



Hinckley

ACADEMY

Children Missing Education (CME) Policy

Date of last review:	July 2021
Reviewed by:	Azizah Pathan, Vice Principal
Approved by Governors on:	October 2021
Frequency of review:	Every 2 years
Date of next review:	July 2023

Children Missing Education (CME)

All children, regardless of their circumstances, are entitled to a full-time education which is suitable to their age, ability, aptitude and any special educational needs they may have. Local authorities have a duty to establish, as far as it is possible to do so, the identity of children of compulsory school age who are missing education in their area.

All staff will be alert to the signs of abuse and neglect including children who are missing from education, in line with our Safeguarding & Child Protection Policy and Keeping Children Safe in Education.

Children missing education are at risk of not achieving their full potential. These children also have the potential to be exposed to higher degrees of risk. These risks could include engagement in anti-social or criminal behaviour, social disengagement and exploitation. Whenever a child is missing from education, the possibility of trafficking, sexual, criminal or commercial exploitation must be assessed. A child going missing from education is also a potential indicator of abuse or neglect. It is vital that all practitioners work together to identify and reengage children missing from education as quickly as possible.

Definition

Children missing education refers to all children of compulsory school age (5-16yrs):

- Who are not on a school roll or receiving suitable education otherwise than at school (e.g. privately, electively home educated or in an alternative provision);
- Registered at a Leicestershire school but their family has moved without providing a forward address or details of a new school;
- Who are registered at a school but for a substantial period of time (usually agreed as ten days or more), have not attended school or alternative education without provision of reasonable explanation).

School Actions

The Children Missing Education flowchart (**Appendix A**), Planned Move Form (**Appendix B**), Remove from Roll Checklist (**Appendix C**) and LA Missing Children Form (**Appendix D**) will be used as part of the following process:-

- Daily attendance monitored by Attendance Officer after morning registration
- First day absence procedures followed for all students, text message, phone call, home visit (see attendance policy and CME flowchart).
- Students who are Looked After, on a Child Protection plan or have other identified vulnerabilities, such as police notifications of Domestic Abuse with current Early Help services involvement, the social worker/key worker will be informed of absence and any concerns, after period 1 register is taken. If there is any doubt as to whether a child may be at risk of harm, the Designated Safeguarding Lead will be consulted.

- After 5 days the Children Missing Education Team (CME) will be informed if no contact has been made with the family, having followed the normal absence process (text messages, phone calls, home visits).
- After a maximum of 10 days, the Children Missing Education Form (**Appendix D**) will be completed and further advice sought.
- After 20 days, the Remove From Roll Checklist (**Appendix C**) will be completed and advice will be sought from the CME Team. The child can only be deleted from the School's admission register, with the signature of the Head of School on the completed Remove From Roll checklist (**Appendix C**).

Planned Moves out of Area/Country

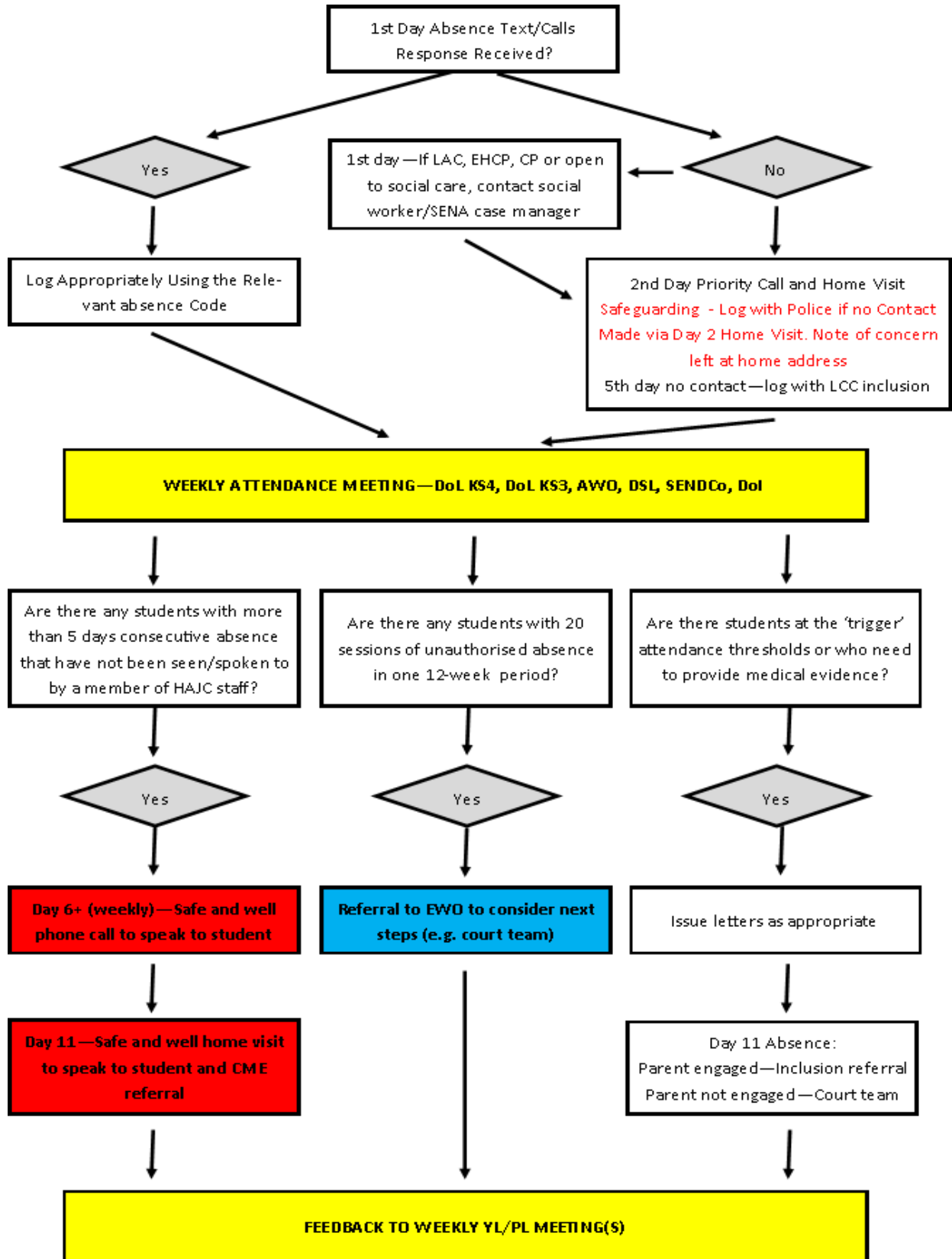
If parents inform the school that they are intending to move out of the area/country then the Planned Move form will be completed at the earliest opportunity and the CME team informed (see contact details below). The Off-Roll Checklist (**appendix C**) will ensure that either a Local Authority or a specific school has taken over responsibility before removing from roll.

Children Missing or Absent from Home or Care

It is noted that the statutory guidance on Children Missing from Home or Care states that "looked after children missing from their placements are particularly vulnerable". It also highlights the importance of Local Authorities having risk management plans, the key driver of placement instability, and importance of Safe and Well Checks and Return Home Interviews. The School will work in partnership with the relevant agencies to support all children, including Children who are Looked After (CLA).

Children who are not where they are expected to be, such as at home or at school, are considered absent and this also places them at increased risk of harm. We will follow our attendance policy alongside the CME policy to ensure safeguarding of these children.

Appendix A - Children Missing from Education – Flowchart



Appendix B – Planned Move Form 2021-22

PLANNED MOVE FORM

I am writing to explain that we must ask for the below to be removed from school roll for the date below due to the following reason.

Name of child(ren): _____

Last day at Hinckley Academy and John Cleveland Sixth Form Centre: _____

Reason for removing from Hinckley Academy and John Cleveland Sixth Form Centre:

I understand that if my circumstances change after the above date, I must inform the Local Authority and Hinckley Academy and John Cleveland Sixth Form Centre so my child(ren) can be allocated a new school place.

I understand that it is the parent's responsibility to ensure that my children attend school every day. I understand that Hinckley Academy and John Cleveland Sixth Form Centre is obliged to pass my details to the Local Authority to ensure that school attendance and the safety and welfare of my child(ren) is maintained.

Parent/Carer name: _____

Signature: _____

Relationship: _____

Parental responsibility Yes/No

Contact numbers: _____

Email: _____

New home address: _____

New school arrangements: _____

If you are leaving the UK,

Date that you are leaving the UK: _____ Flight details: _____

The reason why you are leaving: _____

Who is the student travelling with? _____

Appendix D CME Referral form

Inclusion Service Referral Form

0116 305 2071

inclusionpupilsupport@leics.gov.uk – Please send this form using secure emails (i.e. [EGRESS/AnyComms](#))

Please tick the reason for your contact:

- GENERAL ENQUIRY - COMPLETE FOR ALL REFERRALS ALONG WITH RISK ASSESSMENT
- POST 16 EDUCATION EMPLOYMENT OR TRAINING (EET) (No additional sections require completing)
- CHILD MISSING EDUCATION (CME) – ALSO COMPLETE SECTION 1
- ELECTIVE HOME EDUCATION (EHE) – ALSO COMPLETE SECTION 2
- CHILD WITH MEDICAL NEEDS (CMN) – ALSO COMPLETE SECTION 3

Referral Details:			
Has consent been gained for this referral from the person with parental responsibility?			YES/NO
If yes, please provide a copy of the consent you have gained			
If no, anonymous advice will be given only, please only provide the child's initials leaving other personal details blank			
Name and Organisation of Referrer:			
Contact number and email:			
Child/Young Person's Personal Information:			
First name(s):		Last name:	DoB:
Setting Name and contact number:	Year Group:	Gender:	Ethnicity and First Language:
If known Capita Pupil ID:		Address:	
If known Mosaic ID		Post code:	
		Tel no:	
		Email:	
Family Information:			
Title / Name of Parent(s)/Carer(s)	Relationship to child?	Address and contact number (if different to pupil)	Please tick who has parental responsibility
Details of Siblings:			
Name	Date of Birth	Setting	Year Group

Social Care Involvement:				
Is the child known to social care?		Name of Social Worker:		
<input type="checkbox"/> LAC/Adoption		<input type="checkbox"/> Child Protection		<input type="checkbox"/> Child In Need
SEND Support				
Does the child have access to SEN support plan?		YES/NO		
Is the child being assessed for an EHCP?		YES/NO		
Does the child have an EHCP?		YES/NO		
If yes please provide the name of the SEN Officer/Case Worker:				
Attendance				
Last date attended:				
Number of days absent in the current academic year:				
Exclusions				
Number of Fixed Terms in the current academic year:				
Contacts of Other Agencies Involved with Child:				
Name	Agency	Contact number	Email	Involvement/Referral date
	Children and Family Wellbeing			
	CAMHS			
	School nurse			
	GP			
	Paediatrician			
	Autism Outreach			
	Ed. Psychologist			
	Specialist Teaching			
	Youth Offending			
	Diana Nurse			
	Voluntary org:			
	Other:			
Has the child been discussed at an Inclusion Forum?				
If yes please provide dates:				
How do the parent/carer preferred to be contacted?				
Confirmation of Referral				
Referrers Signature:			Date of Referral:	
Please tick this box to confirm that the senior leadership within your setting are aware of this referral <input type="checkbox"/>				

Risk Assessment: <i>Please complete the table below. Indicate as appropriate and mark whether the indicators are current, historic or unknown (in relation to the child and/or family)</i>			
Vulnerabilities, Warning Signs & Risk Indicators (for the child and/or family)	Yes, No or Unkno wn (Y/N/U) ?	Current , Historic or Unkno wn (C/H/U?)	Child, Family or Both (C/F/B?)
Behaviours			
Goes missing from School/Setting, Home or Care?			
Involvement in criminal activities (<i>Possible offending patterns in the family</i>)			
Whereabouts unknown (or unclear) – whether day or night			
Exclusion and/or unexplained absences from school/setting (<i>or not engaged in education, employment or training</i>)			
Displaying harmful sexualised behaviours			
Gang member or association			
Aggressive behaviour towards others (<i>sometimes leading to fixed term exclusions</i>)			
Social and/or learning difficulties			
Isolated from peers / social networks (not mixing with their usual friends)			
Low self-esteem / Self-harm requiring medical treatment / Eating disorders / Emotional Health issues (including anxiety related issues, suicidal ideations etc)			
History of mental health difficulties			
Adverse Childhood Experiences			
Bereavement or loss			
Breakdown of living and/or family relationships (sometimes leading to staying out overnight)			
Domestic abuse / violence			
History of being bullied or being a bully			
Sexual, physical, emotional abuse/neglect			
At risk of Child Sexual Exploitation (CSE) (known or suspected)			
Migrant / Refugee / Asylum seeker			
Evidence of poverty and/or deprivation			
Drug / alcohol and/or substance misuse			
Young Carer			

<p>Professional Assessment: Please ensure you take time to complete all of the sections below</p>	
<p><i>(The previously completed Risk Assessment: Vulnerabilities, Warning Signs & Risk Indicators should help inform your professional judgement when completing this section of the referral form)</i></p>	
<p>What are you <u>worried</u> about?</p> <p><i>Include risk factors, whether the pupil is suffering or likely to suffer significant harm</i></p> <ul style="list-style-type: none"> • Harm – actual hurt, injury or abuse (likely) caused by adults in the past or present • Risk taking behaviour by the child / young person • Any complicating factors 	
<p>What do you think is working <u>well</u>?</p> <p><i>Include protective factors:</i></p> <ul style="list-style-type: none"> • People, situations & actions that contribute to the wellbeing of the child • Actions already being taken to make sure the child is safe <p><i>(These could be at school/setting or within the home)</i></p>	
<p>Professional Judgment</p> <p><i>Please use your professional judgement to reflect upon the indicators you have ticked and consider the health, welfare and safety of the child / young person in question and complete the rating scale</i></p>	<p><u>Rating scale</u></p> <p>No concerns Very concerned</p> <p>1 10</p> <hr style="width: 100%;"/> <p style="text-align: center;">Please indicate your current concerns using the scale above</p>
<p>What do you think needs to happen <u>next</u> (outcomes)?</p> <p><i>This is the initial plan and should include what outcomes you are hoping to achieve and by when (short, medium and long term)</i></p>	

SECTION 1 – CME REFERRAL ONLY
Please refer to page 8 of the Children Missing Education Statutory Guidance 2016
 CLICK LINK:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/550416/Children_Missing_Education_-_statutory_guidance.pdf

Actions taken by the referrer:	Outcome
Has the whereabouts of the child been checked with parents, staff, siblings, friends and other pupils?	
Has contact been made with any known extended family and/or emergency contact numbers?	
Has a visit to the home/last known address been completed? <i>(Are their visible signs that the property is occupied?)</i>	

SECTION 2: EHE REFERRAL ONLY
Please provide a copy of the DfE Guidance to Parents/Carers
 CLICK LINK:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/791528/EHE_guidance_for_parentsafterconsultationv2.2.pdf

What reason has the family given for withdrawing the child from school/setting to pursue EHE?	<input type="checkbox"/> Cultural life choice <input type="checkbox"/> Pending alternative educational provision <input type="checkbox"/> Parent felt educational provision could not meet need <input type="checkbox"/> Breakdown in relationship between school/setting and parent <input type="checkbox"/> Child with medical needs/SEND needs <input type="checkbox"/> Mental Health/Social Anxiety <input type="checkbox"/> Attendance difficulties Other please specify:
Will Elective Home Education be a short-term or permanent option?	Permanent
Are there any concerns regarding withdrawing the child from the school/setting or achieving their progress targets? If so, please provide details	Hinckley Academy do not recommend home education as students who do not have professional tuition will struggle to reach their full potential.

Key Stage Results:
Please specify key stage levels, which may include teacher assessed grades / predicted grades as appropriate

	KS1	KS2	KS3	KS4
English				
Maths				
Science				

GCSE Options (if appropriate) or Vocational Options:
Please provide details of examination boards, coursework etc.

Subject	Board	Qualification	Predicted Grade	Achieved Grade	Coursework completed?

Please list any planned statutory tests and/or examinations providing dates & locations

SECTION 3 – CMN REFERRAL ONLY
Please refer to Supporting pupils with Medical Conditions 2017 & SEND Code of Practice
CLICK LINK: <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>
CLICK LINK: <https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

Does the child have a medical diagnosis YES/NO

Please give details of any medical conditions which the school/setting is already aware of and details of any medication / treatment

Confirmed Medical Diagnosis	Medication / Treatment or Intervention

Medical Professional Advice Given

How the illness affects the child's learning – please state:

What interventions have the school/setting put in place to meet the child's medical needs and to support them to remain in school:

If the child is not attending school/setting has medical advice been provided on strategies that could help the child attendance improve – please state:

Where the child is not attending:
Please provide details of the education that is being provided?

What is in place to ensure that the child can maintain contact with their peers?

Key Stage Results:

Please specify key stage levels, which may include teacher assessed grades / predicted grades as appropriate

	KS1	KS2	KS3	KS4
English				
Maths				
Science				

GCSE Options (if appropriate) or Vocational Options:

Please provide details of examination boards, coursework etc.

Subject	Board	Qualification	Predicted Grade	Achieved Grade	Coursework completed?

Please list any planned statutory tests and/or examinations providing dates & locations

Essential Documentation Checklist:

If the following information is not provided the processing of the referral may be delayed

Please Tick

Current Medical Consultant Letter

CAMHS report

Educational Psychologist Report

SEN/Pastoral Support Plan

In Patient Discharge Information

Supporting Documentation from

Official Use Only:

Has consent been gained for this referral from the person with parental responsibility? YES/NO

Date referral acknowledged at point of processing:

Actions:

- Email Response/Call to referrer
- Systems Checked and updated where needed

Date

Date

Date

<ul style="list-style-type: none"> • Gain Family and Child Voice • Inclusion Pathway Management Oversight 	Yes/No
Next Steps:	
Pass to East <input type="checkbox"/> West <input type="checkbox"/> Pathway Manager <input type="checkbox"/>	
Pathway Manager Oversight	

CME Information and Support Co-ordinator
 Stephanie Carter
 Inclusion Team
 Leicestershire County Council
 0116 305 2071
inclusionpupilsupport@leics.gov.uk