vulnerability or abuse, CME will complete a Children Missing Education Form (CME1)<sup>11</sup> and request a search from the NHS in line with the missing family alert protocol.

The CME1 will be distributed in the same manner as the MFA1.

When a child has been located in their health board area, the nurse consultant will inform Graham McNaught at CME (Scotland)<sup>12</sup> that the child has been found and will be advised of the CME named person in their locality. The CME named person in their locality should be advised of the child's name, date of birth, address and any other relevant details. The CME named person will pro-actively follow up on the child's educational requirements.

The nurse consultant will ensure that the child/family are in receipt of NHS services and that appropriate and relevant risk assessment and referrals are made in accordance with professional practice, information sharing protocols and child protection guidelines so that appropriate planning and actions can be taken to support the child and family.

### **9. NHS 24**

On receipt of a MFA1 or CME1 (see Children Missing From Education at point 11) will undertake retrospective checks, against calls handled. If a family subject to an alert has contacted, NHS 24 will advise the nurse consultant in the health board area in which the family have been located.

### **10. Scottish Ambulance Service (SAS)**

The SAS hold contact information on emergency, urgent and planned contacts. On receipt of a MFA1 or CME1, the named manager at Emergency Medical Despatch Centre (EMDC) North West will advise the remaining two control centres and a named National HQ manager. The SAS will undertake a retrospective check against calls handled. If a family subject to an alert is identified, the SAS will contact the nurse consultant in the health board area in which the family have been located. The Service will undertake up to three checks per person and "tag" details where sufficient information is provided".

### **11. Practitioners Services**

Practitioners services, in Aberdeen will, on receipt of a MFA1 or CME1, advise partner centres in Glasgow and Edinburgh and together will undertake a national weekly check against CHI, of families registering with a GP practice. If a family are located, Practitioner Services will inform the nurse consultant in the health board area in which the family have been located.

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<sup>11</sup> Appendix 5 – CME1

<sup>12</sup> See Page 25 for Contact Details

## **12. Police**

On receipt of a report of a missing person the Police will carry out an initial risk assessment based on all the known circumstances at the time. The level of risk will determine the resources dedicated to the enquiry. In all cases the Police have a duty to enquire into a report of a missing person until such time as that person is found.

The Police have access to numerous databases, which can assist in gathering information or intelligence, which will assist in tracing missing persons.

The Police prefer to receive missing person reports as soon as is practically possible. Occasionally a professional individual may have immediate cause for concern which cannot be evidenced. In these cases the Police would recommend that early contact be made to ensure the missing person enquiry commences immediately. "Too soon is better than too late".

## **13. Actions and distribution following receipt of a MFA1 should include:**

- On receipt of a MFA1 the nurse consultant should monitor the information received. Detailed clinical and social information should be condensed and transferred onto the MFA1 if this has not been done e.g. alerts received from social services; however in such cases all original information should be kept on file.
- The nurse consultant will use professional judgement in respect of the distribution of the MFA1 to the lead nurse or equivalent in appropriate disciplines, according to identified risk. This will include all accident and emergency departments and all senior, specialist or designated nurses for child protection.
- The nurse consultant must retain a copy of the MFA1 and specific distribution (Flow Chart 2) as a file/audit copy.
- The nurse consultant should ensure those personnel receiving a MFA1 are aware of their responsibilities in respect of the alert.
- Should the family be located, personnel must inform the Nurse Consultant in their health board area.
- Should the family be located there is an additional responsibility to inform/contact the named person in the health board who raised the alert to access additional information and request health records.
- The nurse consultant in the area in which the family have been located should ensure that appropriate NHS services are provided.

## **14. Actions and distribution following receipt of a CME1 should include:**

- The nurse consultant will use professional judgement in respect of the distribution of the CME1 to the lead nurse or equivalent in appropriate disciplines, according to identified risk. This will include all accident and emergency departments and all senior, specialist or designated nurses for child protection.
- The nurse consultant must retain a copy of the CME1 and specific distribution (Flow Chart 2) as a file/audit copy.
- The nurse consultant should ensure those personnel receiving a CME1 are aware of their responsibilities in respect of the alert.
- Should the family be located, personnel must inform the Nurse Consultant in their health board area.
- Additionally, should the child/family be located in the receiving health board area, there is a responsibility to inform (CME) (Scotland) and subsequently, as advised by CME, the Children Missing Education named person for the locality in which the child/family have been located.
- The nurse consultant in the area in which the family have been located should ensure that appropriate NHS services are provided.

### **15. Missing Family Alert Form (MFA1) and Children Missing Education Form (CME1)**

- The MFA1 and CME1 should be made available in confidential staff areas for NHS personnel to read; local arrangements should be agreed.
- The MFA1 and CME 1 will contain pertinent but minimal clinical and social identifying information.
- The MFA1 and CME1 will stipulate risk factors to facilitate appropriate distribution.
- The MFA1 and CME1 should be destroyed after 3 months, or in the case of unborn children, EDD plus 3 months.

### **16. Individual NHS Practitioners in Receipt of a MFA1 or CME1**

- On receipt of a MFA1 or CME1, NHS practitioners should check the details against their case files.
- Where locally agreed protocols exist to flag or retrospectively check records or IT systems, this should be done.
- Should the family be located, the local nurse consultant should be informed.
- Should the family be located there is an additional responsibility to inform/contact the named person in the health board who raised the alert to access additional information and request health records.

### **17. Family Not Found**

If the family have not been located at the end of the 3-month alert period, the nurse consultant in the health board raising the MFA1 must review all the circumstances relating to the family.

Professional judgement should be used to consider any additional actions that can reasonably be undertaken and this should include referral to the Keeper of the Register who has authorisation to check Inland Revenue<sup>13</sup> details.

Referral to the police must be initiated if this has not already been done.

Action could also include re-issue of a MFA1. Local health board arrangements for continuing IT searches, and the processing and storing of unclaimed records should be instigated at the end of 3 months if the family have not been located.

In respect of a CME1, CME (Scotland) will review all further actions that can reasonably be undertaken.

### **18. National Audit of MFA1 and CME1**

The purpose of the MFA1 and CMA1 is to locate missing families where children are at risk of significant harm due to unmet need, vulnerability or abuse. To audit the effectiveness of the system, the nurse consultant for each health board should, at the expiry date of the MFA1 or CMA1, send a copy of the MFA1 or CMA1, stating if the family have been located and by whom or have not been located, in their Health Board area to:

Sandie Young  
Lead Child Protection Advisor  
NHS Highland  
Morven House  
Raigmore Hospital  
Inverness  
IV2 3UJ

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<sup>13</sup> See Page 21 Accessing information from Inland Revenue to assist with enquiries about a child's safety and welfare.

## **CHILDREN MISSING FROM EDUCATION (SCOTLAND) AND NHS LINKS**

Children Missing from Education (CME) (Scotland) is a national project to track and trace children who become missing from education (and other) services. The rationale and operational guidelines for the project can be found within Safe and Well, Scottish Executive 2005.

NHS Scotland have introduced a missing family alert process to locate children who have disappeared and for whom there may be concerns of significant harm in respect of unmet need, vulnerability or abuse.

Information sharing and collaborative working are required in successfully locating and reintegrating children and families with services. This paper sets out protocol and procedures to be followed for health and education professionals to work together in this work.

### **Children Missing from Education**

Children Missing from Education are children and young people of compulsory school age who are not on a school roll and are not being educated otherwise (at home, privately or in an alternative provision). They have usually not attended school for a substantial period of time (usually agreed as 4 weeks or considerably less for vulnerable children)

Schools have in place absence policies and procedures to record attendance and to provide guidance on relevant actions to be taken in cases of absence. Whilst parents / carers are requested to inform the school if their child is to be absent, when there is no information given, the class teacher (primary) or guidance teacher (secondary) will endeavour to find out the reason and circumstances of the absence. Such actions include: contacting home by phone or letter, asking other children in the class, contacting emergency contacts or requesting a home visit from home link staff. Further information will be gathered from other services or agencies involved with the child or family.

A request for a national search co-ordinated by CME (Scotland) can be made after the school and local authority have taken such actions to ascertain that the child has disappeared from view within their local authority. Each local authority has a named Children Missing from Education contact who co-ordinates a wider local search which involves searching databases for education, housing and social work, and ensures the usual checks have been made with friends, relatives and any other services for children and families.

The diagrams below are in Safe and Well, Scottish Executive, 2005. Figure 1 shows the usual course of action taken when a child is transferring school; Figure 2 illustrates procedures followed when a child is absent from school.

### **Requesting a Search from NHS**

When education and CME (Scotland) searches have proved unsuccessful and there are concerns regarding the child, then it may be appropriate to request a search from the NHS in line with the missing family alert protocol.

CME (Scotland) staff complete the confidential NHS Scotland CME1 Form (see attached) and distribute it via:

- Sandie Young, Lead Child Protection Advisor, NHS Highland, Morven House, Raigmore Hospital, Inverness, IV2 3UJ

CME (Scotland) staff will reissue the NHS Scotland CME1 Form when they have been notified that the family have been found via Sandie Young as per above details.

This form will be sent to Nurse Consultants in each of the Health Boards, Scottish Ambulance Service, NHS 24, and Practitioner Services Division.

When a child has been located in their health board area, the nurse consultant will inform Graham McNaught at CME (Scotland)<sup>14</sup> that the child has been found and will be advised of the CME named person in their locality. The CME named person in their locality should be advised of the child's name, date of birth, address and any other relevant details. The CME named person will pro-actively follow up on the child's educational requirements.

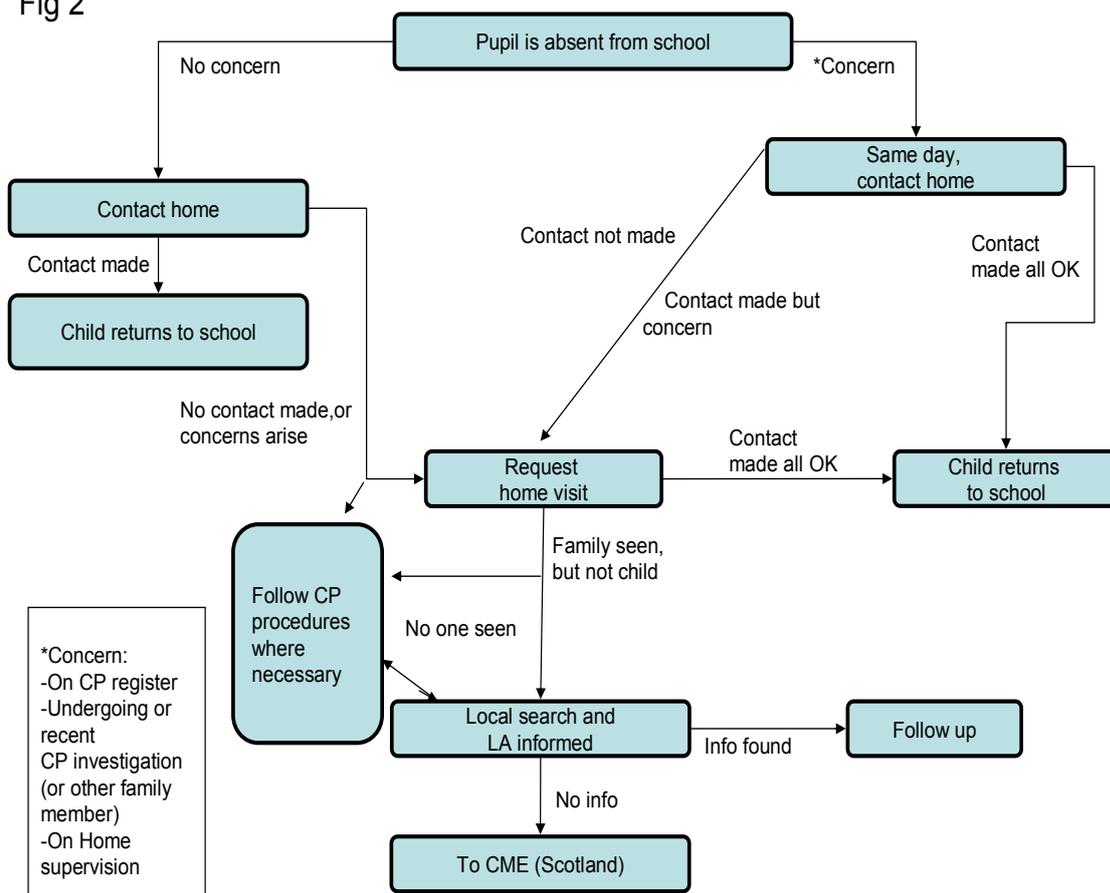
The nurse consultant will ensure that the child/family are in receipt of NHS services and that appropriate and relevant risk assessment and referrals are made in accordance with professional practice, information sharing protocols and child protection guidelines so that appropriate planning and actions can be taken to support the child and family.

**Error! Objects cannot be created from editing field codes.**

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<sup>14</sup> Contact details will be distributed with the protocol.

Fig 2



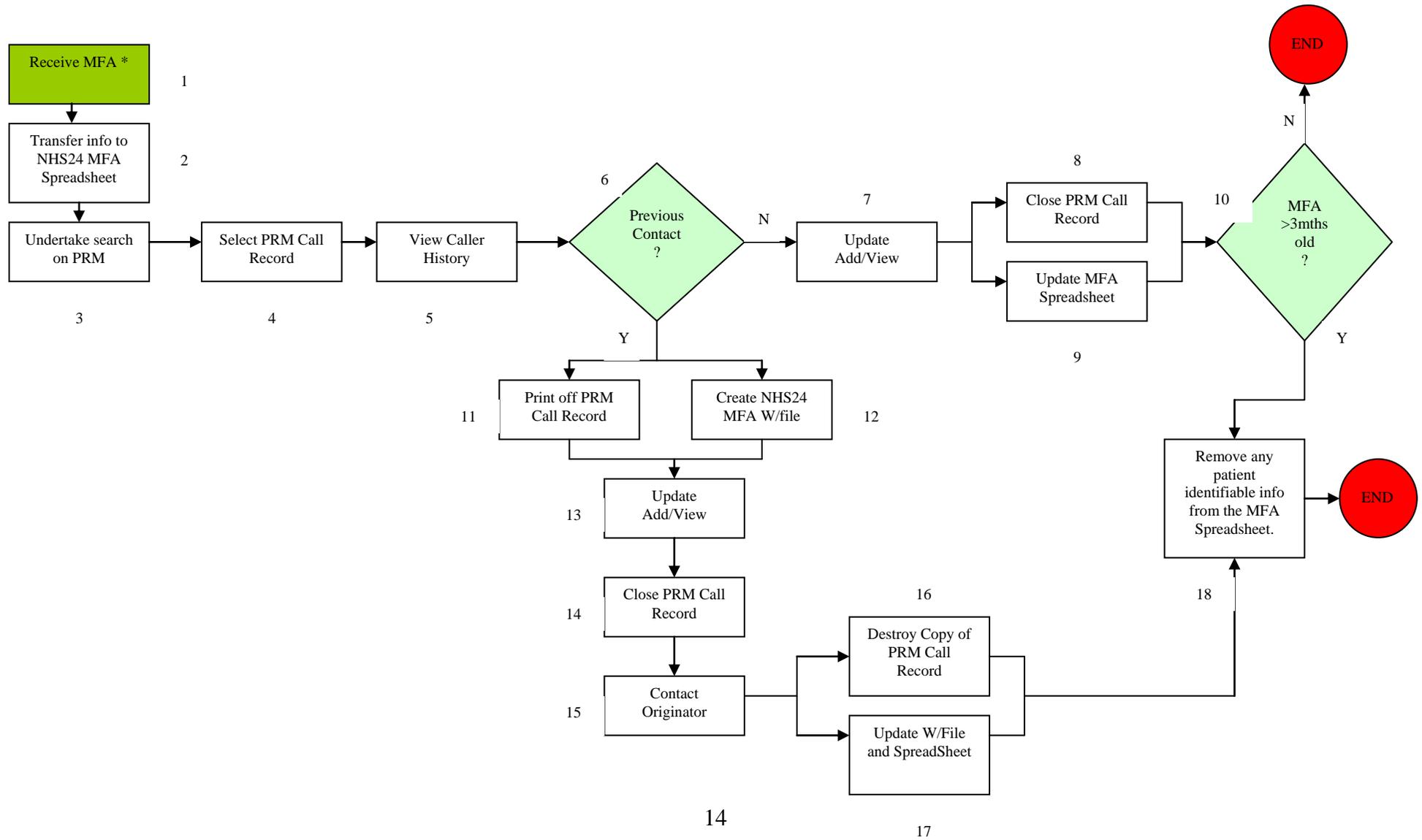
A search carried out by CME (Scotland) involves:

- Information being gathered from the referrer, school and any other agencies regarding the child and family
- Identification of the most likely geographical areas the child / family could be
- A request for searches of databases (education, social work, housing) in targeted local authorities
- When a child is located, a request for home visits and other follow up action to support the child into education (and other) services.

All information is recorded by CME (Scotland) using an electronic database and back up paper files.

## NHS 24 MISSING FAMILY ALERTS

This process is for the Child Protection Advisor (or delegates) to undertake on a regular basis, (i.e. weekly or similar).



## Process Steps

- 1) The Child Protection Advisor (or delegate) will receive the Missing Family Alerts (MFA) from either a Scottish or English Health Board via the area Child Protection Nurse Consultant or Advisor.
- 2) The key information from the MFA (Forename, Surname, DOB and Originator) will be populated into the NHS 24 MFA Spreadsheet. This spreadsheet documents all received MFA's and gives an overall summary view of the work/investigations undertaken on each. It is maintained by the Child Protection Advisor (or delegate).
- 3) On a regular basis (daily), the Child Protection Advisor (or delegate) will undertake a search of all the MFA entries on the Spreadsheet, to ascertain if any member of the missing family has contacted the NHS 24 for information/assistance. A search will be undertaken on the PRM System, as per the Demographics Process (Clinical Process # 3).
- 4) The relevant PRM Call Record should be selected accordingly.
- 5) The Caller History of the PRM Call Record should be viewed to establish if any contacts have been made over the relevant period (i.e. since the last review).
- 6) Has any member of the Missing Family made contact with NHS 24 recently?  
**NO:**
- 7) In order to ensure a clear audit trail, a statement should be entered in the "Add/View Comments", as follows: *"Missing Family Alert Received. Call Record opened by Child Protection Advisor XXX (insert name) to ascertain if recent contact made to NHS 24. No further Action Required."*
- 8) Close the PRM Call Record Accordingly
- 9) Update the NHS 24 MFA Spreadsheet to document that a search was undertaken and no contacts found.
- 10) If the MFA is more than 3 months old (or the individual concerned is 3 months past her EDD) and no contacts have been made to NHS 24, the MFA entry can be anonymised. This will retain the entry but will remove all patient identifiable information, so that it can still be used for statistical purposes.

**YES:**

- 11) Print of PRM Call Record for reference
- 12) Create an NHS 24 MFA Workfile, which will document all action undertaken by Child Protection Advisor (or delegate)
- 13) In order to ensure a clear audit trail, a statement should be entered in the "Add/View Comments", as follows: *"Missing Family Alert Received. Call Record opened by Child Protection Advisor XXX (insert name) to ascertain if recent contact made to NHS 24. No further Action Required."*
- 14) Close the PRM Call Record Accordingly.
- 15) Contact the MFA Originator, i.e., whoever generated the alert. Provide them with all the key information from the call.
- 16) Following contact and providing there is no further action required, destroy the paper copy of the PRM Call Record, as there is no further requirement to retain.
- 17) For record keeping purposes and clear audit trail, ensure that both the MFA Workfile and Spreadsheet are clearly updated to reflect the work undertaken during the search and investigation.
- 18) As the individuals/family have been located, the MFA entry on the spreadsheet can be anonymised, i.e. remove all patient identifiable information. The remaining information can be used for statistical purposes only.

## SCOTTISH AMBULANCE SERVICE

### Process for managing Confidential MFA1 or CME1 requests in Emergency Medical Despatch Centre (EMDC)

*The Service is committed to protecting vulnerable children and adults through inter agency joint working and data sharing. The following flowchart describes the simple process required by the Service in an attempt to identify missing children who have “disappeared” and where there is significant welfare or protection concerns (including an unborn child).*

These official requests will come from **NHS Scotland** “Missing Family Alerts” (MFA1 forms) or “Children Missing from Education” (CME1 forms) which is a national project operating under **Scottish Executive** guidance 2005.

The Emergency Medical Despatch Centre (EMDC) North (based in Inverness) will receive all such alerts and ensure that the other two Scottish EMDCs are informed. It is also important to notify W Mason so that the National Children’s Services Steering Group can keep the system under review. Requests from elsewhere in the United Kingdom will be handled similarly.

On receipt of a request, all EMDCs will undertake a database search on the details provided. If the child is found, then the nurse lead (a directory will be provided) of the Health Board area where the child is found will be notified, including any pertinent information. If the child is not immediately identified, then an internal EMDC notice should be posted alerting staff to the concern. At the same time and if possible with the information provided, the details should be tagged. A further two, monthly databases searches will be undertaken to ensure that the case has not been registered.

*The complete process is time limited to 3 months and at this time the case will be deactivated.*

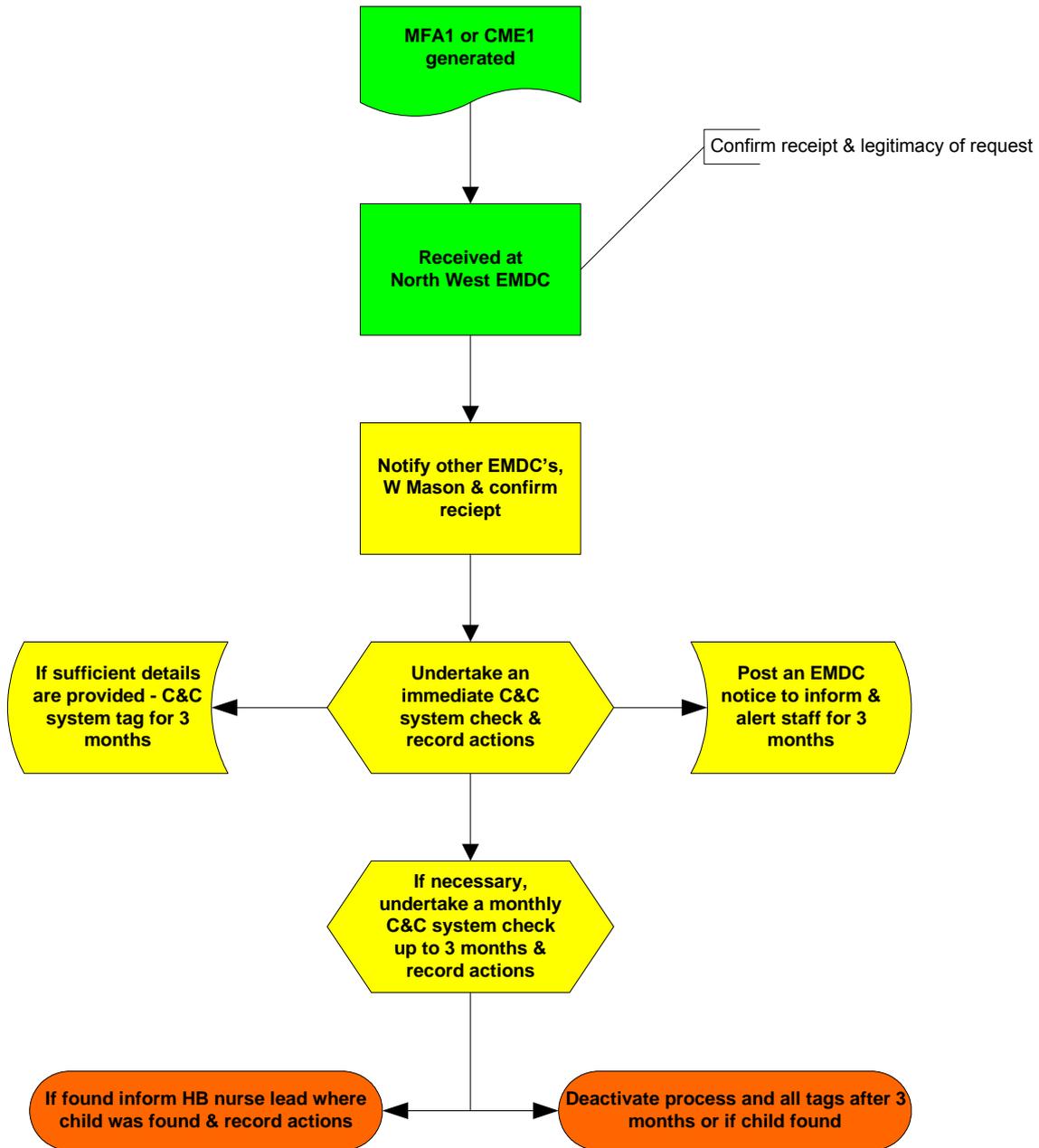
Important points to emphasise:

1. The process is confidential to the participating agencies/ people
2. The process is part of wider protection arrangements for vulnerable people and it is essential that information is shared with legitimate organisations/ people for that purpose
3. If a child is found when the Service are in attendance, it is important not to reveal this to the child or any adult present – this may create a situation where the child “disappears” again.
4. The NHS scheme is currently coordinated by Lead Child Protection Advisor Protection Advisor Sandie Young based at Raigmore Hospital and she will liaise closely with our NW lead, Jackie Noble on any difficulties that may arise in the introductory period.
5. Case numbers are likely to remain small, as the system has been created to identify only those children at significant risk.

Contact details for North EMDC:

Don Cameron  
Head of EMDC  
Raigmore Gardens  
Inverness  
IV2 3UL  
Tel – 01463 554204

# SCOTTISH AMBULANCE SERVICE EMDC FLOWCHART



## **PSD PROCEDURE FOLLOWING RECEIPT OF A MISSING FAMILY ALERT FORM (MFA1) or CHILD MISSING FROM EDUCATION FORM (CME1)**

### **Practitioner Services**

Practitioner Services, which is part of National Services Scotland, is responsible for making payments to all Family Health Service (FHS) Contractors in Scotland, Doctors, Dentists, Pharmacists and Opticians, and also for maintaining indices of patients registered with doctors and dentists. These functions are performed on behalf of all NHS Boards in Scotland. The Division also supports the Scottish Executive Health department in implementing changes in legislation and contractual arrangements for FHS contractor groups.

*The three Regional Medical Offices within Practitioner Services provide a range of support in relation to General Medical Services (GMS). The teams register patients with family doctors on the population database, the Community Health Index (CHI), maintain the integrity of the index, transfer the medical records of register patients and make payments under the terms of the new General Medical Contract. The teams also monitor and review the payments made, which include verification with patients that the service has been provided.*

More information can be provided on:

[www.show.scot.nhs.uk/psd](http://www.show.scot.nhs.uk/psd)

- On receipt of MFA1 or CME1, PSD Aberdeen will send a copy to PSD Edinburgh (FAO Rosalind Dolan) & Glasgow (FAO Janet Mair).
- All 3 offices will check CHI for missing family.
- If traced, PSD will contact the nominated nurse consultant (*list to be distributed with Protocol*) in the Health Board area in which the family has been found.
- If family not traced, the Form should be filed in pending folder & a check made on CHI for family on a weekly basis. (Follow above procedure if traced).
- *NB. If a family is found, the nurse consultant who first raised the MFA1 or CME1 Form will advise PSD by re-circulating the original MFA1*
- MFA1 or CME1 form should be destroyed 3 months after first received or on receipt of "Family Found" information.

## **POLICE RESPONSE TO A REFERRAL FROM NHS**

On receipt of a report of a missing person the police will carry out an initial risk assessment based on all the known circumstances at that time.

Missing person will be classed as either:

- Low Risk
- Medium Risk
- High Risk

The risk assessment will determine the resources dedicated to the enquiry. In all cases the report will remain live until the person is traced.

Without exception a “missing person marker” will be placed on the Police National Computer (PNC).

Consideration will be given to notification and liaison taking place with the Police National Missing Persons Bureau (PNMPB) and the National Missing Persons Helpline (NMPH).

PNMPB complements rather than replaces the current missing person notification to PNC. It serves the United Kingdom Police Forces and overseas agencies. It is able to offer advice in relation to Government and non-Government agencies, which may be of assistance.

NMPH is another organisation, which is dedicated to helping missing persons, their families and those who care for them.

The police have access to numerous databases, which can assist in gathering information on a person reported missing. Not all will be used in every case and the assessment of risk may determine which are used. In most cases the following will be checked to obtain all information available including potential addresses and associations.

- Scottish Criminal Record office (SCRO)
- The Police National Computer (PNC).
- Internal police databases such as Command and Control (names differ as different suppliers to forces)
- Scottish Criminal Intelligence Database (SID)

Others databases and sources, which may be interrogated, are: -

- Historic intelligence database
- Voters roll
- Health
- Social Work
- Education
- Housing
- Department of Work and Pensions (DWP)
- Financial databases and institutions
- Driver and Vehicle Licensing Agency (DVLA)
- Prison



### ACCESSING INFORMATION FROM INLAND REVENUE TO ASSIST WITH ENQUIRIES ABOUT A CHILD'S SAFETY AND WELFARE

#### SUMMARY

When the Child Benefit Office was part of the Department of Work and Pensions (DWP), it had the legal authority to share information in the public interest, including for the purposes of assisting with child protection enquiries. Following its transfer from DWP to the Inland Revenue, the Child Benefit Office was legally prohibited from sharing information for such purposes. This is because of the strict confidentiality laws which exist to protect the privacy of data provided by the Inland Revenue's customers.

Section 63 of the Children Act 2004 amends Schedule 5 of the Tax Credit Act, meaning that the Inland Revenue now has lawful authority to provide local authorities with the limited amount of information relating to children, i.e. names and address(es). The new Paragraph 10A of the Tax Credit Act at sub-paragraph (2)(b) allows for information to be supplied to any local authority in Scotland for use for the purpose of any enquiry or investigation under Chapter 3 of Part 2 of the Children (Scotland) Act 1995 relating to the welfare of the child. This information can only be requested where it is needed in order for the local authority to fulfil their statutory responsibilities to safeguard and promote the welfare of children.

Full details of the provision at s63 of the Children Act 2004 can be found at <http://www.uk-legislation.hmso.gov.uk/acts/acts2004/40031--f.htm#63>.

Section 63 mirrors the other information-sharing gateways in Schedule 5 of the Tax Credit Act 2002, all of which contain provisions to ensure that the information is used only for the purposes for which it is provided. It is intended that local authorities should only access information from the Inland Revenue in a very small number of cases, i.e. where there are urgent concerns about a child or family who is missing and all other possible sources of information, e.g. schools, health services, etc have been exhausted. This is because, in many cases, the information held by the Inland Revenue may be inaccurate or out of date.

Health staff, especially those doing Child Protection work are asked to familiarise themselves with the provisions of s63 of the Children Act 2004 and, in particular note the following: information should only be sought from the Inland Revenue where there are urgent concerns about a child or family that is missing and all more immediate sources of information have been exhausted. Separate work is also under way to improve the NHS response to finding Missing Families.

Information obtained from the Inland Revenue under s63 should only be passed on to other agencies for the purposes for which it was obtained (i.e. enquiries about a child's safety or welfare) It is an offence to disclose this information for any other purpose and, if a person is found guilty, they can be liable to a fine or imprisonment.

The route to access cannot come direct from NHS Child Protection nurse consultants, but needs to go through the local keeper of the Record of the Child Protection register. This is because Scottish Executive have provided the Inland Revenue with a list of contacts and addresses of Scottish Keepers. The process for accessing requires the Child Protection keeper / nominated person ie coordinator to make the request. Inland Revenue will then return the call to ensure the information is being disclosed to the appropriate person.

So from their view access is limited to those people and it also means that there is some scrutiny to ensure any request meets the criteria as set out in the legislation.

This is the same in Scotland as for England.

For further information: enquiries should be made to  
Vijay Patel  
Children and Families Division  
Scottish Executive

Tel 0131 244 0272  
Fax 0131 244 0978

Email [vijay.patel@scotland.gsi.gov.uk](mailto:vijay.patel@scotland.gsi.gov.uk)

Or:  
Fiona Bisset  
Data Protection and Confidentiality  
Scottish Executive Health Department

Tel 0131 244 2362

[Fiona.Bisset@scotland.gsi.gov.uk](mailto:Fiona.Bisset@scotland.gsi.gov.uk)

## NHS Missing Family Alert Distribution & Contact List

Health Board	Name	Address/phone	e-mail
1. Argyll & Bute (NHS Highland)	Kath Fitzgerald	NHS Argyll & Bute Aros Lochgilphead Argyll PA32 8LD 01546 605636 07901 510199	<a href="mailto:Kath.fitzgerald@nhs.net">Kath.fitzgerald@nhs.net</a>
2. Ayrshire	Maureen Bell	NHS Ayrshire & Arran Dept of Child Health Ayrshire Central Hospital Irvine KA12 8SS 01294 323431 07788 566871	<a href="mailto:Maureen.bell@aapct.scot.nhs.uk">Maureen.bell@aapct.scot.nhs.uk</a>
3. Borders	Eleanor Kerr	Child Protection Unit Albert Place Galashiels TD1 3DL 01896 662762 07789 778710	<a href="mailto:Eleanor.kerr@borders.scot.nhs.uk">Eleanor.kerr@borders.scot.nhs.uk</a>
4. Dumfries & Galloway	Patricia Gillespie	Child Health Nithbank Dumfries DG1 2SD 01387 244572 07702 219066	<a href="mailto:Patricia.gillespie@nhs.net">Patricia.gillespie@nhs.net</a>
5. Fife	Barbara Rowland	Greenfields Clinic Lynebank Hospital Halbeath Road Dunfermline KY11 4UW Fife 01383 565395 07785 588371	<a href="mailto:BarbaraRowland@fife-pct.scot.nhs.uk">BarbaraRowland@fife-pct.scot.nhs.uk</a>
6. Forth Valley	Maureen Berry	9 Gladstone Place Stirling FK8 2AH 01786434770 07787 152107	<a href="mailto:Maureen.berry@fvpc.scot.nhs.uk">Maureen.berry@fvpc.scot.nhs.uk</a>
7. Glasgow	Janice Brown	Child Protection Unit RHSC Child Protection Unit 2 <sup>nd</sup> Floor Medical Records Building Dalnair Street Glasgow, G3 8SJ 0141 201 9253 07767 811176	<a href="mailto:Janice.brown@yorkhill.scot.nhs.uk">Janice.brown@yorkhill.scot.nhs.uk</a>

8. Grampian	Phyllis Smart	Combined Child Health Royal Aberdeen Children's Hospital Westburn Rd Aberdeen AB25 5ZG 01224 559529 07623 876069	<a href="mailto:Phyllis.smart@nhs.net">Phyllis.smart@nhs.net</a>
9. Highland	Sandie Young	NHS Highland Morven House Raigmore Hospital Inverness IV2 3UJ 01463 701309 07748 761708	<a href="mailto:Sandie.young@hpct.scot.nhs.uk">Sandie.young@hpct.scot.nhs.uk</a>
10. Lanarkshire	Anne Neilson	Dept of Community Child Health Roadmeetings Hospital Goremire Rd Carluke ML8 4PS 01555 772271 Ext 220 07748 703719	<a href="mailto:Anne.neilson@lanarkshire.scot.nhs.uk">Anne.neilson@lanarkshire.scot.nhs.uk</a>
11. Lothian	Jan Ramchurn	NHS Lothian Vega Building Clock Tower Estate South Gyle Crescent EH12 9LB 0131 316 6676 07770 410739	<a href="mailto:Jan.ramchurn@lpct.scot.nhs.uk">Jan.ramchurn@lpct.scot.nhs.uk</a>
12. Orkney	John Rodwell	The Health Centre New SCAPA Rd Kirkwall KW15 1BX 01856 761565 07884 114511	<a href="mailto:john.rodwell@nhs.net">john.rodwell@nhs.net</a>
13. Shetland	Ann-Marie Edge	NHS Shetland CHP Offices Lerwick Health Centre South Rd Lerwick Shetland ZE1 0RB 01595 743096	<a href="mailto:annmarie.edge@shb.shetland.scot.nhs.uk">annmarie.edge@shb.shetland.scot.nhs.uk</a>
14. Tayside	Anne Burgham	Ashludie Hospital Victoria Street Monifeith Dundee DD5 4HQ 01382 527865	<a href="mailto:Anne.burgham@nhs.net">Anne.burgham@nhs.net</a>

15. Western Isles	Alison McVie	Balivanich Clinic Benebcula Western Isles HS7 5LA 01870 602266 07769 932168	<a href="mailto:Alison.MacVie@wihb.scot.nhs.uk">Alison.MacVie@wihb.scot.nhs.uk</a>
16. NHS24	Mary Austin	Norseman house 2 Ferrymuir South Queensferry EH30 9QZ 0131 3004359 07817 543721	<a href="mailto:Mary.austin@nhs24.scot.nhs.uk">Mary.austin@nhs24.scot.nhs.uk</a>
17. Scottish Ambulance Service	Don Cameron	Head of EMDC Raigmore Gardens Inverness IV2 3UL 01463 732000	<a href="mailto:dcameron@scotamb.co.uk">dcameron@scotamb.co.uk</a>
18. Practitioner Services Department	Marj McAvoy	Operations Manager PSD Bridge View North Esplanade West Aberdeen AB11 5QF 01224 358481	<a href="mailto:marj.mcavoy@psdaberdeen.csa.scot.nhs.uk">marj.mcavoy@psdaberdeen.csa.scot.nhs.uk</a>

#### **CME Missing Family Alert Contact**

Children Missing from Education	Graeme McNaught	Project Director CME (Children Missing From School) 23 Walker Street Edinburgh EH3 7HX 0131 241510	<a href="mailto:Graeme.mcnaught@scotland.gsi.gov.uk">Graeme.mcnaught@scotland.gsi.gov.uk</a>
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## Appendix 1

### CHILDREN MISSING FROM KNOWN ADDRESS (MKA 1)

This form should be completed when a Health Visitor, Midwife, School Nurse or other caseload holder providing care to a child, becomes aware that a child/unborn child is missing from a known address and they have no forwarding information

All reasonable and practical effort should be undertaken to locate the family. If at the end of local checks you still have no forwarding information, please discuss the situation with the Child Protection Nurse within your locality.

Concerns regarding unmet need, vulnerability or protection may necessitate the raising of a Missing Family Alert (MFA 1)<sup>15</sup>

**Child's Name:** **AKA:**

**Child's DOB:**

**Date Child Last Seen:**

**Child's Last Known Address:**

CHECKS WITHIN THE LOCALITY	YES	NO
• Contact local Child Health Department to check IT systems (PAS, CHI, SIRS)	<input type="checkbox"/>	<input type="checkbox"/>
• Contact Nursery/School attended. (Children Missing Education Guidelines may have been initiated. Scottish Executive 2005)	<input type="checkbox"/>	<input type="checkbox"/>
• Check HV/SN/GP Practice with whom registered	<input type="checkbox"/>	<input type="checkbox"/>
• Check with Housing as appropriate <sup>16</sup>	<input type="checkbox"/>	<input type="checkbox"/>
• Check with Social Work as appropriate	<input type="checkbox"/>	<input type="checkbox"/>
• Check with family members as appropriate	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments:

Discussed with Child Protection Nurse:

Signed:

Date:

NB. This form should be filed with the child's records and an entry made in the chronology

<sup>15</sup> The Nurse Consultant for Child Protection, or equivalent, for your Health Board will raise the MFA 1 in consultation with the Caldicott Guardian.

<sup>16</sup> Appropriateness will be determined by professional judgement  
July 2006

**Appendix 2**

DATE OF ISSUE:

DATE OF RE-ISSUE (If applicable):

**CONFIDENTIAL – MISSING FAMILY ALERT FORM (MFA1)**

<b>FAMILY NAME:</b>		<b>FAMILY AKA:</b>	
<b>MOTHER</b>		<b>D.O.B.</b>	<b>CHI:</b>
<b>FATHER</b>		<b>D.O.B.</b>	<b>CHI:</b>
<b>PARTNER</b>		<b>D.O.B.</b>	<b>CHI:</b>

<b>CHILDREN'S NAMES</b>			
<b>1<sup>ST</sup> CHILD</b>		<b>D.O.B.</b>	<b>CHI:</b>
<b>2<sup>ND</sup> CHILD</b>		<b>D.O.B.</b>	<b>CHI:</b>
<b>3<sup>RD</sup> CHILD</b>		<b>D.O.B.</b>	<b>CHI:</b>
<b>4<sup>TH</sup> CHILD</b>		<b>D.O.B.</b>	<b>CHI:</b>

**ADDRESS (LAST KNOWN):**

**Risk Factors (Identify all known risks)**

On Child Protection Register	<input type="checkbox"/>	Parenting Concerns	<input type="checkbox"/>	Vulnerability	<input type="checkbox"/>
Child Protection Order Pending	<input type="checkbox"/>	Unborn	<input type="checkbox"/>	Prostitution	<input type="checkbox"/>
Adult Substance Misuse	<input type="checkbox"/>	Previous LAC	<input type="checkbox"/>	Travelling family	<input type="checkbox"/>
Domestic Abuse	<input type="checkbox"/>	Refugee	<input type="checkbox"/>	Paediatric Health	<input type="checkbox"/>
Adult Learning Disability	<input type="checkbox"/>	Homeless	<input type="checkbox"/>	Child Psychiatry	<input type="checkbox"/>
Adult Mental Health Issues	<input type="checkbox"/>	Learning Disability	<input type="checkbox"/>	Physical Disability	<input type="checkbox"/>

<b>FURTHER DETAILS AND CLINICAL INFORMATION HELD ON FILE FROM:</b>	<b>NAME:</b> <b>ADDRESS:</b> <b>TEL:</b> <b>HEALTH BOARD:</b>
--	--

**SHOULD YOU LOCATE THIS FAMILY, PLEASE CONTACT THE CHILD PROTECTION NURSE CONSULTANT IN YOUR AREA WHO WILL INFORM THE NURSE CONSULTANT IN THE HEALTH BOARD AREA RAISING THE ALERT**

<b>STAFF RISKS:</b> (Detail any relevant factual information)	
--	--

<b>REFERRED TO POLICE AS MISSING PERSON</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	<b>DATE REFERRED:</b>
---	-----------------------

- NHS staff in areas of identified risk will receive this MFA1
- Staff in receipt of this MFA 1 should make it available in a confidential area for colleagues to read.
- NHS staff, on receipt of the MFA1, should check the family details against case files held.
- If the family are located contact the Child Protection Nurse Consultant or equivalent in your Health Board Area and the named person on the MFA1 for further details and health records.
- Destroy the MFA1 after 3 months or EDD plus 3 months for unborns or on receipt of 'Family Found' information.

<b>FAMILY FOUND:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	<b>FOUND BY (Please indicate)</b> Police <input type="checkbox"/> Social Work <input type="checkbox"/> Health <input type="checkbox"/> Education <input type="checkbox"/> SAS <input type="checkbox"/> NHS 24 <input type="checkbox"/> Practitioner Services <input type="checkbox"/> Other <input type="checkbox"/>
<b>DATE FOUND:</b>	

**NATIONAL AUDIT/ADMINISTRATION**

At the end of 3 months the Nurse Consultant for each Health Board will send a copy of the MFA 1 detailing if family are not found/found and by whom in their area to: Sandie Young, Lead Child Protection Advisor, NHS Highland, Morven House, Raigmore Hospital, Inverness, IV2 3UJ

**Appendix 3**  
DATE OF ISSUE:

**CONFIDENTIAL – CHILDREN MISSING EDUCATION FORM (CME1)**

Children Missing from Education (Scotland) is a national co-ordinating body to track and trace children who disappear from view from education services. In situations where children have not been located after the usual checks have been made and where there are concerns in respect of unmet need, vulnerability or abuse, CME (Scotland) will inform the Scottish Executive and the children will be included in the national NHS Missing Family Alert System.

<b>FAMILY NAME:</b>		<b>FAMILY AKA:</b>		
<b>MOTHER</b>		<b>D.O.B.</b>		<b>CHI:</b>
<b>FATHER</b>		<b>D.O.B.</b>		<b>CHI:</b>
<b>PARTNER</b>		<b>D.O.B.</b>		<b>CHI:</b>

<b>CHILDREN'S NAMES</b>				
<b>1<sup>ST</sup> CHILD</b>		<b>D.O.B.</b>		<b>CHI:</b>
<b>2<sup>ND</sup> CHILD</b>		<b>D.O.B.</b>		<b>CHI:</b>
<b>3<sup>RD</sup> CHILD</b>		<b>D.O.B.</b>		<b>CHI:</b>
<b>4<sup>TH</sup> CHILD</b>		<b>D.O.B.</b>		<b>CHI:</b>
<b>ADDRESS OF PREVIOUS SCHOOL:</b>				

<b>Risk Factors (Identify all known risks)</b>					
On Child Protection Register	<input type="checkbox"/>	Parenting Concerns	<input type="checkbox"/>	Vulnerability	<input type="checkbox"/>
Child Protection Order Pending	<input type="checkbox"/>	Unborn	<input type="checkbox"/>	Prostitution	<input type="checkbox"/>
Adult Substance Misuse	<input type="checkbox"/>	Previous LAC	<input type="checkbox"/>	Travelling family	<input type="checkbox"/>
Domestic Abuse	<input type="checkbox"/>	Refugee	<input type="checkbox"/>	Paediatric Health	<input type="checkbox"/>
Adult Learning Disability	<input type="checkbox"/>	Homeless	<input type="checkbox"/>	Child Psychiatry	<input type="checkbox"/>
Adult Mental Health Issues	<input type="checkbox"/>	Learning Disability	<input type="checkbox"/>	Physical Disability	<input type="checkbox"/>

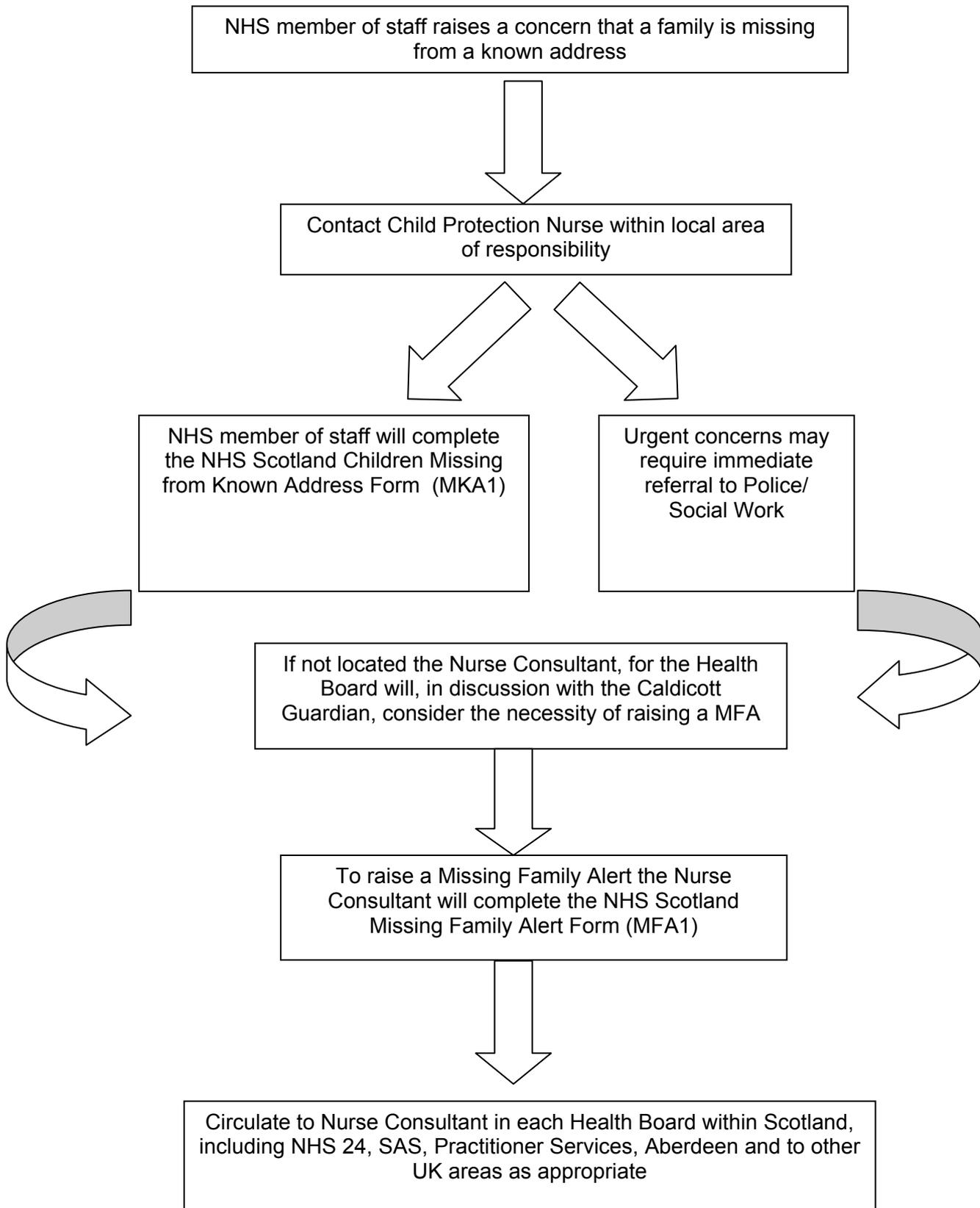
<b>STAFF RISKS: (Detail any relevant factual information)</b>	
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- NHS staff in areas of identified risk will receive this CME 1
- Staff in receipt of this CME1 should make it available in a confidential area for colleagues to read.
- NHS staff, on receipt of the CME1, should check the family details against case files held.
- If the family are located contact the Child Protection Nurse Consultant or equivalent in the Health Board Area in which the family have been located.
- On notification that the child/ren have been located, the Child Protection Nurse Consultant will contact Graham McNaught at CME (Scotland).
- CME (Scotland) will advise the nurse consultant of the CME named person in their locality who should be informed and who will follow up the child/ren's education requirements.
- The Nurse Consultant in the area in which the child is located will ensure appropriate NHS services are provided.
- The CME1 should be destroyed after 3 months.

<b>FAMILY FOUND:</b> YES <input type="checkbox"/> NO <input type="checkbox"/>	<b>FOUND BY (Please indicate)</b>		
	Police <input type="checkbox"/>	Social Work <input type="checkbox"/>	Health <input type="checkbox"/>
<b>DATE FOUND:</b>	Education <input type="checkbox"/>	CME <input type="checkbox"/>	SAS <input type="checkbox"/>
	Practitioner Services <input type="checkbox"/>	NHS 24 <input type="checkbox"/>	
		Other <input type="checkbox"/>	

<b>NATIONAL AUDIT/ADMINISTRATION</b>
At the end of 3 months the Nurse Consultant for each Health Board will send a copy of the NHS/CME detailing if family are not found/found and by whom in their area to: Sandie Young, Lead Child Protection Advisor, NHS Highland, Morven House, Raigmore Hospital, Inverness, IV2 3UJ

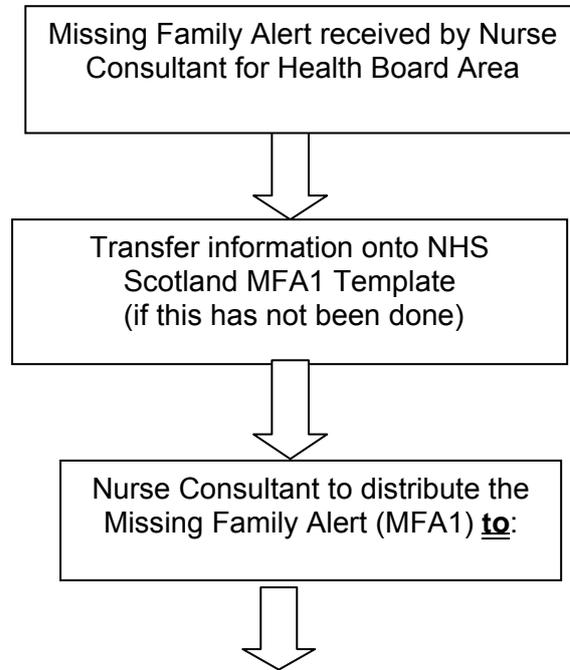
## RAISING A MISSING FAMILY ALERT (MFA) (FLOW CHART 1)



**Appendix 5**

**DISTRIBUTION FOLLOWING RECEIPT OF A MFA  
(FLOW CHART 2)**

On receipt of a MFA1 the receiving Nurse Consultant should follow this diagrammatic process within his/her health board area.<sup>17</sup>



- **All Senior, Specialist or Designated Nurses for Child Protection.**
- **All A&E Departments.**
- **To Lead Nurse or equivalent working in areas of specified risk in both acute and community sectors (please note for further reference)**

- |                        |                          |                  |                          |                      |                          |                           |                          |
|------------------------|--------------------------|------------------|--------------------------|----------------------|--------------------------|---------------------------|--------------------------|
| Adult Mental Health    | <input type="checkbox"/> | Midwifery        | <input type="checkbox"/> | Travelling Families  | <input type="checkbox"/> | LAC                       | <input type="checkbox"/> |
| Children's Wards       | <input type="checkbox"/> | Homeless         | <input type="checkbox"/> | Refugees             | <input type="checkbox"/> | School Nursing            | <input type="checkbox"/> |
| Adult Substance Misuse | <input type="checkbox"/> | Domestic Abuse   | <input type="checkbox"/> | Learning Disability  | <input type="checkbox"/> | Physical Disability       | <input type="checkbox"/> |
| Health Visiting        | <input type="checkbox"/> | Child Psychiatry | <input type="checkbox"/> | Child Health Dept(s) | <input type="checkbox"/> | Adult Learning Disability | <input type="checkbox"/> |

Other (Specify):

<sup>17</sup> The Nurse Consultant distributing the MFA1 within his/her Health Board to retain this form as an aide memoir to assist with alerting previously informed staff if the family is locate

## Children Missing from Education (Scotland)

### Keeping in Touch – Gypsy and Traveller Children

#### Good Practice when there are concerns for Gypsy and Traveller children's safety and wellbeing if they lose contact with schools

*“The diversity in pupils’ lifestyles today presents a challenge to education providers in their push to support inclusion for all”.*

*(Inclusive Educational Approaches for Gypsies and Travellers – Guidance for Local Authorities and Schools, Scottish Executive, 2003)*

#### 1. Introduction

- 1.1 It is important to be aware of the diversity of lifestyles in Scotland which an inclusive education system must acknowledge and embrace. Gypsies and Travellers have a cultural way of life which is diverse and also different from those of the majority of pupils and therefore flexibility and solution-focused approaches are essential in working effectively with them in the best interests of Gypsy and Traveller children. To ensure that they and their families do not become disengaged or alienated from the education system a reflective and sensitive approach is crucial.
- 1.2 CME (Scotland) tracks and traces pupils to ensure children who have disappeared from view are safe and well. It is then for local services to consider the most appropriate approaches to working with families to continue to ensure their wellbeing, and appropriate access to education.
- 1.3 Gypsy and Travellers families frequently move around the country for occupational, cultural and family reasons. It is therefore to be expected that children will disappear from view of a school for periods of time. There are resources on <http://www.scottishtravellered.net> which provide advice for teachers and local authorities on good practice in keeping in touch with families when this happens.
- 1.4 In addition, all parents, including Gypsy and Traveller parents, have the option to provide for their children's education in ways other than sending them to school. It is for education authorities to consider that the education provided is suitable for the child (where a child has first been registered at a school before home-education is considered).

**1.5 CME (Scotland) will therefore only become involved in tracing Gypsy/Traveller children when there is a concern about their safety and wellbeing.**

## **2. Definition**

### **Gypsy/Traveller families – avoiding stereotypes**

2.1 In Scotland, the terms Gypsy and Traveller broadly refer to three distinctive groups of Travellers. These are:

- *Gypsy/Travellers the slash between these two terms reflects the Scottish Executive's inclusive approaches towards people self-identifying as a Gypsy/Traveller, a Scottish Traveller, as an English Traveller, as Roma or as an Irish Traveller. People from these groups have distinctive histories and cultures and many are committed to living and maintaining their particular ways of life. (see below regarding ethnic minority status)*
- *Occupational Travellers include show/fairground and circus Travellers who regard themselves as business communities and who travel for work reasons. Occupational Traveller communities do not regard themselves as belonging to a minority ethnic group.*

2.2 Only Roma, English Travellers and Irish Travellers have statutory protection, under the Race Relations (Amendment) Act 2000. However, the Scottish Executive acknowledges that all Gypsy/Travellers require the same level of protection from discrimination as all of Scotland's minority ethnic groups and have advised that Gypsy/Travellers should, therefore, be treated as having minority ethnic status, and all that implies under the Race Relations (Amendment) Act 2000.

2.3 Gypsies and Travellers are recognised by the European Parliament as being the group most socially excluded from school education and with the highest levels of non-literacy. Male Gypsies and Travellers perform well below educational levels expected even when deprivation and other factors are taken into account

2.4 Not all Gypsies and Travellers travel regularly as part of their lifestyle. Some live settled lives in houses, choosing to live in them all year round or to travel part of the time. Gypsies and Travellers who are tenants on designated sites often stay for increasing periods. However, some Gypsy and Travellers do experience difficulties in finding sites and, when staying on non-designated sites, may be evicted without warning, resulting in disruption to all other aspects of their lives, including schooling.

## **3. The challenge of keeping in touch**

3.1 It is difficult to gather accurate data about the number of Gypsy and Traveller families within Scotland. The September 2004 census ethnicity data revealed that there were 581 Gypsy and Traveller children in publicly funded Scottish schools. However, this does not account for those travelling and not on a school roll at the time of the census. Nor does it account for those pupils who did not record themselves as Gypsies and Travellers.

3.2 There are sometimes Gypsy/Traveller sensitivities around the sharing of information about family background with schools. Not all Gypsies Travellers wish to divulge their identity at

school, with the result that accounts of educational achievements among Gypsies and Travellers in Scotland must be treated with caution.

- 3.3 There are often high levels of absenteeism or irregular attendance at school among Gypsy and Traveller children. The reasons for this are complex and may include bullying; the challenges for pupils of disrupted education and poor literacy; family priorities may focus on work for older children or families may have traditional values and distrust the influence schools and peers may have on children. Building positive relationships with Gypsy and Traveller children and their parents requires persistence and flexibility, but where a designated member of staff (e.g. Gypsy and Traveller support for learning teacher, pastoral care or home-school link worker) consistently offers communication and support this can help to build trust.
- 3.4 Experience of moving to new schools and constantly having to provide information or have children assessed again and again, may discourage Gypsy/Traveller families from enrolling in school when they move to a new area. Where schools share information effectively and quickly, this can be avoided, and result in children settling quickly and benefiting from appropriate and consistent support.
- 3.5 Schools that take a personal approach to communication with Gypsy/Traveller families also help to overcome the possibility that older generations have poor literacy, preferring an oral tradition. Letters and school information can therefore be conveyed in discussion by phone or through visits. It is helpful if attention is paid to positive communication in this way, rather than only resorting to these measures when there is a problem.
- 3.6 Older children whose families travel experience difficulties in keeping up portfolio work for standard grades and in timetabling of exams. However, flexible approaches enable children to stay in touch with schools ICT supported learning approaches are being developed. Gypsy/Traveller children may benefit from flexible learning approaches and vocational learning may also be a positive choice.

#### **4. Concerns for Gypsy/Traveller Children's Safety and Wellbeing**

- 4.1 Schools that get to know children and their parents using the approaches described above are in a much stronger position to assess concerns for a child's safety and wellbeing.
- 4.2 School staff, home-school link staff and outreach teaching staff should be familiar with their authority's child protection procedures (see also *Safe and Well handbook for child protection in education*).
- 4.3 While a child is attending school, any concerns should be recorded and responded to appropriately.
- 4.4 Schools should also listen to children and parents, and through positive relationships (as with any other family), build a picture of family links, travelling patterns and the level of stability of current living arrangements (e.g. settled, on a designated site or on an unofficial site). This picture should be recorded and may be helpful when keeping in touch or if tracing children becomes necessary.
- 4.5 If a child has not come to school, and their absence is unexpected, the initial response should be to contact the parent, as with any other child. However, if the family have moved on unexpectedly, a risk assessment should be carried out, in collaboration with the Traveller teacher where possible, to consider the level of concern. If there have been previous

concerns for a child's safety and wellbeing, this must be a factor in the risk assessment (see section: Level of Concern).

- 4.6 If a family's pattern of travelling leads a school to expect them to return after a period of travelling, and the child does not arrive, the same risk assessment process should be considered in consultation with the Traveller teacher and/or local site manager.
- 4.7 Where there is a low level of concern, schools and education authorities should still seek to locate families so that information between schools and services can be shared, to support the family (see box: Contacts and Networks)
- 4.8 Where there is a higher level of concern, when local efforts to trace children have been unsuccessful, the authority designated manager for Children Missing from Education should consider referral to CME Scotland for national co-ordination.

## **5. Risk Assessment**

- 5.1 Once a pupil from a Gypsy and Traveller background is believed to have gone missing from education the level of concern should be assessed in discussion with other staff who know the child or family. From this a plan of further action should follow local procedures. CME (Scotland) accepts referrals for Gypsy and Traveller children when there are concerns about the child's safety and well being. As with all other children, whenever there are child protection concerns or the child is on the Child Protection Register, local child protection procedures should be followed.
- 5.2 When assessing the risk factors in determining whether to refer a Gypsy and Traveller child to CME (Scotland) professional judgement and relevant information sharing should occur. This may require communication between adult and children's services to determine any risk to the child of the family moving on without the support of existing services. All staff should be made aware of local procedures for raising a concern about the safety and well being of a Gypsy and Traveller pupil. CME (Scotland) is happy to discuss cases prior to referral to offer advice and guidance.
- 5.3 The definition of a 'child in need' from the Children (Scotland) Act 1995 should be used. The child may have a Co-ordinated Support plan (CSP) or a Record of Needs. Other specific concerns may include the child coming from a family where there are concerns over domestic violence, substance misuse or mental health issues. The child may be a young carer, have emotional or behaviour problems or be a looked after child. (This is not an exhaustive list). Due sensitivity must be used as usual categories are unlikely to fit with a Gypsy and Traveller child's experience.

## **6. Referring to CME (Scotland)**

- 6.1 When it has been agreed at local authority level that there are other concerns usual procedures for referring to CME (Scotland) should be followed. (See guidelines in *Safe and Well child protection in education handbook*)
- 6.2 If CME (Scotland) accept the referral all usual procedures for tracking and tracing will be followed. (See guidelines in *Safe and Well child protection in education handbook*)

## **Guidance and good practice**

‘Safe and Well’ <http://www.scotland.gov.uk/Publications/2005/08/0191408/14093>

Children Missing Education - ensuring they are safe and well  
<http://www.scotland.gov.uk/Publications/2005/08/0191408/14154>

Specific advice on developing good practice to include Gypsies and Travellers can be found in:

<http://www.scottishtravellered.net/>

8<sup>th</sup> and 9<sup>th</sup> term Reports of the Advisory Committee on Scotland’s Travelling People (Scottish Executive, 1998, 2000)

The Equal Opportunities Committee Inquiry into Gypsy Travellers and Public Sector Policies (2001)

Race Equality Advisory Forum Report (2001)

Inclusive Educational Approaches for Gypsies and Travellers within the context of Interrupted Learning. (Learning and Teaching Scotland 2003)

### **DfES: Developing a policy for children not receiving education**

#### **1. Developing a policy for children not receiving education**

##### **1.1. Why do children go missing from education?**

1.1.1. When developing a policy for children not receiving education, local authorities should consider the reasons why children go missing to help them develop systems to close the gaps. Children can go missing when they fall out of the education system and there is no systematic process in place to identify them and ensure they re-engage with appropriate provision (which may include services outside of school to meet their needs). Their personal circumstances or those of their families may contribute to the withdrawal process and the failure to make a transition. For example they may:

- fail to start appropriate provision and hence never enter the system;
- cease to attend, due to illegal exclusion or withdrawal; or
- fail to complete a transition between providers (e.g. being unable to find a suitable school place after moving to a new local authority area, or after leaving a custodial establishment).

##### **1.2. Vulnerable groups**

1.2.1. Some children who experience certain life events could be more at risk of not receiving education. These can include:

- young people who have committed offences;
- children living in women's refuges;
- children of homeless families, perhaps living in temporary accommodation, house of multiple occupancy or Bed and Breakfast;
- young runaways;
- children with long term medical or emotional problems;
- children affected by substance misuse;
- unaccompanied asylum seekers;
- children of refugees and asylum seeking families;
- children in new immigrant families, who are not yet established in the UK and may not have fixed addresses;
- children who have been trafficked to, or within the UK;
- looked after children;
- children who are privately fostered;
- young carers;
- teenage mothers; and
- children who are permanently excluded from school, particularly those

excluded illegally, e.g. for problematic behaviour or offending (see paragraph 2.2.5 for more information on excluded pupils).

- 1.2.2. When local authorities identify/are made aware of children/young people in any of these groups who may not be receiving education, they should seek advice from the relevant specialist team/partner agency on how best to proceed.

### **Potential vulnerability due to high mobility**

- 1.2.3. Children from families of members of the Armed Forces are likely to experience high mobility both within and outside the UK. Moves can be made at quite short notice, with future home address and school not known until just before the move. Schools and local authorities can make enquiries through the MOD Children's Education Advisory Service (CEAS). CEAS can also liaise between local authorities, and with devolved authorities in Scotland, Wales and Northern Ireland. Service Children's Education (SCE) also keeps records of all pupils in Service schools overseas. Enquiries about children in Service schools overseas should also be made via CEAS. The CEAS helpline can be contacted on 01980 618244.
- 1.2.4. Children in Gypsy, Roma and Traveller families often have a mobile lifestyle and local authority Traveller Education Support Services (TESS) already advise schools on the best strategies to include these children and promote their achievement and engagement in school activities. There are times when the high mobility of some of these children means they can be more at risk of going missing from education, for example, highly mobile Roma or Traveller families who are living on unauthorised sites and are subject to unpredictable forced movement which hinders access to school. Local authorities should work closely with their TESS in these cases to ensure the correct procedures are followed. More information is available at [www.standards.dfes.gov.uk/primary/publications/inclusion/tess/](http://www.standards.dfes.gov.uk/primary/publications/inclusion/tess/)

### **Pupils excluded from school**

- 1.2.5. It is intended that from September 2007 regulations made under the Education and Inspections Act 2006 will require local authorities to ensure that suitable full-time education is made available to permanently excluded pupils from the sixth school day of exclusion, and schools will likewise be required to arrange full-time education from the sixth school day of fixed period exclusion.
- 1.2.6. If it becomes apparent that a child has been unofficially excluded the local authority will need to challenge the school as this practice is illegal. More information on exclusions is available at [www.dfes.gov.uk/exclusions/guidance/index.cfm](http://www.dfes.gov.uk/exclusions/guidance/index.cfm)

### **1.3. How to consider police involvement**

- 1.3.1. Although the subject of this guidance is about children not receiving education,

there may be occasions when a child identified as such may have been the victim of a crime. Considering the following questions could help identify episodes when police involvement may be necessary:

- 1.3.2. Have there been suspicions in the past concerning this child and family which together with the sudden disappearance are worrying?
- 1.3.3. Have there been any past concerns about the child associating with significantly older young people or adults?
- 1.3.4. Was there a significant incident prior to the child's unexplained absence?
- 1.3.5. Is there a good reason to believe that the child's absence may be the result of them being the victim of a crime? The following questions could assist a judgement:
  - Is this very sudden and unexpected behaviour?
  - Has the child/young person gone missing with their family?
  - Has the child/young person gone missing without their family?
  - Is there any health, religious or cultural reason to believe that the child/young person is at risk of harm?(Department for Education and Skills/Foreign Office joint guidance on forced marriages can be found at: [http://www.teachernet.gov.uk/wholeschool/familyandcommunity/childprotection/usefulinformation/typesofabuse/forced\\_marriage/](http://www.teachernet.gov.uk/wholeschool/familyandcommunity/childprotection/usefulinformation/typesofabuse/forced_marriage/))
- 1.3.6. If the answer to any of the above questions is yes then a referral to the police should be made - local procedures should be followed. The appropriate Education Welfare Service and/or local authority designated person as agreed locally should be informed.
- 1.3.7. Other questions to consider are:
- 1.3.8. Is the child/young person the subject of a child protection plan (on the Child Protection Register)?
- 1.3.9. Is the child/young person looked after by the local authority?
- 1.3.10. Is there current social care involvement?
- 1.3.11. If the answer to any of these questions is yes Children's Social Care should be informed immediately. A referral to the police might be made in line with local procedures. The appropriate Education Welfare Service and/or local authority designated person as agreed locally should be informed.
- 1.3.12. Positive responses to one or more of the following questions may give an indication that the family is avoiding contact:
  - Has there been Social Services involvement in the past?

- Is there a history of mobility?
- Are there immigration issues?
- Has there been school or local authority intervention in relation to attendance, e.g. visits by Education Welfare Service, parenting contracts and fast-track to attendance?

1.3.13. The quicker the intervention the more likely they will be traced, delay may well lead to longer periods of interrupted education for the child/young person. More guidance on these questions, which were developed with the Metropolitan Police, can be found on the London Child Protection Committee website, in their *London Good Practice Guidance for Safeguarding Children Missing from School* at <http://www.londoncpc.gov.uk/procedures.htm>

1.3.14. There are also some circumstances when a registered pupil of compulsory school age is absent without explanation. Most cases are relatively minor whereby the child returns home quickly or is not believed to be in any serious danger even if they are not found or do not return. However, there are more serious cases where children are concerned, including those where a child may become a victim of crime, such as being abducted by his/her parent, or abduction by a stranger. It is best practice for school administrative staff or support staff to contact parents on any day a registered pupil is absent without explanation (i.e. First Day Contact), including in cases where the pupil skips lessons after registration. By contacting the parent the school also ensures that the parent is aware that the child is not in school enabling the parent to take steps, where necessary, to establish that the child is safe. Further information on first day contact is in the “Tackling it Together toolkit” at <http://www.dfes.gov.uk/schoolattendance/goodpractice/tackling.cfm>

1.3.15. Other sources of information on where to look for advice about missing children are also available via some non-Government organisations, for example: the National Missing Person’s Helpline (their “Education” section on their website [www.missingpersons.org](http://www.missingpersons.org) contains information which may be useful); also the Parents and Abducted Children Together (PACT) website [www.pact-online.org](http://www.pact-online.org) contains some useful advice.

#### 1.4. **Reducing the risk of children not receiving education**

1.4.1. There are a range of systems, processes and procedures currently used by local authorities to reduce the risk that children fall out of the education system and go missing. Existing good practice broadly falls into three categories where the local authority introduces measures to:

- reduce the likelihood that children fall out of the education system, such as audits of the rolls and registers of schools;
- identify and locate children who are not receiving education, such as via truancy sweeps and the provision of named points of contact to receive notification of children from other agencies; and

- re-engage the children with appropriate educational provision, for example via multi-agency panels to broker admissions.
- 1.4.2. Although the main focus of this document is on processes and systems within local authorities, it is important that local authorities work with their partners to ensure that there are robust arrangements for identifying children not receiving education across partner agencies.
- 1.4.3. The work to identify children not receiving education should also be seen within the wider remit of the local authority to safeguard the welfare of all children. If at any time there are concerns about a child's welfare, and in particular, consider that a child may be, or is, suffering significant harm, established Local Safeguarding Children Board procedures must be followed. Detailed information about Local Safeguarding Children Boards can be found at: <http://www.everychildmatters.gov.uk/socialcare/safeguarding/lscb/>

### Criteria for local authority standards, DfES, 2007

#### Evidence to show 'Achieved' status

(1) The policy itself which should be shared with and understood by at least Health, Education (including all schools in the area), Children's Social Care, Police, Youth Justice Services and Housing. The document(s) containing the policy should contain:

- the current position of the authority;
- evidence about the scale and nature of any CME problem;
- ways of tackling it in a multi-agency approach; and
- arrangements for monitoring.

(2) Arrangements for identifying children not receiving a suitable education are included in the integrated processes of the children's trust arrangements.

(3) The authority can provide copies of records, or the ready ability to produce regular records. 'Regular' is Termly.

(4) The authority can provide documentary evidence listing other agencies in their area who the CME named individual has spoken to, referred children to and/or given CME details, plus receiving details of children not receiving education from other agencies and the general public.

(5) Documents showing notification routes, and evidence of the dissemination of this information should be available. Dissemination should be by: mail outs, website, leaflets etc. Essentially, if a number of likely important stakeholders are approached they can say easily how they notify the authority.

(6) If contacted, the authority can give the name of a person or persons with the responsibility for receiving information on children not receiving education.

(7) The person(s) in (6) are readily contactable, and are able to provide, without difficulty information on their role and the limits of their responsibility and if they are not responsible they know who is.

(8) The authority can provide accurate, verifiable and up to date figures (no more than a month old), and trends over time, together with a description of how these figures are collected and calculated.

(9) The authority can provide information on any case within the database and show the dates of: notification, assessment (if necessary), identification of appropriate provision and actual access to that provision.

(10) The authority can provide documentary evidence that regular updates on the number of children not receiving education are sent to senior responsible officers within the organisation. Ideally the numbers should come from the same system that provides data in response to (8)

(11) The authority can provide documentary evidence of the mechanism by which they identify children in recognised vulnerable groups in their area. There are also documents detailing how the educational status of these groups is monitored. Ideally the monitoring should be robust, in that it should rely on more than one source of data to establish the situation regarding children in recognised vulnerable groups in their area.

(12) Access rules and procedures to ensure fair/safe data processing are known and understood by any member of staff in the authority who is likely to have to deal with any data on children not receiving education. Any case drawn at random should show the implementation of these processes if tracked through to support receipt. This knowledge should be consistent with written down and agreed procedures.

(13) Documented procedures for securing the support of other services is known understood and agreed by relevant staff both in the authority and those in the relevant support services and partner agencies. Any case tracked through the system that requires such support should reflect the documented procedure.

(14) Documented procedures for attempting to secure appropriate provision is known, understood and agreed by relevant staff and followed regularly, so that any case tracked reflects those procedures in principle and shows records of any failures to secure provision.

(15) The authority can provide documentary evidence that gives regular updates on, for example, the mean, mode and range of time taken to access provision are sent to senior responsible officers within the organisation. Ideally the data should come from the same system that provides data in response to (8)

(16) The authority can provide accurate, verifiable and up to date figures (no more than a month old) on the number of places available, broken down by at least statutory and alternative provision. A description of how these figures are collected and calculated should be available.

(17) The authority can provide accurate, verifiable and up to date figures (no more than a month old) on the number children who have left education without a

known destination. A description of how these figures are collected and calculated should be available.

(18) The authority can provide documentary evidence of follow up procedures, together with a named contact for whoever is responsible for follow up work. Any case tracked should show evidence of regular (at least monthly) follow up contact until the case is registered with a new provider or the local authority designated person.

(19) Documentary evidence is available describing the process for children leaving provision. There should be evidence that this process has been agreed to by all school authorities in the area, and that contact with staff responsible for implementing these procedures should show knowledge consistent with an understanding of the process. Any case tracked upon leaving provision should show evidence reflecting the appropriate following of the process.

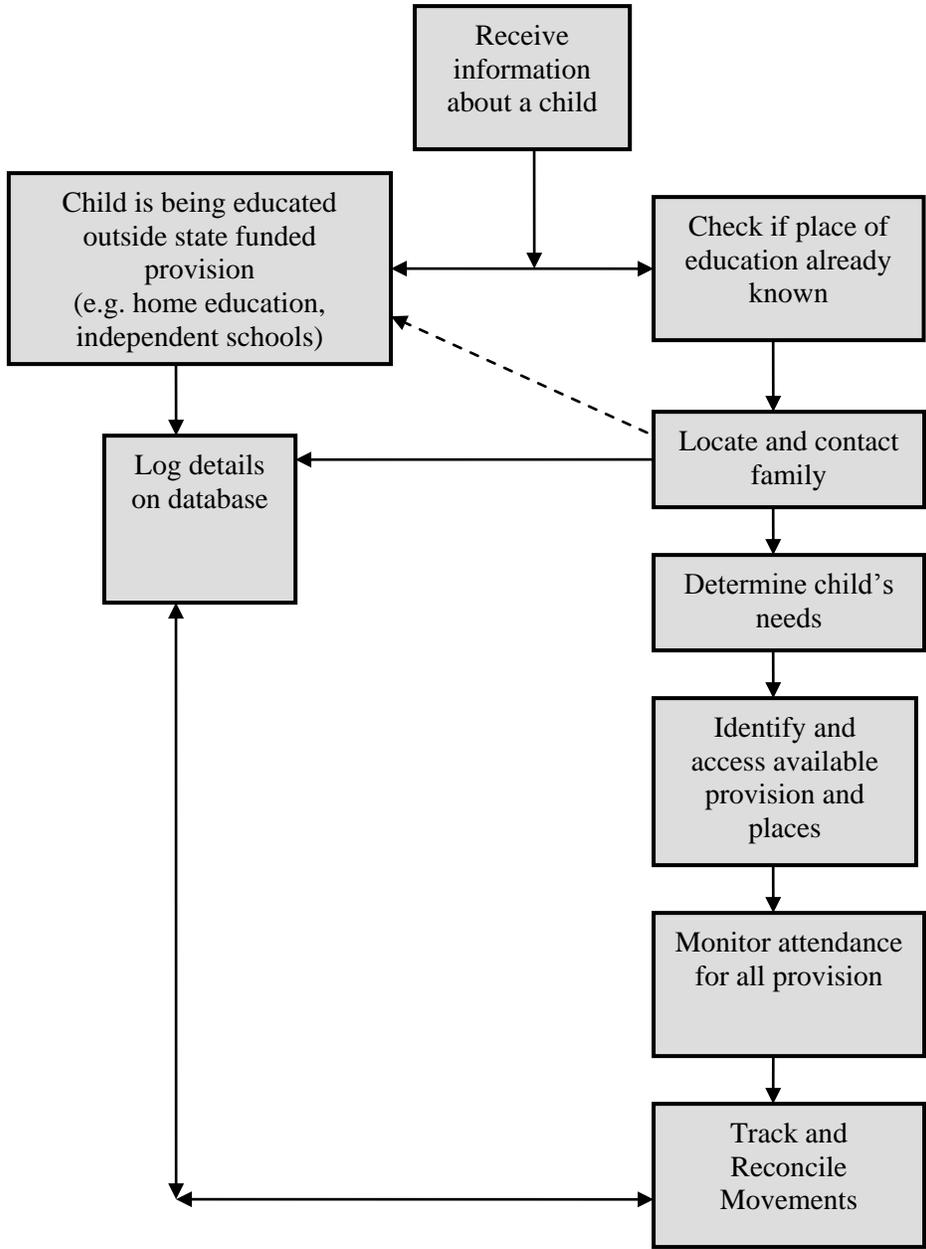
(20) The authority can provide documentary evidence of support given to all schools, and of appropriate encouragement of all schools in the use of the s2s system. Relevant staff in any school selected at random in the authority should be able to show that they are at least aware of the system. Ideally, where they are not currently using it, they should be able to show evidence of support from the authority to do so. This support should comprise at least the provision of relevant and appropriate materials on how to access the system.

(21) If contacted, the authority can give the name of a person or persons with the responsibility for administering the s2s Lost Pupil Database.

(22) If contacted, the person(s) named in (21) can provide documentary evidence of regular (at least monthly) uploads and downloads to the Lost Pupil Database. This evidence could comprise upload and download reports for each session.

**DfES: Practical model of process steps**

Local authorities should select, according to local circumstances, from the practical model of process steps given below. These process steps reflect practice that local authorities have already demonstrated as being effective:



Receive information about a child

### **Clear responsibilities for appropriate action**

1.1.1. All local authorities must have:

*“A named individual responsible for receiving information about children of compulsory school age in their area who may not be receiving a suitable education at school or otherwise, and for brokering support for them through the most appropriate agencies.”*

1.1.2. This responsibility is determined depending on local circumstances. Examples of how some local authorities have taken this forward are:

- recruitment of a dedicated pupil tracking officer;
- senior management lead with delegation to others; or
- a small team who may receive notifications from different sources.

1.1.3. If local authorities decide to recruit a dedicated pupil tracking officer, robust recruitment and vetting procedures should be followed, as appropriate, to help prevent unsuitable people from working with children.

[www.everychildmatters.gov.uk/socialcare/safeguarding/](http://www.everychildmatters.gov.uk/socialcare/safeguarding/)

1.1.4. It is also essential to ensure that arrangements to discharge the new duty are included in the local authority’s children’s trust governance and strategic planning arrangements and the cross-cutting arrangements of safeguarding and inter-agency co-operation to improve wellbeing of children. The development of Targeted Youth Support Teams within the Integrated Youth Support Service will also be a key part of these arrangements.

1.1.5. Senior management, Elected Members and Children’s Trust partners, as appropriate, should monitor procedures and numbers.

### **Notification routes**

1.1.6. Information about children not receiving education can be received from within local authority boundaries (from colleagues within the local authority and other agencies) and/or from other local authorities around the country.

1.1.7. Providers of the Connexions service are required to hold details of all 13-19 year olds and where they are being educated on their local Client Caseload Information System (CCIS). Connexions Personal Advisors offer information and advice in schools and may have identified a young person moving into the area. Connexions providers also have cross border arrangements with neighbouring services in order to help keep contact with young people as they move from one area to another.

1.1.8. Youth Offending Teams (YOTs) who work with young people who offend are

well placed to identify young people out of education. The ONSET or ASSET assessment, completed by the YOT, is designed to identify educational and other needs at specific periods of the young person's relationship with the YOT or secure establishment.

- 1.1.9. Local authorities may receive notification about a child via Truancy Sweeps run in conjunction with the police and other agencies. More information about Truancy Sweeps can be found at <http://www.dfes.gov.uk/schoolattendance/truancysweeps/index.cfm>
- 1.1.10. Notifications could be about children who are actually receiving an education, which is being delivered by a route not known to the local authority at that time: e.g. independent schools, home education, or alternative provision. When the route of education has been determined it should be logged on the local authority database for future reference.
- 1.1.11. Immigration and Nationality Directorate (IND) routinely informs local authorities about children subject to immigration controls coming to stay in their area:
  - all cases of unaccompanied asylum-seeking children (UASC), who are looked after by local authorities;
  - children who are part of a family which is seeking asylum - in such cases, when a family is provided with accommodation, the contractor responsible for that provision is required to notify the local authority; and,
  - children who are non-European Economic Area nationals who arrive in the UK to stay with someone other than their parent(s) or close relatives (i.e. a private fostering arrangement).
- 1.1.12. In addition, there are two points of contact provided by IND for local authorities to verify the immigration status of children:
  - for enquires about the immigration status of individuals who are not claiming asylum, contact the 'LA Desk' in the Enquiries Unit on: Tel: 0845 601 2298; Fax: 020 8196 3049; and
  - for enquires about the immigration status of individuals who are claiming asylum, contact the 'LA Communications Team' on: Tel: 020 8760 4527.

### **Partner Agencies<sup>1</sup> understand who and how to notify**

- 1.1.13. It is necessary to raise awareness amongst partner agencies about how to inform the local authority about children not receiving education, to ensure that agencies employ this route consistently. It will often be the case that another agency is aware of the arrival or existence of a child, living in the local authority area but not in education, before the local authority is aware.

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<sup>1</sup> Partner agencies as identified in paragraph 1.3.2.

1.1.14. The first step is to identify all likely routes of information, for example:

- school secretaries/administrators/Designated Senior Persons;
- Pupil Referral Units and alternative education providers;
- housing departments;
- homeless hostels;
- Missing Persons Helpline;
- Accident and Emergency;
- NHS Walk-in services;
- GPs;
- Children's Social Care;
- Police;
- Youth Offending Teams;
- Health Visitors;
- Education Welfare Officers (Education Social Workers);
- SEN caseworkers;
- Connexions;
- General Public (via LA switchboard).

1.1.15. Possible routes for raising awareness with partner agencies (which will need to be repeated on a regular basis due to staffing changes, etc) could be by:

- circulating (either online or via hard copy) the name of the local authority named individual with telephone number and email address, including information about how to inform the local authority about children not receiving education;
- entry in Directory of Services;
- events/workshops with partner agencies;
- School Secretaries' Conferences;
- leaflets, etc.

1.1.16. When raising awareness with partner agencies it is useful to remind them that parents have a legal right to educate their children at home. Where a parent states that their child is educated at home, the child is receiving education and is not the target of this duty, so it is not always necessary to notify the local authority. Education of children at home by their parents is not in itself a cause for concern about the child's welfare.

1.1.17. Local authorities should agree arrangements with the agencies with whom they need to share information. Guidance on information sharing and tools for integrated working can be found on the Every Child Matters website: [www.everychildmatters.gov.uk/deliveringservices/informationsharing/](http://www.everychildmatters.gov.uk/deliveringservices/informationsharing/)

## 1.2. Check if place of education already known

### Access to rolls for all providers

- 1.2.1. When the named person(s) receive notification about a child believed to be in their area it may be necessary to check the child's name and other details, if available, against all alternative provision rolls in the local area to see if they are already registered. One way to achieve this is to have all names of school-aged children kept on a central database which is frequently updated and can be checked by the staff members who require access. (This is not a requirement to set up new IT systems for children not receiving education. See paragraph 3.4 for suggestions for utilising existing databases.)
- 1.2.2. Another way to check a child's name and other details would be via communication links with all educational providers: all schools; Pupil Referral Units; custodial institutions and other providers of alternative provision (local authorities should establish a contractual agreement that providers of alternative provision will keep a register, Joint Area Review and inspection frameworks say these contracts are a minimum standard) to check if the child is registered with them. "Guidance for Local Authorities and Schools: Pupil Referral Units and Alternative Provision", including a paper on "Commissioning Alternative Provision - the Role of the LEA" can be found on the Teachernet website <http://publications.teachernet.gov.uk/> (ref: LEA/0023/2005 and LEA/0024/2005). If email is used then careful consideration should be given to what information is sent via a relatively insecure medium. The last section of this guide describes the School2School (s2s) website, where a secure messaging facility is available.

### Reasonable enquiry

- 1.2.3. When making "reasonable enquiry, to ascertain where the pupil is" as referred to in Regulation 8(1)(f)(iii) and (h)(iii) of the Education (Pupil Registration) Regulations 2006 <http://www.dfes.gov.uk/schoolattendance/> it is reasonable to expect that the appropriate team in the local authority will complete and record the following actions:
- check local databases within the local authority (including the ContactPoint when implemented);
  - follow local information sharing arrangements and where possible make enquiries via other local databases e.g. housing, health, police, Youth Justice Services, social care, Inland Revenue;
  - check with agencies known to be involved with family;
  - check with local authority from which child moved originally, if known;
  - where appropriate check with the custodial institution from which a child has left;
  - check with any local authority to which a child may have moved (see below);
  - in the case of children from families of those in the Armed Forces, check

with the Children's Education Advisory Service (CEAS) on 01980 618244;  
and

- home visit(s) made by appropriate team, following local guidance concerning risk assessment and if appropriate make enquiries with neighbour(s).

### **Enquiry to another local authority in England**

- 1.2.4. In the first instance an enquiry via the phone should be made. Secure systems should be used to appropriately share personal information. If an address is being provided then the correct person at the other local authority should be identified first. If further information needs to be sent - secure messaging is available using s2s.
- 1.2.5. Local authorities should not make "blanket" enquires (by email or hard copy). Contacting all local authorities with a list of children asking them to search their databases is seen as poor practice and the majority of local authorities will ignore this request, as it is time consuming with little reward (very rare that they find the child in their area). It is also not secure. Best practice is for local authorities to carry out thorough local checks in their own authority area before contacting specific local authorities that they believe to be linked to the child/young person that they are looking for.

### **Useful information to share with another local authority in England**

- 1.2.6. To enable local authorities to make their best efforts to search for a child/young person on behalf of the enquiring local authority the following basic information could be shared (as appropriate) with the named officer:
- Name (plus any know aliases)
  - Date of Birth
  - Gender
  - Ethnicity
  - Parents/carers names including who has parental responsibility
  - Siblings names
  - Previous Address
  - Previous school and date of last attendance
  - Possible new address and school if known or suspected
  - Date child/young person left area
  - If recent entry to UK - their country of origin.
- 1.2.7. Care must be taken to ensure information is factual and evidence based. (Also consideration should be given to guidance on "custodians of child protection register": <http://www.everychildmatters.gov.uk/socialcare/safeguarding/missing/>)
- 1.2.8. The following may give an indication of the level of vulnerability of child:

- reason for leaving if known;
- Child Protection Status/Looked After Child/Private Fostering/Asylum Seeker/any involvement in the youth justice system;
- any interventions for poor attendance (including prosecutions pending);
- SEN Status; and
- reason for believing child has gone to this particular local authority.

### **Local authority actions on receipt of an enquiry**

- 1.2.9. When another local authority has provided an address, the family should be contacted as soon as possible (which would be carried out by the relevant team in the local authority, e.g. Education Welfare Service, or Children's Social Care). An assessment of vulnerability based on the information provided should be made prior to any home visit. The level of priority should be based on the information provided which will indicate the level of vulnerability of the child/young person. Unless concerns justify an immediate visit, initial contact should be made in writing before calls or visits are made.
- 1.2.10. If no address is provided but reasonable evidence to suggest a child/young person could have moved to the area then check with local schools including independent schools via the local authority database, or a secure communication medium. Also follow local information sharing arrangements and where possible make enquiries via other local databases e.g. housing, health, social care, police, Inland Revenue. Whatever the result of the search, the enquiring local authority will need a response.

### **Elective Home Education**

- 1.2.11. Parents of children who are of compulsory school age have a duty to ensure that they receive an efficient, full time education, suitable to their ages, abilities, aptitudes and any special educational needs they may have, either by regular attendance at school or otherwise (section 7 of the Education Act 1996). Some parents decide, as they are entitled, to provide suitable education for their children by educating them at home.
- 1.2.12. Where parents decide to withdraw their child from school and notify the proprietor in writing that the child is receiving education at home, the proprietor must delete the child from the admissions register (regulation 8(1)(d) of the Education (Pupil Registration) (England) Regulations 2006) (' the Pupil Registration Regulations') <http://www.dfes.gov.uk/schoolattendance/>
- 1.2.13. It is the duty of the proprietor of the school to inform the local authority of the deletion and the reason for it, no later than when the pupil's name is deleted from the register (regulation 12(3) of the Pupil Registration Regulations 2006). The Pupil Registration Regulations apply to all schools: maintained; independent; Pupil Referral Units; special schools; City Technology Colleges; and Academies.

- 1.2.14. Children with statements of SEN can be educated at home. The duty of the parent remains to provide a suitable education for the child. Where the local authority maintains a statement for the child, the authority is responsible for arranging that the special educational provision specified in the statement is made for the child, unless the child's parent has made suitable arrangements (section 324(5)(a) of the Education Act 1996). If the parent's arrangements are suitable, the local authority is relieved of their duty to arrange the provision directly, but it still remains the local authority's duty to ensure the child's special educational needs are met.
- 1.2.15. To help identify quickly if a child is already known to be receiving education at home the local authority could keep a list of children known to be educated at home by parents. Parents are not, however, required to inform the local authority if they decide to home educate a child who has not previously attended school.
- 1.2.16. If it becomes known that a child identified as not receiving education is being home educated, this should be recorded on the local authority's database and no further action should be taken unless there is cause for concern about the child's safety and welfare. Monitoring arrangements already exist for children being educated at home. Where there are concerns about the child's safety and welfare, Local Safeguarding Children Board procedures must be followed.

### 1.3. **Log details on database**

- 1.3.1. There is not a requirement to set up new IT systems for children not receiving education, the following suggests how to utilise existing databases.
- 1.3.2. Some authorities hold information on a centrally held database (e.g. Education Management Systems (EMS) (Capita system), Impulse (Arete system), IDEAR (Tribal system) or a locally developed system) and a download of information from school via SIMS every month which ensures the information held is reasonably current. The individual with responsibility for monitoring pupil registration and co-ordinating pupil mobility checks any names notified against the data held in the centrally held database.
- 1.3.3. ContactPoint, to be implemented across England by the end of 2008, will help local authorities fulfil their responsibilities for identifying children not receiving education by recording the place where a child is being educated, where that is known. More information can be found at <http://www.everychildmatters.gov.uk/deliveringservices/contactpoint>
- 1.3.4. As mentioned before, monitoring by senior management is considered to be a helpful component of effective systems. Consideration should be given to the form in which data is held. Also to monitor the speed with which children progress into provision after being found, it will be necessary to record the

appropriate dates:

- date referred in;
- date of assessment, if necessary;
- date form of provision determined;
- date moved into provision.

1.3.5. In order to monitor the patterns in the previous history of the children then both date and location of last known educational placement would be useful, as well as form of provision recommended and accessed.

1.3.6. Some local authorities also helpfully include in their database, as a subgroup, all those children of compulsory school age living in their authority but not in educational provision. The other information allows local authorities to monitor the educational status and progress of recognised vulnerable groups.

#### 1.4. **Locate and contact family**

1.4.1. This is the process by which the local authority determines the child's address, parent or legal guardian and establishes communication with the child and parent/guardian or refers the contact to the local authority in which the child is resident.

#### **Information Sharing**

1.4.2. To locate children and young people when it is believed they are resident in your local authority, it will be necessary to share information with other agencies (as listed in paragraph 1.3.2). Agencies will include many who are already notifying the local authority when they encounter a child not receiving education.

1.4.3. Any sharing of information must comply with the law relating to confidentiality, data protection and human rights. The local authority should work within their authority's arrangements for recording information and within any local information sharing protocols that are in place. These arrangements and protocols must be in accordance with the Data Protection Act 1998 – the key provisions of which are summarised in "Information Sharing: Further Guidance on Legal Issues" a copy of which can be found at:  
<http://www.everychildmatters.gov.uk/resources-and-practice/IG00065/>

1.4.4. The Government has made available (via the Every Child Matters website [www.everychildmatters.gov.uk/deliveringservices/informationsharing/](http://www.everychildmatters.gov.uk/deliveringservices/informationsharing/)) a model local information sharing protocol and cross-Government guidance on information sharing, which will support local areas in developing clear protocols and an understanding of the appropriate legislation.

1.4.5. Children who are both not receiving education and whose current residential whereabouts are unknown are likely to be deemed vulnerable.

1.4.6. It is in the interests of other agencies for children to be enrolled in education and

attending regularly, not only because of the welfare of the child but also in order that the agency can fulfil their duties.

## 1.5. Determine child's needs

- 1.5.1. If a child has been identified as not receiving education it is important that any process to access education is as speedy as possible. Parental and child preference should be taken into account. In order to ensure a successful return to education, an assessment and intervention plan, that takes into account the reasons the child or young person has become disengaged from education, will assist the process of successful reengagement. Guidance on re-integration can be found at [www.dfes.gov.uk/behaviourandattendance](http://www.dfes.gov.uk/behaviourandattendance)

## Common Assessment Framework

- 1.5.2. A Common Assessment Framework (CAF) is available to help in assessing needs and improving services to children, young people and families. There is no need to do a common assessment for every child, but it is useful if the child's needs are unclear and it can help identify the other services which may need to be involved. The CAF will enable a child's needs to be assessed in a holistic way, to decide what response is needed. If it is identified that the child has complex needs, a referral for a more specialist assessment appropriate to the child's situation will need to be made. This specialist assessment will build on the work undertaken in completing the CAF.
- 1.5.3. The CAF will enable practitioners to join up with any other professional who might have already completed an assessment for the child and share concerns with them. This will enable professionals from different agencies to work more effectively together, build up a picture of a child's needs over time and develop a more appropriate response.

## Lead Professional

- 1.5.4. Where a child not receiving education needs support from several agencies to help them return to full-time learning, having a lead professional should help ensure that the actions identified in the assessment process are fully co-ordinated.
- 1.5.5. Information about the CAF and Lead Professional can be found at: <http://www.everychildmatters.gov.uk/delivering-services/integrated-working/>

## Eligibility criteria

- 1.5.6. Any Directory of Children's Services supported by the local authority, for example as part of its action to ensure practitioners, children, young people and parents are informed about services available to them, should include details

about eligibility criteria for services.

## 1.6. Identify and access available provision and places

### Current Information about places

- 1.6.1. If the process is to progress efficiently, then information about available places is best held centrally, if at all possible. In areas with high transience, turnover in schools will be high and therefore school places will come and go rapidly.

### School Admissions Procedures

- 1.6.2. The School Admissions Code is due to come into force on 28 February 2007, and applies to all admissions to all maintained schools and Academies. The Code imposes mandatory requirements and refers to statutory requirements.
- 1.6.3. All admission authorities and Admission Forums must have In-Year Fair Access Protocols in place by September 2007. These protocols should ensure that children are admitted to suitable provision as quickly as possible, and should ensure that all schools in an area admit their fair share of children with challenging behaviour. The children that should be covered by the protocol, and the process by which a school is identified as the one that should admit a child, are matters for local agreement. The Department has produced guidance on developing and agreeing protocols and this can be found at [www.dfes.gov.uk/sacode](http://www.dfes.gov.uk/sacode).

### Multi-agency panels

- 1.6.4. Additionally, some authorities find it useful to use multi-agency panels to place children in provision, often called “hard to place panels”. These panels track progress and alert the Inclusion and Access Managers if there are concerns about delay or inability to meet the child/young person’s needs.

## 1.7. Monitor attendance for all provision

### Audit Registers

- 1.7.1. It was identified both in the consultation exercise to produce this document and in the Ofsted Report: *Key Stage 4: towards a more flexible curriculum* (2003) that children go missing from alternative provision. This indicates the need to audit registers of alternative provision as well as schools.
- 1.7.2. Guidance for local authorities for schools on monitoring attendance is contained within [www.dfes.gov.uk/behaviourandattendance/](http://www.dfes.gov.uk/behaviourandattendance/).
- 1.7.3. Guidance for local authorities on Pupil Referral Units and alternative provision was issued in February 2005 “Guidance for LEAs - PRUs and Alternative Provision” including a paper on “Commissioning Alternative Provision - the Role

of the LEA". This guidance can be found on the Teachernet website <http://publications.teachernet.gov.uk/> (ref: LEA/0023/2005 and LEA/0024/2005).

## Deletion procedures

- 1.7.4. Deletions from the admission and attendance registers must be made in line with the provisions of Regulation 8 of the Education (Pupil Registration) Regulations 2006 (SI 2006/1751). The name of a pupil of compulsory school age may only be deleted from the attendance register on the grounds prescribed in this Regulation. Under regulation 12(3), schools must also inform their local authority of deletions of compulsory school age pupils due to: ceasing to attend the school; being withdrawn to be educated outside the school system; being certified by the school medical officer as unlikely to return; being in custody; being permanently excluded. More information is available at: [www.dfes.gov.uk/schoolattendance](http://www.dfes.gov.uk/schoolattendance)
- 1.7.5. In line with the duty on all children's services to safeguard the welfare of children (s11 of the Children Act 2004), the expectation is that both the school and the local authority will put in place procedures designed to track the whereabouts of the child and to record that they have completed these procedures before deleting them from the register. The type of procedures may include the appropriate agency checking with relatives, neighbours, private or public landlords and other local stakeholders who are involved. If there is reason to believe the child/young person may be or is at risk of significant harm procedures should be followed in line with the Local Safeguarding Children Board <http://www.everychildmatters.gov.uk/socialcare/safeguarding/lscb/> :
- if the child/young person is located and the current school is still the appropriate school then steps should be taken to engage with the child/young person and the parent to improve attendance;
  - if the child/young person is located, but has moved, and a new school is necessary but in the same local authority, the necessary steps should be taken to access a new school as previously mentioned and steps taken to transfer the Common Transfer File (CTF) (see paragraph 3.9.4);
  - if there is evidence to suggest the child/young person has moved to a different local authority then contact should be made with the named individual in the new authority.
- 1.7.6. In the absence of the location of the child/young person being found these procedures will also prompt reference to the transfer of information to the police and Children's Social Care and the transfer of information via school2school (s2s) and the Lost Pupil Database (see paragraph 3.9.6). Until a child/young person is located the local authority should maintain a record of their details.

## 1.8. Track and reconcile movements

- 1.8.1. This is the process by which the local authority maintains visibility of children who have ceased to be registered with a provider and monitoring progress until they are registered with a new provider, by effective use of available inter-local authority exchange of information. Monitoring at the transfer between Key Stage 2 and 3 is vital. Local authorities will need to develop protocols with their schools to ensure that all children leaving a primary school are subsequently registered at a new provider.
- 1.8.2. There are particular challenges in areas where children leave the maintained sector for the independent sector in high numbers, in areas where children commonly cross boundaries to attend schools in other authorities and in areas of high transience, particularly if children leave schools at other than normal ages of transfer. In addition, similar issues regarding the transfer of information apply for young people involved in the youth justice system and who are leaving custody.

### Transfer of Information

- 1.8.3. The Education (Pupil Information) (England) Regulations 2005 (SI 2005/1437) (<http://www.opsi.gov.uk/si/si2005/20051437.htm>) governs the transfer of information from school to school when a child moves school. In particular, regulation 9(3) provides that: "...the governing body of the old school or, where this has been agreed between that governing body and the local authority, that authority shall transfer the pupil's common transfer file and educational record to the responsible person of the new school no later than fifteen school days after the day on which the pupil ceases to be registered at the old school".
- 1.8.4. The DfES provides a secure internet site (s2s) for the electronic transfer of information Common Transfer Files (CTFs) from school to school when a child moves school. On the home page for s2s [www.teachernet.gov.uk/s2s](http://www.teachernet.gov.uk/s2s) there is description of the processes and guidance is provided for local authorities and schools on how to use the system. There is also a publication for schools which local authorities can order and distribute. s2s also provides a secure messaging facility. Guidance notes for schools and local authorities to clarify the creation and use of CTFs can be found at [www.teachernet.gov.uk/management/ims/datatransfers/CTF/](http://www.teachernet.gov.uk/management/ims/datatransfers/CTF/)
- 1.8.5. There may be exceptional circumstances when standard rules for sending a receiving a CTF for a pupil might not apply. Each case would need to be judged on its merits in consultation with relevant parties. Circumstances when it is not considered appropriate to pass on details via a CTF might include: a family escaping a violent partner; or the family is in a witness protection programme. Guidance on how to share information in these circumstances is available in Annexe A of the CTF Guidance Notes [www.teachernet.gov.uk/management/ims/datatransfers/CTF/](http://www.teachernet.gov.uk/management/ims/datatransfers/CTF/)

## Lost Pupil Database (LPD)

- 1.8.6. The LPD is not a separate database, it is a searchable area of the s2s website containing CTFs of pupils where the destination (or next) school of the pupil is not known to the school the pupil is leaving:
- where a school knows that a pupil is leaving but cannot identify the school to which the pupil is transferring, the school creates a CTF with just that pupil in it and identifies the destination school as unknown;
  - the CTF file is then posted to the s2s website;
  - the school which has just enrolled a new pupil but cannot identify the previous school, requests the maintaining local authority to conduct a search to see if they can locate a CTF for the pupil;
  - the local authority searches the s2s website using the available pupil related data provided by the school and, if a match is found, downloads the CTF file and forwards it to the school (some editing may be required to ensure that the file can be imported by the new school);
  - the local authority informs the previous school/local authority that the child has been placed.
- 1.8.7. A similar process is used when a pupil is leaving a school and is known to be transferring to a non-maintained school or to a school outside England and Wales.
- 1.8.8. The purpose in providing this "searchable area" of the website is to provide a facility whereby local authorities, on being requested by a school which has just enrolled a new pupil but cannot identify the previous school to request a CTF, can search for a CTF which may have been "posted" there by the previous school.
- 1.8.9. Also, by encouraging schools to upload CTFs to the LPD (when the child's destination (or next school) is unknown, or if the child moves abroad/transfers to a non-maintained school) local authorities and schools are ensuring that these details are being held on a secure website.

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