



## **Elective Home Education Audit Report**

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### **Background to the Audit**

The issue of the increasing number of elected Home Educated children was raised at the Board's LIG meeting in March 2017. The data showed that the number of home educated children open to Social Care services had also increased. The LIG meeting agreed to undertake an audit of a small number of cases where children are electively home educated and also open to either Social Care or Early Help.

It was agreed that an initial six cases would be audited in July and August and the findings and recommendations would report to the October LIG meeting. The six cases were audited by the Professional Adviser for the LSCB.

### **Number of Cases Audited**

Six cases were audited. The cases were randomly selected from the case lists provided by the Intelligence Hub.

### **Number of Cases Open to Early Help**

Four. Three of these cases have had a Social Work Assessment.

### **Number of Cases Open to Social Care**

Two. Both of these cases have had some Early Help involvement.

### **Number of Cases with some Social Work Involvement**

Five.

### **Ages of Children**

The youngest child was six and the oldest sixteen. There were two nine-year olds and a fourteen and fifteen-year-old.

## **Presenting Reasons for Home Educating**

The presenting reasons for home education of the children are as follows:

- The nine-year-old didn't like school and was bored.
- The second nine-year-old's mother had fallen out with the school.
- The fourteen-year old had missed a lot of school and hadn't been attending. They had been through IYFAP and EWO intervention. Reasons for home education were largely connected to the father's agenda.
- The six-year-old was being bullied at school and having difficulties with toileting.
- The fifteen-year-old was anxious and had health worries.
- The sixteen-year old didn't like school and was having anxieties about parental ill health.

## **Underlying Reasons for Home Educating**

Five of the six cases show that an underlying reason for the children being home educated is anxiety over parental illness. It may not be stated as the presenting reason but it is the underlying reason in five cases. In the sixth case the father was keeping the child off school to look after the grandparents, one of which was ill with cancer in order that he could go back to work. All six cases had a link with parent mental or physical ill health.

## **Attitudes of Parents to Services**

Workers have struggled in many of the cases to engage parents fully. In three of the cases, parents displayed avoidant and deflective behaviour. In one of the cases, the father was aggressive towards workers and services.

## **Referrals to MASH**

All six children have been the subject of a referral and all six children have been the subject of more than one referral.

## **Services Working with the Families**

The services working with the families in the six cases are generally health services. The GP or Health Centre is involved in three of the cases and specialist health services are involved in three of the cases. There were no services other than Early Help or Social Care and EHE working with families in two of the cases.

## **Summary of 'Worries' in the Six Cases**

- EHE Consultants have concerns with the education curriculum in three of the cases.
- Schools or workers in other agencies have in five of the cases raised concerns about the parent's capacity to home educate their children.
- Avoidant behaviour/non-engagement towards workers and services was shown in three of the cases.
- Co-dependent relationships with parent and child have been observed in three of the cases.
- Children display anxiety in general or about a parent's health in three of the cases.
- Parent's capacity to parent is questionable in all six cases.
- Social isolation and ability to socialise is identified as a worry in three of the cases.
- One child has scored high on the CSE risk tool.
- Emotional abuse is a factor in two of the cases.
- In five of the cases one or both parents have an illness, either physical or mental. In the sixth case, there is a grandparent with an illness.
- The sixteen-year-old is on the NEET register.
- Emotional neglect is a factor in at least two of the cases.

## **Summary of 'Working Well' in the Six Cases**

Recordings often state that 'the children appear to be happy'.

## **EHE Team Involvement in the Cases**

The summary of the involvement of the EHE Consultant in the cases is as follows:

Case 1 – Contact with the EWO to compare notes on the case.

Case 2 – Record that the EHE Consultant has visited the family.

Case 3 – Joint visit with the Social Worker to see the family.

Case 4 – Considerable contact with the Early Help Transition worker and evidence of workers updating each other.

Case 5 – Recording of initial contact with the Social Worker regarding the case being discussed at panel.

Case 6 – Considerable contact between the workers regarding the concerns.

Workers leading on the cases in Early Help/Social Care are not always aware if an EHE case is being discussed at panel and are unclear as to what this means or involves. There is little evidence of the outcomes of panels being fed back to Early Help/Social Care workers in the recordings.

## **Child's Voice**

The child's voice is not apparent in four of the cases audited. The child's voice is heard in two of the cases. One of these cases involved a Return Interview being completed and the other was due to the work of the Transition Worker. In one case, the Social Worker has very clearly been prevented from seeing and hearing the child.

## **Summary of Findings**

- There is a lot of evidence in all six cases to suggest that parental (grandparents in one case) illness (both mental illness and physical) plays a large part in the reasons why the children have become home educated. The impact of poor parental health and illness has a big impact on children's capacity to remain in a school environment.
- All six children are undertaking a young carer's role.
- Recordings show that communications between EHE Consultants and case workers is inconsistent.
- It is unclear as to what 'going to panel' in EHE means and workers don't appear to routinely get feedback on the outcome of a panel meeting.
- Workers in Early Help/Social Care are unclear about the role and work of the EHE Team.
- Some of the cases appear to be closed on the basis that the case is held with EHE and therefore there is an assumption that everything is ok and there is no role for the team.
- The work being undertaken by the EHE Consultant is not being recorded consistently and regularly throughout the case in Profile or Carefirst.
- The children involved in the cases haven't been asked what their views are about being home educated. The child's voice is lacking in four out of six of the cases. There is no evidence in the recordings. Stating that the children appear 'happy' is not good enough.
- The recordings in Early Help show that Early Help are sometimes not looking at the bigger picture for the child i.e. they are not seeing beyond the presenting concern of not being at school and often closing cases when this issue has been resolved.
- All six of the cases show deeper worries for the children than that of home education. For example; emotional neglect, inadequate parenting, anxiety about parental illness, co-dependency.
- Parental ability to home educate the children is questionable in nearly all six cases.

## **Recommendations (Revised following October LIG)**

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### **Recommendation 1**

For the Liquid Logic Project Group to explore how EHE Consultants can be enabled to record on the new Liquid Logic database.

### **Recommendation 2**

A staff briefing on the role of the EHE Consultant and the role and function of the EHE service and panel to be produced for all CYPS workers and managers.

### **Recommendation 3**

The safeguarding and welfare of the child should be considered alongside the quality of the education in all cases where a parent wants to home educate. An assessment of these needs should be undertaken if risks are identified.

### **Recommendation 4**

All cases where children are home educated remain open until the views of the EHE Consultant and any work they might be undertaking have been considered and used to inform the case and then recorded on the appropriate case management system by the lead worker.

### **Recommendation 5**

Guidance, tools and support for assessing risk need to be developed for schools and EHE Consultants.

### **Recommendation 6**

The child's voice needs to be heard and considered throughout all EHE cases and the child's views, wishes and feelings need to be clearly recorded on both EHE team recordings and the lead worker recordings.

### **Recommendation 7**

Assessment and plans on home educated cases need to state any potential risks and identify and consider all worries, needs and risk factors including historic factors and the parenting capacity.

### **Recommendation 8**

If a home educated child has become a young carer, Social Work and Early Help managers need to recognise the need for a Young Carer's assessment. All workers and managers in Social Care and Early Help need to be fully aware of the potential link for home educated children with the role of a young carer.

26/10/17