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# Children in Care in Northern Ireland 2016 - 17



Statistical Bulletin



# Reader Information

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Target Audience Directors of Children's Services, Chief Executives of

Boards and HSC Trusts in Northern Ireland, health care professionals, academics and social care stakeholders.

Main uses of document The main uses of these data are to monitor the delivery of

social care services to children, to help assess Trust performance, corporate monitoring, to inform and monitor related policy, and to respond to parliamentary/assembly questions. The bulletin is also used by academics/researchers, the voluntary sector and those with an interest

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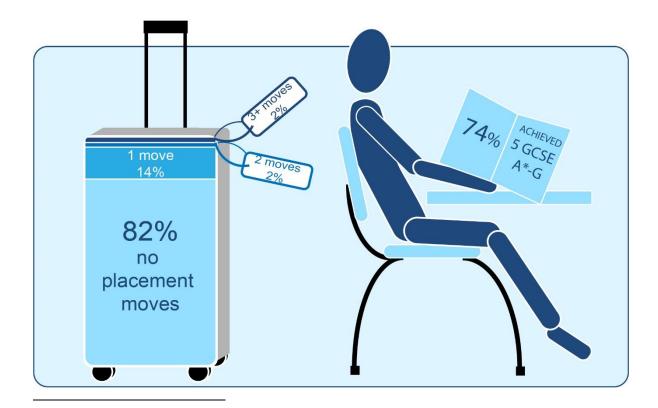
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# **Key Findings**

This bulletin presents findings from annual information returns of children who have been in care continuously for twelve months or longer. It details analyses relating to the child's placement and health, schooling and educational attainment. It also covers cautions and convictions and current activity for those that finished compulsory schooling.

- → At 30 September 2017, 2,325 children and young people had been in care continuously for 12 months or longer;
- → Of these, almost one fifth (18%) had experienced a placement change during the previous 12 months, which is the lowest number in recent years. When excluding those children whose placement move was placement for adoption, the proportion of children with a placement change was 17%;
- → Having a statement of Special Educational Needs continues to be more prevalent among the children in care of school age (24%) compared with the general school population (5%);
- → Some 12% of school aged children and young people had full attendance through the 2016/17 school year, while 9% missed 25 or more school days;
- → In general, children in care for 12 months or longer did not perform as well as their peers on the Key Stage Assessments<sup>1</sup>;
- → Almost three quarters (74%) of looked after children attained five or more GCSE at grades A\* to G; this compared with 99% of the general school population. The equivalent figures for those achieving GCSE at grades A\* to C were 48% and 85%.



<sup>&</sup>lt;sup>1</sup> See Chapter 7 for details and limitations to the figures.





www.health-ni.gov.uk/topics/dohstatistics-and-research Statistics and research for the **Department of Health** is provided by the Information and Analysis Directorate (IAD). IAD is responsible for compiling, processing, analysing, interpreting and disseminating a wide range of statistics covering health and social care.

The statisticians within IAD are out posted from the Northern Ireland Statistics & Research Agency (NISRA) and the statistics are produced in accordance with the principles and protocols set out in the Code of Practice for Official Statistics.

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This publication is produced by Community Information Branch.

### Our Vision and Values

- Provide up-to-date, quality information on children and adult social services and community health;
- to disseminate findings widely with a view to stimulating debate, promoting effective decision-making and improvement in service provision; and
- be an expert voice on social care information.

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# **About Community Information Branch**

The purpose of Community Information Branch (CIB) is to promote effective decision making in children and adult social services by providing quality information and analysis.

We collect, analyse, and publish a wide range of community information that is used to help monitor the delivery of personal social services policy. Information collected by CIB is used to assess HSC Trust performance, for corporate monitoring, policy evaluation, and to respond to parliamentary/assembly questions.

Information is widely disseminated through a number of regular key statistical publications and ad hoc reports, details of which are available online.

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# CHILDREN IN CARE IN NORTHERN RELAND 2016–17

# 1. Introduction

The Children (Northern Ireland) Order 1995 (the Children Order) is the principal statute governing the care, upbringing and protection of children in Northern Ireland. It affects all those who work and care for children, whether parents, paid carers or volunteers. The Children Order emphasises the unique advantages to a child being brought up within his or her own family. In practice, this means that the Order sees families as a major way of supporting and helping children. Health and Social Care Trusts have the power and in some circumstances the duty, under the Children Order, to help children by providing services to their families.

A child can be referred to social services for a variety of reasons. When a child is referred, social services undertake an initial assessment to determine if that child is a 'child in need' as defined by the Children Order. If a child is considered to be a child in need, services should be offered to assist the child's parents/carers to meet that identified need. Should there be concerns that a child may be suffering or at risk of suffering 'significant harm' Social Services will conduct an investigation under Article 66 of the Children Order and respond appropriately. A Child Protection Case Conference may be convened and the child's name included on the Child Protection Register and a Child Protection Plan drawn up to safeguard the child. If there are significant concerns that indicate authoritative intervention is required Social Services may make application to the Court for a Legal Order to enable them to afford an appropriate level of safeguarding to the child. This may include removing a child from its family and into the care of the HSC Trust.

Children are taken into care for a variety of reasons, the most common being to protect the child from abuse or neglect. In other cases their parents could be absent or may be unable to cope due to disability or illness.

This publication provides valuable information in regards to outcomes for in care children and assists the development of the Looked After Children (LAC) Strategy, the NICS Outcomes Delivery Plan<sup>2</sup> as well as the Health and Social Care Commissioning Plan Direction (CPD)<sup>3</sup>. Within this publication, performance against CPD targets and indicators will be discussed in detail.

# 1.1. The OC2 Community Information Return

This publication presents the latest figures on children and young people in care in Northern Ireland. The OC2 community information return is specifically designed to collect information on children while they are in care, expressly for those who have been in care continuously for 12 months or longer. Together with two additional surveys, OC1, which collects information on educational attainment of care leavers aged 16 to 18, and OC3, which covers the circumstances of care leavers at the time of their 19th birthday<sup>4</sup>, they provide a comprehensive series of data on children and young people in care in Northern Ireland.

The OC2 returns, first published in 2004, collects information relating to the educational qualifications<sup>5</sup>, health and other key areas of children in care continuously for 12 months or more at 30 September each year. Comparisons are included where possible with the general Northern Ireland population and with looked after children in other UK countries. These comparisons should however be treated with caution as they relate at times to very different cohorts of children or slightly different time periods.

<sup>&</sup>lt;sup>2</sup> https://www.executiveoffice-ni.gov.uk/publications/outcomes-delivery-plan-201819

<sup>3</sup> https://www.health-ni.gov.uk/publications/ministerial-priorities

<sup>&</sup>lt;sup>4</sup> Please see Appendix A: Technical Notes for further details on the OC publications

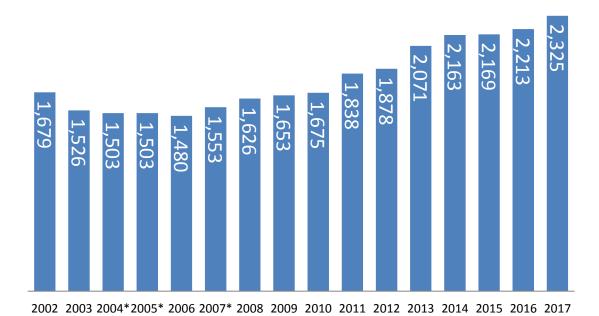
<sup>&</sup>lt;sup>5</sup> From 2015/16, educational information has been received from Department of Education NI

## 1.2. Children in care 2016-17

At 30 September 2017, 2,325 children who were in care in Northern Ireland had been continuously in care for more than a year<sup>6</sup>. Figure 1.1 outlines how the number of children in care for at least 12 months has risen year on year since 2006. The number of children in care in 2017 was 5% higher than in the previous year, and represented a 57% increase from 2006 (1,480).

The rise in numbers of looked after children – as well as referrals to children's services and being registered for child protection in Northern Ireland, is similar to the trend across the UK<sup>7</sup>. The increase may be explained by a number of factors including an increased level of awareness of child protection issues; greater willingness to take action to protect children who are potentially at risk and more adolescents becoming looked after due to family breakdown.

Figure 1.1 Number of children in care continuously for 12 months or longer at 30 September (2002 to 2017)



\*Number estimated for these years

The 2,325 children and young people that had been in care continuously for at least 12 months represented a rate of 53 children per 10,000 population aged under 18<sup>8</sup>; a somewhat lower proportion to that in England, where 62 children per 10,000 child population had been in care for 12 months or more at 31 March 2017<sup>9</sup>.

The rate of looked after children in 2017 was slightly higher than that in 2016 (51 children per 10,000 population aged under 18). Of recent years, the lowest rate occurred in 2006 when 34 children per 10,000 population had been in care for 12 months or longer.

<sup>&</sup>lt;sup>6</sup> This figure may differ slightly from other sources due to categorisation and exclusions.

<sup>&</sup>lt;sup>7</sup> Links to other UK publications can be found in the technical annex

<sup>8 2017</sup> Mid-Year Population Estimates, NISRA 2018

<sup>&</sup>lt;sup>9</sup> Source: 'Children Looked after in England (including adoption and care leavers), year ending 31 March 2017', Department for Education (DfE)

# 1.3. Trust Profile

Table 1.1 sets out the number of children in care for 12 months or longer at 30 September 2017 by Health and Social Care (HSC) Trusts. The Belfast HSC Trust had the largest proportion of the children; a quarter of all children in care continuously for a year or longer (25%).

Table 1.1 Number of children and young people in care continuously for 12 months or longer at 30 September 2017

	Number of children in care	
Belfast HSC Trust	588	25%
Northern HSC Trust	518	22%
South Eastern HSC Trust	389	17%
Southern HSC Trust	356	15%
Western HSC Trust	474	20%
Northern Ireland	2,325	100%

Figure 1.2 sets out the trend figures of looked after children for 12 months or longer over the last five years. It shows that between 2012/13 to 2016/17, all of the HSC Trusts have had an increase in the cohort of these children, from the relatively moderate increase of 4% in the Northern HSC Trusts to the more substantial increase of 31% in the Western HSC Trust. The variance in these figures will to some extent relate to the different population structures and geographies within the individual Trust.

Looking specifically at the last year's change in the cohort of children (change between 2015/16 and 2016/17), the changes were relatively moderate. They ranged from a 13% increase of number of children in care for 12 months or longer in the Northern HSC Trust to a 2% decrease in the Southern HSC Trust.

2016/17 by HSC Trust 700 600 500 Number of children 400 300

Figure 1.2 Change in the number of children in care for 12 months or longer between 2012/13 and

2012/13 - 2016/17

+8%

+9%

Southern

**HSC Trust** 

+13%

Belfast

**HSC** Trust

200

100

0

**HSC Trust** 

# 1.4. Multiple Deprivation Measure and Rurality

The home location of the looked after child prior to entering care was linked to the Northern Ireland Multiple Deprivation Measure 2017<sup>10</sup> (MDM) and the Urban-Rural Classification 2015<sup>11</sup>.

For the children where geographical information was available<sup>12</sup> in 2017, 77% were living in a predominantly urban area before entering care, with 18% originating from rural areas and 5% from mixed urban/rural areas. In comparison, it is estimated that 58% of the Northern Ireland population were living in predominantly urban areas, 33% in rural areas and 9% in mixed urban/rural areas<sup>13</sup>.

An analysis of the MDM quintiles showed that 43% of the children had been taken into care from the 20% most deprived areas within Northern Ireland, similar to the 2015/16 figure (44%). Around six per cent of the children originated from the least deprived quintile. Although there were some variance between the HSC Trusts, a similar picture to that of Northern Ireland in general was observed when examining the distribution of deprivation areas within the individual HSC Trusts.

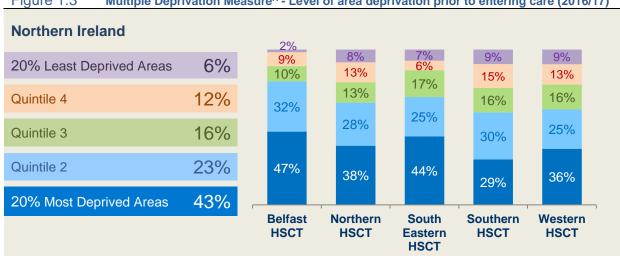


Figure 1.3 Multiple Deprivation Measure<sup>A</sup> - Level of area deprivation prior to entering care (2016/17)

<sup>&</sup>lt;sup>A</sup>The multiple deprivation rank for the HSC Trusts are based on the Trust's individual deprivation structure. Note: The above figures relate to the HSC Trust the child lived in before becoming looked after, which may differ from the Trust area in which the child currently resides.

<sup>&</sup>lt;sup>10</sup> Source: Northern Ireland Statistics and Research Agency – <a href="https://www.nisra.gov.uk/statistics/deprivation">www.nisra.gov.uk/statistics/deprivation</a>

<sup>&</sup>lt;sup>11</sup> "Review of the Statistical Classification and Delineation of Settlements", NISRA 2015

<sup>&</sup>lt;sup>12</sup> Geographical information prior to entering care was available for 95% of the children

<sup>&</sup>lt;sup>13</sup> Calculations using Super Output Area to urban-rural classification. Annex B of "Technical Guidance on production of official statistics for Settlements and Urban-Rural Classification". NISRA 2015

# 2. The Children in Care

# 2.1. Age and Gender

At 30 September 2017, 55% of the children and young people who had been in care for 12 months or longer were male (1,281) and 45% were female (1,044). Similar to 2015/16, some 17% of the children were of pre-school age (1-4 years), 39% were of primary school age (5-11 years), 26% of post-primary school age (12-15) and 18% were 16 years or older. There were only minor differences in the age breakdown between boys and girls.



Figure 2.1 Number of children in care for 12 months or longer by age (2016/17)

# 2.2. Religion and Ethnicity

There was a higher proportion of Catholic (52%) than Protestant (40%) looked after children in 2016/17, with 186 (8%) reported as having either 'No', 'Unknown' or 'Other' religious denomination<sup>14</sup>. This difference would be expected as the 2011 Census results showed that the Catholic population has a younger age distribution than Protestants<sup>15</sup>. These figures are similar to the previous year.

<sup>14</sup> See tables for details

<sup>15</sup> http://www.nisra.gov.uk/Census/detailedcharacteristics\_stats\_bulletin\_2011.pdf

HSC Trust differences were observed in relation to religion, with around three quarters of the children in the Southern and the Western HSC Trusts having Catholic background (71% and 76% respectively), compared to 31-46% in the other Trusts. The Northern HSC Trust had the highest proportion of No, Unknown or Other religion (14%), whereas the equivalent figures in Southern and Western HSC trusts were 4% and 5% respectively.

The ethnic grouping of the children in 2016/17 indicated that 95% (2,200) were White, and of the remaining 5% (125), 36 were Irish or Roma Travellers, 16 were Black and 73 were of mixed, 'other' or not known ethnic backgrounds. Belfast HSC Trust had the lowest population of white ethnic background (92%) whereas all other Trusts had 95% or higher.

# 2.3. Disability

HSC Trusts were asked to indicate if children were disabled in accordance with the definition below:

"The child has a physical or mental impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day-to-day activities".

Using this definition, 13% (299) of the children in care for more than 12 months were reported as disabled in 2016/17, a slightly lower proportion than in 2015/16 (14%). Furthermore, a higher proportion of boys (15%) than girls (10%) were disabled. Although not directly comparable, the NI Census found that 5% of children in Northern Ireland had a limiting long term illness or disability that limited their day to day activity <sup>16</sup>. It would therefore suggest that having a disability is more prevalent among looked after children than the general population.

Figure 2.2 below sets out the frequency of different disability types. The majority of the disabled looked after children had a learning disability (66%) either on its own or in combination with another disability. This was followed by autism (22%) and physically disabled (11%). Some 15% of the disabled children fell into 'Other' categories. Of the children with a disability, 20% (61) were recorded as having multiple disabilities.

Figure 2.2 Children in care with a disability and type of disability (2016/17)

299 children and young people had one or more disabilities							
66%	22%	11%	5%	2%	2%	15%	
Learning disability	Autism	Physical disability	Visually disabled	Hearing impaired	Mental health disability	Other disabilities	

Note: 61 of the children (20%) were recorded as having multiple disabilities and are therefore included in more than one category.

Of the 299 looked after children with a disability, 33% could be found in the Belfast HSC Trust, 23% were in the South Eastern HSC Trust, 21% in the Northern HSC Trust, 17% in the Western HSC Trust and 6% in the Southern HSC Trust. As a proportion of their in care

-

<sup>&</sup>lt;sup>16</sup> Findings from the Northern Ireland Census 2011

children populations, the Belfast and South Eastern HSC Trusts were looking after the largest proportion of disabled children (17%); in comparison, 5% of the looked after children population in the Southern HSC Trust were disabled.

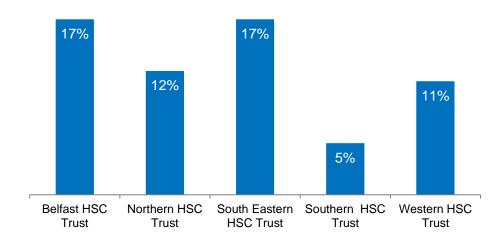


Figure 2.3 Proportion of children in care in each HSC Trust with a disability (2016/17)

Four fifths (80%) of disabled children were placed in foster care (non-kinship or kinship). This represented 13% of all children in this placement type. In comparison, 23% of children in residential placements were considered to have a disability.

# 2.4. Dependants

Becoming a parent may impact on educational and other outcomes for young people. In 2016/17, 12 young people in care had one or more dependent children, 1 less than in 2015/16. The majority of the young people with dependants were female (75%) and all were aged 16 years or older at the time of the survey.

# 3. Health

# 3.1. Development & Health Assessments

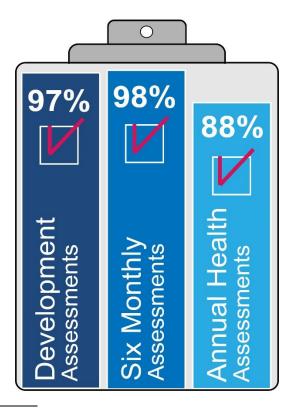
Figure 3.1 sets out the uptake of development and health assessments by children looked after for 12 months or longer. Development Assessments and Six Monthly Assessments relates to the children who were aged 4 and younger at 30 September 2017 (17% or 398 of the children). Annual Health Assessments relates to children aged 5 and over (83% or 1,927 of the children).

**Development Assessments** Nearly all of the children aged under 5 (388 of 398), had their development assessments up-to-date at 30 September 2017 (97%). The 2017 figure was higher than the corresponding figure for looked after children in England (82%).

**Six Monthly Assessments** Of the children aged under 5, 98% (392) had their six monthly assessments up-to-date at 30 September 2017, the same proportion as in 2016.

**Annual Health Assessment** Of the 1,927 children aged 5 and over, 88% (1,694) had their annual health assessment up-to-date at 30 September 2017, slightly below that of 2016 when 90% had their health assessment up-to-date. Similar to Northern Ireland, 89% of looked after children in England aged 5 and over had their health assessment up-to-date.

Figure 3.1 Development and Health Assessments for children in care for 12 months or longer in Northern Ireland and England<sup>17</sup> (2016/17)



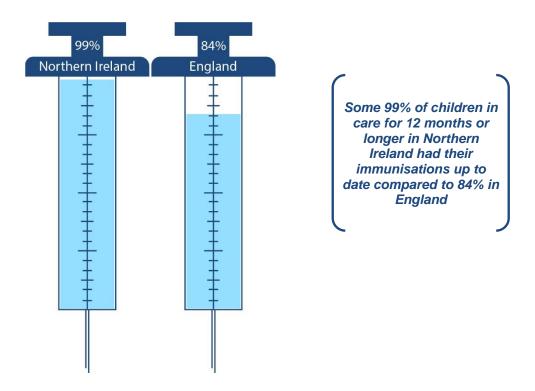
<sup>&</sup>lt;sup>17</sup> Children looked after in England (including adoption and care leavers) year ending 31 March 2017, DfE

## 3.2. Immunisations

Information on immunisations relates to all looked after children covered in this bulletin, and not just to those that were due immunisations in 2016/17. It includes immunisations due before admittance into care and during time spent in care. For the purpose of this survey, children who did not receive immunisations for health reasons or because parents refused consent, were counted as children whose immunisations were not up-to-date.

A child's immunisation record was considered up-to-date if the HSC Trust indicated that all relevant immunisations had been administered by 30 September 2017. From the information provided, 99% (2,293) of children in care had their immunisations up-to-date at 30 September 2017. This was considerably higher than looked after children in England<sup>18</sup>, where 84% had their immunisation up to date.

Immunisation rates for Northern Ireland generally are not published on a client basis but rather by type of immunisation<sup>19</sup> and are therefore not comparable with the way the immunisation rates are collected within this publication.



## 3.3. Dental Checks

This relates to all children and young people in care who had their teeth checked during the year ending 30 September 2017. For very young children, these checks may be undertaken by a dentist, a paediatrician or other health care professional and these would count as dental checks.

Of the 2,325 children in care for 12 months or longer at 30 September 2017, 97% (2,263) had their teeth checked the previous year; 14 percentage points higher than the corresponding figure for England<sup>20</sup> (83%).

<sup>&</sup>lt;sup>18</sup> Children looked after in England (including adoption and care leavers) year ending 31 March 2017, DfE.

<sup>&</sup>lt;sup>19</sup> Public Health Agency Core Tables http://www.publichealth.hscni.net/

<sup>&</sup>lt;sup>20</sup> Children looked after in England (including adoption and care leavers) year ending 31 March 2017, DfE.

# 4. Placement

Children in care can be cared for in a variety of placement types depending on the individual child's situation and needs<sup>21</sup>. For the purpose of this report, five main placement categories will be used; **non-kinship foster care** (including children placed for adoption<sup>22</sup>), **kinship foster care<sup>23</sup>** (including emergency foster care), **residential care**, **placed with parent** and **'other' placement types**.

At 30 September 2017, 45% (1,055) of the children in care for 12 months or longer were placed in non-kinship foster care, 35% (818) were placed in kinship foster care, 12% (282) were placed with a parent, 5% (126) were in residential care, and 2% (44) were in 'other' placement types. These are similar proportions to those in 2016.

Of the 1,055 children in non-kinship foster care, 71 were placed for adoption. Fewer children were placed for adoption with 'others' (24 children) compared to those placed with their former foster carers (47 children).

Of the 44 children in 'Other' placement types, 27 (61%) were living independently, with the remaining 17 placed in assessment centres, community placements, supported accommodation, hospitals, juvenile justice centres and other placements not elsewhere described.

Table 4.1 below shows the main placement categories, broken down by HSC Trusts. For all Trusts, apart from the Western HSC Trust, the most prevalent placement was non-kinship foster care followed by kinship foster care. There were however some variations in the distribution of placements between the Trusts. The South Eastern and Western HSC Trusts had lower proportions of children placed with parents and slightly higher proportions of children in residential care compared with the other Trusts.

Table 4.1 Placement type by HSC Trust year ending 30 September 2017

	Northern Ireland	Belfast Trust	Northern Trust	South Eastern Trust	Southern Trust	Western Trust
Non-kinship foster care*	45%	44%	46%	52%	46%	39%
Kinship foster care	35%	34%	34%	30%	33%	44%
Placed with parent	12%	16%	14%	7%	15%	8%
Residential care	5%	4%	4%	8%	4%	7%
Other	2%	2%	2%	3%	2%	2%
	100%	100%	100%	100%	100%	100%

<sup>\*</sup> Non-kinship foster care includes children placed for adoption.

Children in Care in Northern Ireland 2016-17

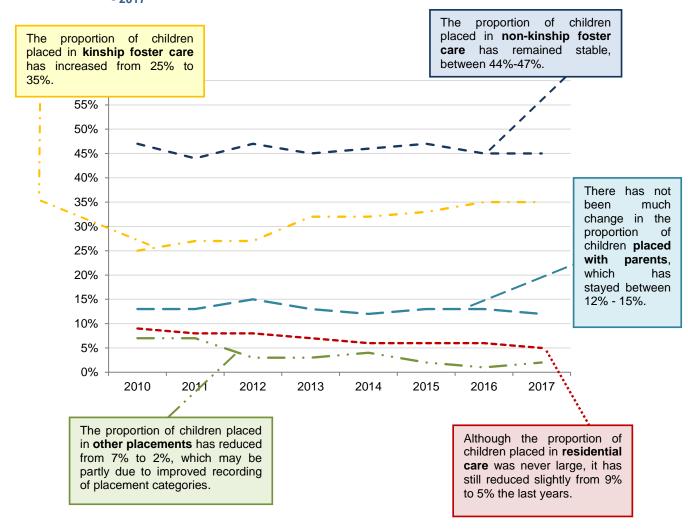
<sup>&</sup>lt;sup>21</sup> Appendix C sets out descriptions of different placement types

<sup>&</sup>lt;sup>22</sup> Being placed for adoption is a stage in the adoption process and a child will still be considered as looked after until the granting of an Adoption Order

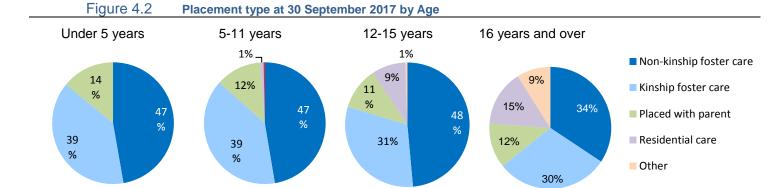
granting of an Adoption Order

23 In this publication "kinship foster care" covers formal kinship care arrangements as opposed to informal kinship care which are private arrangement. Please see appendix C for further details

Figure 4.1 Placement of children in care continuously for 12 months or longer at 30 September 2010



The age of the child in care may influence the suitability of placement types. For all age groups, non-kinship foster care and kinship foster care were the main placement types. The circumstances of every child is unique, however it is generally understood that where possible children under eleven years old will not be placed in residential care. This is reflected in the charts below (Figure 4.2). Those aged 16 & over, as may be expected, showed the greatest variation in placement type.



# 4.1. Placement Changes

Almost a fifth<sup>24</sup> (18% or 421 children) of all children in care for 12 months or longer changed placement at least once during the year ending 30 September 2017; 14% once only, 2% twice only, and 2% had changed placement three times or more (Figure 4.4). This was similar to the proportions in 2015/16.

A higher proportion of females experienced placement changes than males (19% and 17% respectively). Belfast HSC Trust had the lowest proportion of children with placement moves the last year (15%). All other trusts had between 18-21%. It is worth noting, however that those Trusts had, compared with Belfast HSC Trust, more children whose move was placement for adoption.

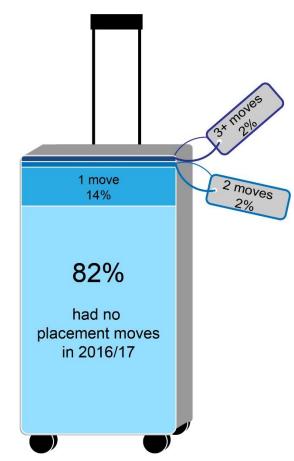
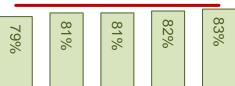


Figure 4.4 Placement changes during the year ending 30 September 2017

## The Health and Social Care (Commissioning Plan) Direction (Northern Ireland)

Children in care for 12 months or longer with no placement change the last year (excluding those placed for adoption)



Target 85%

2012/13 2013/14 2014/15 2015/16 2016/17

Placement stability is associated with better outcomes for children in care. *The Health and Social Care (Commissioning Plan) Direction (Northern Ireland)* includes a Target relating to placement stability/changes<sup>25</sup>.

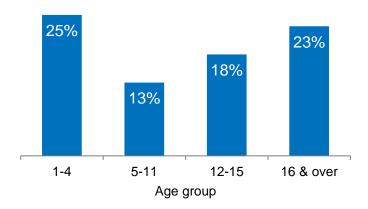
The target sets out that 85% of children in care for 12 months or longer should have no placement changes during the last year. This excludes placement moves where the child was placed for adoption as this is seen as a necessary step towards stability for the child.

Although the Target has not been met, there has over the last years been an increase in the proportion of looked after children who don't experience a placement change.

<sup>&</sup>lt;sup>24</sup> Including those placed for adoption

<sup>&</sup>lt;sup>25</sup> Health and Social Care (Commissioning Plan) Direction (Northern Ireland) http://www.health-ni.gov.uk/publications/ministerial-priorities

Figure 4.5 Percentage of children in care who experienced a placement change during 2016/17 by age group



Children under 5 years of age together with the children aged 16 and over saw the highest proportion of placement changes during 2016/17 (25% and 23% respectively) 4.5). (Figure Compared with 2015/16, there was a decrease in the proportion of placement changes within the 16 and over age group (4 percentage points).

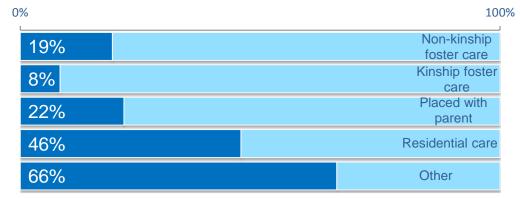
Of the children under 5 years of age, 24% (24 children) had a move which represented being placed for adoption. In total, 31 children's moves represented placements of adoption<sup>26</sup>.



Figure 4.6 sets out the proportion of placement changes by the child's current placement type at 30 September 2017. Of the children in care for more than 12 months, children who were in kinship foster care at 30 September 2017 had the highest stability during the previous year (8% with a placement change). Some 66% of the children in 'Other accommodation' had a placement change, which may be due to the nature of the placements included in this category (see appendix C for details).

<sup>&</sup>lt;sup>26</sup> Being placed for adoption is a stage in the adoption process and a child will still be considered as looked after until the granting of an Adoption Order

Figure 4.6 Percentage of children in care who had experienced a placement change during 2016/17 by their current placement type at 30 September 2017

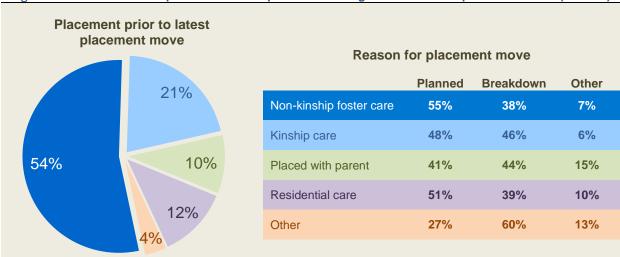


Many placement moves are planned as part of the child's care plan. Other moves are the result of a placement breakdown. The HSC Trusts reported that for 51% of the 421 children with a placement move during 2016/17, the latest placement change was planned whereas 41% were due to a breakdown and 8% for other reasons. These figures were similar to those reported in the previous year.

There were only minor gender differences in relation to whether the placement move was planned or not, however the age of the child appeared to be of relevance. Three fifths of all placement moves for the 16 and older age group related to a placement breakdown (59%). In comparison, 19% of the placement changes for the under 5 year olds related to a placement breakdown.

Of the 421 children who experienced one or more placement changes during 2016/17, just over half originated from non-kinship foster care prior to the latest move. A fifth (22%) of the planned moves from non-kinship foster care were children placed for adoption.

Figure 4.7 Placement prior to the latest placement change and reason for placement move (2016/17)



This relates to the 421 children with at least one placement move during 2016/17

'Other' reasons for a placement change include admission to secure accommodation, death or retirement of carer and child's needs not met in current placement.

# 4.2. Statutory reviews

During 2016/17, 58% (1,355) of children and young people in care continuously for 12 months or longer at 30 September 2017, were invited to attend their latest statutory review. Some 30% (401) of children invited attended their last statutory review. A further 47% of children invited did not attend but sent views in writing to the review panel, while 13% did not attend but briefed an advocate to speak on their behalf. A tenth of all children invited did not attend their review or convey their views to the review panel.

Of the 42% (966) children who were not invited to attend their review almost nine in ten (88%) were considered to be too young to understand and fully participate in the process. A further 5% could not engage in the review due to the level of their disability, while 4% did not want to participate in the review<sup>27</sup>.

### Looked After Children Reviews

Health and Social Care Trusts are obliged to carry out reviews of the arrangements of looked after children. The first review must be carried out within two weeks of the child becoming looked after, with the next review no later than 3 months after the initial review and each subsequent review taking place on a six monthly basis.

The review records the implementation of the 'Care Plan' establishing whether or not agreed steps have in fact been taken. It also records both positive and negative developments in the child's life including health, education, developments within the birth family and the child's relationship with members of their family.

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<sup>&</sup>lt;sup>27</sup> Other recorded reasons given were that the child was at school when the review took place and the child was living abroad. Some 19 responses were missing

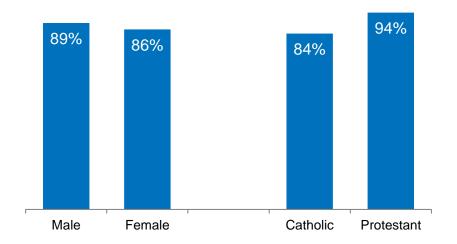
# 5. Pre-School Provision

Information on pre-school provision relates to children under 5 years of age. In 2016/17 it related to those children whose date of birth fell between 2 July 2012 and 1 July 2013.

Over four fifths (87%) of the 135 looked after children eligible for funded pre-school provision had been allocated a free place during 2016/17.

A smaller proportion of girls (86%) than boys (89%) in care aged under 5 had a funded preschool place in 2015/16 (Figure 5.1). In terms of religion, a smaller proportion of Catholics (84%) than Protestants (94%) under 5 years had a funded pre-school place.





# 6. School Age Children

Education is a vital component of all children's lives and can impact on their chances for future employment and their general wellbeing. This applies particularly to looked after children who continue to have lower educational achievements than their peers in the general school population. There are a number of initiatives in place to maximise the benefit of education and make real improvements in outcomes for these children and young people.

Family & Children's Policy Directorate
Department of Health

# 6.1. Compulsory School Age

Compulsory school age in this publication refers to all children whose date of birth fell on or between 2 July 2000 and 1 July 2012, whether or not the child was in a position to attend school, i.e. any child who received or should have received full-time schooling during the school year.

The number of children and young people of compulsory school age, who had been in care for 12 months or longer at 30 September 2017 was 1,732. Of these, forty-six children in care identified in the OC2 returns could not be linked with school data provided by the Department of Education. The total number of school aged children included in the following analyses is therefore 1,686<sup>28</sup>.

Of those children of compulsory school age in care continuously for at least 12 months at 30 September 2017, 47% attended Primary School the previous school year, 37% were at Non-Grammar School, 9% were at Special School and 5% attended a Grammar School. Some 30 children (2%) were of school age but not enrolled in NI schools for the 2016/17 school year (e.g. enrolled in another jurisdiction or not attending school).

Historically, school related information reported in this publication has been obtained from the child's school by social workers. Since 2015/16, a data sharing agreement has been in place between Department of Education and Department of Health in regards to looked after children's school information. This relates to specific, but not all, school information covered in this publication.

Further details on the variables covered by this agreement, the linking rates and changes to methodology can be found in the Technical Notes.

<sup>&</sup>lt;sup>28</sup> Please see Technical Notes for further details

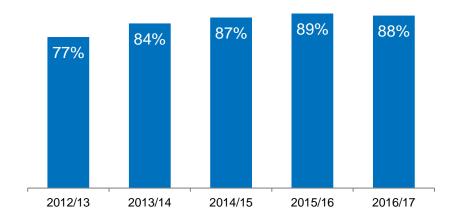
## 6.2. Personal Educational Plans

Of the school aged children in care for 12 months or longer at 30 September 2017, 88% had a Personal Education Plan (PEP). Of those children who had a PEP, 90% had had it reviewed within the previous six months. The South Eastern HSC Trust had the lowest proportion of children with a PEP (82%). In comparison, PEP uptake within the other Trusts ranged from 85% in the Southern HSC Trusts to 93% in the Belfast HSC Trusts.

The level of school aged children with PEP has been stable the last three years, however there has been an increase of eleven percentage points between 2012/13 and 2016/17, from 77% to 88%. There has been a similar increase in the number of PEP reviews from 74% to 90% over the same period of time.

A Personal Education Plan (PEP) is a continuous record of the child/young person's school history and identifies what needs happen to for child/young person in care to fulfil their potential by planning and establishing clear targets for the child/young person relating to learning achievements. A PEP should be completed for all looked after children/young people of school including statutory age, children/young people in secure accommodation and in custody, at the 3 month LAC Review, 6 month LAC Review, and at 6 monthly intervals thereafter to coincide with LAC Reviews. The importance of educational outcomes for adult life was highlighted when PEP was included in the Health and Social Care Indicators of Performance Direction in 2014/15 and subsequent years.

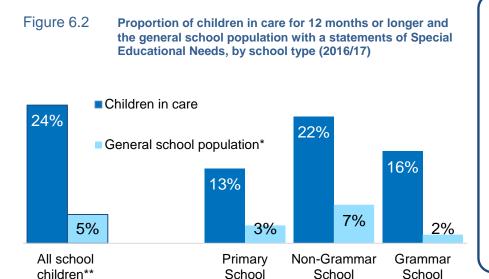
Figure 6.1 Proportion of children in care for 12 months or longer with a Personal Education Plan (2012/13 - 2016/17)



# 6.3. Children with statements of Special Educational Needs (SEN)

Children have special educational needs if they requires special educational provision. Learning difficulty means the child has significantly greater difficulty in learning than children of similar age, and/or has a disability which hinders using everyday educational facilities (or, where the child is below school age, would hinder such use if the child were of school age). Special educational provision is different from, or additional to, that made for children of comparable age. Further information is provided in the Code of Practice on the Identification and Assessment of Special Educational Needs (SEN) published by the Department of Education NI<sup>29</sup>.

A quarter of children who had been in care for twelve months or longer and were of compulsory school age in 2016/17, were covered by a statement of SEN (24%)<sup>30</sup>, which was substantially higher than the general school population in Northern Ireland<sup>31</sup> (5%). This proportion was, however, similar to that for children in care in England<sup>32</sup> (27%).



A substantially larger proportion of children in care of school age had a statement of Special Educational Needs (SEN) than the general school population in 2016/17. Having SEN can affect the educational outcomes for these children as well as inflate the educational attainment gap between looked after children and their peers.

Of the children with a statement of SEN, over a third (37%) attended a Special School. Furthermore, 97% of children in care in special schools had a SEN statement. Of those attending mainstream school, Primary School pupils had the lowest proportion of children with a statement of SEN (13%). This may reflect that for some of these children their special needs may not yet have been detected or that the statement process may not yet have been completed.

A higher proportion of boys (30%) than girls (18%) were covered by a statement of SEN; this is similar to the proportions in previous years.

<sup>\*</sup> Source: "Annual enrolments at schools and in funded preschool education in Northern Ireland, 2016/17", DE

<sup>\*\*</sup> Includes children in Special Schools

<sup>&</sup>lt;sup>29</sup> Code of Practice, Department of Education NI <a href="https://www.education-ni.gov.uk/articles/special-educational-needs-code-practice">https://www.education-ni.gov.uk/articles/special-educational-needs-code-practice</a>

<sup>&</sup>lt;sup>30</sup> Special Educational Needs status was not recorded for 36 children

<sup>&</sup>lt;sup>31</sup> Department of Education NI, Enrolments at Schools and in Funded Pre-School Education in Northern Ireland 2016/17

<sup>&</sup>lt;sup>32</sup> Outcomes for Children Looked After by Local Authorities in England, as at 31 March 2017 – DfE

# 6.4. Education Other Than at School (EOTAS)

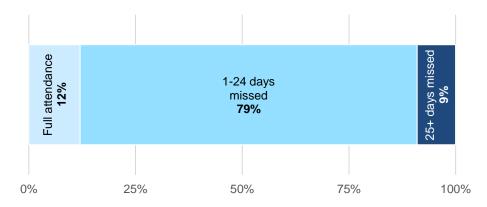
Of those looked after children of compulsory school age, 6% (109) were educated somewhere other than at school sometime during the past year. Just over a quarter (28%) of these children were educated outside of school due to mental health or behavioural problems, with a further 28% due to a refusal to attend mainstream school and 7% were unable to cope in a mainstream education setting. Further reasons for not attending included criminal behaviour, suspensions and expulsions and long term hospitalisation.

## 6.5. Attendance and absenteeism

Absenteeism from school, whether authorised or unauthorised, can be detrimental to a child's educational progress. Reducing the levels of school days missed can aid in enhancing the educational attainment of children in care. Emphasizing the importance of this issue, school attendance for children in care has been included in the Health and Social Care (Indicator of Performance) Direction since 2014<sup>33</sup>.

During the 2016/17 school year, 12% of the looked after children of school age had full attendance at school<sup>34, 35</sup>. Some 79% had missed between 1 and 24 school days. A further 9% of children in care had missed 25 or more school days for any reason, the same proportion as in 2015/16. There was no difference in the proportion of girls and boys in care who had missed 25 days or more (9% respectively). Looking specifically at the absence for those missing 25 or more school days, some 44% of the missed days were recorded as authorised absence; the remaining 56% was recorded as unauthorised absence <sup>36</sup>.

Figure 6.3 Percentage of children in care for 12 months or longer of compulsory school age who missed school days for any reason (2016/17)



Note: Excludes 50 young people who either did not attend school in Northern Ireland or for whom no absence data was recorded

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<sup>33</sup> http://www.health-ni.gov.uk/publications/ministerial-priorities

<sup>&</sup>lt;sup>34</sup> Information on the number of school days missed was not provided for 50 young people in 2016/17, mainly because they did not attend school, were educated outside of school setting or no absence data was recorded

<sup>35</sup> Please note that Department of Education also publish attendance information for looked after children, however use a slightly different methodology. Please see the Technical Notes for details

different methodology. Please see the Technical Notes for details <sup>36</sup> See Technical Notes for description of authorised and unauthorised absences

Compared with the general school population, slightly less looked after children attending Primary School missed 25 or more school days (3%) compared to 4% of the general school population. The trend was reversed for those children attending post-primary schools, where 16% of looked after children missed 25 or more days compared with 10% of the general school population. For Special Schools the figures were 11% for looked after children and 18% for the general population<sup>37</sup>.

A substantially larger proportion of the school aged children who were in residential care or who were placed with parents missed 25 or more school days in 2016/17 compared with children in foster care (non-kinship and kinship). Children in non-kinship foster care were the least likely to miss 25 days or more (Figure 6.4). Caution must however be taken when interpreting these figures due to low numbers involved.

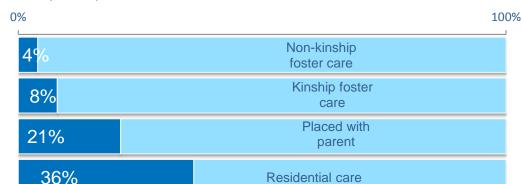


Figure 6.4 Percentage of children in each placement missing 25 school days or more for any reason (2016/17)

Note: Excludes 50 young people who either did not attend school in Northern Ireland or for whom no absence data was recorded

Placement stability may influence school attendance. Of the school aged children with no placement moves during 2016/17, 7% had missed 25 or more school days for any reason. The corresponding figure for children who had experienced a placement move was 21%. This survey however cannot confirm if the placement moves caused the school absence, only that there is a correlation between the two.

The Department of Education reports school absence in half day units recorded as authorised or unauthorised. The following section is comparable with this data examining absence data for looked after children by half day units.

The overall absence rate for looked after children during 2016/17 was 5.8%, similar to the figure reported for the general school population of 5.4%<sup>38</sup> during the same period. Authorised absence accounted for 3.3% of half days missed with the remaining 2.5% considered to be unauthorised. In comparison, the unauthorised absence was somewhat lower for the general school population (1.7%). Furthermore, the overall absence rate for

<sup>37</sup> Attendance at grant-aided primary, post-primary and special schools in Northern Ireland 2016/17: DENI 2017

<sup>38</sup> Attendance at grant-aided primary, post-primary and special schools in Northern Ireland 2016/17: DENI 2017

looked after children in England during 2016/17 was lower than for both looked after children and the general school population in Northern Ireland, at 4.3%, with authorised absence accounting for 3.1% and unauthorised absence 1.2%<sup>39</sup> (figure 6.5).

5.8%

2.5%

1.7%

4.3%

1.2%

Unauthorised absence

Authorised absence

3.7%

3.1%

Children in care

(Eng)

Figure 6.5 Percentage of half days missed for children in care (Northern Ireland), general school population (Northern Ireland) and children in care (England) (2016/17)

Sources: School Census; "Attendance at grant-aided primary, post-primary and special schools in Northern Ireland 2016/17"; and "Outcomes for children looked after by local authorities in England 31 March 2017".

General school

population (NI)

For the children in care of school age in Northern Ireland, the absence rate for males (5.9%) and females (5.8%) was similar, with authorised absence accounting for 3.5% and 3.2% respectively. Unauthorised absence accounted for 2.4% of all half days missed for males and 2.6% of all half days missed for females.

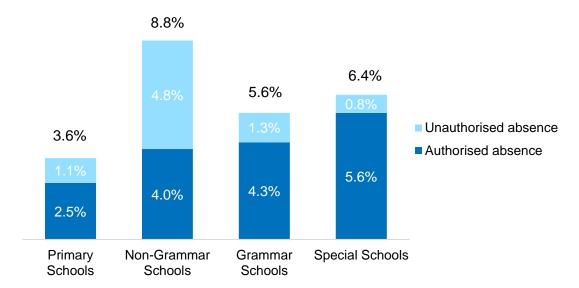
The absence rate for looked after children varied by school type. In primary schools 3.6% of all half days were missed comprising 2.5% authorised absence and 1.1% unauthorised absence. In contrast, in secondary schools, 8.8% of all half days were missed comprising 4.0% authorised absence and 4.8% unauthorised absence (figure 6.6).

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Children in care (NI)

<sup>&</sup>lt;sup>39</sup> Outcomes for children looked after by local authorities in England 31 March 2017: DE 2017

Figure 6.6 Children in care for 12 months or longer; proportion of half day absence by school type (2016/17)



Note: Excludes 50 young people who either did not attend school or for whom no absence data was recorded

Differences in absence rate were also evident by placement type. Young people in care in a residential placement missed 16.5% of all half days, compared to 3.9% of all half days missed for those children placed in non-kinship foster care.

Illness was the most common reason for absence<sup>40</sup> in all school types. Illness is an authorised absence and accounted for 49.9% of absences in primary schools, 27.6% in secondary schools, 35.2% in grammar schools and 41.0% in special schools. This equated to 1.8%, 2.4%, 2.3% and 2.3% of total half days respectively.

Absences for which no reason had been provided was the most common unauthorised absence in 2016/17, accounting for 21.2% of all half days missed. It was the most common unauthorised absence in all school types.

# 6.6. Suspensions

Children in care were more likely to be suspended from school than children in the general school population; 7% (121) of children in care had been suspended in 2016/17, compared with 1.4% of the general school population in Northern Ireland<sup>41</sup>. The proportion of children in care that had been suspended decreased by one percentage point, from 8% to 7% between 2015/16 and 2016/17.

Suspensions are included in absence statistics and are treated as an authorised absence.

As in 2016/17, a higher proportion of boys than girls in care had been suspended from school during the academic year; 10% of boys compared with 4% of girls had been suspended at least once during 2016/17.

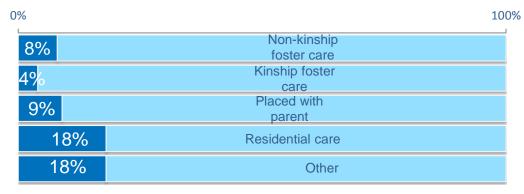
<sup>&</sup>lt;sup>40</sup> See technical Notes for all reasons for absence

<sup>&</sup>lt;sup>41</sup> Pupil suspensions and expulsion, Department of Education NI 2016/17

Some 16% of children attending Secondary School had been suspended during 2016/17, compared to 13% of those attending Grammar School, 3% of those in Special School and just 1% of children attending Primary School.

Children in residential care were more likely to be suspended than children in any other placement types (Figure 6.7). This must however be viewed in conjunction with the fact that most children suspended were in the older age groups at the same time as the majority of children in residential care were also in the older age groups.

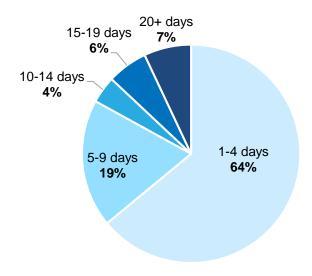
Figure 6.7 Proportion of school age children in each placement that were suspended from school (2016/17)



Note: Excludes 50 young people who either did not attend school or for whom no absence data was recorded

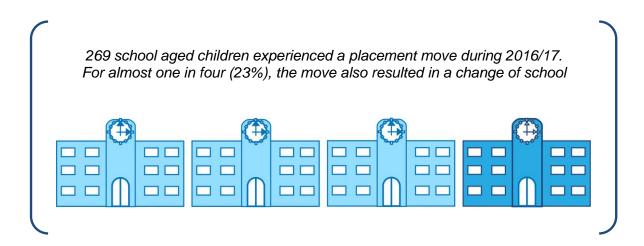
During 2016/17, 64% of the 121 children in care who had been suspended, had been suspended for less than 5 days, whilst 9 children (7%) had been suspended for 20 days or more (Figure 6.8). Although the general trend was the same in 2015/16, a larger proportion of the children suspended had been suspended for less than 5 days in 2016/17 compared with 2015/16 (64% and 54% respectively).

Figure 6.8 Children in care who were suspended; school days missed through suspension (2016/17)



# 6.7. School changes

During the school year 2016/17, 93% of children in care of school age had not changed school at any time, while 7% had changed school at least once during this period. These are the same or similar proportions as observed in the last four years. There was no difference in the proportion of school changes between girls (7%) and boys (7%).



# 7. Educational Attainment

# 7.1. Children eligible to sit exams

In the following, attainment results will be analysed for Level of Progression assessments Key Stage 1 (year 4) Level 2 or above, Key Stage 2 (year 7) Level 4 or above and Key Stage 3 (year 10) Level 5 or above and as well as GCSE results. These assessment results have been compared with the results from the general school population in Northern Ireland and, for GCSE results, looked after children in England. There will always be some differences in the way attainment results are captured or presented between these cohorts. However, since 2015/16, a new methodology has been applied to the attainment results for children in care in this publication, which aligns better with attainment results for the general school population as well as the looked after statistics in England, which will aide a more fair basis for comparison. Please see Technical Notes for further details.

An overview of the looked after children's educational attainment compared with that of the general school population is set out in Table 7.1 below.

Table 7.1 Educational attainment for children in care for 12 months or longer and the Northern Ireland general school population<sup>42</sup> (2016/17)

			Children in care for 12 months or longer	General school population
Ē	(ey Stage 1 Level 2 or above	Communication	78%	88%
essio	Key Stage Level 2 or above	Using Maths	78%	89%
ogre	Key Stage 2 Level 4 or above	Communication	70%	79%
of Pr		Using Maths	61%	80%
Level of Progression	Key Stage 3 Level <b>5</b> or above	Communication	37%	76%
Ľ		Using Maths	31%	76%
	GCSE or Equivalent Passes	1 or more GCSE grades A*- G	94%	100%43
[2		5 or more GCSEs grades A*- G	74%	99%
Year 12		5 or more GCSEs grades A*- C	48%	85%
<b>&gt;</b>		5 or more GCSEs grades A*- C inc GCSE English and Maths	35%	70%

**Level of Progression attainment results**: Please note that due to industrial action, 2016/17 data for the general school population have been weighted to account for non-response bias<sup>44</sup>. Figures reports are the best estimate of the mean figure drawn from the sample. Of the same reason, attainment results for children in care are based on a proportion only of the children who were eligible to sit the exams.

 $<sup>^{42}</sup>$  Source: Department of Education NI  $^{43}$  Please note that this figure has been rounded, with 0.1% of all pupils achieving no GCSEs at grades A\* - G  $^{44}$  Please see technical notes for further information.

# 7.2. Key Stage 1 Level of Progression – Level 2 or above

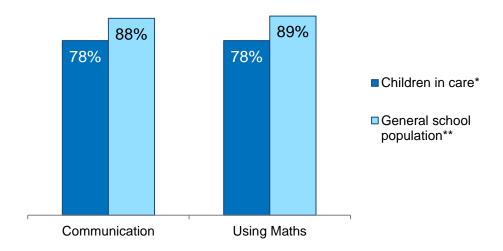
Of the 113 children eligible to sit KS1 assessments (e.g. they attended Year 4 in a primary school in 2016/17), only 27 (24%) were assessed. The remaining 76% were not assessed due to school industrial action, they were exempt from sitting the exam or the school carried out different assessments.

Figure 7.2 details the percentage of the children in care and the general school population in Northern Ireland who achieved Key Stage 1 Level of Progression Level 2 or above in Communication and Using Maths.

It shows that almost four fifths of the children in care achieved Level 2 or above in Communication or Using Maths (78% respectively), compared with 88% in Communication and 89% in Using Maths for the equivalent general school population.

Due to the low number of assessment results available, no further breakdown is provided.

Figure 7.2 Children achieving Level 2 or above in Communication and Using Maths Assessments for children in care and NI general school population<sup>45</sup> (2016/17)



<sup>\*</sup>Figures are based on assessment results for 24% of the children in care eligible for assessment.

# 7.3. Key Stage 2 Level of Progression – Level 4 or above

Of the 129 children eligible for KS2 assessment (e.g. they attended Year 7 in a primary school in 2016/17), only 33 (26%) were assessed. The remaining 74% were not assessed due to school industrial action or they were exempt.

Figure 7.3 details the outcomes for children attaining the level for Key Stage 2 assessments in respect of children in care and the general school population in Northern Ireland. It shows that 70% of the children in care achieved Level 4 or above in Communication and 61% of

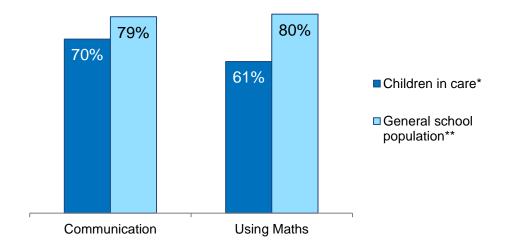
<sup>\*\*</sup>General school population figures are weighted to account for non-response bias.

<sup>&</sup>lt;sup>45</sup> Source: Department of Education NI

children in care achieved Level 4 in Using Maths compared with four fifths of the equivalent general school population in Communication and in Using Maths.

Due to the low number of assessment results available, no further breakdown is provided.

Figure 7.3 Children achieving Level of Progression Level 4 or above in Key Stage 2 Communication and Using Maths assessments for children in care in NI and the NI general school population<sup>46</sup> (2016/17)



<sup>\*</sup>Figures are based on assessment results for 30% of the children in care eligible for assessment.

# 7.4. Key Stage 3 Level of Progression – Level 5 or above

Of the 137 young people eligible for KS3 assessment (e.g. they attended Year 10 in a post-primary school in 2016/17), only 27 (20%) were assessed. The remaining 80% were not assessed due to school industrial action, they were exempt or the school carried out different assessments.

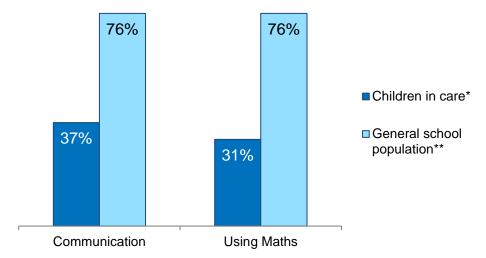
Figure 7.4 details the percentage of young people in care and the general school population in Northern Ireland attaining Level of Progression Level 5 or above for Key Stage 3 assessments. While three quarters of the general school population achieved Level of Progression Level 5 or above for both Communication and Using Maths, two fifths (37%) of young people in care achieved the same in Communication and 31% in Using Maths.

Due to the low number of assessment results available, no further breakdown is provided.

<sup>\*\*</sup>General school population figures are weighted to account for non-response bias.

<sup>46</sup> Source: Department of Education NI

Figure 7.4 Young people achieving Level of Progression Level 5 or above in Key Stage 3 Communication and Using Maths assessments for young people in care and the NI general school population<sup>47</sup> (2016/17)



<sup>\*</sup>Figures are based on assessment results for 20% of the children in care eligible for assessment.

#### 7.5. GCSEs

One-hundred-and-nine young people who had been in care for more than a year sat GCSE exams in 2016/17. A further 38 were eligible to sit the exam (eg they attended Year 12 in 2016/17) however they did not sit these exams due to special educational needs, having been placed on the EOTAS scheme or other welfare issues. Of those who sat exams, 18% (20 young people) had a statement of SEN.

Figure 7.5 details the percentage of young people in care who sat exams and attained GCSE or equivalent qualifications. It shows that 94% of the young people attained at least one GCSE at grades A\*- G. This compares with close to 100% of the general school population in Northern Ireland<sup>48,49</sup>.

Almost half (48%) of young people in care attained 5 or more GCSEs at grades A\* - C, with 35% achieving 5 or more GCSEs at grades A\* - C including GCSE English and Maths. These figures were substantially lower than the general school population in 2016/17, with 85% achieving 5 or more GCSEs at grades A\* - C and 70% achieving this feat including GCSE English and Maths.

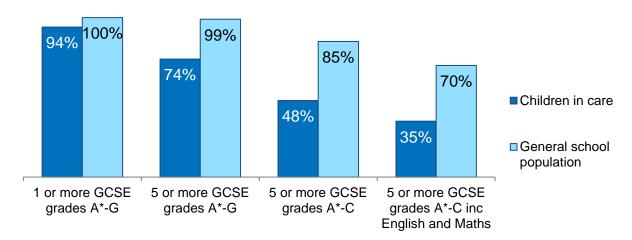
<sup>\*\*</sup>General school population figures are weighted to account for non-response bias.

<sup>&</sup>lt;sup>47</sup> Source: Department of Education NI

 $<sup>^{48}</sup>$  Please note that this figure has been rounded with 0.1% of all pupils achieving no GCSEs at grades A\* - G

<sup>&</sup>lt;sup>49</sup> Year 12 and Year 14 Examination Performance at Post-Primary Schools in Northern Ireland 2016/17: DENI, 2017

Figure 7.5 Proportion achieving GCSE or equivalent passes for young people in care and the NI general school population (2016/17)



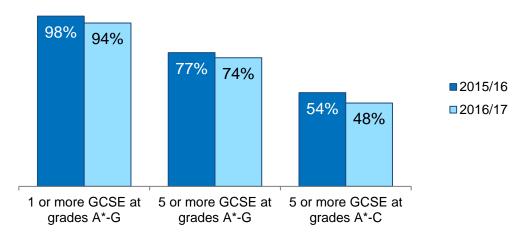
Note1: The percentage of the general school population achieving GCSEs at grades A\* - G has been rounded by 0.1%. Note2: GCSE English and Maths.

Similar proportions of girls (75%) and boys (73%) achieved 5 or more GCSEs at grades A\*-G, however a slightly higher proportion of girls achieved 5 or more GCSEs at grades A\*-C, (50%) compared to boys (45%).

Lower proportions of children in non-kinship than in kinship foster achieved at least one or more GCSEs at grades A\*- G (71% and 82% respectively). This was also observed for those achieving 5 or more GCSEs at grade A\*-C (45% and 49% respectively). Please note that the number of children in each placement type eligible for these tests were small.

The grades achieved by young people in care in 2016/17 were lower than those achieved in 2015/16. Please note that the number of children assessed each year for these tests were small and the trend therefore may be subject to volatility due to small numbers.

Figure 7.6 Young people in care for 12 months or longer achieving GCSE Passes (2015/16 – 2016/17)



Note: Information on GCSEs at grades A\* - C including GCSE English and Maths was not available in 2015/16

## Cautions / Convictions

#### 8.1. Children Cautioned or Convicted

Of children in care aged 10 and over at 30 September 2017, 7% (98) had been cautioned or convicted of an offence whilst in care during the year. The equivalent figure for England was three percentage points lower at 4%. For both England and Northern Ireland, the proportion of young people in care cautioned or convicted has reduced over the last years (Figure 8.1).

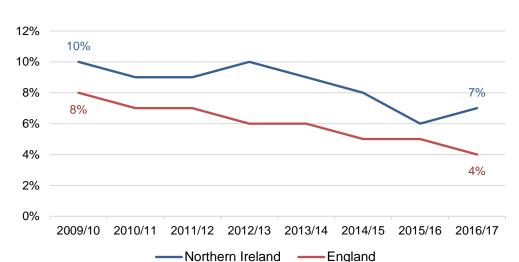


Figure 8.1 Children in care for 12 months or longer, aged 10 and over, cautioned or convicted in Northern Ireland and England<sup>50</sup> (2009/10 – 2016/17)

For young people in care aged 10 and over, a higher proportion of boys (10%) than girls (5%) had been cautioned or convicted during 2016/17. Furthermore, cautions and convictions were more prevalent in the older age groups, with one-sixth of children aged 16 and over having been convicted or cautioned (16%). There was a rise in the proportion of Protestant children in care that had been cautioned or convicted during 2016/17, from 5% in 2015/16 to 7%. The proportion of Catholic looked after children cautioned or convicted also rose, from 7% to 8% during the same period.

Children placed in foster care were the least likely to be cautioned or convicted in 2016/17 (3%) compared with the other placement types. This must be seen in conjunction with the older age profile of those placed in residential care and the fact that higher proportions of the older children were cautioned or convicted.

<sup>&</sup>lt;sup>50</sup>Children looked after in England (including adoption and care leavers) year ending 31 March 2016 – DfE

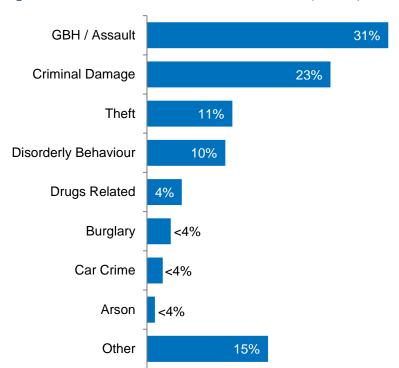


Figure 8.2 Reasons for cautions or convictions (2016/17)

Of the 98 looked after children cautioned or convicted, 203 separate offences were recorded. Almost a third of recorded offences were for grievous bodily harm (GBH)/assault and just under a quarter were for criminal damage (Figure 8.2).

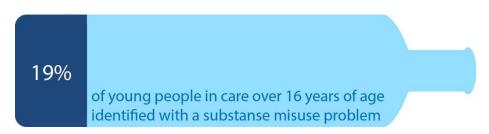
#### 8.2. Substance Abuse

Of the 2,325 children in care for twelve months or longer at 30 September 2017, 118 (5%) were identified as having a substance abuse problem; one percentage point lower than the corresponding figure for England<sup>51</sup> (4%). A higher proportion of boys (6%) than girls (4%) had been identified as having a substance abuse problem.

Substance abuse was most common among older children, with one fifth (19%) of young people in care aged 16 and over identified as having a problem.

Substance Abuse is in this publication defined as 'substance taking which harms health or social functioning'.

The majority of children identified as suffering a substance abuse problem in 2016/17 were offered intervention (89%), with half (50%) having accepted this offer.



<sup>&</sup>lt;sup>51</sup> Outcomes for Children Looked After by Local Authorities in England, as at 31 March 2017 - DfE

# 9. Children who finished compulsory schooling in 2016/17

Standard school progression expects children to finish compulsory schooling at age 16 after having completed Year 12. Of the young people who had been in care for 12 months or longer, 148 completed Year 12 in 2016/17.

#### 9.1. School changes

Of the 148 young people aged 16 in 2016/17, 70% had attended one primary school only and 30% had changed primary schools at least once. A larger proportion of boys (32%) than girls (28%) looked after had changed primary schools at least once (Figure 9.1).

Four fifths (82%) of the young people attended a single secondary school, whilst a fifth (18%) had changed secondary schools at least once. The same proportion of boys and girls changed secondary schools at least once during their post primary school years (18%) (Figure 9.1).

Figure 9.1 Primary Schools and Secondary Schools changes by children in care who had completed Year 12 in 2016/17, by gender

MALES who attended same Primary School 68%	changed at least once 32%
FEMALES who attended same Primary School 72%	changed at least once 28%
MALES who attended same Secondary School 82%	changed at least once 18%
FEMALES who attended same Secondary School 82%	changed at least once 18%

Note: figures exclude young people where data was not recorded

#### 9.2. Gaps in Mainstream Education

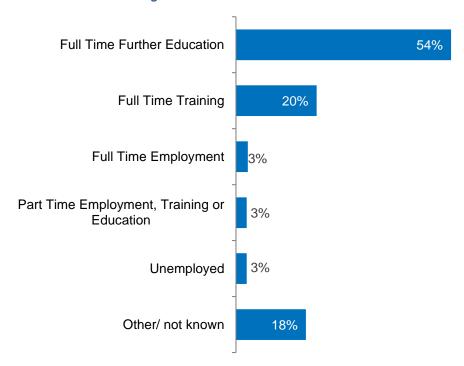
Just over a tenth (11%) of young people aged 16 in 2015/16, had at some stage during their school years been out of mainstream education and continued to be educated in other ways.

#### 9.3. Current Activity

Figure 9.2 details the activity of young people in care aged 16 during 2016/17. Over half (54%) of these were in or about to start full-time education and one fifth were in full time training. Some 3% were regarded as unemployed.

Girls (60%) were more likely than boys (48%) to have started or about to start full-time education (see Appendix D for details).

Figure 9.2 Current activity of young people in care for 12 months or longer who had completed Year 12 during 2016/17 in Northern Ireland



#### Appendix A - Technical Notes

#### **Data Collection**

The information presented in this bulletin derives from the tenth collection of 'OC2' annual returns of children and young people in care in Northern Ireland. The returns were provided by each of the five Health and Social Care Trusts in Northern Ireland to Community Information Branch (CIB) in the Department of Health (DoH).

Information is entered online by nominated HSC Trust staff using a secure web-based application. Records are anonymised to ensure confidentiality and to protect the identities of individual children. Guidance notes and other documents associated with the OC2 survey are available to view or download from the DoH website:

https://www.health-ni.gov.uk/publications/children-care-return-and-quality-report

#### Looked after children included in this survey

For inclusion in the OC2 returns, children had to be looked after continuously for at least 12 months at 30 September 2017. Children looked after under an agreed series of respite placements were excluded from the survey. As such, the reference period for the present survey was 1 October 2016 to 30 September 2017. This is distinctly different from other statistical collections by the DoH, which are based on the year ending 31 March. The period chosen for OC2 is designed to align with the academic school year.

The main aim of the OC2 returns is to inform on educational attainment for children in care, however it also collects information on a range of other areas such as religion, ethnicity, disability, placement, health assessments, economic activity and criminal convictions (see appendix E for the full questionnaire). Together with its companion surveys OC1 (care leavers aged 16-18) and OC3 (care leavers at their 19th birthday), it provides a comprehensive series of data on children and young people in care in Northern Ireland.

#### Change of data source

Historically, school related information reported in this publication has been obtained from the child's school by social workers. To both ease the data collection burden on the social workers as well as streamlining information with that published by Department of Education (DE), and through this ensure improved quality and consistency of data, a data sharing agreement has been put in place between DE and DoH in regards to children in care. The data supplied from the DE relates to three sources; the School Census; Attendance and School leaver survey.

The information shared covers:

- Key Stage 2 attainment results
- Attendance (including suspensions)
- Special Educational Needs (SEN)

In addition, DE has supplied information that historically was not collected through the OC2 survey:

- School type
- School year

The attendance, suspension and SEN information will be reported on the same way as in previous publications. However, where the new source of information allows for more scrutiny of the figures, additional analysis will be supplied. For example, reason for non-attendance can now be analysed. It also allows for comparison with the general school population on a like for like basis. Furthermore, there is a slight change to the methodology of reporting Key Stage and GCSE attainment information. This is set out in detail below.

#### Linking rate between OC2 returns and DE data

Unique linking variables were used to link the OC2 returns with the DE school data without compromising children's identity.

Of the 1,733 children of compulsory school age (5-16):

• 1,656 (96%) were matched (linked) between the OC2 and DE datasets;

- 30 (2%) who were not matched were identified as not attending school in Northern Ireland, either because they were in school outside of this jurisdiction, because they were disabled or because they had chosen to leave education. These will be included in educational analysis only where appropriate; and
- 46 (3%) were not matched for unknown reasons and will be excluded from the education analysis within this report.

#### Change to methodology

Historically, Key Stage attainment results has been used to assess outcomes of an age cohort of looked after children. It is expected that children of a certain age should be in school and attending a specific school year. If a child is not attending school (school refuser), or has been held back a year, it would show that outcomes for the child are worse than what is expected for the general age population. These children have therefore historically been <u>included</u> in attainment analysis as children achieving no Key Stage results.

Although this methodology is valid on its own, unavoidably, the looked after children's attainment results are compared with attainment results from the general school population. However the general school population results only includes those children who were enrolled in school and only those who were in a specific school year (eg. a child held back a year will be included in Key Stage results in whatever year they reach that level, and not the year they, according to their age, should sit the exam). Due to this difference in methodology, looked after children may have had slightly unfavourably low attainment results compared with the general school population.

With the additional school information supplied through the data sharing agreement since 2015/16 (see above), it is now possible to apply the methodology used for the general school population. Taking into account that the Key Stage results are in general used as a comparative to the general school population, the new methodology will be used to ensure a more fair comparison. This also aligns with recent changes in methodology for looked after children statistics in England.

The change of methodology has a net result on other analyses within this publication. For example, chapter 9, which relates to children who finished compulsory schooling, will now be selected as those who were in Year 12 the last school year.

#### Attendance

Department of Education (DE) publish attendance information for children in care (<a href="https://www.education-ni.gov.uk/articles/pupil-attendance">https://www.education-ni.gov.uk/articles/pupil-attendance</a>). DE attendance figures relate to all children who were looked after at a specific point in time. In contrast, the "Children in Care" publication includes only children who have been looked after for a minimum of 12 months. As such, the annual school attendance figures should relate, as much as possible, to a time when the child was continuously in care. The difference cohorts of children included in the two publications will therefore result in different attendance figures.

Attendance or absence is measured for every pupil in half day sessions (am and pm). Absence can be either authorised or unauthorised.

An authorised absence is absence with permission from an authorised school representative on provision of a satisfactory explanation. This includes:

- Artistic endeavour
- Bereavement
- Suspension
- Agreed family holiday (in very exceptional circumstances)
- Illness
- Medical / dental appointments
- Other exceptional circumstances (includes an exceptional event outside control of the school, for example, travelling children, court appearance)
- Religious observance

An unauthorised absence is absence without permission from an authorised school representative due to unexplained or unjustified absence. This includes:

- Family holiday not agreed
- Other absence (includes absence not covered by any other code or a reason which is not acceptable to the school, for example, pupil's / parent's or sibling's birthday).
- No reason provided for absence
- Late (after registration closed)

Further information on attendance and absence can be found in the readers notes of DE's Pupil Attendance publications (https://www.education-ni.gov.uk/articles/pupil-attendance).

#### Levels of Progression Key Stage results

From 2012/13, the new Levels of Progression replaced the Key Stage Assessments. Children were from this point on assessed in Communication and Using Maths as opposed to the previous English and Maths assessments. These results are not directly comparable with Key Stage Assessment outcomes from previous years.

Key Stage Levels of Progression are used to measure Literacy and Numeracy targets set out in the Department of Education Strategy 'Count, Read: Succeed' which contains long-term targets by 2019/20. Since 2013/14, ongoing industrial action has heavily impacted on the number of schools submitting their Key Stage data to DE. Therefore an exercise was carried out to firstly determine how representative the 2016/17 returns are within the NI context and, accordingly, adjust the data for non-response within each cohort. In order to accurately reflect the composition of Northern Ireland's Years 4, 7 and 10 school populations, weights have been calculated and applied to the data to compensate and adjust for non-response bias. The link below details the methodology used to produce Key Stage Assessment NI averages. https://www.education-

ni.gov.uk/sites/default/files/publications/education/KSA%202016to2017%20Methodology%20Paper.pdf

#### **Data Quality**

The data quality of the results presented in this bulletin is considered to be high. The online data collection system has built in validation checks, where Trust staff correct or amend data as required, and provide appropriate explanations if information is missing. CIB perform further checks, using historical data to monitor annual variations and emerging trends.

Furthermore, the new data source (DE data) removes elements of manual recording and ensures inter-departmental consistency of information.

A detailed quality report for children's community statistics is available on our website at: <a href="https://www.health-ni.gov.uk/topics/dhssps-statistics-and-research/official-statistics-and-user-engagement">www.health-ni.gov.uk/topics/dhssps-statistics-and-research/official-statistics-and-user-engagement</a>

#### Rounding/Disclosure Conventions

Percentages have been rounded to whole numbers and as a consequence some percentages may not sum to 100.

It has been necessary to suppress other figures whenever it would be possible to calculate the value of a suppressed number by means of simple arithmetic. The rule applied in these circumstances has been to suppress the next smallest data item.

#### A National Statistics Publication

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Services Act 2007 and signifying compliance with the Code of Practice for Official Statistics.

Designation can be broadly interpreted to mean that the statistics:

- are trustworthy;
- have high quality; and

are of value to the public.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed. The most recent assessment of these statistics, Report 265, can be found at the following link:

https://www.statisticsauthority.gov.uk/publications-list/?type=assessment-report

If you have any comments on this publication, please contact:

Community Information Branch Department of Health Annexe 2, Castle Buildings Stormont, BT4 3SQ

Email: cib@health-ni.gov.uk

Tel: 028 90522580

#### **Related Publications**

Statistics on children and young people in care published by other countries in the UK (United Kingdom) can be found as detailed below.

#### Scotland

Children's Social Work Statistics are produced annually by the Scottish Government. The most recent publication was published on 27 March 2017, and is available at: http://www.gov.scot/stats/bulletins/01308

Educational Outcomes for Scotland's Looked After Children is an annual summary of the educational outcomes of Scotland's looked after children. The most recent publication was published on 20 June 2017, and is available at:

http://www.gov.scot/stats/bulletins/01282

#### Wales

Children Looked After by Local Authorities, Year Ending 31 March by Local Authorities in Wales are produced annually by the Local Government Data Unit and the Welsh Assembly Government, and are available at:

https://gov.wales/statistics-and-research/children-looked-after-local-authorities/?skip=1&lang=en

#### England

Outcomes for Children looked after by local authorities in England, 31 March is produced annually by the Department for Education. Figures for the year were published on 28 March 2018, and are available at:

https://www.gov.uk/government/statistics/outcomes-for-children-looked-after-by-las-31-march-2017

Children looked after in England (including adoption and care leavers) year ending 31 March is published annually by the Department for Education. The latest publication was published on 28 September 2017, and is available at:

 $\underline{\text{https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption-} \underline{2016\text{-to-}2017}$ 

Other statistics produced by the DoH relating to looked after children and other areas of children's social care as detailed below can be found on:

https://www.health-ni.gov.uk/topics/dhssps-statistics-and-research/childrens-services-statistics

Children's Social Care Statistics for Northern Ireland Northern Ireland Care Leavers Children Adopted from Care in Northern Ireland Quarterly Child Protection Statistics for Northern Ireland

## Appendix B – Coverage of OC2 2016-17

The table below specifies the subset of children and young people covered by each category of the OC2 collection.

Definition	Which Children were included?
Scope of OC2	All children and young people in care on 30 September 2017, and who on that date had been in care continuously for at least 12 months.
Remaining items are subsets of the Scop	pe.
Total children of compulsory school age	Children and young people whose date of birth is in range 2/7/2000 to 1/7/2012
Key Stage 1	Children attending school year 4 in a mainstream school in 2016/17
Key Stage 2	Children attending school year 7 in a mainstream school in 2016/17
Key Stage 3	Young people attending school year 10 in a mainstream school in 2016/17
GCSEs	Children attending school Year 12 in 2016/17
Offending	Children aged 10 & over at 30 September 2017, i.e. whose date of birth is 30/9/2007 or earlier.
Pre-School Provision	Children in their pre-school year in 2016/17, i.e. whose date of birth is 2/7/2013 to 1/7/2014
Development Assessments	Children aged under 5 at 30 September 2017, i.e. whose date of birth is 1/10/2012 or later.
Immunisations  Dental Checks  Health Assessments	All children covered by the OC2 collection, i.e. all children who were looked after on 30 September 2017, and who had been looked after continuously for at least 12 months.
Current Activity / Past Schooling Experiences	Children attending school Year 12 in 2016/17

#### Appendix C - Placement definitions

Below are explanations of different types of care placements.

Foster care is when a child is placed by a Trust, or by its parents (or those with parental responsibility), with other persons who will care for, and rear the child. Foster Carers are approved by a Health and Social Care Trust and receive an allowance for their caring responsibilities from the approving Trust. In this publication it will be differentiated between those foster care placements that are kinship foster care arrangements and those that are non-kinship foster care arrangements.

Kinship care (formal) is when a looked after child is placed by a Trust with a relative, friend or other person with a prior connection to the child, who will care for and rear the child. A person with a prior connection could be someone who knows the child in a professional capacity such as a childminder, a teacher or a youth worker although these are not exclusive categories. Kinship carers are approved by a Health and Social Care Trust and receive an allowance for their caring responsibilities from the approving Trust. Kinship care (informal) is when a child who is not 'looked after' is placed with a relative or friend on a voluntary basis with no involvement of social services. This group of children is not covered in this publication.

*Placed for adoption* refers to a child that has been approved to be adopted and is placed with his/her prospective adoptive parents pending affirmation from the courts. It is distinguished between children who are placed for adoption with their former foster carers and those who are placed for adoption with 'others' (not former foster carers). Unless otherwise stated, children placed for adoption will be included in 'Non-kinship foster care' in the analysis in this report.

Residential care is when a looked after child is placed by a Trust in a children's home. Residential care for children / Children's Homes are there to ensure that the needs of children are met when they cannot live with their own family. They are a place for children to develop and grow, as well as providing food, shelter, and space for play and leisure in a caring environment. Children's Homes look after children with many different needs.

Secure accommodation is provided for children on a short term basis when it is likely that the child, in any other setting, will injure him/her self or abscond and is likely to suffer significant harm when absconding. Unless otherwise stated, children in secure accommodation will be included in 'Residential care' in the analysis of this report.

*Placed with parent* refers to children for whom a Care Order exists and who are placed with their parents, a person who is not a parent but who has parental responsibility for the child or where a child is in care and there was a residence order in force with respect to him/her immediately before the care order was made, and who are placed with a person in whose favour the residence order was made.

*Emergency foster care* is when a looked after child is placed by a social worker in an emergency (short term) arrangement. All emergency foster care placements covered in the 2014/15 OC2 survey collection related to kinship carers. Unless otherwise stated, children placed in emergency foster care will therefore be included under 'kinship foster care' in the analysis of this report.

Independent living arrangements refers to children placed in independent accommodation. This would refer to young people between 16-18 years old. Independent living arrangements can further be categorised into with or without formal support from Trust. Unless otherwise stated, children in independent living arrangements will be included in 'Other placements' in the analysis of this report due to the small number of children in these living arrangements within the cohort studied.

Other placements refers to any placement reported that are not covered by other categories given. This may include children in assessment centres, boarding schools etc, and also special arrangements relating to one Trust. The categories included may therefore change from year to year.

## Appendix D – Tables

All tables can be found in excel format at: <a href="https://www.health-ni.gov.uk/articles/looked-after-children">www.health-ni.gov.uk/articles/looked-after-children</a>

Table 1a	Children in care for at least 12 months at 30 September 2017
Table 1b	Demographic Trends of Children in care for at least 12 months (2011 – 2017)
Table 2	Health Trend Data for Children in care for at least 12 months (2011 – 2017)
Table 3	Funded Pre-School Provision Trend Data for Children in care for at least 12 months (2011 – 2017)
Table 4	General Educational Information for Children in care continuously for at least 12 months for the year ending 30 September 2017
Table 5	Eligibility of Children in care for at least 12 months at 30 September 2017, for each of the Key Educational Stages 2016/17
Table 6	Special Educational Needs Trend Data for Children of Compulsory School Age Continuously in care for at least 12 months (2011 - 2017)
Table 7	School Suspensions Trend Data for Children in care for at least 12 months (2011 - 2017)
Table 8	Days Missed Trend Data for Children in care for at least 12 months (2011 – 2017)
Table 9	School Attendance by Half Days 2016/17
Table 10	Half Days Missed by Absence Type 2016/17
Table 11	School Changes Trend Data for Children in care for at least 12 months (2011 - 2017)
Table 12	Children in care for at least 12 months sitting Exams (2016/17)
Table 13	Key Stage 1 Trend Data for Children in care for at least 12 months (2011 - 2017)
Table 14	Key Stage 2 Trend Data for Children in care for at least 12 months (2011 - 2017)
Table 15	Key Stage 3 Trend Data for Children in care for at least 12 months (2011 - 2017)
Table 16	GCSE Trend Data for Children in care for at least 12 months (2011 - 2017)
Table 17a	Children in care for at least 12 months at 30 September 2017 by placement type
Table 17b	Educational Attainment for Children in care Continuously for 12 Months or longer at 30 September 2017 by Placement Type
Table 18	Cautions/Convictions Trend Data for Children in care for at least 12 months aged 10 and over (2011 - 2017)
Table 19	Current Activity Trend Data for Children in care for at least 12 months who had completed Year 12 at 30 September (2011 – 2017)
Table 20	Current Activity Trend Data for Children in care for at least 12 months who had completed Year 12 at 30 September 2017 by gender
Table 21	Personal Education Plans for Children in care for at least 12 months of compulsory schoolage at 30 September (2013 – 2017)
Table 22	Children in care for at least 12 months at 30 September 2017 by Local Government District
Table 23	Children in care for at least 12 months at 30 September 2017 by Assembly Constituency Area

### Appendix E – OC2 Survey form 2016/17



Form OC2

2016/17

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#### Outcome indicators for looked after children

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Form OC2 2016/17

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White (excluding Traveller)	Indian	
Chinese	Pakistani	
Black Caribbean	Bangladeshi	
Black African	Irish Traveller	
Black Other	Roma Traveller	
Mixed ethnic group (please specify)		
Other ethnic group (please specify)		
Don't know		
12. What is the child's religion?		
Roman Catholic	Methodist	
Presbyterian	Other Christian	
Church of Ireland	Jewish	
Church of England	Muslim	
Not Known	Other	2000
None	_	
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Form OC2 2016/17

Children in care in Northern Ireland 2016-17

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17. Where is the child currently placed (at 30th September 2017)?	21. If there was a placement change during the last 12 months; what was the placement prior to the current placement?
Secure accommodation	Secure accommodation
Other residential accommodation	Other residential accommodation
Placed for adoption with former foster carers	Placed for adoption with former foster carers
Placed for adoption with others	Placed for adoption with others
Emergency foster care (kinship or non-kinship)	Emergency foster care (kinship or non-kinship)
Kinship Care – less than 12 weeks	Kinship Care – less than 12 weeks
Kinship Care – Approved Stage 1/Approved Stage 2	Kinship Care – Approved Stage 1/Approved Stage 2
Unregulated – in placement >12 weeks and not approved	Unregulated – in placement >12 weeks and not approved
Foster Care (Non-kinship)	Foster Care (Non-kinship)
Placed with parents (or persons with parental responsibility)	Placed with parents (or persons with parental responsibility)
Independent living with formal support	Independent living with formal support
Independent living without formal support	Independent living without formal support
Other accommodation (please specify below)	Other accommodation (please specify below)
17b. At what date did the current placement begin?    D D M M Y Y Y Y   Y	22. What was the reason for the last placement change?  Planned (including placement for adoption)  Breakdown  Other (please specify below)  23. If the child was of school age, did the placement change result in the child have to move school (due to the travel distance)?  Yes  No
Other relative	
Non-related connected person	24. What was the child's legal status at 30 September 2017? Police protection in Board/Trust accommodation (Article 23)
19. Did the child's placement change during the last year (i.e. between 1 October 2016 and 30 September 2017)? (do not include placement changes that were due to short	Child assessment Order (Article 62)
break/respite)	Emergency Protection Order (Article 63)
Yes	Accommodated under Article 21
No	Interim Care Order (Article 57)
20. If 'Yes', how many placement changes occurred during the year? (do not include	Care Order (Article 50 or 59)
placement changes that were due to short break/respite)	Deemed Care Order (Paras 11 and 30 of Sch 8)
	Freed for adoption and looked after by Board/Trust
	Other (please specify below)

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25. D	ate o	f the	last:	statu	tory	revie	w (p	rior to 30 September 2017):	
D	D	М	М	Υ	Y	Υ	Y		
1	es lo						invit	ed to attend the last statutor	y review
i no -	piea	se sp	ecify	reas	on w	ny:			
						•••••	•••••		
								b	
			partic poke			•		erson in last statutory reviev	v:
								or her behalf	
Atten	ded a	ınd c	onve	yed v	iews	non-	verba	lly	
Atten	ded a	ınd d	id no	cont	tribute	9			
Did n	ot att	end b	out br	iefed	advo	cate	to sp	eak	
Did n	ot att	end t	out se	nt vie	ews (	e.g. i	n writ	ing, by phone)	
Did n	ot att	end a	and vi	iews	not c	onve	yed to	the review	
Othe	(plea	ase s	pecif	y belo	ow)				

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28.	Was the child expelled/permanently excluded from school at any time during the school year? (do not include suspensions)	Yes No
29.	Did the child change schools at any time during the school year?	Yes No
If 'Yes 30.	; please enter how many times did the child change schools during the year?	
31.	Was the child at any time during the school year ever out of	Yes
	mainstream school and continuing to receive education (e.g. a period or periods in EOTAS and/or at a Pupil Referral Unit)?	No
If yes: <b>32.</b>	What was the reason for the child being educated outside of mains school?	tream

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	Yes No		
34	If 'No', please choose the rea	ason that best describe	s why the child was not
	assessed		
	Child was not in Year 4 School Industrial Action	•	-
	Child was not in schoo	Mary cress percer and no contra	
	EOTAS	i iii i totti citi ii ciana	
	Statement of SEN - Se	evere Learning Disability	
	Statement of SEN - ex	emption from Key Stage	Exam
	Pending statutory asse		
		mption from Key Stage E	xam
	Pupil Illness/In Hospita		
	Other – please state		
35	If 'Yes', what level did the ch	ild achieve in	
	567	Communication?	
	or (for Irish medium schools)	Irish?	
		Using Maths?	
		Using ICT?	

		·	
36	Was the child assessed at Ke	y Stage 2 during the 2016/17	school year?
1	Yes		
	No		
37	If 'No', please choose the rea	son that best describes why	the child was not
1	Child was not in Year 7	-	
	School Industrial Action		
1	Child was not in school	in Northern Ireland	
l	EOTAS		
l		vere Learning Disability	
l		emption from Key Stage Exam	
	Pending statutory asset		
	Pupil Illness/In Hospital	nption from Key Stage Exam	
	Other – please state		
	Other – please state		
100000000000000000000000000000000000000			
38	Was the child assessed at Ke Yes No	ey Stage 3 during the 2016/17	school year?
39	If 'No', please choose the rea	son that best describes why	the child was not
0.00000	assessed	94 PA TO DE TO	<u> </u>
	Child was not in Year 1	-	
	School Industrial Action		
	Child was not in school EOTAS	in Northern Ireland	
		vere Learning Disability	
		emption from Key Stage Exam	
	Pending statutory asse		
		nption from Key Stage Exam	
	Pupil Illness/In Hospital		
	Other - please state		
	**		~
40	If 'Yes', what level did the chi	ild achieve in	
""	ii 103 , what level and the ch	Communication?	
	or (for Irish medium schools)	Irish?	
		Using Maths?	
		Using ICT?	

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	Was the young person in Year 12 and sat at least 1 GCSE examination during the 2016/17 school year?  Yes No
42	If 'No', please choose the reason that best describes why the young person did not sit any of these examinations
	Young person was not in Year 12
	Was unable to sit <u>any</u> formal examinations due to either serious illness (including mental health issues) or pregnancy
	Was not in school in Northern Ireland
	Placed in the EOTAS scheme
	In Special Unit / Special School
	Statement of Special Educational Needs
	Serious welfare issues that have culminated in the inability to sit any formal examinations
	Other – please state
	If 'Yes', please enter the number of qualifications obtained at  GCSE Grades A*-C  GCSE Grades D-G
	No
	No N/A
44	
44	N/A  Did the child obtain any NVQs? Yes

F	or children who began primary school in September 2017 ONLY	
46	Did the child have a funded pre-school place (in a day nursery, nursery school, nursery class or playgroup) in their pre-school year? (i.e. between September 2016 and June 2017)  Yes No	
<u> </u>	or children aged 5 and over at 30 September 2017	
47	Has a LAC Personal Education Plan been completed for the young person? Yes No	
48	If yeshas the LAC Personal Education Plan been reviewed within the last 12 months? Yes	
	No	10
		4.91
	For children aged 4 and younger at 30 September 2017	
49	Were the child's development assessments up to date at 30 September 2017? Yes No	
50	Did the child have his/her 6-monthly health assessment completed between 1 April 2016 and 30 September 2017? Yes No	
	graphs in a group of work and a second of the	ě
<u> </u>	For children aged 5 and over at 30 September 2017	*
51	Did the child have his/her annual health assessment completed during the year ending 30 September 2017?  Yes No No	

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For all children
Were the child's immunisations up to date at 30 September 2017? Yes No
Did the child have his/her teeth checked by a dentist during the year ending 30 September 2017? Yes No
Was the child identified as having a substance misuse problem during the year ending 30 September 2017? Yes No
155 If 'Yes' was the child offered an intervention for this problem? Yes No
If 'Yes' did the child accept or refuse this intervention?  Accepted the intervention and received treatment  Refused the intervention
For children aged 10 and over at 30 September 2017
Was the child convicted or cautioned during the year (1 Oct 2016-30 Sept 2017), for an offence committed while being looked after?  Yes No
If 'Yes', please state below what the offence or offences were
58 Is the child/young person involved in access to family history through Life Story work?
Yes No

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For children who were in Year 12 in 2016/17 and who were eligible for GCSE (or equivalent) examinations 59. Had the young person completed Year 12 at 1 July 2017? No If 'Yes': 60. What was the young person's activity at 30 September 2017? Full-time further education (up to 'A' level or equivalent standard) Part-time further education (up to 'A' level or equivalent standard) Higher education Full-time training Part-time training Full-time employment with planned training Full-time employment with no planned training Part-time employment Part or full-time volunteering Parent - full-time carer Other full-time carer Unemployed as a result of ill-health or disability Unemployed for other reason Other activity (please specify below) 61. How many different schools has the child attended during his/her school years?

> This is the end of the questionnaire. Many thanks for your cooperation.

62. Was the child ever out of mainstream school and continuing to receive education (e.g. a period or periods in EOTAS and/or at a Pupil Referral Unit)?

Total number of primary schools attended

No

Total number of secondary/grammar schools attended

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<u>www.health-ni.gov.uk/topics/dhssps-statistics-and-research-social-</u> services/social-care-statistics

Further Information on Children in Care in Northern Ireland is

#### available from:

Community Information Branch Department of Health Annexe 2,Castle Buildings Stormont, BT4 3SQ

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