
Response to Trevor Keable

Report being considered by: Schools' Forum on 20th January 2025

Report Author: Melissa Perry

Item for: Information **By:** All School Representatives

1. Purpose of the Report

1.1 In response to an email received by Trevor Keable (set out on section 3.1 below) to Chair of the Schools' Forum and Neil Goddard.

2. Recommendation

1.1 That the information be noted.

3. Introduction/Background

3.1 I note from the Constitution of West Berkshire Schools' Forum, Section C, para 3.2: "Items for consideration by the Forum shall be submitted to the Clerk no later than ten working days prior to the meeting."

Local authorities have a Legal responsibility on the following:

- 1) Identifying Children not receiving a suitable education
- 2) Arranging suitable education for permanently excluded children
- 3) Supporting Fair Access Arrangements and
- 4) Supporting Pupils with medical conditions (including Mental Health). This includes: promote and protect public physical and mental health, safeguarding children and young people and assessing and supporting children with SEND.

Please can we have a breakdown of staff (including vacancies) to cover these areas and financial budget with estimated overspend / underspend.

I believe the Forum needs to understand these figures in light of the changes and present vacancies with the EWO service, the blockages within iCollege (educating Children not suitable for main stream education rather than children who can have planned returns to Education) and the practical lack of support experienced by schools in supporting children with medical conditions.

I recognise we have had much of this information in reports but have never had the opportunity to understand if the funding is working and whether the LA is legally covering it's legal responsibilities.

4. Supporting Information

4.1 I will try and address every aspect of the questions above to ensure transparency:

4.2 1. Identifying Children Not Receiving a Suitable Education

4.3 Overview

- Ensuring that all children receive a suitable education is a legal and moral obligation. A "suitable education" is one that enables children to achieve their potential and prepares them for adult life. Challenges such as truancy, school refusal, increased suspensions/exclusions, poor attendance, health, socio-economic factors, and unsuitable home education contribute to this issue.
- Over the past 18 months the Education Attendance/Welfare Service has made significant improvements to this duty including the recruitment of a dedicated CME/FAP Officer to ensure that the robust processes are in place to identify, track and support CME pupils back into a swift education.
- Our EHE offer to the community is well received and we have built up good relationships. Gold Award for this was issued by Education Otherwise to the officer. We are also strengthening this provision by increasing capacity to full-time.
- We have strengthened scrutiny and processes in relation to EHE and are using parental responsibility measures where appropriate which has supported some pupils return into a suitable school setting.
- There continues to be a rise in parents opting to EHE and this needs to be addressed across all schools to review the reasons at play.
- Through Targeted Support Meetings with all schools, the Education Attendance/Welfare Team is working collaboratively with schools on strategic plans to ensure 'support first' approach.

4.4 Key Actions

4.5 Develop a Robust Tracking System:

- Implementation of a centralised data system to monitor school attendance and identify at-risk children.
- Improvements will be to enhance cross-referencing with health to ensure comprehensive coverage.
- The Children's Well-being Bill will support LAs track and know pupils receiving education other than at school. We are supporting the progression of this through active talks with our networking partners and DfE.

4.6 Engage with multi-Agency Teams:

- Collaborate with social workers, health professionals, and law enforcement to identify children missing from education (CME). Training sessions have been

accessed across internal services and outreach to the health service includes attendance at the safeguarding meeting for GPs proposed in January. Policy includes information on referral process for external agencies and 'anyone' and online form activated. Targeted training sessions for schools available.

- Creation of a collaborative LA wide attendance strategy to stay compliant with WTTISA.
- Planned work for Jan 25 with health colleagues to address training and improvements

4.7 **Conduct Community Outreach:**

Proposed hosting of forums and distribute resources in communities with high absenteeism rates. Encourage parents to engage with education services and report barriers.

4.8 **Provide Training for Educators:**

- Train school staff to recognise early signs of disengagement or family challenges and escalate concerns to the relevant authorities – webinars have been in place this term
- Comprehensive training offer to all schools to support WTTISA.

4.9 **Enhance Reporting Channels:**

Ensure anonymous and accessible reporting methods for community members to alert authorities about CME concerns now in place through online accessible forms. Website information to be developed by T-level student placements in Jan 2025.

Additional progress:

4.10 **15 days absence notification**

- Reports of 15 days absence, consecutive or cumulative are analysed, tracked and investigated to ensure no drift and delay. Improvement on returns from schools and process being reviewed considering high numbers to analyse effectively and decide on appropriate education provision.
- Improvement required on information received to enable effective decision making.

4.11 **2. Arranging Suitable Education for Permanently Excluded Children**

4.12 **Overview**

Permanently excluded students often face educational and social disadvantages, risking marginalisation. Promptly arranging suitable educational provisions mitigates this risk.

4.13 **Actions Being Taken to Address Rising Suspensions and Exclusions:**

- (1) **Proactive Monitoring and Support for Pupils at Risk:**
Regular *Pupil at Risk* meetings are conducted to identify and address the needs of pupils vulnerable to permanent exclusions (PEX), ensuring early intervention strategies are in place, however potential reduction in funding will impact the provision of this service.
- (2) **Delivering Better Value (DBV) Project and SEND and Inclusion Strategy 2024-2029:** (see attached one page plan: Appendix 2)
The DBV project is aligned with the SEND and Inclusion Strategy, focusing on six key priorities, including inclusion. Key initiatives under this project include:
- (3) **SEND Funding Stream:** Enhanced financial support targeted at improving SEND services.
- (4) **Targeted Transition Support:** Identifying vulnerable pupils during primary to secondary school transitions (Years 6 to 7) and implementing a structured transition program.
- (5) **Specialist Recruitment:** Recruiting two ASD workers and an SEMH worker to provide dedicated support for pupils and schools during transitions.
- (6) **Building Confidence in Mainstream Schools to Support SEN Pupils:**
 - Developing the *Ordinarily Available* framework to clarify referral pathways into support services, including health, and providing resources for schools and parents.
 - Strengthening Special Educational Needs (SEN) support within schools.
 - Expanding Alternative Provision (AP) to better meet the needs of at-risk pupils.
 - Conducting multi-agency discussions and solution-focused meetings with schools to address individual cases and system-level challenges.
- (7) **Improving Strategic Planning and Resources:**
 - Establishing a commissioning function within education to better define needs and service delivery.
 - Creating a Service Level Agreement (SLA) with the PRU to formalize expectations and enhance service offerings.
- (8) **Innovative Mental Health Pilot Project (AATIMHP):**
 - Funded by the DBV grant, this pilot project aims to develop inclusive school cultures and effective behaviour management strategies.

- Participating schools will receive tailored support from Flourish (formerly AC Education), Consultant Tony Clifford, and Birmingham Newman University. The program also includes educational psychology and mentoring support.
- Results from other local authorities show reductions in suspensions and exclusions, and similar outcomes are expected in West Berkshire.

(9) Behaviour Management Training and Policy Review:

- Schools are being offered online training in behaviour management.
- Policies and procedures within schools are under review to ensure consistency and effectiveness in managing behaviour and supporting pupils at risk of exclusion

4.14 3. Supporting Fair Access Arrangements

4.15 Overview

- Fair Access Protocols (FAP) aim to secure school placements for vulnerable children, including those excluded or new to an area. This process ensures equity in school admissions.
- Delays in leadership and internal processes have impacted the joint protocol being released for consultation with schools. This will happen imminently. There is a budgetary requirement within this.

4.16 Key Actions

- (1) **Streamline Admissions Processes:**
Establish clear timelines for placing students under FAP to avoid prolonged delays.
- (2) **Promote Transparency and Accountability:**
Publish annual FAP reports detailing placements and outcomes to build trust and accountability.
- (3) **Encourage School Cooperation:**
Foster partnerships with schools to distribute responsibility fairly and support schools in accommodating vulnerable students.
- (4) **Provide Financial and Professional Support:**
Offer resources, including funding and specialist staff, to schools accepting children under FAP.
- (5) **Engage Families in Decision-Making:**
Involve parents and guardians in placement decisions, ensuring their concerns are addressed.

4.17 Supporting Pupils with Medical Conditions (Including Mental Health)

4.18 **Overview**

Students with physical and mental health conditions require tailored support to achieve their educational potential. Effective systems and collaboration between health and education sectors are vital.

- (1) Promoting and Protecting Physical and Mental Health
- (2) **Develop Health Support Plans:**
Work with healthcare and school professionals to create individualised health care plans for students, specifying medical needs, medication administration, and emergency procedures including how the pupil can access education despite the medical needs.
- (3) Collaborative approach
- (4) EBSA SEND strategy commenced to support the rising issues of school avoidance
- (5) Work with schools to identify the gaps in support and approach to medical pupils
- (6) **Enhance Mental Health Support:**
Further embed school-based mental health practitioners and offer regular training for teachers to recognise mental health issues and early intervention. Mental Health project piloting in 10 schools in WB has commenced
- (7) **Provide Flexible Learning Options:**
Use technology and part-time schedules to support students unable to attend school full-time with clear guidance

4.19 4. Safeguarding Children and Young People

- (1) **Implement Safeguarding Policies:**
Regularly update policies to reflect current best practices and train staff on safeguarding responsibilities.
- (2) **'Eyes on' processes:**
 - Continued work with CSC and front door services to support educational neglect and safeguard those pupils who are at risk of poor outcomes.
- (3) **Capacity building:**

- 'interim' Safeguarding Officer for Education recruited for 3 months to build capacity within the service and education welfare whilst further re-structuring advances are made to support statutory duties

5. Appendices

- 5.1 Appendix 1 – Table showing finances as requested across varying services sharing the responsibilities outlined.

Appendix 1

	Area/team	Council funded/DSG	Staff	In Post	Vacant	24/25 forecast @ Q2	variance 24/25 @ Q2	25/26 budget	Comments
1. Identifying Children not receiving a suitable education	Elective Home Education Officer(s)	DSG	1.0 fte	0.8fte	0.2fte (TTO)				24/25 was built at 0.6fte (TTO) - now increased to 1.0 fte due to demand - approved Schools Forum March 2024
2. Arranging suitable education for permanently excluded children	Exclusion officer(s) with support of colleagues from i-college*	DSG	1.0 fte	1.0 fte	0				* Unable to quantify value of input from i-college
3. Supporting Fair Access Arrangements	Education Welfare Service	Council funded	0.5fte	0.5fte	0				
4. Supporting Pupils with medical conditions (including Mental Health).	Medical Tuition Service	DSG	4.5fte	2.9fte	1.6fte				One recruitment round unsuccessful – repeat in Jan 25.
Education Welfare Team		Council Funded	2.23fte	1.41fte	0.82fte				This cost centre was previously a trading account. The income would have previously covered the cost to run the service, with an overall negative budget, which was to help support the support services (HR, accounts, legal, it etc). From 23/24 we have been unable to trade, but the income target is still in the budget. Bottom line is to make £13,870 profit on trading in 24/25.

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									Supporting families helping to improve this position in 24/25 but from 25/26 this funding is unavailable and will cause a further pressure of £33k. Income trading budget is £108k.
Education Welfare Team		DSG	3.11fte	2.21fte	0.9fte				Recruitment underway for EAO replacement and additional capacity to support EHE.
						Total	641,718	-35,322	765,125