

LAST UPDATED: MAY 2024

Making Attendance Everyone's Business in Redcar & Cleveland

Solutions Workshop

8th May 2024

Suggested focus for action linked to the intervention themes of:

Effective parental communication and engagement

Sharing attendance good practice and learning

Mentoring, coaching and peer support (this evolved to 'trusted person roles')



This Project is funded by Anglo American and managed by Redcar & Cleveland Borough Council

To keep up to date on the Project and to access free and useful resources please visit

www.skyblue.org.uk/attendance

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Attendance Good practice solutions

HOW DO WE MAXIMISE ENGAGEMENT WITH ATTENDANCE HUBS AND FIND AND SHARE THE GOOD PRACTICE FOUND WITHIN THE BOROUGH'S NURSERIES, SCHOOLS, COLLEGES & LEARNING SETTINGS?

What are attendance hubs? [Attendance hubs](#) are led by senior leaders in schools with effective attendance practice. Through their hubs, lead schools share their strategies and resources for improving attendance. The first attendance hub was set up by Rob Tarn, CEO of Northern Education Trust and members of the [Attendance Action Alliance](#), to provide other schools with techniques, resources and advice on how to improve attendance. There are currently 14 attendance hubs in England with an intention to expand to 32 in 6 regions in turn supporting 'nearly 2,000 schools ...to tackle persistent absence'. (DfE 8th Jan 2024). **Examples that are close to Redcar & Cleveland**



- [Attendance HUB - Northern Education Trust](#) (100 schools signed up for the pilot which will see the sharing of strategies and resources for improving attendance)
- [River Tees Multi Academy Trust \(rtmat.org.uk\)](#) 'Attendance at River Tees Multi-Academy Trust (RTMAT) academies is, like safeguarding, everyone's business.'




Early learning from attendance hubs about what works: *"Forensic data' is key ... but schools need to go 'extra mile.' You need to build trust with the family and find out what's going on at home, to strengthen that bridge. Improving attendance takes time."*

How can R&C schools get involved? DfE published an application process [Attendance Hubs Application Form \(office.com\)](#) and [expectations for schools joining attendance hubs](#) in December 2023 inviting mainstream maintained schools and academies to express interest in 'joining' an attendance hub which would see them – *if successfully selected* ('Spring 2024' decisions) - being able to access support for a range of commitments in exchange. 'Schools who join the hub will have access to half termly virtual hub meetings run by the lead school to share practice and discuss any challenges with others. They will be expected to use this learning to revisit and revise their existing systems and protocols for managing attendance to drive improvement. At an initial online meeting, school leaders will be introduced to their hub and have the opportunity to ask questions. DfE will match interested schools to the most appropriate hub. In the form applicants were asked which area of attendance practice they/their school would like to receive support from through a hub giving insight as to the kind of practice likely to be shared:

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| ■ Developing an effective attendance policy | ■ Staff training | ■ Staff roles & responsibility |
| ■ Establishing a culture of high expectations for attendance | | ■ Attendance systems & processes |
| ■ Improving attendance for specific groups of children | | ■ More effective use of attendance data |

? **Are schools in Redcar & Cleveland engaged or engaging with these hubs?** We're not sure. The application process is still being decided so we will seek an update from DfE. At the most recent Attendance Network meeting ((February 2024), only one school represented on that call (from c30) said they had engaged with an attendance hub in England, saying that whilst it would be beneficial over time the matching of their school to just one hub had been challenging. Another school reported they had applied to be an attendance hub in 2023 and 2024 but not heard anything back. Christina Jones, the Chief Executive of RT-MAT introduced their attendance hub to the Network with a generous offer for anyone in Redcar & Cleveland wanting to know more to get in touch with her / team via Grant Smith (Head of Inclusion, RCBC).

- ?**
- **The Attendance Network** has been starting to share examples of good practice used to encourage good attendance and address PA and SA. From their SWOTS (collected by Grant Smith and his team) which strengths and opportunities do we need to build on?
 - What about the **role of Governors and accountability for attendance** – are they / could they be Champions?

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- How much of the shared strategies and best practice that hubs and matched schools discuss and learn about together about things **outside of a school’s control** i.e. that require wider system partners to be a part of the solution and ‘make attendance everyone’s business’?

Suggestions from delegates attending the 20th of March 2024 ‘solutions’ workshop session

Suggested Solution(s): Maximising the opportunities of Attendance Hubs as well as good practice within the Borough.

Including consideration of supporting School Governors as champions for attendance (accountability) and all the ‘SWOTs’ being completed by schools/participants of the Attendance Network.

1: Thinking about this solution, and referring to the theory of change *diagram*, if done well, which outcomes would it most contribute towards?

A key theme of the discussion was around the need to provide ‘**support before sanction**’ as an approach to addressing attendance issues. If this, and other good practice is applied across the Borough a range of useful outcomes could occur including:-

- Culture change – language and attitudes, small changes that add up over time to the way things are done
- More support for CYP / families would result in less sanctions and less punishment perhaps galvanising more trust amongst the different parties
- Recognition of effort by CYP with schools offering more flexibility in approach
- Policy change could result in removing barriers that otherwise inhibit ‘good’ attendance
- Feelings of openness, access and belonging by CYP supported with their attendance
- Changes for parents, governors, Trustees and pupils working together.

2: ARE WE ALREADY DOING THIS SOLUTION ANYWHERE ‘WELL’ IN REDCAR & CLEVELAND?

| Where is it working well and why? | Where are there gaps that you think this solution would ideally fill? |
|--|---|
| <ul style="list-style-type: none">• Archway – works well by encouraging small changes with each young person• Laurence Jackson School was namechecked as having good practice to meet individual needs• South Bank Primary School were namechecked as having good practice regarding mental health modifications• <u>Macmillan Academy</u> were namechecked for good practice in relation to policy changes they had made | <ul style="list-style-type: none">• Effective, consistent transition• Unless it’s for parents evening, parents don’t go into secondary schools or get involved – how to change this culture? |

3: WHICH PEOPLE/ORGANISATIONS IN THE WIDER SYSTEM I.E. NOT JUST SCHOOLS OR COLLEGES, BUT ACROSS ANY OF THE SERVICES, IN COMMUNITIES, AT HOME – NEED TO BE INVOLVED IN THIS SOLUTION?

- Whole staff culture – attendance has always been ‘done’ in a certain way, so the language has to be more supportive than in the past
- Outside agencies e.g. Early Help, Education Psychology Service

Making Attendance Everyone's Business in Redcar & Cleveland

- Inclusion team members – to advise on other services
- HeadStart – school quality standard (academic resilience framework)
- CEOs of Multi Academy Trusts – to follow up on a recent event about Attendance Hubs at Middlesbrough Football Club – have there been any policy changes@ Individuality at what age and purpose of compliance discussions to continue.
- Youth club / auxiliary staff – shared staff retention
- Schools who can be supported to do more Early Help Assessments.

4: WHAT IS YOUR RECOMMENDED ACTION PLAN FOR THIS SOLUTION?

| How do we get started / build on what we've got? If we think more of this type of solution is needed how do we make it happen? | Can we make change using the resources 'we' already have in the system i.e. can we improve things by doing things differently with what we've already got? Do we need additional resource to make a step change in the outcomes to reduce the risk of / persistent / severe absence? |
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| <p>Relationships and Culture <i>"Encouragement on everyone's lips in school"</i></p> <ul style="list-style-type: none"> • Recognising the positives – instead of 'where have you been?' say 'good to see you back?' • Sharing attendance practice with different settings • 'Where are you' to 'How are you' language builds trust and develops relationships. • Transition – key people involved, build from their experience • Staff training – whole staff – everyone using the same language including auxiliary staff who can often not be part of this training/info sharing however are also often first contact. • Some pupils are in Social isolation, 'don't see a person' so its important that their 1st contacts are positive and trusting. • 'Get in there!' – Macmillan Trust slogan Their approach will be shared at next network meeting. | <ul style="list-style-type: none"> • Attendance policy – consistency / comprehensive coverage / applied by all-needs revisiting and training • Planners and phone calls will need to be updated – phone calls made more personable than a text. • Text messages are not relationship based, therefore re-write email / texts to make them strength based so how do we improve things, 'knowing' forces the conversations. • Rewards for most improved linked to health so that even the slightest improvement is recognised and rewarded. • Consistency in applying the attendance codes in all schools • Punctuality systems – <i>"change the bell"</i>- what happens if you ring it 5 mins earlier? • Expectations should be realistic and ambitious but not punitive. • Tutor group recognition- the role of the form tutor – has this been reduced in recent years ? • Compliance – consider compliance based policy – what is the purpose – if it doesn't have one remove it |

GETTING TO A SMALLER NUMBER OF PRIORITISED ACTIONS TOGETHER

At a further 'solutions' workshop hosted on the 20th of May by the Project Team, over 30 delegates agreed that there might be benefit in focusing on a small number of actions – some that would incrementally be trialled and embedded in each school setting, whilst others would be purposely aimed at connecting and learning about as much good attendance practice as possible.

Some of the delegates – mostly from professional services that work with children, young people and families felt they did not know enough about Attendance Hubs – what were they, where were they, what was happening and what their offer was. Whilst NET and RT-MAT (the two closest Attendance Hubs) are well known within the school system / community there may be benefit in inviting them to present / explain their

approach and learning to this wider audience in the Borough at a future event. We have discovered, however, that just because they are the closest Attendance Hubs it doesn't necessarily mean that schools within the Borough are or could be 'matched' with them to access their best practice and resources. As such, knowing about the overall network of Attendance Hubs invested in by the government may equally be beneficial.

Here, meantime, is one of the strongest ideas emerging from the Project participants that might attract energy from different stakeholders for 'good practice' solutions in 2025.

Inspiring conference to celebrate and share best practice

A mix of activity is required to extract and share the best practice found inside and outside of Redcar & Cleveland that will reduce the risks of, and reverse the levels of persistent and severe absence. In every school, college and learning setting there should be a predisposition to share the positive work of students regularly. Whilst interactions between school staff and professionals could involve scoping conversations to share and celebrate good practice. RCBC attendance surgeries could be facilitated in each school to offer good practice on resources at ground level and include a face to face meeting at the start of next term.

To bring visibility to the many ways in which persistent and severe attendance could be reduced and reversed it is proposed that an inspiring event should be hosted in 2025; the ambition being to showcase what we're already doing well in the Borough but with a clear ambition to identify schools / settings / system partners – 'champions' - willing to try something new.

Step 1: Plan a conference with inspiring keynote (e.g. Paul Dix to talk about 'visible consistencies' and belief that 'when the adults change everything changes') and good practice workshops linked to effective interventions

Step 2: Advertise / plan for 3 follow up research projects – 'all have to sign up for one'

This idea needs further exploration to understand what such projects / trials might look like, but likely to be a mix of the most effective interventions being discovered through this and wider regional (Teesside Attendance Action Alliance) and national (DfE / Attendance Action Alliance) work and investment.

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| Enabler ('wish-list 'would be nice...'): Introduce an Attendance Co-ordinator for the Borough building relationships within the system for the long-term and making this kind of activity the norm in all settings. |
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Lived experience, Parental/carers engagement and communication solutions

HOW DO WE MAXIMISE LIVED EXPERIENCE ALLIED WITH PARENTAL / CARER ENGAGEMENT & COMMUNICATION INTERVENTIONS?

WHAT DOES THIS MEAN?

'Parental engagement interventions are those that involve parents in supporting and encouraging their children to attend school. There are 2 distinct types of parental engagement interventions:

1: Communication: 'Parental communication interventions aim to increase awareness of the consequences of absenteeism or target commonly held parental misbeliefs undervaluing the importance of regular attendance. The aim of these interventions are that greater awareness or eradicating misconceptions will lead to guardians' taking a more active role in improving their student's attendance. Communication can occur in a range of ways including email, phone-calls, text messages and post, varying in quantity and time of day. Typically, these messages state information about the importance of attendance and add in specific information about the child's attendance history.' Examples:

- Delivering personalised information to parents of medium- and high-absence students through a series of mail-based communications. The mailers emphasised the value of regular school attendance in the early grades and reported the number of days their child had been absent alongside an insert that encouraged parents to reach out to others they could enlist to help improve their child's attendance.
- Another example was Nudge letters which were sent to parents/guardians of students identified as chronically absent. The letter focused on the importance of students' attendance to their learning and the school community and the number of days of school the student had missed the previous year alongside school contact details. The letter was translated into the most commonly spoken languages of families listed in the district records.
- [BITUP: Updating Parents on Number of School Days Missed... | EEF \(educationendowmentfoundation.org.uk\)](https://educationendowmentfoundation.org.uk) – this is a parent messaging trial - Updating Parents on Number of School Days Missed - working with The Behavioural Insights Team (2022/23)

2: TARGETED PLANNING SUPPORT WITH FAMILY MEMBERS AND/OR GUARDIANS

Targeted parental engagement interventions are responsive in nature and include approaches that involve staff having discussions with parents to gain information about the reasons for low attendance and collaboratively planning support students and their families need to overcome attendance barriers. These interventions are usually more intensive with families having access to multiple services e.g., counselling, mentoring, resources and family activities. Therefore, access to these interventions is usually assessed by monitoring attendance and identifying those pupils who are considered to have attendance issues and the approach is tailored to the needs of the pupil and the family.

Lived experience: Our event in May 2023 at Tuned In! and collection of 18 trauma informed case studies from CYP and families that had managed to move from being SA/PA to more stable attendance highlight the important role of positive relationships between the different parties; the style of engagement; the positive and negative impact that communications can have and the way in which this can sometimes fuel either positive or negative community feelings towards school more generally e.g. through social media. How do we ensure lived experience is rooted in any of the interventions we invest in together?



Are we using the tools, resources and best practice available?

Are we listening communicating with and engaging with parents & carers effectively – is it two-way?

[Toolkit for schools: communicating with families to support attendance - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

[DfE external document template \(childrenscommissioner.gov.uk\) – Attendance Action Alliance guidance for parents on school attendance](#)

[Attendance campaign communications toolkit for schools](#)

Suggestions from delegates attending the 20th of March 2024 'solutions' workshop session

Suggested Solution(s): Lived experience allied with effective parental/carers engagement and communication interventions.

1: THINKING ABOUT THIS SOLUTION, AND REFERRING TO THE THEORY OF CHANGE DIAGRAM, IF DONE WELL, WHICH OUTCOMES WOULD IT MOST CONTRIBUTE TOWARDS?

- Each school could have a drop-in, bookable by parents to talk about their children / child and about family issues. Remove the barrier of phone only contact and offer face to face conversation instead then parents would feel listened to and understood, and this would also support children who can't communicate well.
- Used lived experience in ordinary questioning about parent and child so it becomes 'normal'.
- Daily record in early years supports families to understand their child and promote a sense of belonging, suggestion that this good practice could be replicated in secondary.
- Family learning would encourage working together to build resilience.
- If letters go out about attendance it can be a negative experience for some parents and creates distrust / fear or additional pressures. The comms via email / posts can be fearful for parents due to (some) being in debt, and some won't read any formal letter as they associate it with 'negative' authority (not just their school necessarily). Alternatives need to be explored to demonstrate empathy with this emotional reaction. Instead, need a key adult to build the relationships with the child and parent and this needs to be targeted.
- Parental engagement – to really understand the child with the 'right' person in the school communicating so a supportive conversation is occurring.
- Empowering parents to decide who is the right / trusted person to talk to – any agency can communicate.

2: ARE WE ALREADY DOING THIS SOLUTION ANYWHERE 'WELL' IN REDCAR & CLEVELAND?

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| <p>Where is it working well and why?</p> <p>Huntcliff secondary school was name-checked as having some good practice re: two-way communication app</p> <p>Sacred Heart Catholic secondary school was also name checked as a good example of having a communications strategy that could be replicated</p> <p>Redcar & Cleveland College was namechecked as having good practice re: early identification of young people at risk of withdrawing from college and becoming NEET. Multi-agency approach adopted to ensure the most vulnerable young people have the right support in place, as well as 'Team around transition' Mentor + individualised approach to understand each young person with family involvement</p> <p>Local authority attendance team: assessment of needs – parents appreciate this. Scotland toolkit for early relationship building was name checked at an earlier workshop by one of the educational psychologists to source and review. Engaging parents and families - A toolkit for practitioners Resources Education Scotland</p> | <p>Where are there gaps that you think this solution would ideally fill?</p> <p>Communication & engagement methods No single communication approach on its own will have much impact relative to the desired outcomes in the theory of change – multiple methods are required.</p> <p>Two way communication needs to be better. 'Nudge letters' don't work; they impact negatively on (some) relationships between school and family</p> <p>Early intervention gaps / opportunities Using the data and responses effectively for early intervention. Targeted planning with earlier opportunities to meet with the parent would impact more on understanding the child and family – maybe an identified slot of 20 minutes conversation but this should be trauma informed and involve wider partners who can support and advocate for the family.</p> <p>Team around the family + targeted support + individualised support + involves VCS specialist</p> <p>Adults First Model – further information to be provided during the Project. (Christine Sketchley leads on this)</p> |
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3: WHICH PEOPLE/ORGANISATIONS IN THE WIDER SYSTEM I.E. NOT JUST SCHOOLS OR COLLEGES, BUT ACROSS ANY OF THE SERVICES, IN COMMUNITIES, AT HOME – NEED TO BE INVOLVED IN THIS SOLUTION?

- Parents and wider family members
- Children and young People
- Early Help
- Social care
- Youth Justice Service
- GPs
- Police
- Specialist services such as CAMHS, Drug and Alcohol Teams
- Voluntary and community sector organisations e.g. The Junction, Daisy Chain etc
- CVS
- Public Health and wider health partners
- DfE (review communications)
- Ofsted

4: What is your recommended action plan for this solution?

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| <p><i>How do we get started / build on what we've got?</i> <i>If we think more of this type of solution is needed how do we make it happen?</i></p> | <p><i>Can we make change using the resources 'we' already have in the system i.e. can we improve things by doing things differently with what we've already got? Do we need additional resource to make a step change in the outcomes to reduce the risk of / persistent / severe absence?</i></p> |
| <p>Intervention typologies:</p> <ul style="list-style-type: none"> • Family / collaborative learning • Earlier intervention • Trauma informed questions included / embedded in meetings with parents, that are also flexible and individualised • Early years nurture approach replication (with parents / family member / carer fully engaged in child's learning and school experience) • Communication: explore use of Parent App with attendance child version incorporating two way communication (i.e. not 'just' letters sent to parents about attendance which can be negative) • Toolkit: area-focussed – use the data | <p>Build on the good practice wherever we can and where additional financial or human resources are not the enabler of improvement rather it's just doing things differently:</p> <ul style="list-style-type: none"> • Post-16: joint approach between the provider, young person, parent, local authority, agencies (e.g. The Junction, MIND, social care, early help etc) with a plan in place so the approach to the parent is considered • Engage with the schools / colleges with good parent engagement / communications set of principles, practice or strategy and encourage them to share widely across the Borough so that others can be encouraged to assess / improve their own practices accordingly • Improve 'first point of contact' arrangements in all education settings using best practice available |
| <p><i>How do we get started / build on what we've got?</i> <i>If we think more of this type of solution is needed how do we make it happen?</i></p> | <p><i>Can we make change using the resources 'we' already have in the system i.e. can we improve things by doing things differently with what we've already got? Do we need additional resource to make a step change in the outcomes to reduce the risk of / persistent / severe absence?</i></p> |
| <p>Intervention typologies:</p> <ul style="list-style-type: none"> • Focus groups with parents, families, children. How do they want to receive communications and how can lived experience be used to inform messaging that is effective? • Centralised collection of lived experience • Transition and early initial relationship building with families before they start school • Review use of language in all communications (by professional services, authorities) • Process of review and sharing best practice. | <p>Make use of good practice evidence from the EEF or shared via the Attendance Hubs around parental engagement and effective communication interventions</p> <ul style="list-style-type: none"> • Involve the team of expert and enthusiastic educational psychologists in developing effective parental / CYP engagement approaches in the Borough – could they work with education leaders on (push-pull framing) strategy / tactics / campaigns that can build successfully over time. |

Suggested focus for action at the 8th of May 2024 solutions workshop session

At a further 'solutions' workshop hosted on the 20th of May by the Project Team, over 30 delegates agreed that there might be benefit in focusing on a small number of actions, but they affirmed the need to continue

discovering better ways to communicate and engage with parents and guardians if we are to reduce and reverse patterns of persistent and severe absence. Reflections included:

- Teachers do not necessarily have the skills, experience, time or aptitude to communicate effectively (and relationally) with parents.
- Some schools (e.g. Margaret Clitheroe) have responded by employing Parent Support Advisors.
- The "High Viz" culture at the school gate is intimidating (and not welcoming) for both pupils and parents.
- One speaker in the group commented on the low average reading age of some parents and that comms should reflect this.
- The table agreed that just as young people need trusted adult relationships in school and to have a sense of belonging, so too do parents.
- The group suggested the need to get adults into schools more often for positive things (plays, celebrations, classroom visits, sports events etc) – more in line with a primary-school-style approach to family engagement in the school.

Here is one of the ideas being suggested that might attract energy from stakeholders for 'communications' solutions in 2024/25 but it will require at least three willing schools – one who already started a trial but stopped, and two new schools feeling that this would bring value to the way they do things already.

'Scrap automated communications by schools to being human (again)'

Dilemma: communication – lost opportunities. Suggested solution: Pilot with a couple of schools who use text message / automated answering service for attendance to trial going back to a 'live' person to build a relationship – it will make a huge difference! Best case scenario: Better relationships through 'humanness'. Worst case scenario: Won't make a difference if not tried. Gut feelings: we have lost some of those relationships enjoyed in the past. Pluses and minuses: - + Reduce the 'reaction' of a text message approach to being proactive in approach with a live person.

Step 1: Revisit Laurence Jackson to find out how many / why the dedicated person to answer absence calls is not in place any more. Find out what worked well, what could be changed / improved and understand why it stopped.

Step 2: Two schools agree to a pilot programme to remove automated services and text messaging.

Step 3: Explore wider staff relationships and behaviours, and the first point of contact for pupils and parents/families in school) – what is the experience like? From the school crossing patrol to the receptionist to the teachers and tutors. Is the experience positive, welcoming, supportive and are barriers (perceived or actual) purposely and consciously removed. Pilot small scale 'visible consistency' approach to welcome / relationships at school.

Enablers: Staff to have specialist training to support children and families. ALL to have empathetic / trauma informed approach.

Mentoring peer support and coaching solutions



Are we clear about the difference between mentoring and coaching, the different types, anyone unsure?

Should mentoring be linked to peer support interventions too?

DfE Attendance Mentors: 1-2-1 mentoring pilot (delivered by Barnardo's) in Middlesbrough aimed at tackling the factors behind non-attendance (since extended to other areas targeting support for 1,665 persistently absent and severely absent children in total).

Updated in January 2024: [Major national drive to improve school attendance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/major-national-drive-to-improve-school-attendance) "The government is also increasing the direct support offered to children and their families with the expansion of the attendance mentor pilot programme. With an investment of up to £15 million, over 3 years, this programme will provide direct intensive support to more than 10,000 persistent and severely absent pupils and their families. The programme will see trained attendance mentors working in **10 further areas** from September 2024. These areas are in addition to the existing pilot programme with Barnardo's, which is already operating in Middlesbrough, Doncaster, Knowsley, Salford, and Stoke on Trent. The programme provides intensive one-to-one support to pupils who are persistently absent working with them and their families to find out why the child is skipping school. This can lead to extra support, more intensive work with teachers or in some cases bridge-building between school and family."

Youth Mentoring: The Achieve Education Programme funded by Anglo American is supplying funds for Youth Mentors able to work with c 25 young people for 3 years in two Redcar & Cleveland Secondary schools (St Peter's Catholic School and Outwood Academy Redcar). Its efficacy is being evaluated by end of 2025.

Evidence Base? Mentoring was one of 8 topics that the EEF looked at to build evidence of what works to reduce absence, exclusions and improve attendance. It concluded that 'many of the interventions that were not targeted either had not enough evidence to reach a conclusion or seemed to have no impact. **There was not enough evidence to reach a conclusion for the efficacy of mentoring or behaviour approaches.**'

The 8 topics were mentoring, parental engagement, responsive and targeted approaches, teaching of social and emotional skills, behaviour interventions, Meal provision, Incentives and disincentives and Extracurricular activities

[Attendance-REA-report.pdf \(d2tic4wvo1iusb.cloudfront.net\)](https://d2tic4wvo1iusb.cloudfront.net/Attendance-REA-report.pdf)

EEF and YEF are investing in a pilot called **Grassroots'** a programme that aims to reduce bullying and conflict in schools by empowering pupils to positively impact their peers' behaviour. Anyone involved?

[Grassroots: a programme to improve pupil behaviour \(2023/24 – ... | EEF \(educationendowmentfoundation.org.uk\)](https://www.eef.org.uk/news/grassroots-a-programme-to-improve-pupil-behaviour-2023-24). The pilot seeks to answer this question: Does empowering KS3 pupils to positively impact fellow pupils' prosocial attitudes and behaviours reduce pupil conflict, including bullying perpetration, and school absence? Bullying is cited as one of the main reasons for young people to choose not to attend school.

The Centre for Youth Impact is conducting evaluation to help understand the impact of youth mentoring too on young people aged 10-14; defined in their trial as 'intentional 1:1 ongoing relationship between a trusted adult and young person, with the aim of supporting young people's personal goals and aspirations and socio-emotional development'. Mentoring should centre on supporting young people to develop social and emotional skills as part of early intervention to reduce young people's risk of involvement in youth violence.'

UK desk research: Mentoring programmes are seen as a way of providing individualised support targeted particularly for at-risk students. There is also the thought that by combining mentoring and peer support interventions, the impacts in terms of student engagement may be greater still (e.g., in London). In Birmingham intensive support for students with chronic absenteeism has been delivered through mentorship.



What about coaching examples – where are these working to reduce SA/PA or the risks of absence by CYP?

SUGGESTIONS FROM DELEGATES ATTENDING THE 20TH OF MARCH 2024 ‘SOLUTIONS’ WORKSHOP SESSION

Suggested Solution(s):

Mentoring, peer support and coaching solutions

1: THINKING ABOUT THIS SOLUTION, AND REFERRING TO THE THEORY OF CHANGE DIAGRAM, IF DONE WELL, WHICH OUTCOMES WOULD IT MOST CONTRIBUTE TOWARDS?

- Happy children who engage
- Feeling listened to and understood
- Knowing where to get help from (signposting)
- Regular, purposeful communication
- Shared action planning for success
- Cycles of positive change reinforced
- Change feels possible and new goals are set
- Self-determination / feeling empowered and resilient
- Peer mentoring grows leadership as well.

2: ARE WE ALREADY DOING THIS SOLUTION ANYWHERE ‘WELL’ IN REDCAR & CLEVELAND?

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| <div><div>Where is it working well and why?</div><div><ul style="list-style-type: none">• Some student leadership / peer mentoring has happened• Mental health support is in place e.g. Headstart• ‘Everyone talks to Neil’ at Huntcliff (school counsellor / therapist)• Student leadership in schools?• Some schools have parent support advisors• Post-16: NEET business mentors have been successful• NEET prevention 1:1 with VYP and parent is personalised and quite solution focused• EWO: Home visits to include some mentoring conversation...but also compliance role!</div></div> | <div><div>Where are there gaps that you think this solution would ideally fill?</div><div><div>➡</div><div>...but we don’t know if it still is or where, or what impact it had?</div></div></div> |
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3: WHICH PEOPLE/ORGANISATIONS IN THE WIDER SYSTEM I.E. NOT JUST SCHOOLS OR COLLEGES, BUT ACROSS ANY OF THE SERVICES, IN COMMUNITIES, AT HOME – NEED TO BE INVOLVED IN THIS SOLUTION?

- Mental health organisations / VCS sector – grow their role?
- Employer networks – volunteering programmes
- Anglo American Youth Mentoring being piloted as part of the Achieve Education Programme (Years 7-9 in two secondary schools)
- Social prescribers – could there be a direct mentoring offer?

4: WHAT IS YOUR RECOMMENDED ACTION PLAN FOR THIS SOLUTION?

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|---|---|
| <p><i>How do we get started / build on what we've got? If we think more of this type of solution is needed how do we make it happen?</i></p> | <p><i>Can we make change using the resources 'we' already have in the system i.e. can we improve things by doing things differently with what we've already got? Do we need additional resource to make a step change in the outcomes to reduce the risk of / persistent / severe absence?</i></p> |
| <p>Main recommendation is to adopt a KEY WORKER approach at every phase.</p> <p>Peer support</p> <ul style="list-style-type: none"> • Establish what is in place in schools currently and any evidence of impact? • Establish which year group is key to be mentored • Pilot some solutions in volunteer schools (low cost!) • Beware of overload / overlapping services. <p>Mentoring coaching</p> <p><i>Consider: CYP and / or family members/parents?</i></p> <ul style="list-style-type: none"> • Discovery phase: talk to other local authorities and talk to schools who have mentors • Design a proposed mentor / coach offer...WAGOLL ('What a good one looks like')...(EP's may have this?) • Funding streams? • Identify potential coaches / mentors / volunteers and Training (Train the trainer model) | <p>Use of existing resources / improving them?</p> <ul style="list-style-type: none"> • How do we develop all casework staff to be able to coach / mentor? • Use a more coaching style? • Tutor time: Is it fit for purpose (to grow self-determination?) <p>Yes, we need additional resources too though for a key worker approach at every phase. Vertical grouping in school tutor groups could be a potential solution?</p> |

Suggested focus for action at the 8th of May 2024 solutions workshop session

At a further 'solutions' workshop hosted on the 20th of May by the Project Team, over 30 delegates agreed that there might be benefit in focusing on a small number of actions, and whilst interested in mentoring, coaching and peer support solutions, reflected that to affect change longer-term, the role of 'a trusted person' in different contexts would be beneficial.

The group discussing these solutions also agreed that just as young people need trusted adult relationships in school and to have a sense of belonging, so too do parents.

Here is one of the ideas being suggested that might attract energy from stakeholders for 2024/25.

THE NEED FOR MORE TRUSTED PERSON ROLES IN MORE SCHOOLS AND COMMUNITY CONTEXTS

Focus on the role of **'trusted person'** in different contexts; support these people, learn from how they affect attendance behaviours and then roll out this practice where it will work best. This could look different in each setting, for example, the **parental support advisor** role exists in some schools. In other contexts this might mean establishing, or making the case for, **dedicated family support officers** who are skilled to talk with families. This also means maximising the skills of people already employed in the Borough with these skills so they can be cascaded more widely in more schools recognising the finite resources available to professionals managing complex caseloads with young people and their families.

Step 1: Obtain and share the **parent support advisor role** and **family support workers** job specifications (DfE have been asked to support this task as well as finding out more about the role of **attendance advisors / mentors** [in Middlesbrough]).

Step 2: Identify how these trusted roles are or could be in place to work on parental engagement and communication in more schools across the Borough. We need to audit / understand better the availability of these and other roles in each school including **mentoring** [which we should also assess to see what is already going on, its impact, which schools use mentors for their pupils and staff] and **buddying** [language will be important here too].

Step 3: Develop support / training / development / community of practice and peer support for these different roles and / or make the case for investment in each setting where it is expected to make a valuable difference to attendance behaviours (e.g. include in any selected place based pilot where feasible).

| |
|---|
| Enablers: Staff to have specialist training to support children and families. ALL to have empathetic / trauma informed (better still trauma attuned) approach |
|---|

Targeted Support and Caseload Management Solutions

HOW DO WE MAXIMISE TARGETED SUPPORT & CASELOAD MANAGEMENT SOLUTIONS AS WELL AS 'TEAM AROUND...CHILD / FAMILY / SCHOOL' MODELS

WHAT DOES THIS MEAN?

'Many approaches to improving attendance do not have a specified "intervention" but instead aim to be responsive to the reasons for low attendance by an individual pupil. These approaches are often multi-component and may involve one to one support for the pupil that has low attendance. One of the key characteristics across all of these approaches is monitoring and identification of pupils that need attendance support and the reasons for low attendance. Some of the approaches combine the targeting of barriers with the positive re-enforcement of good behaviour.

[Attendance-REA-report.pdf](#) – (see page 23)

What's the evidence trail? EEF did a review in 2022 of '**responsive and targeted approaches**' to build evidence of what works to reduce absence, exclusions and improve attendance. They concluded:

'There is some evidence of promise for several strategies including parental engagement approaches and **responsive interventions that target the individual causes of low attendance**. Positive impacts were found for both parental communication approaches **and targeted parental engagement interventions**. The impact was larger for targeted approaches. **Responsive intervention in which a member of staff or team use multiple interventions and target approaches specifically to the needs of individual pupils was also found to be effective**. There may be crossover with these approaches and the approaches used in English schools by attendance officers.'

Local RCBC peer review insight supplied post-workshop: 'This approach, to unpicking the root causes of a child's poor attendance is aligned with Working Together to Safeguard Children 2023

[Working together to safeguard children 2023: statutory guidance \(publishing.service.gov.uk\)](#)

and more specifically, the chapter regarding Early Help. The role of a lead practitioner is described - to not just look at the child in isolation- but assess the needs of the whole family and unpick the worries and find solutions working with the family to help identify these, coordinating services and interventions that in turn, will improve their attendance'.

The EEF report continues: 'These approaches include staff monitoring of pupil absences, the identification of the causes of absences and then responsive, individualised interventions that tackle those causes.'

Local RCBC peer review insight supplied post-workshop: [Working Together to Safeguard Children 2023](#) explains the role of the lead practitioner (page 45, para 121): "A lead practitioner should co-ordinate the activity around the family, ensure the assessment and the family plan responds to all needs identified, and lead on ensuring the family co-produce the plan. The plan might include the family network. The time commitment to deliver this role will vary family by family depending on the complexity of their needs." Making Attendance Everyone's Business in Redcar & Cleveland

EXAMPLES FROM THE DESK RESEARCH

The responsive interventions are delivered by a variety of staff from social workers to teachers.

- Social Worker Teacher Classroom Collaboration (Viggiani 2002) - in this approach a social worker identifies barriers to attainment and attendance and pro-actively intervenes to overcome them.
- A three-tier model - which combined whole class rewards for good attendance, monitoring and parent communication for pupils with lower-than-average attendance, and individualised support from a guidance counsellor for those with the lowest attendance rates.
- A multi-faceted intervention that might include a school-based co-ordinator and several interventions such as mentoring, family involvement, school-based health centre enrolment, and tutoring.

THINGS ARE CHANGING DYNAMICALLY.....

The Project's Theory of Change Group identified in the Autumn of 2023 that **The Care Review** as an opportunity to think about how different professionals in the system provide support differently in future linked to Family Help Teams, the role of Early Help Multi Agency Teams working with CPY and families (who could hold Children in Need cases and appropriate supervision).

WHAT OPPORTUNITIES EXIST TO CONTINUALLY WORK ACROSS TEAMS THAT ARE INVOLVED IN CASELOAD MANAGEMENT AND THE WAY IN WHICH DECISIONS ARE MADE WHEN CHILDREN AND YOUNG PEOPLE ARE 'CLOSED' FROM ONE PARTICULAR PART OF THE SYSTEM?

Local RCBC peer review insight supplied post-workshop: Since Autumn things have moved on and at the solutions workshop in March 2023, RCBC senior officers explained that since the Care Review was published, there have been 3 local authority trials commissioned by DfE and other local authorities are awaiting the outcome of these pilots to see how some elements could be adopted. Regionally, the Directors of Children's Services are considering a collective 'pilot' of the new ways of working described. There are likely to be some barriers that means RCBC cannot 'jump into locally now' as the OFSTED inspection framework and legal framework will need changing to enable officers to work with Children in Need (CiN) cases without a qualified social worker leading the case. 'It is complicated!'

In the Autumn 2023 workshops some participants were interested to learn more about the way in which cases are stepped down and closed by experts in different services managing CYP and family caseloads. Helpful clarifications were provided in the March 2024 workshop and afterwards as follows>

Local RCBC peer review insight supplied post-workshop in March 2024: RCBC would not statutorily keep a case open when attendance was the only outstanding issue for a child or young person. It would be requested that it was stepped down to school to have a Team Around the Family in regard to this issue. There is already a process in place around closure and this would normally be agreed at a TAF / Care Team Meeting. Making Attendance Everyone's Business in Redcar & Cleveland

HOW DO WE OPTIMISE OUR 'TEAM AROUND...' MODELS OF WORKING IN REDCAR & CLEVELAND?

THIS 'SOLUTION' IS GOING TO BE MULTI-FACETED. IT MAY MANIFEST IN DIFFERENT 'TEAM AROUND' MODELS IN THE BOROUGH – AROUND THE CHILD, FAMILY AND/OR SCHOOL. WHAT DOES THIS LOOK LIKE, CAN WE PAINT A PICTURE?

HOW DO WE OPTIMISE OUR 'TEAM AROUND...' MODELS OF WORKING IN REDCAR & CLEVELAND?

MORE WORK IS BEING DONE ON THIS TOPIC IN 2024 AND 2025 AND THIS WORKSHOP IS JUST THE START OF THE CONVERSATION.

SUGGESTIONS FROM DELEGATES ATTENDING THE 20TH OF MARCH 2024 'SOLUTIONS' WORKSHOP SESSION

SUGGESTED SOLUTION(S): TARGETED FAMILY ENGAGEMENT INTERVENTIONS INCLUDING CASELOAD MANAGEMENT BETWEEN SERVICES AND PROFESSIONALS AND 'TEAM AROUND...'¹ MODELS EMBEDDED WITH RELATIONSHIP CENTRED AND TRAUMA INFORMED PRACTICES.

1: Learning from the [Alternative Provision Specialist Taskforce pilots](#) but also how do we start to realise all the different professional service / school / college staff that are employed in the Borough and work with CYP and families to support positive outcomes in their lives. Is ATTENDANCE embedded in all conversations / caseload management / graduated responses seamlessly around the child / family / school. How is public health, social care, youth justice, early help, welfare, youth services, family services and other support connected to support CYP/families attend well?

1: THINKING ABOUT THIS SOLUTION, AND REFERRING TO THE THEORY OF CHANGE DIAGRAM, IF DONE WELL, WHICH OUTCOMES WOULD IT MOST CONTRIBUTE TOWARDS?

List the key outcomes – CYP / families / schools/learning settings / communities / system

Targeted interventions including effective 'team around' (child / family / school) models are thought to contribute to these outcomes if done well in Redcar & Cleveland:-

- Feeling listened to and understood (CYP and family members)
- Trusted relationships being formed that build confidence and motivation
- Improved emotional health (of CYP / family members)
- PA/SA being supported to go back to school
- Improved parental engagement with the school
- Improved academic achievement (each CYP)
- Improved resilience (all involved – CYP, family members, school staff).

2: ARE WE ALREADY DOING THIS SOLUTION ANYWHERE 'WELL' IN REDCAR & CLEVELAND?

WHERE IS IT WORKING WELL AND WHY?

Multi-agency meetings 'wherever there is an attendance concern' that are inclusive 'with everyone; involved e.g.

- Skilful social workers who are usually coordinating meetings whether Team Around Child (TAC) or Team Around the Family (TAF) in approach – involving care teams prompting one workshop delegate to say, 'we have a blueprint.'
- There is a strong Team Around the Family approach in Redcar and Cleveland
- In the local authority Children's Services have a range of teams providing family support at an early
- Workers working with the most complex families, Health Visitors, Family Hub teams and Youth Workers. Intervention staff work alongside RCBC's attendance and welfare service and other external support services to take a Team Around the Family approach. These meetings

WHERE ARE THERE GAPS THAT YOU THINK THIS SOLUTION WOULD IDEALLY FILL?

Workshop delegates felt there were some inconsistencies and gaps that create challenges to improving attendance by CYP including:

- Behavioural policies, particularly in secondary schools in the Borough
- Newly qualified vs experienced staff deployed to Team Around the Family (TAF) approaches impacts the quality of outcome and could increase the risk of disengagement if not robust in all instances.
- There was a description given about the experience of social care being 'either nothing or a complete offer' suggesting a gap in the 'Middle ground however that could be defined – more discussion and exploration would be required to understand this better
- Delegates felt there was a need to better understand current 'Team Around the

can be chaired by the Intervention lead practitioner or often by school staff.

School' (TAS) approaches and influence models accordingly.

WHERE IS IT WORKING WELL AND WHY?

- Multi-agencies include EH, social care, plus an Educational Psychologist + Inclusion Officer + school staff (usually pastoral staff member, safeguarding and senior leadership representative) + Attendance Officer + Head(s) of Year + Designated Safeguarding Lead (DSL) + where appropriate, CAMHS, school nurse. And always include the parents/carers and young person (where they wish to attend).

WHERE ARE THERE GAPS THAT YOU THINK THIS SOLUTION WOULD IDEALLY FILL?

- One delegate added that they felt school staff do not understand they can help fill 'the gap' by taking on the lead practitioner role themselves and undertaking an early help assessment and plan with a child and family that unpicks the root causes of poor attendance and comes up with solutions together with the family and other professionals in the Team Around the Family. This is an expectation within the [Keeping Children Safe in Education Guidance](#)² for schools but does not seem to have been understood by school leaders.

2: Ibid: P16 Keeping Children Safe.... "If staff have a concern, they should follow their own organisation's child protection policy and speak to the designated safeguarding lead (or deputy). 54. Options will then include: • managing any support for the child internally via the school or college's own pastoral support processes • **undertaking an early help assessment**¹⁴ or • making a referral to statutory services¹⁵ for example as the child could be in need, is in need, or is suffering, or likely to suffer harm.

3: WHICH PEOPLE/ORGANISATIONS IN THE WIDER SYSTEM I.E. NOT JUST SCHOOLS OR COLLEGES, BUT ACROSS ANY OF THE SERVICES, IN COMMUNITIES, AT HOME – NEED TO BE INVOLVED IN THIS SOLUTION?

- Children and young people at risk of or struggling with their attendance, PA and SA
- Parents / carers and family members as appropriate
- Schools
- Executives at Multi Academy Trusts to buy in to effective targeted solutions around each child and family
- Social workers
- Early Help Officers
- Early Help Coordinators
- Intervention Workers
- School Inclusion Officers
- Education Welfare Officers
- Mental Health support services operating in schools.
- Multiple agencies suitable to the circumstance of each child or young person.

In one of the Theory of Change workshops (Autumn 2023), delegates started to list different individuals and organisations that are – in different ways and in different circumstances – part of a Team Around a Child, Family or School, but the extent to which these are consistent and effective is unknown.

In a 'Team Around the Family' example – where it was explained 150 complex Early Help cases were open at the time to RCBC's Early Help Intervention Teams, the following people/professionals were name checked but it was unclear (to some delegates) 'where' the Team came together – in a school, around a family at their home / in their community or a mix of contexts. For these 150 cases it was explained that key people are convened regularly to work on an action plan. Post-workshop clarifications have been helpfully provided:

The team around the family meetings at an early help level usually take place in a school with the particular child/parents attending the meeting too. Sometimes these are chaired by the school rep or the Intervention Worker from the LA. The 150 complex cases refers to the local authority's Intervention Team. Not all the people in the list below will be involved but some of these professionals will come together. This is not an 'adult first' model - this is a whole family model of support and is linked to the Supporting Families Agenda. The Intervention Team undertake assessment and co-ordinate referrals to other agencies as well as others who are already involved. We would then have a Team Around the Family meeting - monthly or as often as needed to make sure that the support was effective. The location of meetings can be wherever is most appropriate for the family. This can include in the family home, at a Family Hub, In a school. This will be to monitor the plan and support that has been identified as a result of the assessment.'

"IN EACH CIRCUMSTANCE THERE STILL NEEDS TO BE A LEAD PRACTITIONER TO COORDINATE THE ASSESSMENT, PLAN AND SUPPORT SERVICES."

1. Local authority and Child & Family Intervention Workers who are based in multi-disciplinary teams in Family Hubs but undertake home visits as well as direct work with young people in schools
For a TAF model with Early Help the parent has to agree / consent to working with them
2. An Education Psychologist
3. Local Authority Attendance and Welfare Team member
4. Local Authority Inclusion Team member
5. SEND specialist staff where appropriate
6. Virtual School staff (e.g. for any child in our care / CiC)
7. School Nurse
8. Speech and Language Therapist (SaLT) where appropriate
9. Physio
10. Other public health staff e.g. HeadStart team and / or other mental health support
11. Career Advisor
12. Voluntary and community sector organisations providing relevant support for the child / family
13. Different members of the school staff
14. Social worker where appropriate
15. Youth justice team where appropriate
16. Different members of the school staff – this needs further exploration as it may differ significantly in each setting, and the way in which CYP are identified as at risk of PA/SA could vary – as will any case conferencing by agencies e.g. RT-MAT does case conferencing every morning to 'predict risks' for each child in relation to attendance.

One delegate said that for a child or young person the leadership and accountability sits with their school, whereas the accountability for any model around the family does not sit with the school though the school could act as a useful conduit for Team Around the Family models of working.

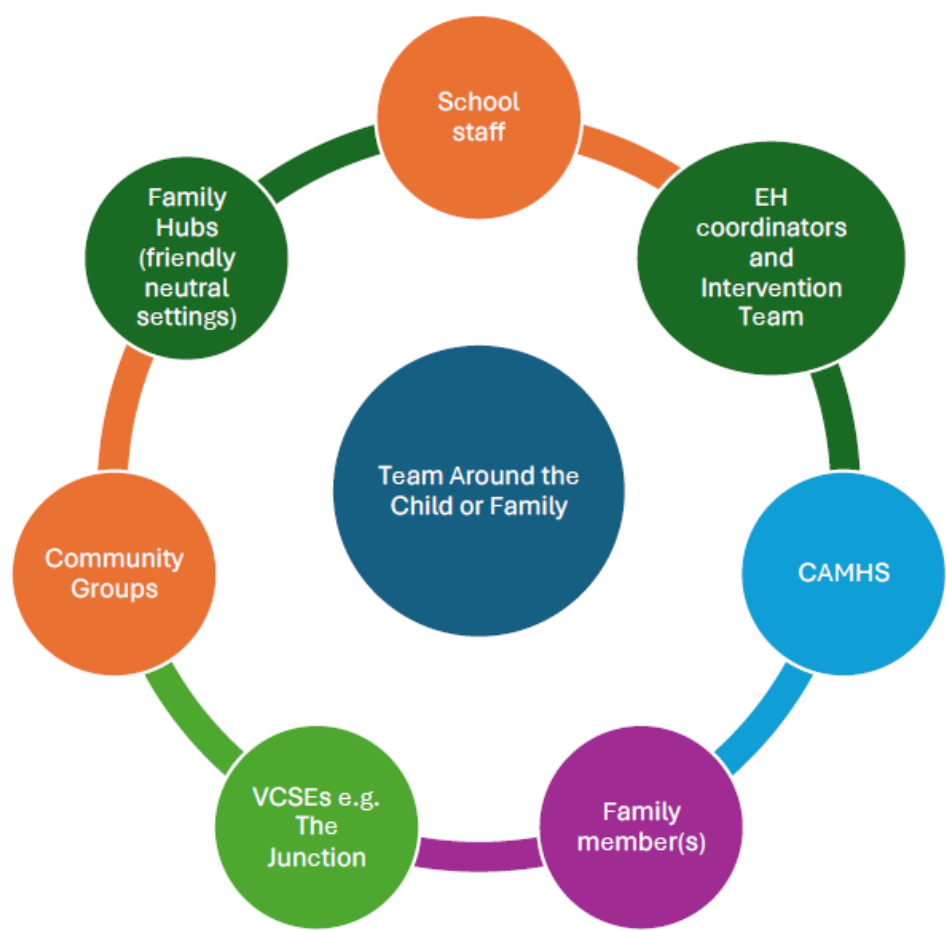
Local RCBC peer review insight supplied post-workshop in March 2024: "If the school was the lead practitioner that led the early help assessment and plan, then they would be accountable along with the rest of the Team Around the Family and the parents, to make sure that the plan is on track. If the school was the lead practitioner then they would be responsible for the Team Around the Family process as per the keeping children safe in education process. If the CAMHS worker was the lead practitioner then they would be responsible for co-ordinating and leading."

Practitioners explained that for any child or young person that is persistently absent there needs to be, or should be, an action plan in place to support them to stable attendance behaviours.

Local RCBC peer review insight supplied post-workshop in March 2024: “This would be the support plan that was put in place as part of the Early Help Assessment and developed alongside the family, any other professionals and the lead practitioner. In the instance of absence I would envisage that school would be the lead practitioner. I would say we are not asking schools to do more by undertaking the lead role we are asking them to do things differently. I would imagine if a young person was persistently absent then there would be arranged meetings with their parents which could be a Team Around the Family to look at what support is needed and how progress can be made.”

At the 20th of March 2024 ‘solutions’ workshop, delegates similarly identified different individuals, agencies and organisations that work in either a Team Around the Child or Team Around the Family approach. The list overleaf is not as exhaustive as the preceding one and is therefore illustrative only of suggestions made in March.

“Team Around the Family does work if the parent engages”



Other useful comments, learning, queries and explanations included:

- These Team Around...models only kick in when something has already happened – not before it has happened i.e. where the child is already not attending or there is an attendance or safeguarding issue. Could approaches be more preventative in their approach was the inference here rather than waiting for a concern or particular negative behaviour to present?

Post workshop peer review comment:

"I'm not sure what is meant by this. For a Team Around the Child to be useful, there has to be more than one worry or concern that cannot be met by a single agency such as the school?"

"School can request support and guidance on undertaking an EHA. I am not sure why you would have a Team Around the Family if there were no issues identified. How could it be possible to do a Team Around a Child/Family for every child."

- Schools try lots of things first before it 'escalates' to the point where a wider 'Team Around' approach is required or expected, but what is that threshold and what are the things that are tried in each school / setting? Do the thresholds look the same or are they open to subjective interpretation by each school such that it might look or feel different in each setting?

"There is a threshold document that is in place as it is for all other local, authorities in the country."

- Professionals that are part of 'Team Around' models explained that often the children and young people they work with to support are VULNERABLE learners – and they draw in different expertise depending on the individual circumstance whether it be attendance, welfare, medical or other.
- It is the Attendance Officers in each school that are said to be the ones who would 'spot the signs' of attendance issues first with a child or young person so their consistency, capacity and actions are important activators of any 'Team Around' model that then comes into force
- Those whose role is not to be a part of the 'Team Around' models commented that with so many professionals involved in a 'case' would that feel overwhelming, scary even traumatic for the parents as well as their child? This led to the view of the group at the workshop that what is required more than anything in the 'Team Around' models is an ADVOCATE alongside effective, friendly peer support (parent to parent support) – to mitigate against any fear of having different professionals involved all at once.

Post workshop peer review comment:

"The role of the lead practitioner is to streamline this for parents and ensure that the child and parent's voices are heard too. The practice model we would advocate using focuses on this - with the child at the centre."

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"The role of the lead is to streamline support and to work with the child / young person and the family to identify who should attend the meetings, not every professional would be in attendance as of course they would not wish to overwhelm the family."

- The delegates noticed interconnections between 'Team Around Model' solutions and those also discussed at the workshop around effective communications and parental engagement.
-

"Give them (parents) a cup of tea and biscuits just to reduce the anxiety. Make things accessible, use good relational practice in all Team Around meetings and models" Making Attendance Everyone's Business in Redcar & Cleveland

Peer review comments post-workshop suggesting space for continued conversations to achieve shared understanding and clarity about how to maximise approaches in Redcar & Cleveland

"RCBC has a threshold document which is clear and statutory guidance which gives clear understanding of what each professional should do and when. If there is a misconception with this then I am happy to link with the safeguarding partnership around threshold awareness. If there is a gap then this is due to partner led Early Help assessments not being completed and partners not understanding their role and responsibility within this."

"What really stood out for me is that people do not understand the continuum of Early Help and that this does not rest solely with the Local Authority but is prescribed in a number of documents in particular Working Together which stipulates that Early Help is everyone's business. Early Help is everyone's business not just the local authority. We have an Intervention Team and EH Co-ordinators, Family Hub staff and Health visiting / school nurses."

*"I would add that the trauma informed **Relationships First** practice model that is being embedded across the local authority Children's Services teams is working well. This aligns with all of the things delegates have said in the Theory of Change workshops that they say they want in the systemic approach to tackling school attendance."*

4: WHAT IS YOUR RECOMMENDED ACTION PLAN FOR THIS SOLUTION?

HOW DO WE GET STARTED / BUILD ON WHAT WE'VE GOT?

IF WE THINK MORE OF THIS TYPE OF SOLUTION IS NEEDED HOW DO WE MAKE IT HAPPEN?

REVIEW BEHAVIOUR POLICIES STARTING WITH SECONDARY SCHOOLS IN THE BOROUGH, WITH A QUESTION 'HOW DO 'WE' INFLUENCE THEIR QUALITY? PERHAPS THIS IS SOMETHING THE DFE AND REGIONAL SCHOOLS COMMISSIONER CAN ASSIST WITH.

SHARE / COMMUNICATE THE EARLY HELP TEAM AROUND THE FAMILY BLUEPRINT MORE WIDELY AS PART OF THIS PROJECT.

PEER SUGGESTION POST-WORKSHOP: **'THE SUPPORTING FAMILIES (SF) PROGRAMME** THAT UNDERPINS PRACTICE IN CHILDREN'S SERVICES, HAS GOOD SCHOOL ATTENDANCE AS A POSITIVE OUTCOME. THE SF FRAMEWORK⁷ CAN PROVIDE GUIDANCE FOR FAMILY SUPPORT WORKERS/PASTORAL STAFF TO ASK THE RIGHT CURIOUS QUESTIONS ABOUT LIFE AT HOME AND ISSUES AFFECTING THE CHILD'S SCHOOL ATTENDANCE.

Additionally, an online toolkit⁸ has been developed for anyone working to support families with multiple needs to help navigate what tools and services are available to support the family/child. Promotion and use of this framework and toolkit needs to be maximised to support local authority officers and schools worried about attendance and wider family needs.'

Build on the ideal of a relationships first model in all this work: *'We can build on the Relationships First practice model to schools by including them in workshops, so they also use a strength-based, trauma informed approach when supporting children and families.'*

Follow in the footsteps of the way in which 'safeguarding is everyone's business' gained momentum and traction what mechanisms and practice is there to learn from and transfer?

'We also need to consider the guidance re Early Help is everyone's business - which is in Working Together to Safeguard Children 2023.'

CAN WE MAKE CHANGE USING THE RESOURCES 'WE' ALREADY HAVE IN THE SYSTEM I.E. CAN WE IMPROVE THINGS BY DOING THINGS DIFFERENTLY WITH WHAT WE'VE ALREADY GOT? DO WE NEED ADDITIONAL RESOURCE TO MAKE A STEP CHANGE IN THE OUTCOMES TO REDUCE THE RISK OF / PERSISTENT / SEVERE ABSENCE?

"WHEN ATTENDANCE HAS IMPROVED IT IS BECAUSE THE SCHOOL HAS BEEN FLEXIBLE IN APPLYING POLICY; THE SCHOOL COME TO THE TABLE."

SCHOOL ENGAGEMENT STARTING WITH CEO LEADS IN ALL THE MULTI ACADEMY TRUSTS COMING TOGETHER TO EXPLORE DIFFERENT RELATIONAL MODELS OF WORKING AROUND THE CHILD / FAMILY / SCHOOL.

THESE **PEERS** WOULD IDEALLY BE BROUGHT INTO A JOINT WORKING SPACE WITH REPRESENTATIVES OF SOCIAL CARE, RCBC EDUCATION AND HEALTH (SERVICE) COLLEAGUES. IF SUCH STRUCTURES EXIST ALREADY THE QUESTION IS ASKED: 'DO WE HAVE THE RIGHT CHALLENGE IN THESE BOARDS?'

THESE LEADERS COULD ALSO THEN EXPLORE A RANGE OF ISSUES TOGETHER WHETHER IT BE:

- ELIMINATING ATTENDANCE BARRIERS
- Overcoming the feeling that school classes are still organised like Victorian times and are perhaps not catering for neurodiversity amongst CYP

Think about how to work on attendance outcomes for the 1,630 open cases across Children's Social Care particularly as cases are closed. "Cases can't be kept open if attendance is the only issue."

"This is a threshold - Statutory Social Work should only be involved for a limited period and for as long as is needed re Safeguarding concerns. If education remains outstanding a lead practitioner would be identified from within the Care Team (likely school) who can continue to support the family via a TAF. This is a step down process which is recognised nationally and is already in place, however, our EHA / TAF at this level of Early Help are really not good. I would recommend that there needs to be more work undertaken so everyone understands their role and responsibility as part of a continuum of early help support. Teachers/schools would say

We need to cohere the support, skills, services and offers of the police, health sector and social care sector within Redcar & Cleveland encouraged by the **Teesside Attendance Action Alliance** 'structure' similarly designed to encourage joint action. *"The police opened my eyes to the amount of crime – 15% - committed in school hours."* **Extract learning from the Alternative Provision Specialist Taskforce Pilots and assess whether any of those experiences are transferable to Redcar & Cleveland** ([link](#))

they do not have time to undertake EHA and likewise SW's do not have capacity to keep cases open when there is not the safeguarding issues identified."

Could this offer services outside of social care a greater insight into their role to continue supporting the family when the social worker steps back - as part of the 'step-down' process and solution?

Encourage more Early Help assessments to be completed (with support) by schools in the Borough - <https://www.redcar-cleveland.gov.uk/children-and-families-services/early-help/the-early-help-assessment>

Place Based Pilot Suggestions

SHAPING THE PROPOSAL FOR A PLACE BASED PILOT

During 2023, Redcar & Cleveland Borough Council convened 13 workshops engaging 104 different people across the local system to shape the UK's first [Theory of Change](#) linked to the challenge of addressing persistent and severe absence from school and college.

These workshops awakened more curiosity and knowledge about the ways in which attendance is something that many different people can or could contribute towards – across education and learning settings, the virtual school, public health, youth justice, serious violence and crime, social care, early help, family services and hubs, inclusion, welfare, attendance, the voluntary & community sector infrastructure and others.

Having spent time deeply thinking about the scale of the challenge ('the problem'), the goals and desired outcomes, people across these different settings have been enthusiastic to turn theory into practice and so for 2024 we have started to convene 'solutions workshops'.

One of the strongest supported ideas emerging towards the end of 2023 was the idea of creating the conditions for an effective place based pilot where all the learning and evidence of what works could be tested in an agreed geography to see what might be possible with concentrated effort and resourcing. Ultimately any such pilot – ideally a minimum of 2, preferably 3 years – would contribute to the prevention and reduction of PA and SA in that area and everyone would feel a part of making that possible.

In suggesting a place based pilot we recognise that there are merits and drawbacks of such an approach, and it will be important to give thought to why, where and who any such pilot would focus on based on the insight, data, evidence and lived experience that continues to be collected through the Project. There is no guarantee of course that if the pilot works well in one part of the Borough it will necessarily easily transfer or 'lift and shift' to another part of the Borough which is why learning through the experience is going to be so vital too.

One of the Project's objectives is as follows: "To explore the potential for at least one place-based pilot in the R&C that could stretch every sinew and muscle we have across the local assets and the system to see what is possible to achieve by working in even more joined up ways.

The call to action via RCBC (Project) communications in 2024: "If you have interest in this, we would like to hear from you whether to help us work out how to decide on where such a pilot could or should take place and what that might look like – or to express interest in contributing to any pilot itself should we secure appropriate funding and resources for that ambition. Can we see what is truly possible in a place when attendance is everyone's business? What could that look and feel like for everyone involved?

At the time of writing this paper it should be made clear that no one has made any decision about the scope, location or focus of the suggested place based pilot, rather the Project Team have noticed that this idea has emerged naturally from previous workshops and feel that it is important to follow this up by collecting views and opinions about the best way to approach the idea.

No criteria have been drawn up; no fait accompli; no resource or action plan in place, just an expression of joint intent that this idea merits further energy.

And so at the first of the series of planned solutions workshops hosted in March 2023 in Eston, c30 people gave their initial views about where any such pilot might work and why.

Five mini groups discussed the idea for 45 minutes in free flowing conversation and were each invited to share their thoughts back with the whole group to see if ideas were similar or different.

INITIAL SUGGESTIONS AND THINKING....

| Where | Why | Other comments |
|--|--|--|
| <i>"Where the steel towns were"</i> | Looking at the data the highest levels of Severe Absence (SA) have been in these localities | The rationale would be to work in those areas with the highest levels of Severe Absence |
| Greater Eston | These places also 'linked' to highest level of domestic abuse, crime and other indices | The rationale would be to work in areas where there are a disproportionate concentration of lower than average / negative outcomes not just attendance |
| Grangetown, Eston and the South Bank area | <p>The new Thrive@Five Project focusing on Early Years interventions has a focus in these areas (and Dormanstown) providing an opportunity to understand attendance patterns formed at this early age and learn how to do early intervention and prevention activity</p> <p>In these areas there is good attendance at nursery and in primary schools 'that buck the trend' but opportunity to address PA/SA in the secondary schools</p> <p>There is family hub transformation in these localities and a strong voluntary and community sector with grassroots organisations in these areas</p> <p>There is multi-agency activity in these localities (including police, Youth Justice Service) with the potential for more joined up activity, working across 'system' boundaries and co-location</p> <p>The local community and lived experience in these areas have energy and strengths but also (in parts) lack the resources to connect with their aspirations e.g. with social mobility opportunities in the future (e.g. Tees Works)</p> | <p>The rationale would be to maximise the Early Years project with its strong focus on parental engagement and build the system beyond the 0-5 age group to primary, secondary schools and post-16 in the localities – building protective factors before PA/SA dynamics occur</p> <p>There are two secondary schools in these localities that are also engaging in the Achieve Education Programme – the rationale therefore for selecting these areas is to build on and deepen that engagement with the secondary phase, and strengthening the attendance approach across the phases including transition points</p> <p>The rationale to work here therefore is around maximising the strengths of local assets and services to work around children, young people, families and each school / education setting. They provide important touchpoints with CYO / families that are at risk of or are already PA or SA and the trust they can build is a vital ingredient for any behaviour change expected in the pilot</p> <p>The rationale to work here therefore is because whilst the communities have strengths</p> |

There is wider opportunity to connect with via the £20m Eston Town Deal which will look to see

and aspirations they may disproportionately lack resources and opportunities to connect with things that CYP/families might value for the future – and to buy in to the need for good attendance by every child, families may need to feel connected to those future opportunities

The rationale for Eston is that the pilot could connect with / complement / contribute towards wider place based investment linked to the Town Deal

| WHERE | WHY | OTHER COMMENTS |
|----------------|---|---|
| EAST CLEVELAND | THERE IS A LINK TO THE ‘REIMAGINING REDCAR & CLEVELAND’ SYSTEMS CHANGE WORK LOOKING AT IN WORK POVERTY AND CAUSAL INFLUENCES HOW TO DO EARLY INTERVENTION AND PREVENTION ACTIVITY | THE GROUPS SUGGESTED THAT THERE IS A LACK OF SERVICES, OPPORTUNITY, AND THE ECONOMY IS DIFFERENT HERE COMPARED TO THE WEST OF THE BOROUGH SO PERHAPS WORKING IN THIS AREA ‘LEVELS UP’ THE OPPORTUNITIES |
| | THE LOCALITY SCORES ‘HIGH’ ON THE INDEX OF MULTIPLE DEPRIVATION ACROSS SEVERAL DOMAINS BUT THERE IS REGENERATION ACTIVITY GOING ON IN THE LOCALITY TO ADDRESS THIS | AGAIN, THE POTENTIAL TO BUILD ON THE AMBITIONS TO CREATE OPPORTUNITY AND ADDRESS SOME OF THE ENTRENCHED ROOT CAUSES THAT PARTLY EXPLAIN WHY SOME CYP/FAMILIES BECOME PA OR SA |
| | THERE IS FAMILIARITY WITHIN THESE COMMUNITIES AND “HISTORICALLY YOU’D THINK PEOPLE ON THOSE COMMUNITIES WOULD ACCESS SERVICES IN THOSE COMMUNITIES.” | THE LOCAL INSIGHT SUGGESTS THAT THE STRONG SENSE OF COMMUNITY HERE IS AN ASSET, AND ANY PILOT WOULD THEREFORE HOPE TO BE ABLE TO COMMUNICATE MESSAGES TO WHOLE FAMILIES “AS YOU HAVE |
| | THERE ARE STRONG, TRUSTED LOCAL COMMUNITY ASSETS SUCH | |

AS LOFTUS COMMUNITY CENTRE AND LOFTUS YOUTH CENTRE, THE LIBRARY AND SKELTON FAMILY HUB OFFERING THE OPPORTUNITY FOR PUTTING IN WELCOMING, ACCESSIBLE DROP INS FOR CHILDREN, YOUNG PEOPLE & FAMILIES WITH NUMEROUS SERVICES TO CLUSTER AROUND THEM APPROPRIATELY

THE SECONDARY SCHOOL IS ALSO SAID TO BE KEEN ON PILOTS AND THEIR ENGAGEMENT WOULD BE IMPORTANT FOR ANY PILOT SELECTED HERE

THE LOFTUS WARD COUNCILLOR HAS REPORTED A STRONG ENTHUSIASM FOR DOING SOME PARENT-PEER BASED PILOT ACTIVITY BASED ON EXPERIENCE OF THIS PROJECT AND KNOWN LOCAL COMMUNITY NEEDS

LOTS OF FAMILIES THERE FOR YEARS / GENERATIONS.”

TO REACH CYP / FAMILIES THAT ARE PERSISTENTLY OR SEVERELY ABSENT MEANS GOING ‘WHERE THEY ARE’ WHICH IS THEREFORE NOT ALWAYS THEIR SCHOOL – LOCAL TRUSTED COMMUNITY SPACES, PLACES AND / OR OUTREACH SERVICES OR HUBS WOULD PROVIDE OPPORTUNITIES FOR REACHING THEM AND BUILDING THEIR TRUST AND CO-ORDINATING ‘TEAM AROUND MODELS’ IN A JOINED UP WAY. A WILLING SECONDARY SCHOOL PARTNER AND FEEDER PRIMARIES WOULD BE IMPORTANT FOR THE PILOT TOO IN THIS LOCALITY.

THERE MAY BE AN IMMEDIATE OPPORTUNITY TO LEVER IN BIG LOCAL FUNDING TO SUPPORT SOME PILOT ACTIVITY IN LOFTUS / EAST CLEVELAND FOR 2024-2025 THAT COULD USEFULLY CATALYSE PARENT PEER SUPPORT INTERVENTIONS AS PART OF A WIDER

| WHERE | WHY | OTHER COMMENTS |
|-------------|--|--|
| GUISBOROUGH | <p>HTs ALREADY BEGINNING TO WORK TOGETHER. “MIGHT NOT MEET SOME OF THE <i>DEPRIVATION</i> CRITERIA BUT COULD BE A SMALLER SCALE PATHFINDER TO DO SOME TRIAL LEARNING BEFORE APPLYING IN A MORE COMPLEX SITUATION.”</p> <p>QUITE SELF-CONTAINED PROVIDING SOMETHING PRAGMATIC FOR A PLACE BASED PROJECT TO BUILD FROM</p> | <p>THIS WOULD MEAN THE PILOT IS LIKELY TO BE WORKING IN A LOCALITY WHERE THERE IS A WILLINGNESS OF SCHOOLS TO BE INVOLVED AS THEY ARE ALREADY COLLABORATING ON OTHER THINGS</p> <p>SELECTING THIS LOCALITY IS “CHOOSING A PROJECT THAT IS DOABLE WITH MOTIVATION.”</p> |

OTHER REFLECTIONS FROM PARTICIPANTS THAT COULD INFORM A PLACE BASED PILOT(S)

IN THE IDENTIFICATION OF ANY PLACE(S) FOR A PILOT THERE OUGHT TO BE CONSIDERATION OF:

- **DEPRIVATION INDICES**
- **THE ACTUAL LEVELS OF ATTENDANCE AT SCHOOLS I.E. AND WORKING IN AREA(S) WHERE PA/SA RATES WERE HIGHEST OR AT GREATEST RISK OF INCREASING IN THE NEXT 2-3 YEARS**
- **A HOLISTIC VIEW OF 'WHAT'S HAPPENING IN PLACES' NOT JUST THE DEFICIT-BASED DATA AROUND ATTENDANCE**
 - *"DO WE GO FOR A PLACE THAT IS MOST IN NEED (MOST DEPRIVED / WORST ATTENDANCE RATES) OR 'SOMEWHERE IN THE MIDDLE'?"*
 - *"DO WE DO IT ON STRENGTHS OR WEAKNESS APPROACH?"*
 - *"BUILD ON STRONG PRACTICE ELSEWHERE."*
- **THE ESSENTIAL REQUIREMENT FOR ANY SCHOOLS IN THE PILOT AREA TO BE FULLY ENGAGED**
 - *"YOU'VE GOT TO HAVE BUY IN FROM THE SCHOOL AND NOT JUST LIP SERVICE."*
 - *"WORK IN AN AREA WITH SCHOOLS THAT REALLY NEED EARLY INTERVENTION."*
 - *"COULD WE WORK IN A WAY THAT ENGAGES 'SCHOOL CLUSTERS' AND WORK WITH THOSE THAT BUY IN AND SAY, 'YES WE REALLY WANT TO DO THAT'?"*
- **THE WIDER INVESTMENT LANDSCAPE IN PLACES ACROSS THE BOROUGH**
 - *"CAN IT DEVELOP INTO A STRATEGIC CONVERSATION - THIS SCHOOL WILL BE GETTING MONEY FROM HERE, THEN THERE ARE ATTENDANCE HUBS OVER THERE - INSTEAD OF PUTTING ALL OUR EGGS IN THE SAME PLACE?"*
 - *"WE KNOW THERE IS OPPORTUNITY FOR PRIVATE SECTOR INVESTMENT TO SUPPORT 'BIG' OUTCOMES FOR 1-2 THINGS ACROSS THE ENTIRE BOROUGH, SO HOW COULD THIS PILOT SUPPORT THAT AMBITION AROUND OUTCOMES FOR OUR CHILDREN, YOUNG PEOPLE AND FAMILIES? 'ATTENDANCE' IN OF ITSELF AS A TOPIC MIGHT NOT BE THE CORRECT FRAMING TO ATTRACT THAT WIDER INVESTMENT SO HOW DO WE THINK ABOUT THIS AS WELL?"*

NEXT STEPS

1. **THE PROJECT TEAM WILL CONTINUE TO TAKE VIEWS AND OPINIONS ABOUT THE PLACE BASED PILOT IDEA INTO THE SUMMER AS WELL AS DO SOME BESPOKE PLACE BASED DATA ANALYSIS AROUND ATTENDANCE RATES TO FURTHER INFORM DISCUSSIONS. INTERESTED IN THE DATA? PLEASE SEE: [DATA AND INTELLIGENCE \(SKYBLUE.ORG.UK\)](https://www.skyblue.org.uk) AND SCROLL DOWN TO THE 'SPRING 2024' PRESENTATION, SLIDES 10 & 11 FOR WARD DATA.**
2. **THERE WAS SOME APPETITE BY PEOPLE ATTENDING THE 20TH OF MARCH WORKSHOP TO CONVENE AGAIN TO DISCUSS THIS SPECIFIC IDEA FURTHER. IT WOULD BE IMPORTANT TO INCLUDE A MUCH WIDER SET OF VOICES OF COURSE IF ANY PLACE BASED PILOT IS GOING TO BE 'OWNED' BY THAT PLACE – THAT COMMUNITY, THE SCHOOLS AND NURSERIES THEREIN AND IMPORTANTLY THE CHILDREN, YOUNG PEOPLE AND FAMILIES THAT WILL LIKELY HAVE THE SOLUTIONS FOR SERVICES AND AGENCIES TO SUPPORT AND ENCOURAGE. THE PROJECT TEAM WILL LOOK TO HOST EITHER A FURTHER IN-PERSON WORKSHOP OR ONLINE SESSION ACCORDINGLY; [AS WELL AS ENGAGE IN CONVERSATIONS WITH THE HEALTHY COMMUNITIES TEAM AND THE POLICE TO BRING IN THEIR NEW LOCAL INSIGHTS AND RATIONALE FOR WORKING IN DIFFERENT PLACES IN THE BOROUGH.](#)**

3. GIVEN THE SPECIFIC SUGGESTION TO EXPLORE THE POTENTIAL FOR WORKING IN LOFTUS BY ONE OF THE WORKSHOP PARTICIPANTS THE PROJECT TEAM WILL ALSO HAVE A FOLLOW UP CONVERSATION ABOUT THAT ACTIVITY AS WE DON'T WANT THE PROJECT IN ANY WAY TO STIFLE ENERGY AND MOMENTUM TO DO SOMETHING POSITIVE AROUND PREVENTING AND REDUCING PERSISTENT AND SEVERE ABSENCE.
4. GIVEN THE CONNECTION MADE TO 'THRIVE@FIVE' THE PROJECT TEAM WILL HAVE FURTHER CONVERSATIONS TO UNDERSTAND THE PLANNED ACTIVITY IN THE SELECTED LOCALITIES FOR THAT EARLY YEARS INTERVENTION ACTIVITY IN CASE THERE ARE USEFUL SYNERGIES PARTICULARLY AROUND MODELS OF PARENTAL SUPPORT AND ENGAGEMENT.
5. AS ANY PLACE BASED PILOT MIGHT REQUIRE ADDITIONAL RESOURCES THE PROJECT TEAM WILL HAVE CONVERSATIONS WITH POTENTIAL INVESTORS TO UNDERSTAND THEIR PLACE BASED WORKING RATIONALE, PREFERENCES AND INTENTIONS TO COMPLEMENT THE WORK LOOKING AT DATA AND LIVED EXPERIENCE.

IF MEANTIME, YOU READ THIS PAPER AND WOULD LIKE TO KEEP INVOLVED IN THIS CONVERSATION OR CONTRIBUTE IDEAS OR DATA OR EXPERIENCES OF HAVING BEEN INVOLVED IN PLACE BASED PILOTS BEFORE SO WE CAN LEARN FROM THOSE LESSONS AND CAUTIONARY TALES PLEASE EMAIL AMANDA.OLVANHILL@REDCAR-CLEVELAND.GOV.UK AND ALAN@SKYBLUE.ORG.UK

Health and Attendance

HOW DO WE MAXIMISE HEALTH INTERVENTIONS THAT COULD PREVENT THE RISK OF AND REVERSE PERSISTENT AND SEVERE ABSENCE?

WHY DOES THIS MATTER?

The barriers from mental and physical ill-health e.g. short-term illness, ongoing physical health and mental health challenges, Social, emotional and mental health (SEMH) needs are a main driver of persistent absence. DfE reports it as THE biggest driver impacting on Persistent Absence (PA) numbers.

Data for this Project in 2023 found lots of intersects between the incidence of poor or limited health and attendance rates by children and young people, whether ill themselves and / or whether caring for someone in their family who is struggling.

Illness (not medical or dental appointments etc) accounted for 39% of authorised absences of CYP classified as severely absent (SA) in primary schools using Autumn 2023 R&C data; 35% amongst secondary school SA pupils and 12% of those in special schools.

Health needs and service pressures mean children and young people's needs are unmet or undiagnosed; there are thought to be a lack of special school places and specialist support, and with complex illness there are issues around appointments and transport.

Data from DfE shared in 2023 found that special education needs and disability (SEND) accounted for 24% of persistent absence.

However, we do need to find out the full scale of the impact of health on attendance behaviours, understanding who is affected most by what sort of health challenge, to more confidently put in place interventions that will work for each child, young person and family circumstance.

DfE Guidance

The recently published '[Working together to improve school attendance](#)'

[Working together to improve school attendance - GOV.UK \(www.gov.uk\)](#)

guidance sets out clear roles and responsibilities for schools, multi-academy trusts and local authorities to work together to provide access to early help services and ensure joined up support for children and families facing **special educational needs, health or disability related barriers to attendance**. It states:

'In working with parents to improve attendance schools should be mindful of these barriers and put additional support in place such as pastoral or curriculum support.'

PARTNERS HAVE MANY OPPORTUNITIES THROUGHOUT THE PROJECT TO UTILISE HEALTH INTERVENTIONS TO IMPACT ATTENDANCE BUT HOW DO WE MAXIMISE THEIR IMPACT?

EMOTIONALLY BASED SCHOOL AVOIDANCE

Sources: Lancashire Educational Psychology Service, [Emotionally Based School Avoidance | West Sussex Services for Schools](#) and Brighter Futures for Children are useful sources

Increasingly recognised as a challenge that explains why some young people are not attending school, a range of guidance and good practice exists for schools, parents and professionals to use. What is the approach in Redcar & Cleveland, and is it being used in all the right places?

Further insights about EBSA and how this is being addressed in Redcar & Cleveland are being collected by the Project Team, so additional notes and suggestions will follow.

SOCIAL AND EMOTIONAL SKILLS

EEF's [review of attendance interventions](#) included the teaching of social and emotional skills e.g. approaches might build pupils resilience or self-regulation skills that might assist when social and emotional barriers to attendance do arise. Interventions: targeted goal setting, reducing test anxiety, topics related to self-concept. These were found to have a small but positive impact. [Attendance interventions rapid evidence assessment | EEF \(educationendowmentfoundation.org.uk\)](#)

MENTAL HEALTH

This is a huge topic! We need to understand how the various interventions available are impacting on attendance, and whether the lack of specific types of mental health and / or emotional wellbeing support is correlating with persistent and severe absence. The lack of a specific 'mental health' attendance codes used by schools in their registers makes this difficult to quantify, but professionals believe that there could be ways to qualify the issue for children in different ways, but it would need effort and piloting with willing schools. This Project is keen not to duplicate anything already in place that coordinates MH support for CYP / families rather bring some visibility and curiosity to the way in which interventions could reduce the risk of, and reverse PA and SA levels across the Borough. How could all the practice, guidance and insight shared via the Child Health and Wellbeing Network be brought to bear on the attendance challenge in the Borough in 2024; as well as the DfE case studies and guidance to support pupils where a mental health issue is affecting attendance in 2024 and 2025?

Support for pupils where a mental health issue is affecting attendance
Effective practice examples

February 2023



Child Health and Wellbeing Network
North East and North Cumbria

The Network has 10 priorities and system partners that work with children and young people across topics that correlate with school absence – **are we linking up to maximum effect?** Priorities 1. Voice of CYP and families 2. **Mental Health** 3. Poverty 4. **Additional Needs & Vulnerability** 5. **Inequalities** and access 6. Strong start in life 7. **Health promotion** 8. Family support 9. **Childhood illness** 10. Data, digital & communication

HEALTHY EATING

EEF's [review of attendance interventions](#) also looked at **meal provision including school breakfast and lunch programmes**. Meal provision may have nutritional benefits leading to improved health and reduced sickness leading to fewer absences from school. Providing free or reduced-price meals may also remove a barrier to school engagement for poor pupils. The provision of universal breakfast programmes has had either a null or small positive effect on pupil attendance. How effective are breakfast clubs and holiday activities and food programme activities in Redcar & Cleveland? Could Public Health's new 'Health Start' offer for schools make a difference if adopted by more schools?

CONFIDENCE SO PARENTS KNOW WHEN / NOT TO SEND THEIR CHILDREN INTO SCHOOL

Some absence from school is explained by illness, but it is unclear to what extent children are being kept off school because parents are uncertain – or anxious – about their child being infectious / catching something from other children. Recognising this as an issue the national Attendance Action Alliance has worked with the HNS and the UKHSA to develop guidance on this topic alongside agreed Royal College of GP principles. But is this advice being given or received at all GP surgeries / primary care settings at the moment when a parent needs it?

Are we using the NHS and UKHSA guidance and new Royal College of GP principles? Is the App to help parents know whether to send their child into school or not well known and being used confidently in Redcar & Cleveland?

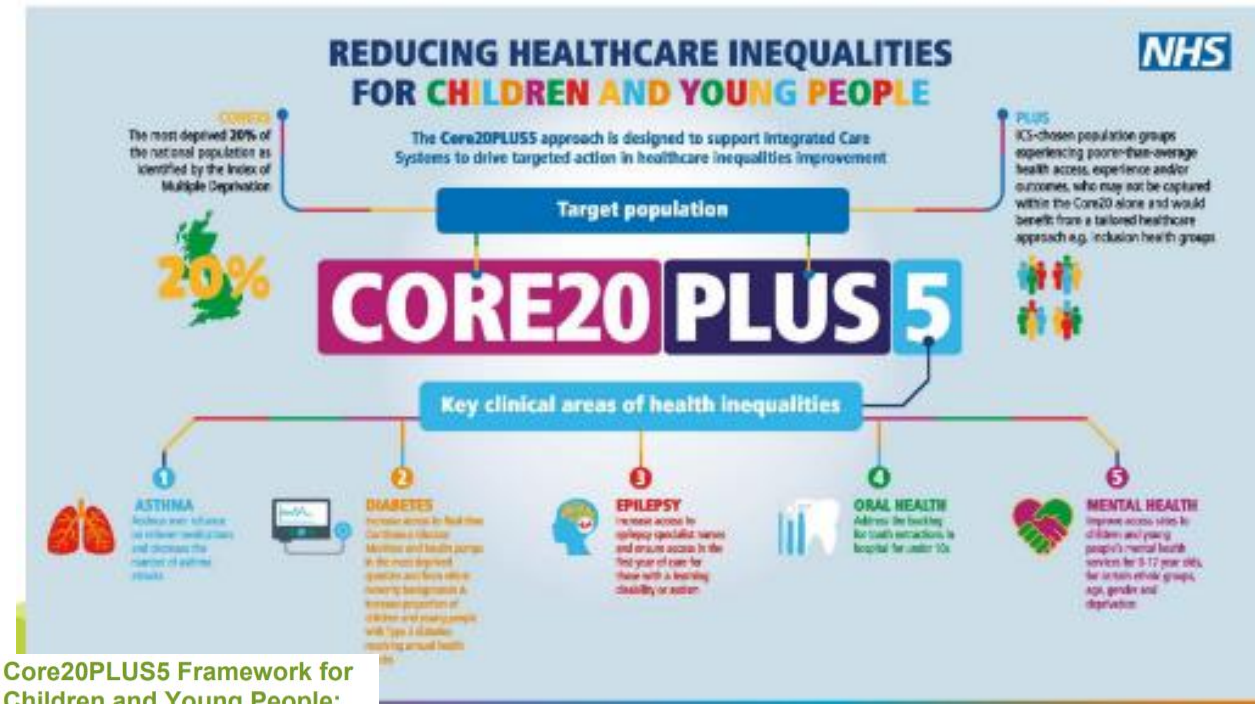
Other ways in which confidence around this topic can be built is through relational practice by professionals that work with children, young people and families, but similarly, are they aware of and using the available guidance consistently in their caseload management?

Examples of good practice: Social workers and early help workers ensuring that that every conversation with a pupil and family involves school attendance and addressing any barriers. School nurses identifying and working with pupils who are anxious about returning to school. Family hubs giving out information to parents on [illness and absence](#) and sharing DfE’s [attendance guidance for parents](#)

What type of health conditions could be impacting persistent and severe absence?

| | | | |
|---------------------|-----------------------------------|--------------------|---------------|
| Chronic Illnesses | Allergies | Chronic fatigue | Mental health |
| Serious injuries | Severe vision/ hearing impairment | Serious Infections | Chronic Pain |
| Physical disability | Other? | | |

CORE20PLUS5



Core20PLUS5 Framework for Children and Young People: A North East and North Cumbria Regional Perspective
A Practical Guide for Using the Framework in a Variety of Settings

Early in this Project a Public Health colleague reported that they had found **asthma to be a key causes of school absence**. If this is the case, what do we do about this in all schools?

This paper has only started to scratch the surface of the relationship between health and attendance, and it is potentially one of the biggest areas of opportunity for Redcar & Cleveland to explore in order to support more children with good attendance for the long term.

It will be important to embed 'attendance' in the new Joint Strategic Needs Assessment for the Borough and any public health service delivery plans so that the topic of attendance can be easily justified by different health specialists across the system – maximising physical, mental health and healthy eating interventions in different contexts including nurseries, schools, colleges, communities and homes.

The opportunity for maximising the skills of health improvement specialists, community developers (in the new Healthy Communities Team), as well as HeadStart, Health Start and immunisation team specialists is great, and it is fantastic to know that many of these individuals have already taken a keen interest in the 'Making Attendance Everyone's Business' Project to explore solutions.

We hope to build on this momentum bringing greater understanding about 'health and attendance' through our work together and welcome leadership and support for this topic from those best placed to take it forward – as well as any support that can be provided to illuminate things we don't know through available health determinants research in Redcar & Cleveland in the next 2 years.

Suggestions from delegates attending the 20th of March 2024 'solutions' workshop session

Suggested Solution(s): Health interventions

1: THINKING ABOUT THIS SOLUTION, AND REFERRING TO THE THEORY OF CHANGE DIAGRAM, IF DONE WELL, WHICH OUTCOMES WOULD IT MOST CONTRIBUTE TOWARDS?

Delegates thought of different health and wellbeing interventions and mapped these to the Project's theory of change; they could make a case for almost every outcomes for children, young people and families highlighting the massive opportunity to explore the intersects between health and attendance and how one affects the other. Outcomes might include:

- A sense of belonging (if needs are being met) and a sense of purpose
- CYP more likely to try new things (as if they are healthier, this can lead to increased confidence, a precursor to being willing to try new things)
- More motivation (because better health = more energetic young people/adults)
- Healthier minds / positive mindsets
- Self-esteem, confidence, feeling supported by peers, friendships and academic resilience (these are outcomes typically resulting from HeadStart)
- More alert to learning and focus (e.g. through healthy eating)
- More adults in the system understanding the child's issues and concerns and circumstances e.g. if caring for a parent at home, a sibling or 'living with their Nanna' (understanding the context leads to better contextualisation of interventions)

"More parents would feel listened to and feel like their child is being supported. Could health interventions give rise to top parental role models, intergenerational activity that is positive and challenges historic 'issues' or beliefs. Parents feeling like they know how to express what they want for their children and supported to return to education or learning themselves."

Making Attendance Everyone's Business in Redcar & Cleveland

- Improved parental health (particularly if health and wellbeing interventions purposely seek to help each parent develop and enhance their support network)
- Better support in communities for parents that enable them to re-connect with school if relationships – for whatever reason -have broken down

“How can we support parents through communities?”

- More understanding of the relationships between families, children, schools/learning settings and services
- Better relationships that feel personal and individual around each child

“We used to have dinner staff when I was at school playing cards and dominos with us at lunchtime – she knew us all, and she was a legend! She, and others, did things that made kids want to come in.”

2: ARE WE ALREADY DOING THIS SOLUTION ('HEALTH & ATTENDANCE') ANYWHERE 'WELL' IN REDCAR & CLEVELAND?

| WHERE IS IT WORKING WELL AND WHY? | WHERE ARE THERE GAPS THAT YOU THINK THIS SOLUTION WOULD IDEALLY FILL? |
|---|---|
| <ul style="list-style-type: none">• Every school has a Mental Health Lead, and some schools are working with HeadStart making good progress with mental health interventions in the 'Getting Help' segment of the iThrive framework• South Bank Primary School was namechecked as having some success with this type of intervention and the way their mental health team works with the whole family.• Outwood Normanby has been part of a behavioural science / health-led project linked to improving uptake of immunisation. That trial is thought to have been successful and has continued with other schools in Hartlepool and Durham. Can behavioural science / work with school nurses be amplified in Redcar and Cleveland?• Public Health South Tees reports that its Holiday Activities Fund piloted interventions in Middlesbrough have been successful and there is the intention to do targeted activity in Redcar & Cleveland in summer 2024 i.e. 4 days' food, cooking together and physical activity / sports. The intention would be to open this up to HeadStart schools and identify Year 6s struggling with transition or for whom attendance is low or moving to Year 7 without their mates | <ul style="list-style-type: none">• We need to connect with every MH lead in every school and ensure Attendance is their business• Every school is also thought to have a Health and Wellbeing Lead, and an immunisations lead. But do they feel that attendance is their business?• Can behavioural science / work with school nurses successful in Outwood Normanby be amplified to other willing schools in Redcar and Cleveland?• Targeted HAF activity for Year 6s in the summer before they move to secondary school – aimed at those with low attendance (in HeadStart schools). PHST reports that staff capacity – rather than desire to enable this activity is the barrier and wonder if there is a way to engage with and gain the support of the VCSE sector to support the ambition in Redcar & Cleveland?• It is unclear how many schools offer breakfast clubs to the point where those children and young people eligible for free school meals as well could have access to at least 2 good meals a day – how can this information be collected easily without burden to the schools? What can we learn from EEF's review and other practice and pilots taking place e.g. in York there is a local fundraising appeal to build on pilots with two primary schools to provide |

| | |
|--|--|
| <ul style="list-style-type: none"> • “One of our schools (Mo Mowlam Academy¹) has set up an Eco Shop to support families struggling to afford essentials, reporting that it has overcome issues of stigma for these families who are reluctant to go to a food bank. It is supporting family engagement particularly responding to healthy eating issues impacted by levels of financial insecurity and poverty • Breakfast clubs were reported as being a good intervention to support punctuality and especially for parents with social anxiety, however, there was some divergent views about how this can sometimes be an issue depending on how much the breakfasts are i.e. some are free breakfasts, some are at a charge which not everyone will or can afford. • There has been trauma informed training in some schools and feedback from that to, for example, the Virtual School has been positive • Children and young people often come to school because it is their safe place, and some do enjoy trusted relationships – but this is not always the case and all efforts to ensure all children feel safe will support good attendance. We need to explore where this is being done well e.g. anti-bullying activity and understand how that could work in more settings • It would be good to understand where mental health needs are being met well in schools and how that is being achieved – what is it about the environment, the skills and attributes of staff, the curriculum, the relationships, ‘the creativity’ that provides protective factors for children who may be struggling and more likely to be on the cusp of persistent absence as a consequence • We’re uncertain where it is happening, but the group is interested to know where flexibility in schools is having an affect on reducing persistent or severe absence and how that is done | <p>breakfast (charged at £1 per day per child) to upscale to all children in every school</p> <ul style="list-style-type: none"> • The group felt there was an issue with parents keeping children off school for minor illnesses so how can the guidance (that is available) reach all parents across the Borough in accessible ways so they feel confident / motivated to get their children into school (whilst also knowing when not to send their kid(s) into school too) • A study across the North East found that wellbeing activities need to be embedded across the curriculum not just within PSHE • Tutor time would ideally be extended to address wellbeing of more children and young people. We need to look at how schools are leading on this – ‘what does being a tutor mean?’ • There is a view that we need resources and training to amplify the trauma informed care training and practice so that it can be embedded in all education settings, and other parts of the system at the same time • The group wondered what they can learn from what it is most children like doing or those who say they love coming to school; and whether they have space and time at school to break or have downtime to recharge • Those in the local authority / professional services part of the system feel that more is being done and could be done by supporting CYP and families with their health in communities alongside the VCSE sector and communities themselves as not everything can be on the shoulders of schools and professional services – untapped potential where parents can also be supported to value education more over time for their children? • There is felt to be a gap in Emotionally Based Literacy Assistants trained to support (like MHST), with ongoing supervision and peer support led by the EP team [following the |
|--|--|

¹ Mo Mowlam Academy is a Special Academy for students aged 5-16 with Social, Emotional and Mental Health Difficulties

| | |
|---|--|
| <ul style="list-style-type: none"> • Development of the Resolve Programme at RC College and Endeavour Connect Programme at Prior Pursglove are supporting those with SEMH to re-engage with learning at Post 16. It's a mixture of remote learning and relationship building • Laurence Jackson School was name checked for its 3-5pm after school offer to support children and young people with re engaging with the school. | <p>Thrive Model]. Mapping is needed across RCBC to see who is still using this approach.</p> <ul style="list-style-type: none"> • Consistent use of language (supportive) about health absence; along with 'support before sanction' • Parents are not sure who to ring in the secondary system if child is ill/anxious etc. They need reassurance that they will be looked after and then more likely to send them to the school. • An attendance hotline within the local authority and available in community settings too – a worries helpline! • Support Adult First model to see improvements with children. |
|---|--|

The delegates also described past activities they felt were successful but stopped because of a cessation of funding or external resource to sustain it including:

Positive Futures (2-year) pilot with Mill Lane Primary School in Stockton which involved 6 weeks of holiday activity in the summer to assist transition from primary to secondary school. The pilot was also with 2 willing secondary schools. The youth workers delivering the activity because a familiar face for the young people that participated and continued to be a port of call for them into Years 8 and 9. Some of the young people also used the youth clubs and so the youth workers became trusted adults in their lives. The fact they were NOT from the school was 100% a factor in developing the trust it was reported. As well as intrinsic outcomes for the young people a wider community outcomes was a reduction in anti-social behaviour (Insights kindly shared by Rob Bell, Prior Pursglove College)

"We used to have family picnic days. They were successful. And 'Police Week' – dogs 'n stuff, activities, cars. You remember those weeks clearly. And in the 6th form 'car crash' and 'smoke busters' – probably 'vape busters' these days! The Fire Brigade, community safety, housing, police, PCSOs – all together. These events were usually towards the end of term and there would be board games. As a kid you wouldn't want to miss it, you'd get into school for these!

A double-sided coin though....."We get the other side of this. Parents think there isn't anything important going on in school towards the end of term, or that the kids don't do anything in the last week so don't worry about their kid's attendance so much." (RCBC Attendance & Welfare Team)

The role of parents and grandparents was emphasised by this group too.

"We need celebration events for parents and grandparents that builds pride in their children's achievements; and to build their sense of belonging with their school. The role of grandparents is important in many of our communities – we maybe need specific solutions with them and their needs and influence in mind too."

3: WHICH PEOPLE/ORGANISATIONS IN THE WIDER SYSTEM I.E. NOT JUST SCHOOLS OR COLLEGES, BUT ACROSS ANY OF THE SERVICES, IN COMMUNITIES, AT HOME – NEED TO BE INVOLVED IN THIS SOLUTION?

- Public Health South Tees
- Health and social care staff – many contexts (clinical, non-clinical, preventative, early intervention, responsive, crisis, in clinical settings, primary care networks, in communities and homes)
- RCBC – multiple departments (cross-departmental approach is essential)
- School immunisation team (the regional team for PHST is commissioned by the ICB ('intra health) since September 2023)
- School nurses (to support low level mental health issues and encourage resilience)
- Early Help – to support attendance
- Health Visitors (in the Early Years phase)
- Family Hubs – to support drop ins (weekly), coffee mornings – these settings need to be accessible and non-threatening and hours that suit families
- Family Support Service – noting they have 4 weeks waiting lists (neuro)
- VCSE engagement officers who look after a patch – could Trusts fund work outside of school hours? Could we map the VCSE sector to signpost parents
- The Junction – their work with young carers and how to best support them emotionally aiming for a better understanding by school staff
- Social prescribers to support parental mental health
- Social workers that are working with children in our care
- The Virtual School

4: WHAT IS YOUR RECOMMENDED ACTION PLAN FOR THIS SOLUTION?

| <p><i>How do we get started / build on what we've got?</i> <i>If we think more of this type of solution is needed how do we make it happen?</i></p> | <p><i>Can we make change using the resources 'we' already have in the system i.e. can we improve things by doing things differently with what we've already got? Do we need additional resource to make a step change in the outcomes to reduce the risk of / persistent / severe absence?</i></p> |
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| <ul style="list-style-type: none"> • A range of Public Health offers were described, but it is unclear how well known they are in the system and uptake / adoption by the 57 schools in the Borough. Offers include: • Eatwell Award • Asthma Friendly Schools initiative • HeadStart (a whole school academic resilience intervention) • Health Start – a new offer to be promoted to schools comprising different elements of healthy eating, physical activity and mental health activity) • PHST are invited to deliver a focused 'health and attendance' workshop as part of this Making Attendance Everyone's Business Project which can accommodate further solutions workshops in 2024 and 2025 – to | <ul style="list-style-type: none"> • Public Health South Tees offers could be better understood by 'everyone in the system' and promoted accordingly in the different contexts where trust is most prevalent i.e. within communities by VCSEs and community groups or via community health champion models / peer to peer models of community-centred public health; in nurseries, schools, colleges, the PRU, specialist schools and alternative learning settings • Thinking about the system team that would ideally be familiar with and favourable about these 'health and attendance offers' so that they get adopted and embedded the group listed many different individuals and organisations including, but not limited to: • Staff in schools/colleges: The Headteacher; Senior Leadership Team; Deputy Principal; |

Making Attendance Everyone's Business in Redcar & Cleveland

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| <p>build awareness and understanding of these offers and see how they connect to the relationships each other service has. This might also be usefully shared via the Attendance Network termly session hosted by RCBC's Head of Inclusion</p> <ul style="list-style-type: none"> • One of the college / Trust contributors at the workshop said that it can feel quite overwhelming so a school / college would need to 'pick one and start with that' and grow it slowly, mindful that without senior leadership buy-in, any intervention would likely fail to become embedded. • Focus on the HAF interventions for R&C in 2024 with view to seeking out more staff capacity and VCSE support for 2024/25 if the targeted work appears to be successful • Contact the fire brigade service to establish what community safety and education engagement resources they have; and the police to see if there is any feasibility and appetite for doing some targeted engagement work as part of any proposed place based pilot for the Making Attendance Everyone's Business Project in 2025 onwards • The power of parents and the power of grandparents – and their influence – needs to be recognised and developed in the interest of every child's attendance – we need to search out the best practice available in the Borough and put in place celebratory interventions that are developed alongside / with or preferably by them in communities and with schools where relationships can be bridged and improved • The UKHSA has developed a 'Healthier Together App' that can help parents decide whether it is safe / they should send their child into school or not if they are ill. NB. | <p>Designated Safeguarding Lead; Mental Health Lead; Health & Wellbeing Lead; Tutor Team; Counsellors (where available); any Health and Wellbeing mentors (in a College Faculty for example); anyone responsible for PSHE in each school; senior staff in the corresponding multi academy trust for each school; school nurses; SENCos; pastoral staff</p> <ul style="list-style-type: none"> • Staff in Public Health South Tees: the physical activity team; the Holiday Activity Fund team; Drug and Alcohol service; Healthy Communities Team; HeadStart; immunisations team • Wider health system: Primary Care Network leads; GPs; social prescriber; key individuals in the ICB with commissioning and safeguarding responsibilities • Wider professional services working with children, young people and families: The 0-19 service; family hubs; health visitors; Inclusion Lead for RCBC and the attendance and welfare team • VCSE sector / charities / community groups: 'We are With You' , Barnardo's • Big institutions e.g. Middlesbrough Football Club / Foundation • Find out whether the Healthier Together App is widely downloaded and used in Redcar and Cleveland; and whether it is known by Primary Care Network leads and other professionals managing CYP / family caseloads so that the National Attendance Action Alliance agreements (with the Royal College of General Practitioners) to provide consistent advice to parents concerned about whether to send their child into school or not when feeling unwell – is available and accessible across the Borough • Ask Grangetown Primary School, who are the first HeadStart 'Gold' school in Redcar & Cleveland to consider a) helping other primary schools and b) consider being the first school to become a Health Start school. Similarly, reach out to South Bank Primary School to see if their mental health |
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| <p>At a recent Thrive at Five discovery session it was reported that whilst Apps can be helpful, they are not suitable for all parents / family members, particularly those with low literacy and struggle with text and words – mixed methods of communication will be required</p> <ul style="list-style-type: none"> • The ICB's Safeguarding Lead for Tees Valley has agreed with the Teesside Attendance Action Alliance (led by DfE) to seek to connect named individuals in every doctor's surgery with every wellbeing lead in schools as an initial action (sharing names and contact details between each of these parts of the system) | <p>team would be willing to share their good practice and 'train' or coach peers – this may require some funding to support the requests but could be a cost effective means of peer led learning to amplify some of the PHSDT offers more widely in the Borough</p> <ul style="list-style-type: none"> • Seek to host at least one joint event involving public health, police, fire, housing, primary care network, family services and other services able to support this ambition in at least one secondary school in 2024/2025 academic year pooling the best of their preventative and early intervention offers with a wide and inclusive invitation for pupils and families alike/. Identify one school willing to do this as part of the wider idea of a preventative 'team around a school' that is less about managing individual / complex cases, rather a more universal intervention aimed at promoting protective factors and reducing risk factors through positive promotion of support available. This idea would be ideal to include in any place based pilot agreed for this Project. |
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¹ 'The NHS Healthier Together app has been designed to allow you to access care for your child much more easily. If your child is unwell and needs to be seen by a healthcare professional, instead of having to call your GP surgery, your surgery may offer you the option to use the app to directly inform them about your child's symptoms. They will then contact you to decide what needs to be done. And if you are seeking help when your GP surgery is shut, it will direct you to NHS 111. Lots of other parents have already downloaded it and have found it extremely useful. [Download the Healthier Together app :: Healthier Together \(what0-18.nhs.uk\)](https://www.nhs.uk/healthier-together/)

Next steps (from May 2024)

1. The Project Team will seek to identify willing individuals within Public Health South Tees to lead on a 'health and attendance' thematic solutions workshop in 2024 to galvanise the many suggestions and pledges of support that have started to emerge as well as understand the different offers (in schools, homes, communities) that could support good attendance in Redcar & Cleveland
2. We will seek the support of the Director of Public Health to give greater visibility to the 'health and attendance' intersects and relationship in the Borough longer term linking to the opportunities of the new Joint Strategic Needs Assessment and service plans.
3. We have also received great enthusiasm from multiple staff within different teams of Public Health to support this work and, in respect of any place-based pilot, the new Healthy Communities Team who are keen to work alongside other stakeholders to help build social capital in more places and wherever possible do more early intervention and preventative activity that benefits both attendance and health of CYP and families.
4. The Project team will reach out to the Police and Fire Bridge Service to explore their resources for community education and engagement alongside public health and other services.

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5. We will connect with Thrive at Five to understand what has been discovered through their work focusing on Early Years interventions that will support a Good Level of Development by more children in Redcar & Cleveland by the age of 5, particularly their understanding of parental needs given their centrality to the 5 year intervention.
6. Any opportunities for maximising the available resources through the wider determinants research in Redcar & Cleveland will also be explored.
7. Meetings with professionals linked to the desire for a more trauma informed Borough and those seeking to address the issue of emotionally based school avoidance will be completed to identify connections and opportunities.
8. The Project Team will seek to align with, and share good practice with the Teesside Attendance Action Alliance who have prioritised 'health' in their work to understand good practice from neighbouring local authorities and Trusts.
9. We will seek leadership from within the education sector for this topic and look for support to discover the best practice, the gaps and opportunities for future trials and collaboration.
10. We will seek to understand the extent to which the guidance available for parents when deciding whether to keep their children off school or not due to illness is known and being used. To do this we need support from many stakeholders including PCN Leads.

Creativity cultural and joyful interventions

HOW DO WE MAXIMISE CREATIVE, CULTURAL AND JOYFUL ACTIVITY INTERVENTIONS THAT COULD PREVENT THE RISK OF AND REVERSE PERSISTENT AND SEVERE ABSENCE?

WHY ARE WE DISCUSSING THIS?

The workshops delivered as part of this Project in 2023, and more recently in March 2024, identified the potential of ensuring there is joyful, creative and participative activity for children and young people to engage with in order to act as an incentive to attend school well – and potentially reduce the risk of some young people becoming persistently absent where they would miss more than 10% of their education.

We haven't had much opportunity to describe what we mean by these kinds of activity, nor consider the evidence base for such interventions. Here are just some thoughts to get us started.....

CREATIVE SOLUTIONS LINKED TO CHILDREN AND YOUNG PEOPLE TELLING THEIR STORIES THEIR WAY

- E.g. Creative Partnership Programme such as the type completed by Blue Cabin with 4-5 care experienced children / young people. A film was made that has been name checked by multiple R&C stakeholders as something that was engaging for the small cohort of young people that made it and the impact of its massaging.
- E.g. Films and comics created alongside young people have been suggested as solutions with relevant supplier details put forward.
- Working with specific populations e.g. carers in creative ways to help create campaigns: [We Care You Care - Help and support for all carers living across the South Tees area | We Care You Care](#) -<https://www.youtube.com/watch?v=pKee0FteBdQ>

EEF's review of attendance interventions: EXTRACURRICULAR ACTIVITIES: '...interventions are those that provide additional educational opportunities outside of the regular curriculum. These approaches aim to increase student engagement in school which may then increase overall school attendance e.g. athletic (sport) and non-athletic (music, drama, play activities and other activities). All extracurricular activities were delivered after school. Four of the seven interventions included multiple components.

[Attendance-REA-report.pdf \(d2tic4wvo1iusb.cloudfront.net\)](#)

- One example of an included approach is called OrchKids. In this approach, participants are provided with musical instruments at no cost and receive lessons with certified teachers in small groups. The intervention also includes additional components, including homework support and academic instruction.
- Another example intervention is Playworks, an extracurricular behavioural intervention that seeks to reduce school "aversion" through the removal of bullying. The intervention includes out-of-school-time support and interscholastic leagues that promote skill building in particular sports to students in the upper grades.

Findings and implications: 'Due to the limited strength of the evidence, we have not been able to extract tangible findings on the impact of extracurricular activities interventions on attendance.' (EEF, March 2022)

WHAT COULD WE LEARN LOCALLY?

The Woodsmith Achieve Education Programme pilots 2023-2025 may reveal insights about the effects of extracurricular activity on engagement, motivation, willingness to try new things and skills acquisition but is not expected to have a causal impact on attendance rates. A range of fun, exciting opportunities are being enjoyed by small cohorts of Year 8 students at St Peter’s Catholic College and Outwood Academy Redcar, and activities are being shaped around young people’s preferences by Redcar & Cleveland’s Tourism and Culture Team. They have recently also engaged in a project called ‘Latitude’ which saw them co-produce a film (about anti-bullying) screened at The Regent Cinema – hopefully we can see this later in the Project too 😊

WHAT ELSE DO WE MEAN, AND THINK IS POSSIBLE, TO INCREASE THE ‘JOY’ YOUNG PEOPLE FEEL, SUCH THAT INSTEAD OF CHOOSING NOT TO ATTEND ‘SCHOOL’ THEY WANT TO GO.

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| Adventure? Adrenaline? | Field trips? Visits? | Challenges? | Peer Support Activity? |
| Fun with family – cooking? | Making films – being heard? | Creativity? | Performance Opportunities? |
| Projects? | Fashion? | Film, photography? | Social action? |
| Gaming? | Comics | Creative writing | Animations |

LOCAL INSIGHT AND LEARNING TO INSPIRE US....

Researchers from Teesside University are sharing outcomes from a series of creative workshops with young people in the South Tees region, including comics, creative writing, and animated and documentary films. An event (in May 2024) explores how creative arts approaches can capture young people’s perspectives on health and wellbeing. This project is a collaboration between Teesside University, the Health Determinants Research Collaborative and Tees Valley Education Trust. It is funded by the Arts and Humanities Research Council (AHRC).

Contact: Rachel Carroll (she / her), Associate Professor (Research), School of Social Sciences, Humanities & Law T: 01642 384029

Redcar & Cleveland Borough Council Culture & Tourism are involved in myriad creative activities that we can learn from over the course of the Project. Many of the themes in the ‘boxes’ above on this page are derived from some of the things that Lisa’s team have recently found young people involved in the Achieve Education Programme would like to explore, discover or experience as part of their ‘Creative Consultation’ approach to listening to young people and co-designing activity with them.

Contact: Lisa Lisa.Storey@redcar-cleveland.gov.uk

Suggestions from delegates attending the 20th of March 2024 'solutions' workshop session

Suggested Solution(s):

Creativity, cultural and joyful activity interventions

1: THINKING ABOUT THIS SOLUTION, AND REFERRING TO THE THEORY OF CHANGE DIAGRAM, IF DONE WELL, WHICH OUTCOMES WOULD IT MOST CONTRIBUTE TOWARDS?

- Sense of belonging
- Self-determination
- Self-achievement
- Trusted person
- Strength / motivation
- Pride in self / community / school
- Happy children
- Building confidence/ friendship
- TRIBE
- Additional benefits – income generation 'giving back'
- Engaging others – parents etc / community

2: ARE WE ALREADY DOING THIS SOLUTION ANYWHERE 'WELL' IN REDCAR & CLEVELAND?

Where is it working well and why?

- Engagement through personal interest – improving attendance on those days
- Primary school examples
- The film made by Year 8s in two of the Borough's secondary schools as part of the Achieve Education Programme
- Creative play
- OPAL (constructive play)
- Building our Future
- Forest School
- Duke of Edinburgh
- Risk Roadshow (primary and secondary)
- Youth Enterprise
- Youth service and Tuned In (for anxious young people)
- Reading programmes supported by people who have retired
- Northfield School, Billingham
- Programmes running with Ishy Din – screenwriter working with CYP on film making linked to Tees Valley creatives
- Family Dining Project in Bradford – no further details
- Passmores School, Harlow, Essex. Long opening hours and broad extracurricular offer

Where are there gaps that you think this solution would ideally fill?

- Break / lunch activity for secondary schools (KS4)
- Animation and gaming for 13-14 year olds
- Dungeons & Dragon, Warhammer etc (place-based)
- Transport
- Scheduling considerations i.e. Friday when absence is typically highest
- Funding
- Youth workers
- Crafting
- Space – area in school for the activities
- Staffing (peer run clubs)
- Joyful curriculum
- PTAs back in secondary schools (who has one)
- We need mapping/discovery/gap analysis
- Find out what CYP actually want/value
- Explore what currently happens during secondary school lunch breaks – many of which have been cut in length

3: WHICH PEOPLE/ORGANISATIONS IN THE WIDER SYSTEM I.E. NOT JUST SCHOOLS OR COLLEGES, BUT ACROSS ANY OF THE SERVICES, IN COMMUNITIES, AT HOME – NEED TO BE INVOLVED IN THIS SOLUTION?

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| <ul style="list-style-type: none"> • VCS organisations • Palace Hub • Specialist grass roots organisations • Youth service • Parents, grandparents, people who retired • Children and young people • Businesses | <ul style="list-style-type: none"> • Public health (HAF) • Creative industries • Universities • Post-16 support • Local theatres (outreach) • People working with animals • VCS e.g The Imaginarium in Redcar • Scouting/Girl Guiding |
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4: WHAT IS YOUR RECOMMENDED ACTION PLAN FOR THIS SOLUTION?

How do we get started / build on what we've got?

If we think more of this type of solution is needed how do we make it happen?

Can we make change using the resources 'we' already have in the system i.e. can we improve things by doing things differently with what we've already got? Do we need additional resource to make a step change in the outcomes to reduce the risk of / persistent / severe absence?

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| <ul style="list-style-type: none"> • Attendance survey • Capture wider examples of best practice • Send out request through cultural team / CVS – anyone wishing to donate time • Student leaders / development programme • Ask the young people and children (focus groups), youth service, school council • Ask schools – what are the barriers and opportunities, are you interested? • How to deliver the curriculum in a different way • Can we build on existing school business / enterprise? • What are the skills of governors that we are not using (map) – skills audit • Pilot project re an 'Alternative Friday Offer' – high quality vocational/sporting activities to improve Friday attendance • Link creative offer into transition work. Use what secondary schools can offer in arts/creative space to build excitement - perhaps some joint Y6/7 activities/visits • Summer schools – HAF opportunities | <ul style="list-style-type: none"> • Difficult to say yet as there is much more discovery to do first it would seem • One group suggested the need to get adults (parents / family members) into schools more often for positive things (plays, celebrations, classroom visits, sports events etc) – more in line with a primary-school-style approach to family engagement in the school. • Middlesbrough football club? |
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Action Plan

THE NEED FOR MORE TRUSTED PERSON ROLES IN MORE SCHOOLS AND COMMUNITY CONTEXTS

Focus on the role of **'trusted person'** in different contexts; support these people, learn from how they affect attendance behaviours and then roll out this practice where it will work best. This could look different in each setting, for example, the **parental support advisor** role exists in some schools. In other contexts this might mean establishing, or making the case for, **dedicated family support officers** who are skilled to talk with families. This also means maximising the skills of people already employed in the Borough with these skills so they can be cascaded more widely in more schools recognising the finite resources available to professionals managing complex caseloads with young people and their families.

Step 1: Obtain and share the **parent support advisor role** and **family support workers** job specifications (DfE have been asked to support this task as well as finding out more about the role of **attendance advisors / mentors** [in Middlesbrough]).

Step 2: Identify how these trusted roles are or could be in place to work on parental engagement and communication in more schools across the Borough. We need to audit / understand better the availability of these and other roles in each school including **mentoring** [which we should also assess to see what is already going on, its impact, which schools use mentors for their pupils and staff] and **buddying** [language will be important here too].

Step 3: Develop support / training / development / community of practice and peer support for these different roles and / or make the case for investment in each setting where it is expected to make a valuable difference to attendance behaviours (e.g. include in any selected place based pilot where feasible).

Enablers: Staff to have specialist training to support children and families. ALL to have empathetic / trauma informed (better still trauma attuned) approach

'SCRAP AUTOMATED COMMUNICATIONS BY SCHOOLS TO BEING HUMAN (AGAIN)'

Dilemma: communication – lost opportunities. Suggested solution: Pilot with a couple of schools who use text message / automated answering service for attendance to trial going back to a 'live' person to build a relationship – it will make a huge difference! Best case scenario: Better relationships through 'humanness.' Worst case scenario: Won't make a difference if not tried. Gut feelings: we have lost some of those relationships enjoyed in the past. Pluses and minuses: - + Reduce the 'reaction' of a text message approach to being proactive in approach with a live person.

Step 1: Revisit Laurence Jackson to find out how many / why the dedicated person to answer absence calls is not in place anymore. Find out what worked well, what could be changed / improved and understand why it stopped.

Step 2: Two schools agree to a pilot programme to remove automated services and text messaging.

Step 3: Explore wider staff relationships and behaviours, and the first point of contact for pupils and parents/families in school) – what is the experience like? From the school crossing patrol to the receptionist to the teachers and tutors. Is the experience positive, welcoming, supportive and are barriers (perceived or actual) purposely and consciously removed. Pilot small scale 'visible consistency' approach to welcome / relationships at school.

Enablers: Staff to have specialist training to support children and families. ALL to have empathetic / trauma informed approach. 3

ATTENDANCE DROPS-IN / CLINICS

Extend the concept of attendance surgeries across Redcar & Cleveland where schools and local authority services/ professionals / VCSE sector come at a set time to 'pop in and discuss any concerns together; and how to maximise inclusive approaches. Attendance surgeries / clinics / drops-ins might look different because they will need to be mixed methods – face to face, in school, away from school and virtual. The attendance drop-in for a parent or child who doesn't want to talk with their school because the relationship has broken down between them may look different to an attendance surgery between school staff and professionals, for example in the RCBC attendance and welfare team.

This idea might be further extended to simply imagining that any parent or family member or child has a concern – and it includes their attendance, perhaps a parent worried about lots of things, but they are worried about their child's risk of not attending school in future – where do they turn, who do they reach out to, especially if school isn't their preference? How is the current information system organised to cater for this eventuality, or if it exists in another form e.g. a parent is worried about their child's mental health, what are the professional prompts in place to proactively seek out signs of potential absence from school in future? There is said to be good practice of a similar nature in place for SEND children so how can that be applied to this wider system for school absence prevention? Solutions:

1. Attendance surgeries to engage parent in school; RCBC attendance surgeries to offer good practice on resources at ground level; and community surgeries
2. Being more inclusive to encourage engagement e.g. electronic communication (website easy to access and understand and being mindful of low literacy levels in some parts)
3. Mentoring groups - engaging with young people / parents
4. Inviting secondary school parents / families into school to promote pride

Enablers: Consistency in school of staff (lower staff turnover; continuity of relationships for young people and families). Worst case scenario: Non-engagement of families and a lack of feeling of belonging.

INSPIRING CONFERENCE TO CELEBRATE AND SHARE BEST PRACTICE

A mix of activity is required to extract and share the best practice found inside and outside of Redcar & Cleveland that will reduce the risks of and reverse the levels of persistent and severe absence. In every school, college and learning setting there should be a predisposition to share the positive work of students regularly. Whilst interactions between school staff and professionals could involve scoping conversations to share and celebrate good practice. RCBC attendance surgeries could be facilitated in each school to offer good practice on resources at ground level and include a face to face meeting at the start of next term. To bring visibility to the many ways in which persistent and severe attendance could be reduced and reversed it is proposed that an inspiring event should be hosted in 2025; the ambition being to showcase what we're already doing well in the Borough but with a clear ambition to identify schools / settings / system partners – 'champions' - willing to try something new.

Step 1: Plan a conference with inspiring keynote (e.g. Paul Dix to talk about 'visible consistencies' and belief that 'when the adults change everything changes') and good practice workshops linked to effective interventions. Step 2: Advertise / plan for 3 follow up research projects – 'all have to sign up for one'.

Enabler ('wish-list 'would be nice...') : Introduce an Attendance Co-ordinator for the Borough building relationships within the system for the long-term and making this activity the norm in all settings. 4

TRANSITIONS: PROACTIVE AND PREVENTATIVE ATTENDANCE SUPPORT BEFORE THEY HAPPEN

Transitions happen at different stages of the child and family life course. It is most often thought of as the change for a child moving from their primary school to secondary school, but any transition is a point of

vulnerability where attendance and other negative behaviours can be catalysed such as mid-year or managed placements / moves. Transitions are more commonplace, and therefore solutions appear to be better known and practiced for service children and young carers (e.g. passports or equivalent processes and techniques of care and support).

Step 1: Speak to schools / academy trusts about current transitions support practice with a focus on preventative actions to reduce the likelihood of a child becoming persistently / severely absent

Step 2: Gather this practice through a face to face Attendance Network meeting to build relationships and deeper understanding and exchange of the ways to adopt practical actions that can work in more schools

Step 3: Explore and strive for a consistent approach for schools to ease transfers and transition for pupils

Step 4: Support transition (mid-year, managed moves) with (educational psychology expertise to support) 'pushes and pulls' models alongside the creation and availability of a 'transition pack' for all schools

Step 5: Invest in / implement trial 1 in the 2024/25 academic year with a willing school/s

INCLUSION AND FLEXIBILITY

More generally, there was a feeling amongst some of the workshop participants that even more needs to be done to promote inclusive practice across the system. Flexibility was also thought to be important in being able to cater for those children and young people more likely to be at risk of persistent and severe absence – not just in schools, but across the professional system too. This becomes problematic though we find when each part of the system has duties to comply with prevailing legal frameworks.

“Some schools are too rigid on adapting timetables after extended periods of absence. More than one participant felt some schools have been inflexible, strict and draconian. Following push back from communities it is now felt that they are slowly changing and adopting a Thrive model.”

In suggesting 'flexibility,' we may need to dig deeper into this topic to discover what this means in practice, what flexibilities are possible and what their effects might be on the overall attendance – and subsequent safety and wellbeing of every child and young person and family members. Ideas included:

1. **Truly accessible attendance and welfare meetings e.g.** all Attendance Case Conferences (ACCS1) offered virtually? – check acronym with Grant. Worst case scenario: No show meetings offered virtually.
2. More flexible application of policies and procedures to 'not one size fits all' or graduated approach.