

# Pupils missing out on education

Low aspirations, little access, limited achievement

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This report examines the experiences of children and young people who are not in full-time education at school. Inspectors visited 15 local authorities and 37 schools and services, undertook 97 case studies of children and young people, and interviewed leaders in a further 41 secondary schools. Inspectors found poor quality and insufficient provision for many of these young people as well as incomplete information about it at a local level. The report draws together these findings and also illustrates some of the effective practice seen.

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## Foreword from Her Majesty's Chief Inspector

Many thousands of children and young people in England do not attend full-time education. This survey sets out stark findings about the failure of some local authorities to meet their statutory obligation to ensure that children and young people in their area are receiving a suitable education. Too often, children and young people who receive only a part-time education, or who have none at all, can become invisible to the local authority. This can be a safeguarding as well as an educational matter.<sup>1</sup>

If no-one in authority knows what education these children and young people receive each week, or whether they even attend, they not only miss out on education but can be vulnerable to abuse. Everyone must take greater responsibility for knowing where they are.

Four of the 15 local authorities that inspectors visited were unable to tell inspectors how much educational provision the children and young people in their area were receiving or attending, even when given more opportunity to find the data. They did not have robust systems for tracking individuals for whom they are responsible and their aspiration for these children was low. This is unacceptable.

As a result of this survey's findings, Her Majesty's Inspectors will ask for detailed and specific data on school-age children, for whom the authority is responsible but who are not in full-time education, as part of the new inspections of local authority children's social care. These inspections will report robustly on whether local authorities are discharging their responsibilities well. I want us to be certain that local authorities are making proper educational provision for all children and young people as well as actively safeguarding them.

In this survey, I also asked inspectors to focus on successful practice. This report sets out what well-informed, well-led authorities can achieve and the impact their actions can have on individual children. As one parent said to inspectors, 'They took a broken child and a family in a mess, and brought her back to us.'

What the report illustrates, once again, is the critical importance of high-quality leadership. Authorities and providers who were supporting their young people successfully were those who exercised their responsibility for leadership well – both strategically and at a personal and individual level. This was not achieved by managerial box-ticking but by a moral purposefulness in everything they did. The individuals in these authorities ensured that no young person in their area slipped out of sight; they were also conscientious, and determined, in communicating with others, recognising that such responsibility does not recognise local authority boundaries.

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<sup>1</sup> Ofsted last reported on children who were missing from education in 2010.

With committed and strategic leadership such as this, it is entirely possible to ensure that children and young people do not miss out on education at vital points in their lives. The expectations that local authorities have for these young people should match those held by the best parents.

As I have stated before, young people who grow up to become adults who lack qualifications face a difficult path, especially when trying to find employment. We owe it to all of them to ensure they are given every chance to stay safe and to succeed.

**Sir Michael Wilshaw**  
**Her Majesty's Chief Inspector**

## Who is this report about?

In every local authority area there are children and young people who do not, or cannot, attend full-time school education in the usual way.<sup>2</sup> Many of these children are not on a school roll and are considered to be the direct responsibility of the local authority. Ofsted has reported previously on the vulnerability of children who are not being educated. Our 2010 report, *Children missing from education*, warned that those who do not attend school or similar provision are at risk not only of social and educational failure but also, importantly, of physical, emotional and psychological harm.

That is why it is important that the current report, while highlighting successful practice in some of the authorities visited, also draws attention to the fact that other local authorities are failing to educate children and young people and may be failing in their statutory duty to take reasonable steps to protect them.

The main groups of children and young people who are the focus of this report are those who:

- have been permanently excluded
- have particular social and behavioural difficulties and have personalised learning plans: this means that, by arrangement, they do not attend their usual school full time
- have mental health needs and access Child and Adolescent Mental Health Services (CAMHS), either as an in-patient or through services provided in the community
- have medical needs other than mental health needs
- rarely attend school and have personalised learning plans as part of attempts to reintegrate them into full-time education
- are pregnant or are young mothers of compulsory school age<sup>3</sup>
- have complex needs and no suitable school place is available.

In addition, small numbers of children and young people do not currently attend school in the usual way because they:

- are returning from custody and a school place has not been found for them
- are new to the country and are awaiting a school place
- are from a Gypsy, Roma or Traveller background and alternative provision has been made

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<sup>2</sup> In this report, 'usual way' refers to the provision attended by the vast majority of children and young people of compulsory school age in England. Typically, they attend school for between 21 and 25 hours a week, as appropriate for their age, for 38 weeks a year.

<sup>3</sup> The report uses the term 'young mothers' to represent this group.

- have moved from another area and a school place has not been secured; this may include children who are looked after.

Education for all these children and young people is offered in many different ways. For example, lessons may be provided in a school or centre; through home tuition; through virtual learning platforms that can be accessed from any site with internet access; or through vocational alternative provision. For those with health needs who are in hospital, lessons may be provided in a classroom in the hospital or by individual staff at the bedside<sup>4</sup>.

## Executive summary

Local authorities have a statutory duty to arrange suitable full-time education for children of compulsory school age at school, or otherwise for children and young people who do not attend school in the usual way.<sup>5,6</sup> Despite this, inspectors found that, in too many cases, children and young people did not have access to full-time provision or as near to full time as their medical needs allowed.

Inspectors' discussions indicated that around 1,400 pupils across 15 local authorities were not participating in full-time education. If this pattern were replicated across all local authorities in England, it would mean more than 10,000 children were missing full-time education. In around half the cases that inspectors followed up, the children and young people were receiving only between five and eight hours educational provision each week.

Some of the local authorities did not know how much provision their children and young people were receiving. Only five of the 15 local authorities visited for the survey regularly gathered the information and analysed it centrally. A further six were able to gather the information from their different heads of services when they were asked for it by inspectors, but the remaining four authorities were not able to provide reliable data.

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<sup>4</sup> This report does not apply to pupils whose parents have taken the decision to electively home educate them

<sup>5</sup> 'Suitable education' in relation to a child or young person means efficient education suitable to his/her age, ability and aptitude and to any special educational needs he or she may have.

<sup>6</sup> The Education Act 1996 says: 'Local authorities have a statutory duty to arrange suitable education for children of compulsory school age who, by reason of illness, exclusion from school or otherwise, may not for any period receive suitable education unless such arrangements are made for them', Education Act, HMSO, 1996; [www.legislation.gov.uk/ukpga/1996/56/contents](http://www.legislation.gov.uk/ukpga/1996/56/contents). This duty was restated in Section 3 of the Children, Schools and Families Act 2010, which came into force on 1 September 2011; 'Local authorities must ensure that all children who fall within the scope of section 19 receive suitable full-time education unless reasons that relate to their medical condition mean that this would not be in their best interests', Children, Schools and Families Act 2010, HMSO, 2010; [www.legislation.gov.uk/ukpga/2010/26/contents](http://www.legislation.gov.uk/ukpga/2010/26/contents).

Local authorities that did not know how many children of compulsory school age were accessing part-time education were less able to comment on the quality and appropriateness of provision because they did not know for whom the provision was intended and whether it met their needs. As a starting point, all local authorities should know what the education provision is for these children and young people, and how good it is.

Up until now, Ofsted has not inspected what arrangements local authorities make for the education of these children and young people. It is a key recommendation of this report that this should change.

All schools, including academies, free schools and independent schools, have a responsibility to share information with the local authority about any child or young person who is out of school for 15 days or more. However, the survey showed that schools and professionals from other services were not sharing information well enough with one another and some children were being missed completely or having their learning seriously disrupted.

Low expectations made the situation even worse. Children and young people were being offered less education than they were entitled to and, at times, provision was not challenging enough. In some of the areas visited, this was starkly apparent in the provision being made for young mothers or young women who were pregnant. For example, one young woman had stopped studying for examinations where she had been on track to do very well and, instead, was attending part-time provision for developing parenting skills. Although this provision included functional literacy and numeracy skills, she would not gain qualifications at the level she was capable of achieving.

Inspectors also came across cases during the inspection where low expectations led to an acceptance that part-time education was all that a child could manage. One case concerned a Year 11 pupil who had emotional and behavioural difficulties. The pupil had moved between three local areas and the local authorities had not provided full-time education since the pupil was in Year 3, a situation that is clearly unacceptable.

In too many of the local areas visited, provision was not flexible enough so that some children and young people had only a few hours of education each week. For example, those with the most significant mental health needs frequently had effective, full-time education in hospital or healthcare settings, but such provision was less frequent for those using community mental health services. Ofsted does not routinely inspect some of the education provision visited for this survey, because it is run as a local authority service or a health service rather than as a school.

Schools have a responsibility to monitor and evaluate the achievement of pupils on their role. Many of the schools in this survey had good or improving systems for monitoring outcomes for pupils who were involved in alternative provision for vocational skills. However, where health services or home tuition were involved, monitoring and challenge by the schools were less robust.



In Ofsted's 2010 report, *Children missing from education*, it was noted that 'officers in all the authorities surveyed gave examples of schools which had not followed the agreed procedures for exclusions' and highlighted that:

'The vulnerability of such pupils was significantly increased because they were out of school unofficially and preventative agencies were not aware of their potentially increased exposure to drugs, alcohol misuse, crime, pregnancy or mental health problems.'

Inspectors also noted further examples of unlawful exclusions during this survey.

The best practice found during this survey shows that local authorities can get it right: they ensure suitable, good-quality, full-time provision for all children and young people who are medically fit for it. This requires strong commitment from senior officials and politicians, robust systems, good partnership working and high expectations. It also requires clear accountability at local authority level. This report also shows, however, that this is not happening enough. In failing to fulfil their statutory duties, some local authorities have left too many children and young people vulnerable to educational failure and possible harm.

## Key findings

- Too many children and young people were not receiving full-time educational provision, as near to full time as their health needs allow. During the survey inspectors found 1,400 children and young people in the 15 authorities visited whose education was part time only.
- Some of the local authorities visited did not know how many children and young people in their area were not receiving full-time education or for how long this had been going on. They could not show that they were meeting their statutory duty to make such provision.
- Children and young people who did not attend school in the usual way had a better chance of receiving full-time, good-quality education in local authorities where a senior officer was held accountable for this statutory duty.
- Schools, health services, youth offending services and local authorities did not always share information about the quality and amount of education being offered to children and young people who were not accessing school in the usual way, such as those in secure children's homes, or whether they were attending. Evidence gathered from parents and carers, parent partnership services and local authority officers suggested that some of the schools visited for this survey were using unlawful forms of exclusion rather than providing suitable support for

children and young people who had behavioural difficulties.<sup>7</sup> This disregard for procedures and legal requirements puts the child at risk of not being safe.

- The entitlement to full-time education of children and young people who had mental health difficulties was more likely to be fulfilled when they had access to in-patient mental health services rather than provision in the community.
- In a number of cases, low expectations of what children and young people could achieve often meant that schools, education, health or youth offending services provided too little education. This often continued over a considerable period and jeopardised children and young people's chances of achieving well.
- Children and young people who remained on the roll of their original school while attending a pupil referral unit or hospital school, or when they were serving a custodial sentence, were less likely to have their education interrupted when circumstances changed.
- Parents and carers were more confident about the quality and success of particular provision when they knew that one single person was taking responsibility for their child. Too often, however, parents and carers were:
  - unaware of how to raise concerns or get support
  - anxious about raising concerns about educational provision
  - unwilling to increase from a part-time to a full-time programme when part-time provision was working well.
- Local authorities and schools that responded quickly to any signs of disengagement, or children and young people's anxieties, were more successful in helping them to achieve at levels comparable with those of their peers and return to full-time education.

## Recommendations

Each local authority should:

- establish a central record of all children not accessing full-time education in the usual way, including those who are accessing alternative provision full time away from mainstream school, regardless of where they are on roll; and maintain good information about the achievement and safety of any child or young person not accessing education in the usual way.
- identify clear lines of accountability for the quality and amount of provision, as well as the educational and social outcomes, for all children and young people of compulsory school age who do not access education in the usual

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<sup>7</sup> Unlawful exclusion (sometimes referred to as an informal exclusion) is the removal of a pupil from the school site without a lawful basis. For example, sending a pupil home for a disciplinary reason or enforcing a period of home study, without following the legal exclusion process. This is unlawful even when the pupil's parents or carers agree to this informal exclusion.

way; taking note of the survey's finding that this was most effective when a *named person* at a senior level was held to account for this statutory duty.

- share information across local authority boundaries in a timely and appropriate way to minimise interruption to a child or young person's educational provision.
- ensure that every child is on the roll of a school, regardless of circumstances, unless parents have elected to educate their child at home.

Schools, including academies and free schools, should:

- with immediate effect, stop unlawful exclusions and provide suitable support for children and young people with behavioural difficulties.
- establish clear accountability for the achievement, safety and personal development of all children and young people who are on the school roll but not accessing school in the usual way, and for the quality and amount of provision made for them.
- inform the local authority of any part-time education arrangements, regardless of the type of school<sup>8</sup>.
- keep children and young people on the school roll during periods of illness or custody (or for as long as it is relevant), in line with Government policy and guidance.
- respond quickly to any early signs of children and young people's raised anxiety or dips in their progress, attendance or engagement in learning.
- give governors sufficient information about children and young people who are not accessing school in the usual way, so that governors can challenge the amount of provision being made and evaluate its effectiveness.

Health services, youth offending services, police, education services and other partners should:

- agree on joint approaches to sharing information, to be used case by case, so that education provision and safeguarding for any child or young person who does not access education in the usual way is effective.

Ofsted should:

- as part of its Integrated Looked After Children and Safeguarding inspections of local authorities, ask for a report on children for whom the local authority is responsible who are of school age and **who are not in receipt of full-**

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<sup>8</sup> This includes schools maintained by the local authority, academies, free schools and independent schools.

**time school education** at the time of the inspection. This report should include for each child:

- the child’s unique ID, date of birth, Unique Pupil Number (UPN)
- type of educational provision being received, including home tuition
- number of hours provision each week (in particular whether the child is receiving more or fewer than 25 hours)
- if the child has been excluded, the type of exclusion
- the date when the alternative provision began

This information will inform the selection of cases for further examination, including in relation to any safeguarding concerns, and may affect the overall inspection judgements.

- regard any failure by local authorities to comply with their statutory duty as a matter likely to affect the overall judgement on safeguarding.
- continue to ensure that all school inspections evaluate the effectiveness of arrangements for children and young people who are not able to access education in the usual way.
- ensure that meetings between local authority officers, Ofsted’s Regional Directors and Ofsted’s Senior HMI include a focus on the amount and quality of education, as well as the progress, attainment and safeguarding of children and young people who are not accessing education in the usual way.
- review the findings from the local authority inspections at regular intervals and use these to inform future actions.
- ensure that enhanced training for inspectors of special schools and pupil referral units includes updated guidance for evaluating the quality of provision for children and young people who are not accessing full-time education, using the good practice found during this survey.

## **Good practice and case studies**

1. Local authorities have a statutory duty to arrange full-time education whenever a child or young person is well enough, but educating children and young people who cannot or do not attend school in the usual way can be complex and challenging. Determined action is needed from a wide range of people to rise to this challenge. The following factors emerged during the survey as being important in ensuring that children and young people not attending school have the best possible chances of success and of staying safe.

- Authorities who were aware of, and fulfilled, their statutory duty made it a high-level strategic priority to ensure that groups who might be most at risk received sufficient education.<sup>9</sup>
- Local authorities that embraced the increasing autonomy of schools, including academies, and worked closely with them and other partners to realise their duty to arrange good-quality full-time education for all children and young people of compulsory school age.
- Provision was sufficiently flexible to respond to the changing needs of children and young people who were not attending school in the usual way. Such provision was full time and of good quality. It was based on the recognition that the more education a child or young person received the more they could achieve.
- Strong reporting systems within schools, and between all types of schools and the local authority, ensured robust monitoring of children and young people who were at risk of not receiving enough good-quality education.
- As well as from education, there was shared commitment and responsibility from other services, including health services, youth offending services and partners from the voluntary sector to ensure that children and young people had access to education that was as near to full time as possible.
- Schools were keenly aware of their responsibility to track and evaluate the provision for and progress of pupils who were not accessing school in the usual way.<sup>10</sup> They provided timely and relevant information for, and kept in touch with, other providers and services that were educating children and young people who were on their school's roll.

2. The following sections give further detail and examples of good practice.

## **Roles, responsibilities and accountability**

### **Good practice**

- A senior leader within the local authority is responsible and held to account for ensuring that the authority knows about all children and young people who are unable to access school in the usual way; and that action is taken to ensure that they have the best possible provision for as much time as possible.

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<sup>9</sup> Ofsted's 2010 report, *Children missing from education*, also found that the best practice in preventing children from becoming 'missing' was a high-level, strategic responsibility: *Children missing from education* (100041), Ofsted, 2010; [www.ofsted.gov.uk/resources/100041](http://www.ofsted.gov.uk/resources/100041).

<sup>10</sup> Ofsted's 2011 report, *Alternative provision*, also noted: 'The schools and units visited often found it difficult to evaluate the overall impact of alternative provision because, in addition to not monitoring progress well, they did not define clear success criteria at the outset.' *Alternative provision* (100233), Ofsted, 2011; [www.ofsted.gov.uk/resources/100233](http://www.ofsted.gov.uk/resources/100233).

- Accurate data about any child or young person not accessing full-time education are gathered from all schools and services in the local area, regardless of their arrangements for governance, and analysed fully.
- A strategic leader in the local authority holds others to account for how they use delegated funding, for example for places in pupil referral units or for home tuition.
- Senior officers and elected members provide strong challenge and ensure that provision is flexible rather than simply expecting children and young people to fit into what is already provided.
- A responsible person has an overview of case histories, the nature of and reasons for the allocated provision, the timeline of the programmes and their effectiveness in terms of the academic achievement and personal development of the children and young people.
- Robust systems for working with other agencies, including CAMHS, the police, the youth offending service and local voluntary agencies, ensure that all parties share responsibility for providing all children and young people in the locality with the support they need to access full-time education – or as near to full time as their health allows.
- Responsibility for children and young people in a local area is shared and communicated effectively and taken on by all schools and education services, either through multi-agency locality arrangements or fair access panels linked to behaviour partnerships.<sup>11</sup>
- Multi-professional teams (including groups of schools) take responsibility for monitoring and acting on the outcomes for children and young people who do not have access to school in the usual way.
- The professionals involved in the local area's multi-professional groups have high aspirations for all children and young people and are strongly committed to ensuring that educational provision contributes significantly to helping children and young people move forward successfully, by aiding treatment and recovery or discouraging re-offending.
- Home tuition is rigorously monitored and evaluated; it is part of a continuum of provision and not an end in itself.

### **Common barriers to success**

- The local authority does not monitor and evaluate educational provision for, and take-up by, children and young people who do not have access to school in the usual way.

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<sup>11</sup> Behaviour partnerships are groups of schools working together in their local area to promote and share good behaviour management and to arrange managed moves and support for children and young people where needed.

- The responsible person is not sufficiently senior to make access to good-quality full-time provision for all children and young people a priority.
- Lines of accountability within a local authority's senior leadership team or across partnerships are unclear or non-existent.
- The local authority does not challenge schools sufficiently.
- Close liaison and information-sharing between schools and other services are lacking.

### **Good practice: information sharing and monitoring**

An urban local authority has a single data system that uses information from education welfare services, behaviour support services and mental health services. This enables the authority to identify young people accessing provision other than at school who are not on the roll of a school, as well as those who access alternative provision through referrals from individual schools. The data show where there are concerns about attendance and where action has been taken. The personalised learning plans that are agreed are subject to regular review, with the explicit aim of increasing the provision to full time when the children and young people are medically fit to do so.

The multi-agency teams in each locality are responsible for reviewing and evaluating the effectiveness of the provision and the progress made by children and young people identified through this system. (Annex B of this report provides an example of a tracking sheet.) This helps decisions to be made about the allocation of provision and support by different professionals. The locality teams are accountable to a senior member of the local authority.

Schools in the local area continue to receive school improvement visits from local authority staff. One of their priorities during each visit is to identify any children and young people who have missed school for 15 days, consecutively or otherwise, and the follow-up action that has been taken.

#### **What makes this work?**

- Clear lines of accountability.
- A simple and inclusive central database.
- Involvement of, and commitment from, all schools in the area.
- Regular review of the effectiveness of actions within locality teams.
- Action taken when there is inconsistent involvement and quality of work from different locality teams.

## What still needs to improve?

- The involvement of the primary schools.

## Good practice: a strong corporate lead

Following Section 3 of the Children, Schools and Families Act (2010) coming into force in September 2011, that made clear the statutory duty to arrange full-time education, the elected members of a rural local authority set clear targets for the quality of education provision and outcomes for children and young people who were not accessing school in the usual way. The authority established clear lines of responsibility that reflect the full range of its vulnerable children and young people.

The elected members hold the Director of Children's Services to account for progress towards the targets. An assistant director is responsible for ensuring that action is taken to meet the targets and others are also accountable, right through the authority, from the person who takes the strategic lead to the professionals at an operational level.

The operational leads have distinct but complementary roles for:

- provision for sick children and young people
- e-learning
- provision for those excluded or at risk of exclusion; this includes the quality assurance of alternative education providers and the pupil referral units.

Performance management takes account of information on the academic progress, attainment and personal development of the children and young people involved. This ensures that service development focuses on need and effectiveness.

This strong corporate lead means that a clear strategic priority is given to these groups of vulnerable children and young people. For example, the Local Safeguarding Children Board has recently run a multi-agency professional development programme on 'hidden children'; this includes those who are out of school or educated at home because they are ill or have some special educational needs.<sup>12</sup>

The local authority is part of the DfE's school exclusion pilot for secondary schools which is about schools keeping responsibility for pupils that they exclude.<sup>13</sup> The pilot has helped to keep children and young people in

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<sup>12</sup> 'Educated at home' in this example does not include children and young people whose parents have elected to educate them at home.

<sup>13</sup> The DfE's school exclusion trials are about greater school responsibility for permanently excluded pupils and an increased focus on early intervention.



schools and means that responsibility for the quality and amount of provision remains with their school.

The area behaviour partnerships are responsible for allocating places on the flexible learning programmes and in the pupil referral unit. The schools have to agree their priorities for places – essentially, an effective system of self-regulation. This new, shared role as commissioners means that the places are used more effectively. When a new academy chose not to become involved, the Director of Children’s Services took action. Following discussions that were held about its responsibility for children and young people in the local area, the academy became active in the partnership and has reduced its use of exclusions.

The local authority regularly provides each partnership with data about attendance, exclusions (fixed-term and permanent), movement between providers, and children and young people who are accessing alternative places. This enables all schools, including the academies, to challenge each other and the local authority and to work together to find and share solutions.

#### **What makes this work?**

- Strong commitment, articulated at the highest strategic levels, to provide effective provision for vulnerable groups of children and young people.
- Clear lines of accountability within the local authority and between services, schools and other providers.
- Shared responsibility of the secondary schools (including academies) as commissioners for provision for any children and young people who are excluded.
- Action by the local authority to ensure that local schools and academies help it to fulfil its statutory duties.

#### **What still needs to improve?**

- Involvement of primary schools.

## **Working together with other services**

### **Good practice**

- Systems are set up with clearly identified roles and robust lines of accountability so that effectiveness does not depend solely on the attitudes of the individuals involved.
- Detailed information is shared quickly between schools and other provision.

- All partners have high expectations and are committed to the role of education as part of a child's or young person's programme; for example to help them:
  - with treatment or recovery
  - return to school to learn with their friends
  - be part of the local community
  - stop offending
  - reach their academic potential and be successfully independent in the future.
- Well-structured, multi-agency locality teams are held to account for ensuring that all children and young people receive enough good-quality education so that they make at least good progress, both academically and socially.
- Clear joint planning works to increase children and young people's access to education and tries to avoid provision such as home tuition or one-to-one tuition where individuals are isolated for too long.
- Dual rolls are used to maintain contact with a pupil's original school.

### **Common barriers**

- The local authority does not identify a responsible person to liaise with other services, for example, health or secure provision, particularly when the provision is out of the authority's area.
- The local authority is not involved in making sure that a child or young person who has a statement of special educational needs has his or her full entitlement to specialist education and other services while also accessing health services.
- When a child or young person accesses health provision, secure or alternative education provision, the original school does not commit itself to continuing contact, so information is not shared when it needs to be.
- Schools do not work together or with other providers well enough to re-integrate children and young people successfully, so gaps in provision emerge.
- If no school place is available when a young person is discharged from health or secure provision, there is a gap in education provision.
- The local authority does not organise links between home tuition and hospital schools well when children and young people are receiving regular hospital treatment. As a result, the treatment disrupts their education or there is a gap when they are discharged.

## **Good practice**

### **Parents' comments:**

'They took a broken child and a family in a mess and brought her back to us...they were right, she needed a programme of reintegration.'

A child attending a hospital school had lost many of her previous skills. Her writing was merely a scribble when she started at the hospital school. Initially, she hated all school activity and especially the classroom setting.

The plan started with one-to-one tuition but it also clearly identified how this tuition would be developed to involve her in small group work, using creative activities at first, and then move towards reintegrating her into her mainstream school. Through drama, art, psychiatric services and a well-organised reintegration programme, the girl's interest and engagement developed steadily until she became confident enough to relearn lost skills.

Over a five-month period she regained skills in literacy and numeracy. She moved from being uncommunicative and withdrawn to participating in group activities. She began to respond to questions and formed friendships with her peers and adults.

Communication between the hospital school and the child's mainstream school was excellent. The latter was keen and willing to work closely to help reintegration following her long absence. Through careful planning and a commitment to reintegration from the start, the hospital school supported the child and the parents throughout the programme. The hospital school also provided a teacher to work with the child in the mainstream setting.

Her parents were confident to listen to advice and follow it because the professionals involved also listened to them and adapted the provision accordingly. The programme was developed using their knowledge of their child as well as the professionals' knowledge of successful programmes for those with similar needs. The whole of the pupil's family felt involved in her education from day one and the close links with her mainstream school meant that it could contribute and be kept informed about her progress.

Close collaboration between the hospital school, the family and the mainstream school helped this child to regain many of her skills and reintegrate successfully into school.

### **What made this work?**

- Experienced staff's high expectations of the child.

- Keeping education as an important part of her treatment, even when the child was very unwell.
- Working closely with parents so that they had confidence in the programme.
- A coherent programme between therapy and education.
- A clear plan identifying long-term outcomes for reintegration.
- Close liaison with the local authority and the mainstream school so that a place at the school was still available when needed and staff were well prepared for the pupil's return.
- Using the child's interests within a structured educational programme.
- Monitoring success over time, including after discharge from hospital.

## Early identification

### Good practice

- Data are available centrally to ensure that the strategic lead within a local authority can identify and take action if a programme for a child is not arranged.
- Services actively share information: for example, data from the education welfare services is held centrally for all schools; antenatal services identify young mothers. CAMHS and youth offending teams ensure that they inform the school or the local authority as soon as possible when a child or young person who is new to them has no school place, or will not be accessing school in the usual way.
- Careful monitoring by schools and the local authority means that they can act swiftly on any dips in performance, health, engagement or attendance.
- Professionals take concerns raised by parents and carers seriously, as well as those from children and young people, and they agree on and take action quickly.
- Local authorities and providers act swiftly to ensure that the next step in education is as near to full time as possible when a change in circumstances is anticipated; for example, discharge from hospital, release from custody, or the birth of a baby.

### Common barriers

- The local authority has incomplete or no data about who is not accessing school full time.
- When parents or children raise a concern, professionals either do not take it seriously or do not ask the right questions to find out if the concern that has been mentioned may be masking other, deeper worries.
- When pupils start to miss some of their education with their parents' or carers' permission, this is not followed up.

- When information about changed circumstances is shared, no-one follows up by taking action.

### **Good practice: moving on**

A local authority identifies a mentor to ensure effective liaison with, and transition for, any young person who is serving a custodial sentence or is in a secure welfare placement. When a child is looked after by the local authority, this mentor is the head or member of staff of the virtual school for looked after children. The mentor attends pre-release reviews and continues to act as an education advocate for the young person, ensuring that continuing education and support are in place. The mentor also keeps his or her own links with the child or young person.

Full-time education is nearly always available for any young person returning to the area. This place is ready when the young person is released, and opportunities for transition meetings or visits (if geographically possible) are opened up. The mentor also ensures that any gaps in education are tackled. This works well to reduce re-offending.

### **What makes this work?**

- A named person at a sufficiently influential level being responsible for securing a school place.
- The commitment of the named person to attending the pre-release meetings and working with the child or young person through transition and beyond.

### **What still needs to improve?**

- Sufficient school places or other educational provision are needed so that all leavers from custody are able to access full-time provision when they are released.<sup>14</sup>

### **Good practice: making links to make it work**

A local authority's early identification of those at risk of missing education is effective because of good relationships between the authority and schools, including academies, alongside formal procedures to bring professionals together. Every mainstream and special school has a named link person for those receiving education other than at school and local

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<sup>14</sup> In 2010 Ofsted reported that 'Arrangements for children and young people to continue their education and training when moving from custodial sentences back to their communities were unsatisfactory.' For further information, see: *Transition through detention and custody* (090115), Ofsted, 2010; [www.ofsted.gov.uk/resources/090115](http://www.ofsted.gov.uk/resources/090115).

authority officers hold regular forums with schools. Within the forums, support for individuals is planned and reviewed and there are opportunities to share best practice. In addition, multi-agency problem-solving panels with representation from a range of services identify and plan support for more complex cases.

Lead personnel in the local authority monitor the effectiveness of alternative provision by checking both the amount of access to education and the children and young people's social and academic progress and attainment. They also pick up children and young people who are at risk of not having a school place and help to secure these wherever possible. The local authority officers work closely with the government's 'troubled family' initiative to ensure that information is shared and that work is coordinated effectively where there is an overlap.<sup>15</sup>

Education and social services use the same central electronic recording system to facilitate good communication. This helps to make joint working between schools and services effective and ensures that each case is referred to the central team. A key worker is assigned to each child or young person. In cases of absence, the system enables others to provide parents with the latest update on their child's progress and provision. Parents and carers as well as schools feel well informed.

The system also enables the local authority to identify any patterns of concern in particular areas of the authority or with particular schools or services. This promotes challenge as well as support.

There is some frustration that other local authorities do not have similar systems and that transferring information can be very slow when a child moves across local authority borders.

#### **What makes this work?**

- Easily accessible central systems for collating information.
- Key people with clear responsibilities at local authority and school level.

#### **What still needs to improve?**

- Consistency across the local partnerships.

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<sup>15</sup> The 'troubled family' initiative is a government trial enabling local authorities to tailor support to whole families with complex problems, helping adults back to work and making sure that children attend school. For further information, see; [www.gov.uk/government/policies/helping-troubled-families-turn-their-lives-around](http://www.gov.uk/government/policies/helping-troubled-families-turn-their-lives-around).

- The availability of effective systems in all local authorities for sharing relevant information in a timely way so that it is available when children and young people move across local area boundaries.

## High-quality provision

### Good practice

- Any provision is rigorously evaluated by considering academic progress and attainment as well as personal development.
- A range of flexible, adaptable provision is available to respond to individual needs. This may include home tuition; working individually in a local venue; attending small group provision; well-managed and supervised e-learning supplementing face-to-face tuition, through to a well-planned and pertinent transition to full-time education in an appropriate school.
- Planning for each child or young person carefully identifies priorities based on high aspirations for them and looks forward to how provision will be adapted as circumstances change, making sure that the child or young person makes the best possible progress.
- The programme always includes learning opportunities with other children and young people and these opportunities gradually increase so that individuals are not isolated.
- For those who are in-patients, education hours are both sufficient and flexible so that when medical needs take precedence, educational needs can be met fully as well.
- Access to a suitably broad curriculum makes sure that children and young people are not disadvantaged by the lack of availability of subjects where they may have strengths or where they may have been following an examination course previously.
- Plans are reviewed frequently and adaptations are made quickly so that children and young people keep up or are 'back on track'.
- Good-quality home tuition is part of a continuum of provision and not an end in itself.

### Common barriers

- Part-time provision is seen as successful in itself.
- Time lost before admission leads to entrenched disengagement.
- Specialist teaching and a broad curriculum are lacking.
- Support for specialist teaching is lacking, particularly for post-16 students attending college for vocational skills.

- Health professionals do not take sufficient account of the role of education in treatment or recovery.
- Space to teach effectively is lacking when children and young people access health provision.
- Home tuition is not quality assured.
- Children and young people's engagement with and use of e-learning are not being supervised, monitored or evaluated effectively.

### **Good practice: keeping it local**

In direct response to the Children, Schools and Families Act (2010), a local authority with many rural districts committed additional resources to meet the needs of children and young people requiring education other than in the usual way. To provide a local response across a wide area, the authority set up area bases. These are coordinated by a central leader with an increased number of teaching staff. Children and young people are offered full-time education through a mix of learning at a base and working at home using e-learning. Although not all pupils are initially able to take full advantage of a full-time programme, the structure is in place to provide it. The e-learning is very well-developed and provides a broad range of subjects and opportunities for real-time learning, with direct contact with teachers and tutors.

The local authority is acutely aware that e-learning is not always the right option for children and young people, especially those for whom developing social skills is a priority. The authority also observed that some children and young people quickly lack engagement in e-learning if they find typing difficult, or if they are studying topics other than those in which they are very interested, so adjustments are made. Although the service provides full-time education for any child or young person who is well, all of them remain on the roll of a mainstream school to ensure continuity and facilitate their return to school when appropriate.

### **A pupil's experience**

A young person had been at home for a considerable time and was used to spending a great deal of his time playing computer games. There were few routines at home and if he wanted to he would stay up all night.

Staff from the education service worked closely with mental health services to ensure a coordinated approach for him and his parents. A detailed assessment was made of his skills and understanding across the curriculum and a programme was carefully designed, with involvement from his mother and professionals. The parenting support service and the centre worked together to set up a behavioural programme to help him leave the house. His mother was encouraged and supported to establish appropriate rewards and to set boundaries. As a result, he gradually



increased his attendance at the centre from three to five mornings a week. This helped him to make great strides, both socially and academically.

The e-learning was swiftly adapted because, although he started working well with it, he reverted to playing computer games. It was set up in such a way that it required contact with tutors and therefore the centre was swift to pick up his lack of engagement. The service's flexibility meant that provision could be adapted quickly. A tutor now supports the young person in the afternoons so that his learning continues.

#### **What makes this work?**

- A coordinated approach with CAMHS.
- A detailed assessment of academic attainment.
- A carefully planned, structured programme in the mornings.
- Swift responses to changes in his engagement and learning.

#### **What still needs to improve?**

- The number of options available in addition to e-learning.

## **Continuity of provision**

### **Good practice**

- Planning for the next steps, with the long-term aim of returning to full-time education, begins at the start of any part-time provision.
- Links are maintained with the child or young person's original school, friends and local services where these are appropriate.
- Children and young people complete coursework and examinations using the same examination board with which they were previously studying.
- A child or young person's original school understands which work might be missed and works closely with other providers and services to help individuals keep up with their work.
- Children and young people are kept on dual rolls wherever possible when they are not accessing school in the usual way.
- Careful planning makes sure that there are no gaps or delays in the provision, and that the child or young person and their parents and carers understand the various stages of the provision and have confidence in what has been planned.
- Local authorities have already begun to take action to be able to fulfil requirements for many of these children and young people once the participation age is raised.

- When determining health provision, health professionals take into account a child or young person's ability to take part in education.
- Local authorities and schools are aware of, and prepared for, immigration. One local authority had established a focused programme with a local college for Year 11 young people who were new to the country and who were unable to access school in the usual way, or who needed support in addition to what was provided by their mainstream school.

### **Common barriers**

- Previous schools provided only limited information about a child or young person's progress, attainment and attitude.
- Information across local authorities was delayed or missing when a child moved from one area to another.

#### **Good practice case study**

A major strength of a hospital school that admits children and young people of all ages from all over the country is that planning for transition begins as soon as they are admitted. The hospital school establishes links with a key person at the child's original school. It also links with the local authority in case the child's original school would not be the best place for him or her to return to. This helps to ensure continuity of provision at every stage.

When they arrive at this hospital school, only half the children and young people are in full-time education. Because of their highly complex medical needs, many have had poor or erratic attendance for a long time. The school works very closely with a wide range of multi-agency staff, including those in the child or young person's home area, to help prepare them and their families for the time when they will leave the hospital school. The school recognises the central role of parents and carers in securing a successful transition. For some children and young people, this may be a few weeks or months later; for others, however, it can be a significantly longer time. By the time children and young people leave the school, nearly all have a full-time education placement or full-time bespoke provision waiting for them.

As well as clear academic targets in each subject, all children and young people have explicit goals that focus on developing positive behaviours, skills and attitudes to equip them for full-time, mainstream education wherever possible. The staff of the hospital school meticulously monitor children and young people's progress against these goals and take an active role in guiding the original school (or new school) throughout the time in hospital and afterwards. They involve key staff from the school and local authority in the programme to help a child or young person move on. Hospital school staff recognise that most schools and colleges

have very little experience of children and young people who need in-patient provision for mental health or psychological conditions. By understanding the concerns that a school may have about a child's return, they are able to provide the support that schools require, as well as support for the children, young people and their families. The hospital school keeps in touch with schools and parents for some time afterwards.

### **A pupil's experience**

Although the young person is extremely settled at the hospital school, because 'school feels like a family', and recognises how it has helped her succeed, she is also positive about the future. She acknowledges that it is not possible to stay there and feels she is being well prepared for leaving.

Staff at her original school provided information on her levels of attainment in each subject, attendance and some very useful, accurate information, based on their experience, on how best to manage her behaviour. The hospital school used the information to build on her interests in art and sport. This helped to encourage her active participation in wider school life. Her programme was balanced coherently between therapy and education and was adapted as her needs changed.

From the start there was a clear expectation that she would return to full-time mainstream school and the hospital school maintained close links with the original school. Provision increased gradually from non-attendance to 21 hours. Continuity in education was ensured because the school provision was built carefully around therapy that continued in the community after she was discharged and while she was settling back at home.

This young person has made good progress in school and in her therapy. The plan is that she should return to her mainstream school, full time, in the next two months.

Her good progress in most subjects is helping her to make up for lost time. She is taking increasing responsibility for her own learning and shows very few of the challenging behaviours seen previously.

### **What makes this work?**

- Parents feel fully involved and feel they are listened to.
- A key person keeps parents informed.
- A key person keeps the original school and local authority involved in the reintegration programmes.
- Regular and frequent formal reviews involve all parties.
- Regular and frequent meetings for the young person and key staff allow for discussion of any concerns.

- Every child and young person has an individual programme.

### **Good practice case study**

Three secure training centres managed by the same provider have designated education welfare officers. Their role is to find out relevant information about a young person's previous education placement, behaviour and achievement. They use this information to personalise education programmes for young people at the secure training centre that will help their transition back to school.

The education welfare officers also actively seek to ensure that a young person is kept on the roll of their previous school, wherever this is possible and appropriate. They establish links with the school from the outset of the young person's custodial sentence so that contact can be sustained. Sharing information about work, learning and progress brings better opportunities for a smooth transition back to the community and school at the end of the sentence.

If a young person is returning to a different school, the education welfare officers work closely with local authorities to secure a new placement, so that preparation for transition can be started in a timely way before the end of their sentence.

#### **What makes this work?**

- A key person with an education brief keeps links open with schools.
- A key person with an education brief liaises with the local authority.
- Tenacity ensures that a school place or other appropriate full-time education provision is available when the young person is released.

## **Successful reintegration**

### **Good practice**

- Young people are supported to maintain links with school friends.
- A long-term view of transition is taken at the start of part-time provision to make sure that services and providers do not work in isolation.
- A child or young person's original school continues its interest and works with others to provide an appropriate and supportive placement on return.
- Staff from the part-time or alternative provision and the school to which a child is returning devise transition plans and involve the child and family fully.
- Transition between each phase of education, where a change in school is inevitable, is carefully planned at an early stage.

- Children and young people are re-engaged with their school well in advance of their discharge from health provision or their release from custody.
- Reintegration programmes include meaningful learning that is related to previous learning, age and attainment, such as continuing relevant courses with focused vocational elements.
- When a child or young person is returning from custody, key professionals from the child or young person's original local authority are closely involved in all planning meetings at the secure setting.
- Health services and other relevant providers give good information and training so that the schools take on the responsibility and give the necessary support to help children and young people settle back into school.

### **Common barriers**

- Transition between the alternative placement and school is not well planned and arrangements are ineffective, often because of the distances involved.
- Although there are good intentions, little contact is sustained with friends or staff.

#### **Good practice: keeping in touch**

Children and young people attending health provision as in-patients are encouraged and actively supported to maintain their friendships at their original schools and to keep in touch with staff. As part of a planned programme, and in consultation with other services such as CAMHS, the child, parents and carers and the child's current and original schools make a commitment to maintaining contact and agree how this is to be done. Access to technology has helped considerably but the potential disadvantages and risks are also recognised by the school.

Having a plan for communication and sharing information about opportunities for contact leads to more regular communication that benefits the child or young person, as well as providing opportunities to prepare friends and the staff for any differences they may find. Any potential detrimental effects are minimised by acknowledging the need of the child to keep in touch, while also ensuring that particular needs are addressed. For example, careful planning for mutually convenient times for video conferencing reduces the risk of disappointment and frustration. It also ensures that communications can be monitored to make sure that they are positive and in the best interests of the child or young person.

#### **Good practice: emotional support**

In a pupil referral unit that provides education for children and young people with eating disorders at an in-patient health provision, transition

back to school is part of the original planning. When the child or young person is first admitted, the unit usually receives good information about academic attainment. It uses this well and quickly sets up individual programmes that ensure continuity in learning, building on previous skills to accelerate academic progress. Health professionals recognise and value the importance of education as part of the provision and work closely with education staff to ensure that there is as little disruption as possible to learning. The education staff are tenacious in keeping close contact with a key member of staff at the original school and, increasingly, they involve them in planning for the child or young person's return.

Transition arrangements involve a key member of education staff and a key health professional working with the mainstream school. In an evaluation of the effectiveness of these arrangements, health and education staff realised that many of the mainstream schools struggled when staff conversations upset children and young people; the latter perceived the staff as judging their appearance. For example, positive comments from staff about how well they looked were perceived by the students as meaning they were overweight. As a result of their evaluation, the approach has moved from trying to help mainstream schools to control the environment, such as adapting their language, to helping them establish positive strategies to use when problems occur. These strategies are agreed between the school and the pupil as well as parents and carers.

Alongside this, the health professionals are working more intensely with the children and young people to help them to understand how their own perceptions affect their responses: for example, their perception of themselves can change the intended meaning of phrases that others use positively. As a result of the measures taken, transition has become far more successful and the children and young people have more confidence in the approaches being taken.

#### **What makes these two case studies work?**

- Friendships and relationships with staff are seen as priorities for successful reintegration as well as recovery.
- Commitment from the schools involved.
- Clear planning and close contact between schools and other services.
- A clear understanding of the child or young person's problems or condition, shared as necessary.
- High priority given to reintegration from the outset.
- Good relationships with schools maintained through frequent and purposeful contact from the beginning.
- Academic attainment, achievement and access to education given high priority from the point of admission to in-patient care.
- Rapid engagement with learning.

- Good information before admission on attainment, courses and personal development, informing plans and tenacious follow-up, with assessment helping to fill gaps in learning.
- Good evaluation of the service by the senior team, leading to changes in how schools are supported for transition, including training for staff in the mainstream schools by focusing on solutions.
- Sensitive use of technology to avoid unintentional disappointment or risk for the child or young person.

#### **What still needs to improve?**

- Training for staff to raise awareness of the emotional and psychological needs associated with a child or young person's mental health.

## **Working with parents and carers**

3. Many aspects of good practice when working with parents, carers and the children and young people have been illustrated already in the earlier case studies in this report. The following sum up both good practice and common barriers to success in relation to parents and carers.

### **Good practice**

- The original school and the current education provider maintain close contact with parents and carers.
- A key person is assigned to a case, either from the original school or from the local authority. This person:
  - is knowledgeable about local services.
  - has sufficient influence and can ensure access to effective provision that is appropriate to the child or young person's needs.
  - has a good understanding of best practice.
  - helps parents and carers to raise their aspirations for their child based on a robust understanding of best practice and the child or young person's needs.
  - coordinates plans, provision and communication, and is responsible for reporting the outcomes.
- Parents and carers, as well as the child or young person, are actively involved in planning a culture for learning right from the start, so that there is no disengagement. Expectations about returning to full-time education are communicated clearly.
- Long-term goals are reviewed formally and frequently.

- Regular reviews and meetings involve parents, carers and the child or young person. They focus on the effectiveness of part-time programmes, ensure that contingency plans are in place, that concerns are tackled and that quick action is taken when the child or young person is fit enough to have more teaching.
- Parents and carers are clear about the role they play. They feel that they are listened to and that their contribution makes them partners in their child's educational programme; but they also understand that they are not the main educators.
- Ways for parents, carers, children and young people to raise concerns with the local authority are clear, well-advertised and known by schools and other services. Quick action takes place about any concerns, even if a proposed solution is only temporary.
- Professionals make it clear to parents and carers that education is a significantly positive aspect of their child's recovery or treatment and that treatment, assessment, disengagement (by the child or young person) and complacency (from parents) must not be allowed to interrupt education unduly.

### **Common barriers**

- Parents and carers feel that they have to exert pressure to get anything done: as a result, some give up or are pleased with provision for their child that is less than the best.
- A lack of guidance for parents and carers about their child's transition or next steps means that parents and carers lack confidence in the changes that take place.
- Statutory processes, assessments and differing requirements by services lead to delays.
- Home tuition is presented as a solution rather than as a step on the way to the higher expectation of inclusion and full-time education.

### **Notes**

In July 2012 inspectors held discussions with three focus groups of professionals who provide children and young people with education when they are unable to attend school in the usual way. The information from the focus groups helped to refine the questions for the survey.

Between September and December 2012, inspectors visited 15 local authorities and 37 providers, including secondary schools, special schools, hospital schools, pupil referral units and local authority-run education services. At least one provider was visited in each of the 15 authorities. Inspectors met a range of education officers and service leaders, as well as key partners who were part of the local area approach to multi-agency work. Inspectors held interviews with leaders of primary schools in the



area and representatives from the local Parent Partnership Services. During these visits, inspectors also reviewed individual case studies and spoke to parents and carers. Telephone interviews were then arranged and conducted with 41 headteachers from secondary schools (including academies) across the 15 authorities.

Inspectors also visited eight providers (based in other local authorities) who have a national role and work with a range of local authorities and schools. During these visits inspectors evaluated the provision and carried out 97 case studies.

In addition, staff from eight secure training centres and secure children's homes responded to a detailed questionnaire and subsequently took part in telephone interviews with inspectors.

## **Further information**

### **Ofsted publications**

*Alternative provision* (100233), Ofsted, 2011; [www.ofsted.gov.uk/resources/100233](http://www.ofsted.gov.uk/resources/100233).

*Children missing from education* (100041), Ofsted, 2010; [www.ofsted.gov.uk/resources/100041](http://www.ofsted.gov.uk/resources/100041).

*Missing children* (120364), Ofsted, 2013; [www.ofsted.gov.uk/resources/120364](http://www.ofsted.gov.uk/resources/120364).

*Transition through detention and custody* (090115), Ofsted, 2010; [www.ofsted.gov.uk/resources/090115](http://www.ofsted.gov.uk/resources/090115).

### **Other publications and guidance**

*Ensuring a good education for children who cannot attend school because of health needs: statutory guidance for local authorities*, Department for Education, 2013; [www.education.gov.uk/aboutdfe/statutory/g00219676/health-needs-education](http://www.education.gov.uk/aboutdfe/statutory/g00219676/health-needs-education).

*Alternative provision: a guide for local authorities, headteachers and governing bodies of schools, pupil referral units and other providers of alternative provision*, Department for Education, 2012; [www.education.gov.uk/aboutdfe/statutory/g00211923/alternative-provision](http://www.education.gov.uk/aboutdfe/statutory/g00211923/alternative-provision).

*School attendance: statutory guidance and dept advice*, Department for Education, 2010, updated 2013; [www.education.gov.uk/aboutdfe/advice/f00221879/advice-on-school-attendance](http://www.education.gov.uk/aboutdfe/advice/f00221879/advice-on-school-attendance).

*No child with cancer left out. The impact of cancer on children's primary school life*, CLIC Sargent, 2012; [www.clicsargent.org.uk](http://www.clicsargent.org.uk).

*Children and equality: equality evidence relating to children and young people in England*, Office of the Children's Commissioner, 2012; [www.childrenscommissioner.gov.uk](http://www.childrenscommissioner.gov.uk).

*Count me in 2010: results of the 2010 national census of inpatients and patients on supervised community treatment in mental health and learning disability services in England and Wales*, Care Quality Commission, 2011; [www.cqc.org.uk/](http://www.cqc.org.uk/).

*Not present and not correct: understanding and preventing school exclusions*, Barnardos, 2011; [www.barnardos.org.uk](http://www.barnardos.org.uk).

## **Annex A: Providers visited for this survey**

### **Local authorities visited**

Blackburn with Darwen Borough Council  
Bradford Metropolitan District Council  
Bristol City Council  
Camden Council  
Derbyshire County Council  
East Sussex County Council  
Halton Borough Council  
Lancashire County Council  
North East Lincolnshire Council  
Northumberland County Council  
Peterborough City Council  
Southampton City Council  
Telford and Wrekin Council  
Wandsworth Borough Council  
Wolverhampton City Council

### **Schools and pupil referral units visited**

<b>School</b>	<b>Local authority area</b>
Agincourt House	Camden
Alternative and Complementary Education and Residential Service (ACERS)	Lancashire
Bethlem and Maudsley Hospital School	Southwark
Bristol Hospital Education Service	Bristol
Chelsea Community Hospital School	Kensington and Chelsea
Children's Hospital School at Great Ormond Street and UCH	Camden
College Central	East Sussex
Dorchester Learning Centre	Dorset
Flexible Learning Educational Support Service (FLESS)	East Sussex
Education in Hospital 1 (Airedale) C/O Learning	Bradford

Support Service, Education Bradford	
Education in Hospital 2 (BRI)	Bradford
Ernest Bevin College	Wandsworth
Henbury School	Bristol
Home and Hospital Service	Enfield
Hospital and Home Tuition Unit	Wandsworth
Hospital Teaching and Home Tuition Service	Rotherham
James Brindley School	Birmingham
Key Stage 1, 2 & 3 Short Stay School	Telford & Wrekin
Kingston Centre (Primary PRU)	Wolverhampton
KS4 PRU	Halton
Midpoint Centre (Key Stage 4 PRU)	Wolverhampton
North East Derbyshire Support Centre	Derbyshire
Northumberland Pupil Referral Unit	Northumberland
Pilgrim PRU Co School Adolescent Unit	Cambridgeshire
Round Oak School and Support Service	Warwickshire
St Anne's Catholic School	Southampton
St Thomas's Centre	Blackburn with Darwen
Tarleton Academy	Lancashire
The Pilgrim School	Lincolnshire
The Pupil Referral Service, Peterborough	Peterborough
The Sholing Technology College	Southampton
Thomas Group	Camden
Tracks	Bradford
Tremona Road Hospital and Home	Southampton
Wade Deacon High School	Halton
Wirral Hospitals School and Home Education Service Community Base	Wirral
Young People's Centre	North East Lincolnshire

## Telephone interviews

### School

Acland Burghley School  
 Arthur Mellows Village College  
 Astley Community High School

### Local authority area

Camden  
 Peterborough  
 Northumberland

Battersea Park School	Wandsworth
Berwick Academy	Northumberland
Charlton School	Telford and Wrekin
Chesnut Lodge Special School	Halton
Colton Hills Community School A Specialist Language College	Wolverhampton
Cramlington Hillcrest School	Northumberland
Deansfield Community School, Specialists in Media Arts	Wolverhampton
Eckington School	Derbyshire
Garratt Park School	Wandsworth
Grange Technology College	Bradford
Hadley Learning Community – Primary Phase	Telford and Wrekin
Hasland Hall Community School	Derbyshire
Havelock Academy	North East Lincolnshire
Haverstock School	Camden
Heath Park	Wolverhampton
Helenswood School	East Sussex
Humberston Park School	North East Lincolnshire
Ken Stimpson Community School	Peterborough
Laisterdyke Business and Enterprise College	Bradford
Mill Hill School	Derbyshire
Nene Park Academy	Peterborough
New Fosseyway School	Bristol
Parliament Hill School	Camden
Ribblesdale School	Lancashire
Ringmer Community College	East Sussex
Ripley St Thomas Church of England Academy	Lancashire
Rosewood Free School	Southampton
Saint Aidan’s Church of England Technology College	Lancashire
Saint Cecilia’s, Wandsworth Church of England School	Wandsworth
Saint George Catholic Voluntary Aided College Southampton	Southampton
St Chad’s Catholic and Church of England High	Halton

## School

St Mary Redcliffe and Temple School

Bristol

St Peter's Collegiate Church of England School

Wolverhampton

St Richard's Catholic College

East Sussex

Sutherland Business Enterprise College

Telford and Wrekin

Thomas Telford School

Telford and Wrekin

William Reynolds Primary School

Telford and Wrekin

Witton Park High School

Blackburn with Darwen

## Secure estates visited

## Local authority area

Aycliffe Secure Services

Durham

Clare Lodge Secure Unit

Peterborough

Medway Secure Training Centre (G4S)

Kent

Oakhill Secure Training Centre (G4S)

Milton Keynes

Rainsbrook Secure Training Centre (G4S)

Warwickshire

Red Bank – Willow House

St Helens

Lincolnshire Secure Unit

Lincolnshire

St Catherine's Secure Centre

St Helens

## Annex B: Exemplar data collection tracking sheet

<i>Case number</i>	<i>Name</i>	<i>Ethnicity</i>	<i>Gender</i>	<i>Date of birth</i>	<i>National Curriculum Year</i>	<i>SEND</i>	<i>Locality team responsible</i>	<i>Original school</i>	<i>School or LA</i>	<i>Provider(s)</i>	<i>Provision start date</i>	<i>Hours</i>	<i>Review date</i>	<i>Description of reasons behind provision</i>	<i>Action to be taken and by whom</i>