



Scrutiny Review of Children Not in School

Children and Young People Select Committee, June 2026

Contents

Select Committee – Membership	3
Acknowledgements	3
Foreword	4
Original Brief	5
1.0 Executive Summary	7
Key Findings.....	7
Conclusion and Recommendations.....	8
2.0 Introduction	11
3.0 Background	12
4.0 Evidence	14
Home and Hospital.....	14
Elective Home Education.....	17
Children Missing Education (CME).....	19
Education Other than at School (EOTAS).....	21
Alternative Provision (AP).....	21
5.0 Conclusion and Recommendations	24
APPENDIX A.....	26
Glossary of Terms	28

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Acknowledgements

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Foreword

[Add in]

Cllr Carol Clark, Chair



Councillor Carol Clark
Chair – CYP Select Committee



Councillor Barbara Inman
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Original Brief

Which of our strategic corporate objectives does this topic address?

This work aligns with the Council's priorities to ensure that all children have a bright future and a sense of belonging and giving children the best possible start in life, this is greater achieved when our children are educated and build connections within the borough. It aligns with the council vision to have a sustainable community where everyone belongs and is valued.

The review supports Stockton on Tees Plan Priority One – The best start in life to achieve big ambitions and key move – Giving children and young people the best possible start, in an inclusive community where everyone can thrive.

This scrutiny review would also support delivery of the following design principles:

- reduce inequality and prioritise prevention
- put communities at the heart of everything we do
- use data and intelligence to inform our decision

What are the main issues and overall aim of this review?

Children not in school covers a range of scenarios where a child is not accessing a full-time education. The range of reasons a child may not be accessing a full-time education at a school is vast and covers:

- All reasons for absence from school including authorised absence, unauthorised absence
- Pupils on reduced/part-time time tables
- Pupils who are accessing Alternative Provision not in a registered school (whether arranged by the school or the local authority)
- Pupils receiving Home and Hospital Provision
- Pupils who are CME (Children Missing Education)
- Children who are EHE (Electively Home Educated)
- Children who have no school base and are EOTAS (Educated Other Than at School)
- Children who move into the borough and are waiting for a school place

Strengthened systems for Children Not in School has the potential to:

- improve attendance further
- improve pupil outcomes
- reduce associated anti-social and criminal activity
- reduce demands on community safety resources

The Committee will undertake the following key lines of enquiry:

- What are the scenarios where a child may be or become a CNIS? Why do parents choose to take their children out of school and what difficulties does this create?
- What risks and safeguarding issues arise from CNIS?
- What are the statutory requirements in relation to the different scenarios?
- Who has responsibility and oversight to ensure appropriate systems are in place and there are no gaps?
- What support is provided when a child is not in school?
- How well do partner agencies work together?
- What is the impact on the child of not attending school?

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1.0 Executive Summary

- 1.1 This report outlines the findings and recommendations of the Children and Young People Select Committee's scrutiny review of Children Not in School (CNIS).
- 1.2 CNIS covers a range of scenarios where a child is not accessing a full-time education. The range of reasons a child may not be accessing a full-time education at a school is vast and covers:
- All reasons for absence from school including authorised absence, unauthorised absence
 - Pupils on reduced/part-time time tables
 - Pupils who are accessing Alternative Provision (AP) not in a registered school (whether arranged by the school or the local authority)
 - Pupils receiving Home and Hospital Provision (H&H)
 - Pupils who are CME (Children Missing Education)
 - Children who are EHE (Electively Home Educated)
 - Children who have no school base and are EOTAS (Educated Other Than at School)
 - Children who move into the Borough and are waiting for a school place
- 1.3 The Committee undertook the following key lines of enquiry:
- What are the scenarios where a child may be or become a CNIS? Why do parents choose to take their children out of school and what difficulties does this create?
 - What risks and safeguarding issues arise from CNIS?
 - What are the statutory requirements in relation to the different scenarios?
 - Who has responsibility and oversight to ensure appropriate systems are in place and there are no gaps?
 - What support is provided when a child is not in school?
 - How well do partner agencies work together?
 - What is the impact on the child of not attending school?
- 1.4 Contributions were sought from Council Officers and the Chair and Vice Chair of the Select Committee visited the homes of children being educated at home due to illness or being electively home educated.

Key Findings

Children Not in School (CNIS) – Overall

- CNIS covers a wide range of children not accessing full-time education
- Primary absence in Stockton is lower than the national average; secondary absence is higher than the national average
- Persistent absence remains a particular issue in secondary schools
- Illness is the main reason for absence, aligning with national patterns
- At the time of the review 164 children were on reduced timetables, 112 with SEND
- There are rising numbers of pupils moving into the Borough with EHCPs, creating pressure on specialist placements
- Admission timescales are normally 10–15 school days, though delays occur for complex or specialist placements

Home & Hospital Tuition

- Provides support for children unable to attend school due to health needs
- 13 pupils were accessing this provision at the time of the review
- Teaching is tailored, flexible, and welfare-focused
- Pupils are offered a mix of functional skills and GCSE qualifications depending on personal circumstances
- Health needs dictate timetabling
- Student and parent feedback is positive

Elective Home Education (EHE)

- Numbers continue to rise: 476 children were electively home educated at the time of the review
- In Stockton-on-Tees, the main reason for choosing to home educate is mental health
- The Local Authority monitors educational suitability but is legally limited in safeguarding checks
- 42 children were returned to school through statutory School Attendance Orders in the previous year
- Caseworkers rely on professional curiosity to identify risk when conducting educational visits
- Legislative change was anticipated, including possible compulsory national registers

Children Missing Education (CME)

- CME numbers have decreased due to improved data systems and off-roll audits
- In the current academic year, 115 children had been referred from Stockton schools. To date 61 had been traced. 32 enquiries had been made from other Local Authorities and 22 of these had been tracked as in a Stockton school.
- CME pupils face high risks (underachievement, poorer health outcomes, harm, exploitation, radicalisation, and becoming NEET (not in education, employment, or training) later in life.
- Improvements were being driven by stronger national guidance, better data sharing, and multi-agency cooperation

Education Other Than at School (EOTAS)

- Very small number of children access EOTAS
- Used only for the most complex SEND cases where school is inappropriate
- Provision remains stable, tightly monitored, and legally under the Local Authority's responsibility

Alternative Provision (AP)

- Rising numbers accessing AP, both school-commissioned and Local Authority commissioned
- Reasons include behaviour challenges, medical issues and exclusions
- Growth was particularly noted for primary-aged pupils
- Stockton's AP Framework was expanded in 2025; at the time of the review there were 29 approved providers
- There was a strong emphasis on quality assurance
- Regular multi-agency AP networks support consistency and best practice

Conclusion and Recommendations

- 1.5 Overall, the review highlights the wide range of reasons a child may not be accessing full time education at school and demonstrates that, while Stockton has strong systems in place for quality

assurance, multi-agency working and engagement with families, there are pressures relating to emotional and mental health needs and rising demand linked to SEND. The Committee was also mindful that home visits to electively educated children were limited by legislation to the monitoring of the child's education. Increasing pressures continue to present risks to educational continuity and safeguarding.

1.6 The Committee's recommendations therefore focus on strengthening staffing capacity, consistency and partnership working to reduce time out of education and improve outcomes for vulnerable children. Alongside this, the Committee emphasises the importance of preparedness for anticipated legislative changes, improved information sharing to mitigate safeguarding risks, and early intervention to address emotional-based school avoidance. Collectively, these recommendations aim to ensure that all children and young people are supported to access suitable education safely and in a way that meets their individual needs.

1.7 The Committee recommends:

Home and Hospital (H&H)

- 1) That staffing capacity is reviewed to ensure provision remains, safe, responsive and broad enough in curriculum and that the staffing model adopted provides flexible and responsive provision in the most cost-effective way.
- 2) That opportunities are explored and expanded for peer social interaction.
- 3) That opportunities for partnership working to enhance both curriculum and enrichment are explored.
- 4) The re-integration pathways are explored.

Electively Home Educated (EHE)

- 5) That a more relational approach be strengthened with EHE families with identification of dedicated staffing resource to promote this.
- 6) That clearer information is provided to parents about:
 - Examination entry processes
 - Associated costs
 - Available support services
- 7) That work continues to prepare for legislative changes on compulsory registers and strengthened Local Authority powers.
- 8) That the range of support shared via EHE networks is broadened.
- 9) That opportunities for partnership working to strengthen intervention and support are explored.
- 10) That the capacity for schools to provide early intervention and support in response to emotional and mental health needs is reviewed.
- 11) That best practice identified at the Attendance Networks on re-integrating vulnerable learners into school is widely and regularly shared.
- 12) That the support available to children and their families experiencing Emotional Based School Avoidance (EBSA) is widely and regularly shared.

- 13) That the Team Around the School be fully appraised of the needs of previously Electively Home Educated pupils who are returning to mainstream education to support and nurture them back into school.

Children Missing from Education (CME)

- 14) That off roll audits are maintained and expanded to prevent inappropriate removal from school rolls.
- 15) That opportunities to work in partnership with the Voluntary and Community Sector are fully utilised to gather intelligence.
- 16) That consideration is given to how the social care reforms can be used to reduce the number of children missing from education.

Educated Other than at School (EOTAS)

- 17) That multi-agency working arrangements for children receiving EOTAS be strengthened, to ensure earlier, coordinated planning for children with complex needs, with education, health and social care partners jointly developing, owning and reviewing EOTAS packages to improve timeliness, quality and outcomes.

Alternative Provision (AP)

- 18) That the new QA framework is implemented fully with follow up action plans for providers needing improvement.
- 19) That AP networks continue to be expanded to promote consistent practice.
- 20) That action is taken to ensure that all AP placements have a clear education plan, regularly reviewed, with reintegration as a priority where appropriate.

Admissions

- 21) That processes and capacity for pupils with EHCPs who move into the Borough are reviewed to minimise time out of education.

Safeguarding

- 22) That caseworker training in professional curiosity is enhanced to seek to ensure that risks are spotted during educational monitoring visits.
- 23) That multi-agency information sharing for EHE and CME cohorts is strengthened, to compensate for restrictions on direct safeguarding checks.
- 24) That CME processes continue to involve agencies such as Border Force, Police, Health and Housing to track and protect high risk pupils.

2.0 Introduction

2.1 This report outlines the findings and recommendations of the Children and Young People Select Committee's scrutiny review of Children Not in School (CNIS).

2.2 Children not in school covers a range of scenarios where a child is not accessing a full-time education. The range of reasons a child may not be accessing a full-time education at a school is vast and covers:

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- Children who move into the borough and are waiting for a school place

2.3 The Committee undertook the following key lines of enquiry:

- What are the scenarios where a child may be or become a CNIS? Why do parents choose to take their children out of school and what difficulties does this create?
- What risks and safeguarding issues arise from CNIS?
- What are the statutory requirements in relation to the different scenarios?
- Who has responsibility and oversight to ensure appropriate systems are in place and there are no gaps?
- What support is provided when a child is not in school?
- How well do partner agencies work together?
- What is the impact on the child of not attending school?

2.4 Contributions were sought from Council Officers and the Chair and Vice Chair of the Select Committee visited the homes of children being educated at home due to illness or being electively home educated.

3.0 Background

- 3.1 CNIS is the overarching term for any child who is not attending school full time and includes children in the following groups: Absentees, accessing alternative provision, reduced timetables, children missing education not on a school roll, children who educated other than at school and children who are electively home educated.
- 3.2 The termly DfE statutory COLLECT for CNIS focuses on children who are EHE and CME.

Locality Team

- 3.3 Local authorities have a duty to identify; Children not registered at a school and children not in receipt of education.
- 3.4 The Locality team main responsibility is the monitoring, and interpreting of absence trends from all schools and education providers in Stockton including alternative provision providers, children listed as EOTAS and children who are electively home educated and not in receipt of their education.
- 3.5 Also included are the Children who have an Education Health and Care Plan and are educated outside of the borough.
- 3.6 Identify and monitor children missing education, act promptly to provide support and intervention, and apply parental responsibility measures where necessary for unauthorised absence.

Pupils who are recorded as absentees

- 3.7 The latest DfE data for this academic year shows Primary absence nationally at 4.56% compared to Stockton figure of 4.42%.
- 3.8 Secondary absence nationally at 7.04% compared to Stockton figure of 7.34%.
- 3.9 In Stockton overtime primary levels of absence are better than national averages
- 3.10 Stockton secondary schools are poorer than national averages in particular levels of persistent absence. Last academic year the level of persistent absence improved it remained worse than the national average.
- 3.11 The main reason for absence is illness and this correlates with the main reason nationally for absence from school.

Pupils accessing part time education

Definition – The amount of education expected that a pupil accesses each week is usually based on 25 hours. There is no legal definition in England of exact hours for each age group.

- Any pupil accessing less hours than the length of day for the home school is accessing part time education.
- The DfE Working Together to Improve Attendance (2024) states that part time timetables must not be used to manage behaviour even with parental consent.
- Part time timetables are a temporary measure and should be carefully planned for the shortest time that allows before a pupil moves back into full time education.

- It should be reviewed very regularly and must have the consent of the parent.
- Part time education impacts on pupils' academic learning and progress and on social relationships
- There are currently 164 children of compulsory school age on reduced timetables, 112 of these children are recorded as having a SEND need.

Pupils who have moved into the Borough and are awaiting a school place

3.12 There are two groups of pupils who this would apply to:

- i. Pupils who move into the Borough who have an Education Health and Care Plan and may or may not require specialist education. For these pupils, the process of admission to a school place is carried out by the SEND service following statutory SEND procedures (for example in the last academic year 74 pupils moved into the Borough who had previously attended a specialist school or a mainstream school with a specialist base/provision attached). We have seen a rise over recent years of pupils moving into the Borough who have EHCPs.
- ii. Pupils who do not have an Education Health & Care Plan. These pupils would be admitted to school via the usual school's admissions process. The Local Authority Admissions team generally aims to secure an offer of a place and notify the parents of the outcome of their application in writing within 10 school days, some can take up to 15 school days

3.13 Under the Fair Access Process, following on from an admissions request to a school, some pupils may meet criteria to be eligible to be placed through a Fair Access process. In Stockton we have a process that was co-produced with our schools.

4.0 Evidence

Home and Hospital

Definition - where a child cannot attend school because of a physical or mental health need, and cannot access suitable full-time education, the local authority is responsible for arranging suitable alternative provision

- 4.1 Children who are of compulsory school age who are on the roll of a school and are unable to attend due to a long-term medical condition or are recovering from surgery and cannot attend are taught predominately in the home by one of the two home and hospital teachers. Home and Hospital is a short-term service for pupils who are receiving support from a health professional (e.g. hospital consultants) and specialist services until children are well enough to return to school.
- 4.2 Children are supported with enrichment as well as academic subjects English, Mathematics, and Science.
- 4.3 At the time of the review there were 13 children accessing home and hospital tuition. Children who are in school year 11 are supported through to take formal exams in their homes.

The Home and Hospital Team

- 4.4 The Home and Hospital Team work with pupils of school age unable to attend school due to physical health problems. Pupils with mental health problems are referred to SENDMAP for support. The team have recently worked with the designated clinical officer from health to map out a procedure for schools and agencies to give clarity on referral routes to home and hospital.
- 4.5 The pupil must have been out of school for at least three weeks (exceptions can be made in some situations for accidents/ planned surgeries). The team:
- **Conduct baseline assessments** in English and Maths to identify starting points and learning gaps.
 - **Deliver targeted intervention teaching** based on assessment outcomes to address specific needs.
 - **Liase with the pupil's school** to obtain current work and incorporate it where appropriate, ensuring alignment with baseline results.
 - **Include additional subjects** as needed, with a focus on Science for KS4 pupils to support curriculum coverage and accreditation.
 - **Use project-based learning** approaches to build engagement and motivation through creative, real-world tasks.
 - **Provide teaching through 1:1 sessions or hub-based delivery**, selecting the most suitable model for the pupil's circumstances and reintegration plan.
- 4.6 Numbers of Home and Hospital pupils are set out below:

	Medical	SEMH/ EBSA	Total	Back into education
22/23	10	15	25	9
23/24	16	27	43	7
24/25	17	18	35	13
25/26 (Sept/Nov)	8	14	22	6

Welfare and Safeguarding - Attendance

4.7 There is daily attendance tracking and all lessons are logged. Home and Hospital teachers attempt to see the child even when not engaging in education. In addition, schools are advised of absence to initiate their safeguarding procedure and review meetings are held at least once every half term all professionals involved attend along with the parent and pupil.

Welfare and Safeguarding - Admission

4.8 There are robust admissions processes involving school, parents, agencies and home and a hospital lead teacher. The team follow the **medical experts' advice** when it comes to lesson duration. For example:

- Students with Chronic Fatigue may only be able to endure short lessons a few times a week.
- Other students' medical needs may require teachers to wear PPE or to teach online
- The range of subjects may be limited to take into consideration the load on the young person
- The timetable is arranged around the needs of the young person. For example: lessons later in the morning due to
- sleeping issues or not teaching on days when there are CAMHS appointments as this can be emotionally draining.

4.9 The team are flexible in their approach to every child offering a service that is tailored to their educational needs and their welfare.

Outcomes GCSE

4.10 Pupils are offered a mix of Functional Skills and GCSE qualifications in English and Maths depending on their personal circumstances.

GCSE 23/24	Number who sat exam	% graded 4 and above	Highest Grade
Maths	9	89%	5
English Language	10	90%	7
Combined Science	5	100%	6:6
GCSE 24/25	Number who sat exam	% graded 4 and above	Highest Grade
Maths	6	67%	6
English Language	7	57%	5
Combined Science	3	100%	5:5

Outcomes – Functional Skills

4.11 Pupils are offered a mix of Functional Skills and GCSE qualifications in English and Maths depending on personal circumstances.

Functional Skills 23/24	EL1	EL1	EL3	Level 1	Level 2
Maths	1	1	7	3	2
English	1	1		1	0
Functional Skills 24/25	EL1	EL2	EL3	Level 1	Level 2
Maths			6		
English				2	

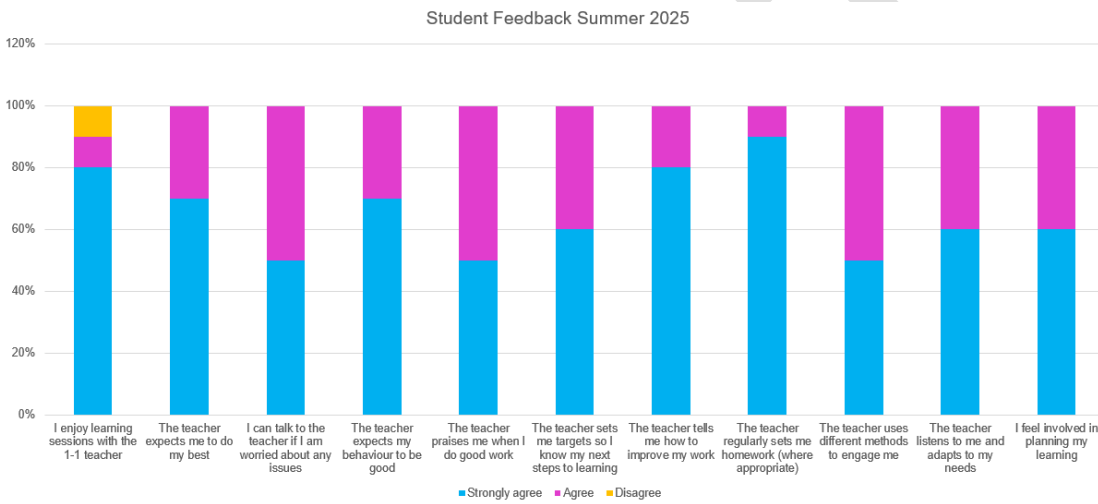
Moving On

4.12 At the end of a Home Hospital placement, a completed exit report is sent to the school along with completed work. Support is provided to return to an alternate provision if appropriate or support with transition to post 16 provision, linking in with the careers team progression advisors.

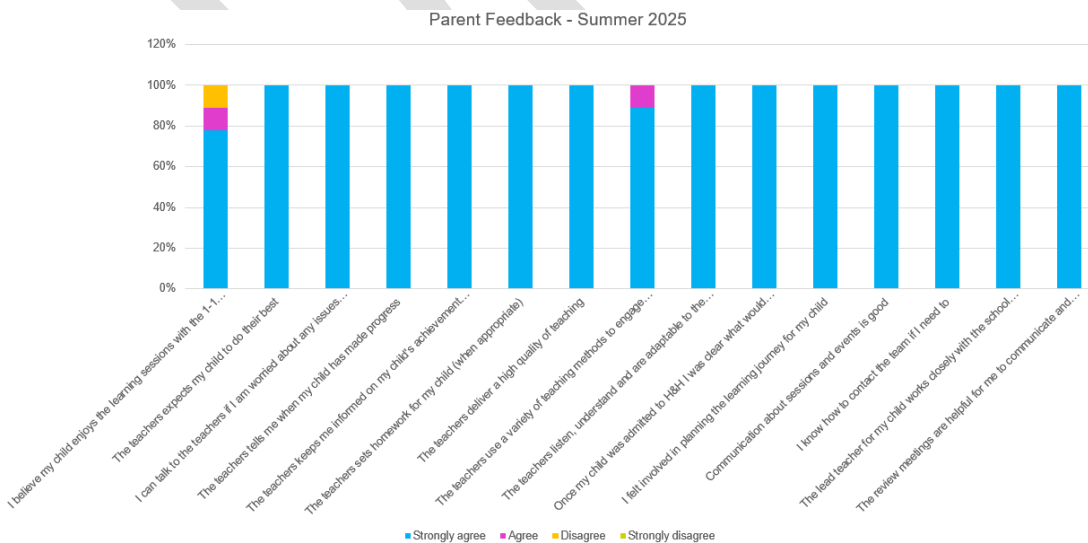
Feedback and Quality Assurance

4.13 Termly satisfaction data is collected from pupils and parents and the team respond to any suggestions for change. Regular meetings with school contacts are held to monitor the effectiveness of processes and support and teachers have lesson observations and book scrutiny. In addition, teachers have access to the CPD offer from the Education Inclusion and Achievement Service.

Student Feedback Summer 2025



Parent Feedback Summer 2026



- 4.14 Members noted that for home and hospital tuition, the service would respond as soon as they received notification; a child could be referred after missing 15 school days. There must also be medical evidence that the pupils is too unwell to attend school from a suitably qualified medical professional.
- 4.15 Additionally, numbers of children not attending school due to Emotionally Based School Avoidance appeared to be reducing due to the alternative provision being rolled out across Stockton schools

Member Observations

- 4.16 Member reflections from the home visit were that there was an overriding feeling of loneliness with this sort of education. Also, the fact that although a teacher is seen daily there is a restriction on the number of subjects taught.
- 4.17 Members noted that there are only two teachers and at the time of the review 19 students were needing their help Most hospital home education is for Secondary aged pupils – Primary Schools normally cater for their children who can't attend school by providing work to be done at home.

Elective Home Education

Definition - Elective home education is a term used to describe a choice by parents to provide education for their children at home or in some other way they desire, instead of sending them to school full-time.

- 4.18 Electively Home Education Children are those whose parents have made the decision to educate them outside of the school system. In this situation, parents take full responsibility for sourcing and funding the child's education.
- 4.19 The Local Authority has a responsibility to ensure all children are accessing an education and therefore keeping a register, monitoring and tracking progress is carried out by the locality team caseworkers, the Local Authority have a policy and procedure that aligns with DfE national guidance including legal measures to return children to school in cases where education is not meeting the needs of the child. In the last academic year, 42 children were returned to school via school attendance order statutory measures.
- 4.20 Each year the number of children electively home educated rises. At the time of the review there were 476 children registered as EHE. Of these, 13 children were open to early help services, 6 were child protection and there were no Children in Our Care registered.
- 4.21 In Stockton the main reason parents gave last academic year for removing children to home educate was mental health. In addition, sometimes parents expressed dissatisfaction with the school. Where a child was home educated, they could return to state provision whenever they wished.
- 4.22 An annual report is presented to Hartlepool and Stockton Safeguarding Children's Partnership in September each year.

Data

4.23 The number of children electively home educated has risen each year.

Academic Year	2018/19	2019/20	2020/21	2021/22	2022/23	20243/24	2024/25	Year to date Sept to Dec
No of Pupils	210	158	194	259	418	433	655	514

4.24 Numbers were steadily increasing year on year up until Covid19. It is evident numbers surged when school attendance once again became mandatory and the steady increase continues following the national and local lockdowns.

4.25 DfE collect and publish the data on electively home educated children on a termly basis via the Children not in school (CNIS) COLLECT.

Monitoring children who are Electively Home Educated

4.26 It is important to note that **safeguarding checks in isolation are not routine**. This reflects current legislative limits, but it underscores the importance of vigilance during educational monitoring. While checks cannot be made without cause, caseworkers have all accessed safeguarding training and can recognise signs of harm and escalate appropriately.

4.27 **Home visits made by caseworkers are within the remit of monitoring the child's education.** While the primary purpose is educational monitoring, caseworkers remain alert to safeguarding indicators during visits. Professional curiosity is vital—if anything observed raises concern (e.g., unsafe home conditions, signs of neglect), on education-focused visits escalation to a manager discussion and Children's HUB referral and safeguarding procedures are triggered even though the visit is not a formal safeguarding check.

4.28 This limitation highlights the importance of inter-agency communication and professional curiosity. While proactive safeguarding checks cannot be made without evidence, caseworkers use every interaction (e.g., education monitoring) to identify potential risks and escalate concerns promptly.

4.29 An overview of the process and steps involved are attached at **Appendix A**.

Building Relationships

4.30 The Service was working more closely with parents of elective home educated children to build relationships. Most parents engaged well with the Local Authority and the Information Pack sent to parents clearly set out issues for them to consider prior to making the decision to home educate. A range of activities to build relationships had been introduced including:

- Introduced Parent network for EHE parents to inform of the services and facilities available to children and their families
- Health and immunisation
- Health information newsletters circulated
- Careers information
- KS4 college access
- Library and museum facilities
- Wellbeing information

- Feedback from parents resulted in a rewrite of initial contact letters and reports with a more relational approach
- Feeding families food parcels through the HAF Programme

Considerations and Next Steps

- 4.31 The EHE policy was due for renewal and would be reviewed when there was greater clarity around the Children's Wellbeing and Schools Bill. At the time of the review, the Bill was going through the House of Lords and would bring in provision for a compulsory register of children not in school and stronger Local Authority intervention powers. A Private Members Bill to establish a register of home educated children was also at Committee Stage in the House of Lords.
- 4.32 As well as being mindful of the legislative limitations and limited opportunities for professional oversight, other considerations included appropriate support and provision for free school meal children and SEND children and the impact of school place availability.

Member Observations

- 4.33 Of the families visited during home visits, Members noted that parents were supportive of what the Council provided. The children visited attended lots of clubs, activities and events. One parent used other organisations to access work for her child and supplemented home education with a maths tutor.
- 4.34 Members observed that the education provided at home was extensive and appeared to be a high standard and that the children visited still socialised personally and on line.

Children Missing Education (CME)

Definition - CME are children of compulsory school age who are not registered pupils at a school and are not receiving suitable education otherwise than at a school.

- 4.35 Children Missing Education (CME) are those children not on a school roll. Numbers in Stockton have decreased over the last three years this may be attributed to off roll audits carried out every three weeks by the Locality Team and improved access to timely data by Stockton IMS and the DfE View Your Education Data (VYED).
- 4.36 In the academic year at the time of the review, 115 children had been referred from Stockton schools. To date, 61 have been traced, 32 enquiries had been made from other Local Authorities and 22 of these had been tracked as in a Stockton school.
- 4.37 Children missing education was recorded for absences of three weeks or more; the absence was quite often due to house moves. All referrals are actioned by the Locality Team with information sought from a broad range of agencies; investigations are made within Stockton, nationally and internationally when necessary.
- 4.38 CME are at significant risk of underachievement, poorer health outcomes, harm, exploitation, radicalisation, and becoming NEET (not in education, employment, or training) later in life.

Referrals

4.39 The number of children referred as CME has decreased in recent years:

Period	Referrals
Autumn 2023/24	212
Autum 2024/25	182
Autumn – to date	132

4.40 Internal Factors which could be attributed to the decreased include:

- **Better access to data and uptake on MIS systems** - Improved integration of Management Information Systems (MIS) allows schools and local authorities to track attendance and pupil movements more accurately. Real-time data sharing reduces delays in identifying pupils at risk of becoming missing from education.
- **More timely discussions on pupils absent/missing education** - Regular multi-agency meetings ensure early intervention for pupils with persistent absence. Enhanced communication between schools and local authority teams helps prevent escalation.
- **Training for school colleagues on expectations and responsibilities** - Clear guidance on statutory duties for both schools and Local Authorities. Training sessions improve understanding of safeguarding implications linked to absence and off-rolling.
- **Off-roll audits to identify errors or immature practice** - Systematic reviews of pupil off-roll cases to ensure compliance with regulations. Identification of patterns that may indicate inappropriate practices or gaps in safeguarding.

4.41 External Factors which could be attributed to the decrease included:

- **Introduction of Working Together to Improve Attendance** - National framework promoting consistent attendance strategies across schools. Emphasis on partnership working between education providers and local authorities.
- **Updated Children Missing from Education Guidance** - Strengthened statutory guidance clarifying roles and responsibilities. Increased accountability for timely reporting and follow-up.
- **National data availability** - Access to comparative data enables benchmarking and identification of trends. Supports evidence-based decision-making at local and national levels.
- **CNIS COLLECT data** - Centralised data collection improves monitoring of pupil movements. Facilitates early identification of vulnerable learners.
- **Focus on links to child exploitation and media exposure** - Greater awareness of safeguarding risks associated with missing education. Media coverage drives public and professional attention to the issue.

4.42 Safeguarding information requested included:

Previous Risks:

- Has the child been subject to a Child Protection Plan? (Yes/No)
- Previous involvement with social care (dates and reasons)
- Historical incidents (e.g., neglect, physical harm, emotional harm)

Present Risks:

- Current safeguarding concerns (nature and severity)
- Any ongoing investigations or plans
- Agencies currently involved (social care, police, health)

Risk Management

- 4.43 Assurance reports are submitted to Hartlepool and Stockton Safeguarding Children's Partnership on an annual basis.
- 4.44 Robust liaison took place with other agencies including schools, teams within Children's Services and the wider council including housing and revenues and benefits, external agencies (health, other Local Authorities, Border Force, Police, voluntary agencies) and access to DfE sites such as GIAS and S2S.

Education Other than at School (EOTAS)

Definition - Education other than at school (EOTAS) means the education or special educational provision of children or young people outside of a formal educational setting.

- 4.45 EOTAS is different to Elective Home Education. It is provided for under Section 61 of the Children and Families Act 2014, which gives Local Authorities the power to arrange special educational provision outside of a school if they are satisfied that it would be "inappropriate" for the provision to be made in a school or college setting. If EOTAS is agreed upon, the local authority remains legally responsible for securing and funding the provision. In addition, the Local Authority monitors the provision in the plan, and it is reviewed annually.
- 4.46 In Stockton the number of pupils who strictly meet these criteria over the past few years has remained low and relatively stable.
- 4.47 Children with special educational needs who cannot access any educational setting owing to their needs are educated other than at school. It includes a small minority of children with the most complex needs agreed by SENDMAP based on evidence and monitored by both SEND and the Vulnerable Learners Teams.
- 4.48 At the time of the review, the numbers of EOTAS children were as follows:
- 7 children currently in Stockton who are registered as EOTAS
 - 4 ordered by or as a result of the SEND Tribunal Service
 - 3 agreed by the service via its SENDMAP, decision making panel
 - Short term intervention

Alternative Provision (AP)

Definition - Alternative provision (AP) is education outside school, arranged by local authorities or schools, for pupils who do not attend mainstream school for reasons such as school exclusion, behaviour issues, school refusal, or short- or long-term illness.

- 4.49 Non School Alternative Provision is a new term promoted by the Department of Education. It means any provision that does not meet the criteria or threshold to legally have to register as a school. There are costs when schools and local authorities commission Alternative Provision and

the commissioners of AP must quality assure, review and monitor the provision to ensure it is safe and provides a quality education and outcomes which are appropriate to the pupil. AP provides tailored learning in settings like pupil referral units, specialist schools, or independent providers, ensuring students continue to receive education suited to their needs.

4.50 In Stockton support is provided to pupils through:

- A team focused on supporting pupils in AP including having education plans for pupils who are accessing NSAP
- Half termly AP networks for schools and agencies and AP providers
- An AP framework of providers and oversight of AP across the Borough
- Quality assurance of AP providers

Non School Alternative Provision (NSAP)

4.51 In Stockton the numbers of pupils accessing NSAP commissioned by schools and the Local Authority has risen. The reasons for the rise in the use of NSAP include managing challenging behaviour and a continued rise in suspensions and exclusions. This included pupils from vulnerable groups.

4.52 At the time of the review there were 34 pupils accessing NSAP since September commissioned by schools. There were 43 pupils in the previous academic year. There has also been an increase in queries regarding AP for primary aged pupils over the past year.

4.53 There are many NSAP's that schools and the Local Authority can access to support Stockton children. They are able to support pupils from KS1 to post 16. They can provide this in different ways including:

- Face to face education in a venue
- Tuition in different venues that are appropriate to the pupil including their home on occasion
- Online education both live and recorded
- Therapeutic support for neurodiverse pupils
- Outdoor and physical activities

Data Snapshot Autumn 2025

- There were 20 requests for AP advice from schools (60% primary and 40% secondary).
- Of the notifications we received in the Autumn term from schools:
 - There were more requests for advice about AP for boys than girls (75% boys and 25% girls)
 - There were 43 pupils who accessed AP from Stockton framework during the Autumn term (86% secondary and 14% primary) and 4 of them returned to school
 - 14 children who have been permanently excluded this academic year are accessing Local Authority organised AP

Stockton on Tees AP Framework

4.54 In 2021 the First Framework was published with a number of providers on. This was used as a school directory for schools to commission providers from an agreed framework. This Framework lasted for two years and had 29 providers on the framework at the start.

- 4.55 In 2023 - A new framework was agreed. It is open for 10 years and has the ability to add new providers if they meet the criteria at regular intervals. Between 2023 and 2025 there were 12 providers on the framework. Following successful applications in summer 2025 there are now 29 providers on the framework.
- 4.56 To be approved on the framework, providers must meet a set of criteria and go through a moderation process completed by a number of Local Authority Officers. Once approved, all providers will have an annual quality assurance visit. Providers may request to leave the framework or Stockton on Tees Council can end the agreement if they feel the provider no longer meets the criteria set.
- 4.57 Pathway Development Centres are Local Authority commissioned AP. They provide short term provision for children who have been permanently excluded in Key Stages 1-4 and include:
- 12-week placements in either a mainstream primary or secondary school or an SEMH special school
 - 6 places in total in mainstream primary school
 - 10 places in secondary school (from January 2026)
 - 80 place Pupil Referral Unit – Bishopton PRU
 - 10 places in specialist provision for children with ongoing EHC Needs Assessment

Quality Assurance of AP including Non School AP

- 4.58 An annual visit takes place to quality assure alternative provision. Local Authority officers who also have qualified teacher status complete the quality assurance of provisions. Quality Assurance (QA) involves a visit either face to face or online (if an online provider). Providers must also provide documents and a range of up-to-date policies, e.g. safeguarding certificates, insurance, policies, first aid etc. Until recently the QA visit focused on 64 different measures. However, following the publication of the new DFE voluntary standards guidance, the QA document was reviewed and is now organised into the four recommended areas for assurance: Health and Safety, Quality of education, Safeguarding and welfare and Admissions, Guidance and Support.
- 4.59 Whilst some providers have been given further advice to add even further improvements to their provision, only one provider at the time of the review (not on the framework) had not achieved a satisfactory quality assurance judgement within the last year.

AP Networks

- 4.60 Networks happen each half term and attendees include schools, Local Authority Officers, AP providers, parents, health and third sector representatives. Networks provide national updates and legislation, share good practice and facilitate co-production of guidance for stakeholders in Stockton. A recent network marketplace event saw 14 AP providers attend for a day to meet with schools and talk about what they can offer schools. Feedback was positive from the event from both AP providers and school staff and Local Authority officers. Feedback from the event praised:
- Face-to-face conversations and networking
 - Variety and breadth of providers in one space
 - High-quality information and clear overviews
 - Professional, well-organised setup
 - Bespoke offers tailored to learner needs

5.0 Conclusion and Recommendations

5.1 Overall, the review highlights the wide range of reasons a child may not be accessing full time education at school and demonstrates that, while Stockton has strong systems in place for quality assurance, multi-agency working and engagement with families, there are pressures relating to emotional and mental health needs and rising demand linked to SEND. The Committee was also mindful that home visits to electively educated children were limited by legislation to the monitoring of the child's education. Increasing pressures continue to present risks to educational continuity and safeguarding.

5.2 The Committee's recommendations therefore focus on strengthening staffing capacity, consistency and partnership working to reduce time out of education and improve outcomes for vulnerable children. Alongside this, the Committee emphasises the importance of preparedness for anticipated legislative changes, improved information sharing to mitigate safeguarding risks, and early intervention to address emotional-based school avoidance. Collectively, these recommendations aim to ensure that all children and young people are supported to access suitable education safely and in a way that meets their individual needs.

5.3 The Committee recommends:

Home and Hospital (H&H)

- 1) That staffing capacity is reviewed to ensure provision remains, safe, responsive and broad enough in curriculum and that the staffing model adopted provides flexible and responsive provision in the most cost-effective way.
- 2) That opportunities are explored and expanded for peer social interaction.
- 3) That opportunities for partnership working to enhance both curriculum and enrichment are explored.
- 4) The re-integration pathways are explored.

Electively Home Educated (EHE)

- 5) That a more relational approach be strengthened with EHE families with identification of dedicated staffing resource to promote this.
- 6) That clearer information is provided to parents about:
 - a. Examination entry processes
 - b. Associated costs
 - c. Available support services
- 7) That work continues to prepare for legislative changes on compulsory registers and strengthened Local Authority powers.
- 8) That the range of support shared via EHE networks is broadened.
- 9) That opportunities for partnership working to strengthen intervention and support are explored.
- 10) That the capacity for schools to provide early intervention and support in response to emotional and mental health needs is reviewed.

- 11) That best practice identified at the Attendance Networks on re-integrating vulnerable learners into school is widely and regularly shared.
- 12) That the support available to children and their families experiencing Emotional Based School Avoidance (EBSA) is widely and regularly shared.
- 13) That the Team Around the School be fully appraised of the needs of previously Electively Home Educated pupils who are returning to mainstream education to support and nurture them back into school.

Children Missing from Education (CME)

- 14) That off roll audits are maintained and expanded to prevent inappropriate removal from school rolls.
- 15) That opportunities to work in partnership with the Voluntary and Community Sector are fully utilised to gather intelligence.
- 16) That consideration is given to how the social care reforms can be used to reduce the number of children missing from education.

Educated Other than at School (EOTAS)

- 17) That multi-agency working arrangements for children receiving EOTAS be strengthened, to ensure earlier, coordinated planning for children with complex needs, with education, health and social care partners jointly developing, owning and reviewing EOTAS packages to improve timeliness, quality and outcomes.

Alternative Provision (AP)

- 18) That the new QA framework is implemented fully with follow up action plans for providers needing improvement.
- 19) That AP networks continue to be expanded to promote consistent practice.
- 20) That action is taken to ensure that all AP placements have a clear education plan, regularly reviewed, with reintegration as a priority where appropriate.

Admissions

- 21) That processes and capacity for pupils with EHCPs who move into the Borough are reviewed to minimise time out of education.

Safeguarding

- 22) That caseworker training in professional curiosity is enhanced to seek to ensure that risks are spotted during educational monitoring visits.
- 23) That multi-agency information sharing for EHE and CME cohorts is strengthened, to compensate for restrictions on direct safeguarding checks.
- 24) That CME processes continue to involve agencies such as Border Force, Police, Health and Housing to track and protect high risk pupils.

EHE Overview of process

STEP	ACTION	SAFEGUARDING FOCUS
Notification	School submits removal form	Identifies professionals involved.
Round-robin	Email to Children's Services & Health	Flags current/previous concerns
12-week visit	Offer home visit, record child's views	Observe environment, listen to child
MIS check	Review professional involvement	Ensure holistic context
Escalation	Refer to CHUB if concerns arise	Multi-agency safeguarding response
CME visit	Verify education provision	Address risk of missing education
12-month visit	Confirm continued education	Monitor long-term well-being

Steps

What we do	Why
Require a notification form from schools requesting information on professionals currently involved	This step is crucial for safeguarding because it helps identify whether the child is already known to services such as social care, health, or early help. Knowing which professionals are involved ensures continuity of care and allows for immediate escalation if there are existing safeguarding concerns. It also helps prevent gaps in support when a child is removed from roll.
On receipt of the notification of removal from roll IVL send a "round robin" email for information on current or previous involvement to children service managers and 0-19 health	This communication acts as an early safeguarding alert. By contacting children's services and health teams, IVL ensures that any historical or current concerns are flagged promptly. This collaborative approach reduces the risk of a child becoming invisible to professionals and enables timely intervention if safeguarding risks are identified.
An information pack is sent to the parent	This includes, information for parents, checklist, signpost to resources other parents have found useful, elective home education policy, and information on when to expect the first monitoring visit.
A contact is made at 12 weeks from removal from roll	a home visit is offered, and at this visit the views of the child are sought and recorded Seeking and recording the child's voice is a key safeguarding principle. It ensures that the child's perspective on their education and well-being is heard and documented. The home visit provides an opportunity to observe the child's living environment, which may reveal indicators of neglect or other risks that would not be apparent through remote checks.
A contact is made at 12 weeks from removal from roll.	a home visit is offered, and at this visit the views of the child are sought and recorded, Seeking and recording the child's voice is a key safeguarding principle. It ensures that the child's perspective on their education and well-being is heard and documented. A home visit can provide an opportunity to observe the child's learning environment.
*A further visit is made at 12 months to ensure the child continues to be in receipt of education, and the child's views are gathered.	This long-term monitoring helps safeguard against chronic educational neglect or failure. By revisiting after 12 months, the caseworker can identify whether the child's circumstances have deteriorated or improved and whether additional support or safeguarding action is required
When information becomes available that a child may be missing education. A home visit is scheduled and can be made under the children missing education statutory guidance to seek evidence an education is in fact taking place.	Missing education is itself a safeguarding risk. Home visits under CME guidance provide an opportunity to verify education and assess whether the child's circumstances suggest neglect, exploitation, or other vulnerabilities.

<p>The home visits made by the caseworkers are solely within the remit of monitoring the child's education as legislation dictates</p>	<p>While the primary purpose is educational monitoring, caseworkers should remain alert to safeguarding indicators during visits. Professional curiosity is vital—if anything observed raises concern (e.g., unsafe home conditions, signs of neglect), this should trigger safeguarding procedures even though the visit is not a formal safeguarding check.</p>
<p>Prior to each visit the Caseworker checks the MIS system to establish if any other children's services professionals are involved</p>	<p>Checking the MIS system ensures that caseworkers are aware of any concurrent safeguarding interventions or concerns. This prevents duplication and ensures that any visit is informed by the child's wider context, which is essential for a holistic safeguarding approach.</p>

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Glossary of Terms

AP	<i>Alternative Provision:</i> Education arranged for pupils who cannot attend mainstream school for reasons such as exclusion, illness, or other needs.
CAMHS	<i>Child and Adolescent Mental Health Services:</i> NHS services that support the mental health and emotional wellbeing of children and young people.
CNIS	<i>Children Not in School:</i> A local authority term for children of compulsory school age who are not registered at a school and are not receiving suitable education elsewhere.
CME	<i>Children Missing Education:</i> Children who are not on a school roll and whose educational provision is unknown.
DfE	<i>Department for Education:</i> The UK government department responsible for education, children’s services, and skills.
EBSA	<i>Emotionally Based School Avoidance:</i> When a child struggles to attend school due to emotional or mental health difficulties, such as anxiety.
EHC	<i>Education, Health and Care:</i> Refers to the integrated support framework covering education, health and social care needs.
EHCP	<i>Education, Health and Care Plan:</i> A statutory plan setting out a child or young person’s special educational needs and the support required.
EHE	<i>Elective Home Education:</i> When parents choose to educate their child at home rather than sending them to school.
EOTAS	<i>Education Otherwise Than at School:</i> Educational provision delivered outside of a traditional school setting, often for pupils with complex needs.
H&H	<i>Hospital and Home:</i> Education services provided to children who cannot attend school due to medical reasons.
HAF	<i>Holiday are Fun:</i> A government-funded programme providing activities and meals for children during school holidays.
MIS	<i>Management Information System:</i> Software used to manage and analyse pupil, attendance, and school data.

NEET	<i>Not in Education, Employment or Training:</i> Young people who are not engaged in formal education, work, or training.
NSAP	<i>Non-School Alternative Provision:</i> Educational provision delivered outside of a mainstream or special school setting for children and young people who require alternative arrangements.
PPE	<i>Personal Protective Equipment:</i> Equipment such as gloves or masks used to reduce health and safety risks.
PRU	<i>Pupil Referral Unit:</i> A type of Alternative Provision for pupils who are excluded or unable to attend mainstream school.
QA	<i>Quality Assurance:</i> Processes used to ensure services, decisions, and provision meet required standards.
SEND	<i>Special Educational Needs and Disabilities:</i> Support framework for children and young people who have additional learning needs or disabilities.

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