



Children in Care in Northern Ireland 2017 - 18



Statistical Bulletin



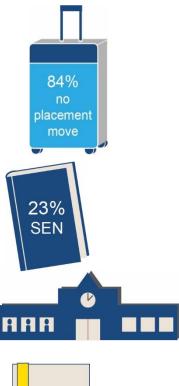
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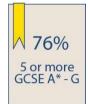
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Main uses of document	The main uses of these data are to monitor the delivery of social care services to children, to help assess Trust performance, corporate monitoring, to inform and monitor related policy, and to respond to parliamentary/assembly questions. The bulletin is also used by academics/ researchers, the voluntary sector and those with an interest in children in care.
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Key Findings

This bulletin presents findings from annual information returns of children who have been in care continuously for twelve months or longer. It details analyses relating to the child's placement and health, schooling and educational attainment. It also covers cautions and convictions and current activity for those that finished compulsory schooling.

- → At 30 September 2018, 2,421 children and young people had been in care continuously for 12 months or longer;
- → Of these, one sixth (16%) had experienced a placement change during the previous 12 months, which is the lowest in recent years;
- → Having a statement of Special Educational Needs (SEN) continues to be more prevalent among the children in care of school age (23%) compared with the general school population (5%);
- → Some 10% of school aged children and young people had full attendance through the 2017/18 school year, while 8% missed 25 or more school days;
- → Over three quarters (76%) of looked after children attained five or more GCSE at grades A* to G; this compared with 99% of the general school population. The equivalent figures for those achieving GCSE at grades A* to C were 54% and 86% respectively.









www.health-ni.gov.uk/topics/dohstatistics-and-research Statistics and research for the **Department of Health** is provided by the Information and Analysis Directorate (IAD). IAD is responsible for compiling, processing, analysing, interpreting and disseminating a wide range of statistics covering health and social care.

The statisticians within IAD are out posted from the Northern Ireland Statistics & Research Agency (NISRA) and the statistics are produced in accordance with the principles and protocols set out in the <u>Code of Practice for Official Statistics</u>.

IAD comprises four statistical sections: Hospital Information, Community Information, Public Health Information & Research and Project Support Analysis.

This publication is produced by Community Information Branch.

Our Vision and Values

- Provide up-to-date, quality information on children and adult social services and community health;
- to disseminate findings widely with a view to stimulating debate, promoting effective decision-making and improvement in service provision; and
- be an expert voice on social care information.

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About Community Information Branch

The purpose of Community Information Branch (CIB) is to promote effective decision making in children and adult social services by providing quality information and analysis.

We collect, analyse, and publish a wide range of community information that is used to help monitor the delivery of personal social services policy. Information collected by CIB is used to assess HSC Trust performance, for corporate monitoring, policy evaluation, and to respond to parliamentary/assembly questions.

Information is widely disseminated through a number of regular key statistical publications and ad hoc reports, details of which are available online.

Content

1.	Introduction	
1.1. 1.2.	The OC2 Community Information Return Children in care 2017-18	
1.2.	Trust Profile	
1.4.	Multiple Deprivation Measure and Rurality.	
2.	The Children in Care	
2.1.	Age and Gender	
2.2.	Religion and Ethnicity	
2.3.	Disability	
2.4.	Dependants	
3.	Health	
3.1.	Development & Health Assessments	
3.2. 3.3.	Immunisations Dental Checks	
4.	Placement	
4.1.	Placement Changes	
4.2.	Statutory reviews	
5.	Pre-School Provision	
6.	School Age Children	24
6.1.	Compulsory School Age	24
6.2.	Personal Educational Plans	
6.3.	Children with statements of Special Educational Needs (SEN)	
6.4. 6.5.	Education Other Than at School (EOTAS) Attendance and absenteeism	
6.6.	Suspensions	
6.7.	School changes	
7.	Educational Attainment	33
7.1.	Children eligible to sit exams	
7.2.	Key Stage 1 Level of Progression – Level 2 or above	
7.3.	Key Stage 3 Level of Progression – Level 5 or above	
7.4.	GCSEs	
8.	Cautions / Convictions	
8.1. 8.2.	Children Cautioned or Convicted Substance Abuse	
9.	Children who finished compulsory schooling in 2017/18	
9.1.	School changes	
9.2.	Gaps in Mainstream Education	
9.3.	Current Activity	
Appendix	A – Technical Notes	43
Appendix	B – Coverage of OC2 2017-18	48
Appendix	C – Placement definitions	49
Appendix	D – Tables	50
Appendix	E – OC2 Survey form 2017/18	51

CHILDREN IN CARE IN NORTHERN RELAND 2017–18

1. Introduction

<u>The Children (Northern Ireland) Order 1995</u> (the Children Order) is the principal statute governing the care, upbringing and protection of children in Northern Ireland. It affects all those who work and care for children, whether parents, paid carers or volunteers. The Children Order emphasises the unique advantages to a child being brought up within his or her own family. In practice, this means that the Order sees families as a major way of supporting and helping children. Health and Social Care Trusts have the power and in some circumstances the duty, under the Children Order, to help children by providing services to their families.

A child can be referred to social services for a variety of reasons. When a child is referred, social services undertake an initial assessment to determine if that child is a 'child in need' as defined by the Children Order. If a child is considered to be a child in need, services should be offered to assist the child's parents/carers to meet that identified need. Should there be concerns that a child may be suffering or at risk of suffering 'significant harm' Social Services will conduct an investigation under Article 66 of the Children Order and respond appropriately. A Child Protection Case Conference may be convened and the child's name included on the Child Protection Register and a Child Protection Plan drawn up to safeguard the child. If there are significant concerns that indicate authoritative intervention is required Social Services may make application to the Court for a Legal Order to enable them to afford an appropriate level of safeguarding to the child. This may include removing a child from its family and into the care of the HSC Trust.

Children are taken into care for a variety of reasons, the most common being to protect the child from abuse or neglect. In other cases their parents could be absent or may be unable to cope due to disability or illness.

This publication provides valuable information in regards to outcomes for in care children and assists the development of the Looked After Children (LAC) Strategy, the Programme for Government / NICS Outcomes Delivery Plan¹ as well as the Health and Social Care Commissioning Plan Direction (CPD)². Within this publication, performance against CPD targets and indicators will be discussed in detail.

1.1. The OC2 Community Information Return

This publication presents the latest figures on children and young people in care in Northern Ireland. The OC2 community information return is specifically designed to collect information on children while they are in care, expressly for those who have been in care continuously for 12 months or longer. Together with two additional returns, OC1, which collects information on educational attainment of care leavers aged 16 to 18, and OC3, which covers the circumstances of care leavers at the time of their 19th birthday³, they provide a comprehensive series of data on children and young people in care in Northern Ireland.

The OC2 returns, first published in 2004, collects information relating to the educational qualifications⁴, health and other key areas of children in care continuously for 12 months or more at 30 September each year. Comparisons are included where possible with the general Northern Ireland population and with looked after children in other UK countries. These comparisons should however be treated with caution as they relate at times to very different cohorts of children or slightly different time periods.

¹ <u>https://www.executiveoffice-ni.gov.uk/publications/outcomes-delivery-plan-201819</u>

² https://www.health-ni.gov.uk/publications/ministerial-priorities

³ Please see Appendix A: Technical Notes for further details on the OC publications

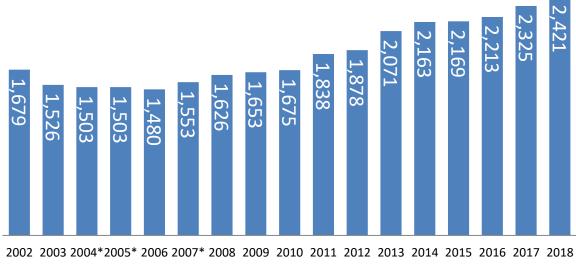
⁴ From 2015/16, the majority of the educational information has been received from Department of Education NI

1.2. Children in care 2017-18

At 30 September 2018, 2,421 children and young people who were in care in Northern Ireland had been continuously in care for more than a year⁵. Figure 1.1 outlines how the number of children in care for at least 12 months has risen year on year since 2006. The number of children in care in 2018 was 4% higher than in the previous year, and represented a 64% increase from 2006 (1,480).

The rise in numbers of looked after children – as well as referrals to children's services and being registered for child protection in Northern Ireland, is similar to the trend across the UK⁶. The increase may be explained by a number of factors including an increased level of awareness of child protection issues.

Figure 1.1 Number of children in care continuously for 12 months or longer at 30 September (2002 to 2018)



^{*}Number estimated for these years

The 2,421 children and young people that had been in care continuously for at least 12 months represented a rate of 55 children per 10,000 population aged under 18⁷; a somewhat lower proportion to that in England, where 64 children per 10,000 child population had been in care for 12 months or more at 31 March 2018⁸.

The rate of looked after children in 2018 was slightly higher than that in 2017 (53 children per 10,000 population aged under 18). Of recent years, the lowest rate occurred in 2006 when 34 children per 10,000 population had been in care for 12 months or longer.

⁵ This figure may differ slightly from other sources due to categorisation and exclusions.

⁶ Links to other UK publications can be found in the technical annex

⁷2018 Mid-Year Population Estimates, NISRA 2019

⁸ Source: 'Children Looked after in England (including adoption and care leavers), year ending 31 March 2018', Department for Education (DfE)

Trust Profile 1.3.

Table 1.1 sets out the number of children in care for 12 months or longer at 30 September 2018 by Health and Social Care (HSC) Trusts. Overall the Belfast HSC Trust had the largest proportion of these children and young people (25%).

	Number of children in care	
Belfast HSC Trust	595	25%
Northern HSC Trust	512	21%
South Eastern HSC Trust	371	15%
Southern HSC Trust	426	18%
Western HSC Trust	517	21%
Northern Ireland	2,421	100%

Table 1.1 Number	of children and	young people in	care continuously	for 12 months	s or longer at 30
Septemb	er 2018		-		

Figure 1.2 sets out the trend figures of looked after children for 12 months or longer over the last five years. It shows that between 2013/14 to 2017/18, the Western HSC Trust had a gradual year-on-year increase amounting to 25%. The Southern HSC Trust had a 24% increase which was mainly caused by a large increase during 2017/18. The Northern HSC Trust was the only Trust area that saw a reduction in numbers (-2%). The variance in these figures will to some extent relate to the different population structures and geographies within the individual Trust.

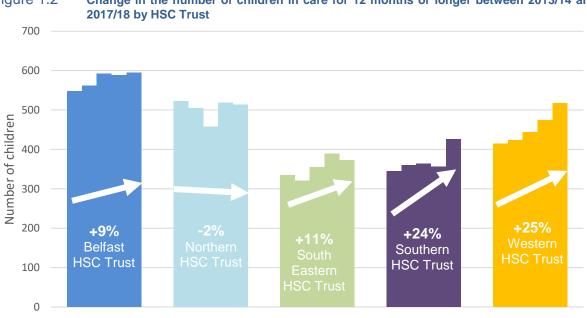


Figure 1.2 Change in the number of children in care for 12 months or longer between 2013/14 and

2013/14 - 2017/18

1.4. Multiple Deprivation Measure and Rurality

The home location of the looked after child prior to entering care was linked to the Northern Ireland Multiple Deprivation Measure 2017⁹ (MDM) and the Urban-Rural Classification 2015¹⁰.

For the children where geographical information was available¹¹ in 2018, 76% were living in a predominantly urban area before entering care, with 18% originating from rural areas and 6% from mixed urban/rural areas. In comparison, it is estimated that 58% of the Northern Ireland population were living in predominantly urban areas, 33% in rural areas and 9% in mixed urban/rural areas¹².

An analysis of the MDM quintiles showed that 43% of the children had been taken into care from the 20% most deprived areas within Northern Ireland, the same figures as in 2016/17. Some 5% of the children originated from the least deprived quintile. Although there were some variance between the HSC Trusts, a similar picture to that of Northern Ireland in general was observed when examining the distribution of deprivation areas within the individual HSC Trusts.



Northern Ireland		3%				
20% Least Deprived Areas	5%	6%	10%	6% 8%	9%	10%
	0,0	10%	17%	17%	16%	13%
Quintile 4	13%	31%	13%	24%	15%	15%
Quintile 3	14%		23%	2470	29%	28%
Quintile 5	1470					
Quintile 2	24%	50%	36%	46%	30%	34%
000/11/15	400/					
20% Most Deprived Areas	43%	Belfast	Northern	South	Southern	Western
		HSCT	HSCT	Eastern HSCT	HSCT	HSCT

^A The multiple deprivation rank for the HSC Trusts are based on the Trust's individual deprivation structure.

Note: The above figures relate to the HSC Trust the child lived in before becoming looked after, which may differ from the Trust area in which the child currently resides.

⁹ Source: Northern Ireland Statistics and Research Agency – <u>www.nisra.gov.uk/statistics/deprivation</u>

¹⁰ "Review of the Statistical Classification and Delineation of Settlements", NISRA 2015

¹¹ Geographical information prior to entering care was available for 95% of the children

¹² Calculations using Super Output Area to urban-rural classification. Annex B of "Technical Guidance on production of official statistics for Settlements and Urban-Rural Classification". NISRA 2015

2. The Children in Care

2.1. Age and Gender

At 30 September 2018, 54% of the children and young people who had been in care for 12 months or longer were male (1,303) and 46% were female (1,118). Similar to 2016/17, some 17% of the children were of pre-school age (1-4 years), 39% were of primary school age (5-11 years), 28% of post-primary school age (12-15) and 17% were 16 years or older. There were only minor differences in the age breakdown between boys and girls.

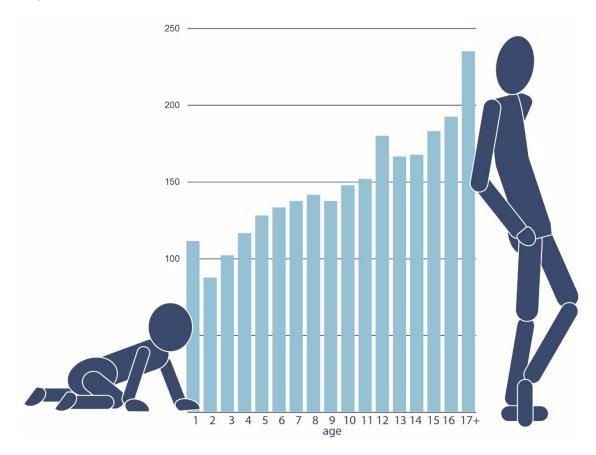


Figure 2.1 Number of children in care for 12 months or longer by age (2017/18)

2.2. Religion and Ethnicity

There was a higher proportion of Catholic (54%) than Protestant (36%) looked after children in 2017/18, with 248 (10%) reported as having either 'No', 'Unknown' or 'Other' religious denomination¹³. This difference would be expected as the 2011 Census results showed that

¹³ See tables for details

the Catholic population has a younger age distribution than Protestants¹⁴. These figures are similar to the previous year.

HSC Trust differences were observed in relation to religion, with around four fifths of the children in the Western HSC Trusts having Catholic background (79%), compared to 31% in the Northern Trust. The South Eastern HSC Trust had the highest proportion of No, Unknown or Other religion (16%), whereas the equivalent figure in the Western HSC Trust was 4%.

The ethnic grouping of the children in 2017/18 indicated that 94% (2,277) were White, and of the remaining 6% (144), 48 were Irish or Roma Travellers, 31 were Black and 65 were of mixed, 'other' or not known ethnic backgrounds. Belfast HSC Trust had the lowest population of white ethnic background (90%) whereas the South Eastern and Western HSC Trusts had 96%.

2.3. Disability

HSC Trusts were asked to indicate if children were disabled in accordance with the definition below:

"The child has a physical or mental impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day-to-day activities".

Using this definition, 13% (315) of the children in care for more than 12 months were reported as disabled in 2017/18, the same proportion as in 2016/17. Furthermore, a higher proportion of boys (16%) than girls (9%) were disabled. Although not directly comparable, the NI Census found that 5% of children in Northern Ireland had a limiting long term illness or disability that limited their day to day activity¹⁵. It would therefore suggest that having a disability is more prevalent among looked after children than the general child population.

Figure 2.2 below sets out the frequency of different disability types. The majority of the disabled looked after children had a learning disability (58%) either on its own or in combination with another disability. This was followed by autism (21%) and physically disabled (8%). Some 22% of the disabled children fell into 'Other' categories. Of the children with a disability, 19% (60) were recorded as having multiple disabilities.

Figure 2.2 Children in care with a disability and type of disability (2017/18)

315 children and young people had one or more disabilities						
58%	21%	8%	4%	3%	3%	22%
Learning disability	Autism	Physical disability	Visually disabled	Hearing impaired	Mental health disability	Other disabilities

Note: 61 of the children (19%) were recorded as having multiple disabilities and are therefore included in more than one category.

¹⁴ http://www.nisra.gov.uk/Census/detailedcharacteristics_stats_bulletin_2011.pdf

¹⁵ Findings from the Northern Ireland Census 2011

As a proportion of their in care children populations, the Belfast HSC Trust was looking after the largest proportion of disabled children (20%); in comparison, 6% of the looked after children population in the Southern HSC Trust were disabled.

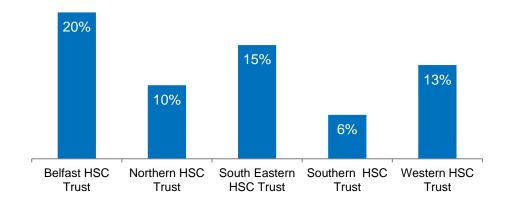


Figure 2.3 Proportion of children in care in each HSC Trust with a disability (2017/18)

Four fifths (79%) of disabled children were placed in foster care (non-kinship or kinship). This represented 13% of all children in this placement type. In comparison, 27% of children in residential placements were considered to have a disability.

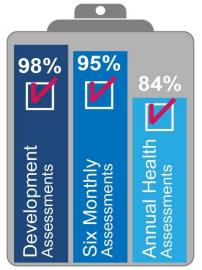
2.4. Dependants

Becoming a parent may impact on educational and other outcomes for young people. In 2017/18, 17 young people in care had one or more dependent children, 5 more than in 2016/17. Twelve of the young people with dependants were female and five were male.

3. Health

3.1. Development & Health Assessments

Figure 3.1 sets out the uptake of development and health assessments by children looked after for 12 months or longer. Development Assessments and Six Monthly Assessments relates to the children who were aged 4 and younger at 30 September (17% or 401 of the children in 2018). Annual Health Assessments relates to children aged 5 and over (83% or 2,020 of the children in 2018).



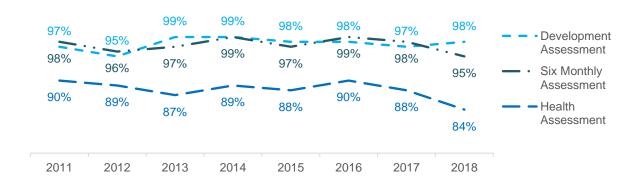
Development Assessments Nearly all of the children aged under 5 (391 of 401), had their development assessments upto-date at 30 September 2018 (98%), a similar proportion to that of recent years. The 2018 figure was higher than the corresponding figure for looked after children in England (85%).

Six Monthly Assessments Of the children aged under 5, 95% (381) had their six monthly assessments up-to-date at 30 September 2018, a lower proportion than in 2017 (98%).

Annual Health Assessment Of the $2,020^{16}$ children aged 5 and over, 84% (1,692) had their annual health assessment upto-date at 30 September 2018, the lowest rate of recent years. It is worth noting that of the young people aged 16 and over, 40% did not have an up to date assessment. This compares

with only 10% of those aged 5-15. Some 88% of looked after children in England aged 5 and over had their health assessment up-to-date.

Figure 3.1 Development and Health Assessments for children in care for 12 months or longer in Northern Ireland (2010/11 - 2017/18)



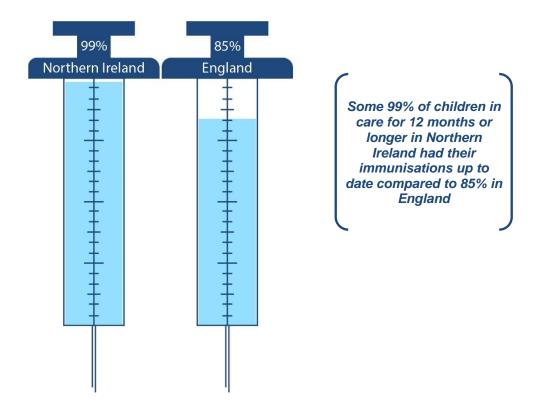
¹⁶ Figures were not supplied for 7 children

3.2. Immunisations

Information on immunisations relates to all looked after children covered in this bulletin, and not just to those that were due immunisations in 2017/18. It includes immunisations due before admittance into care and during time spent in care. For the purpose of this survey, children who did not receive immunisations for health reasons or because parents refused consent, were counted as children whose immunisations were not up-to-date.

A child's immunisation record was considered up-to-date if the HSC Trust indicated that all relevant immunisations had been administered by 30 September 2018. From the information provided, 99% (2,390) of children in care had their immunisations up-to-date at 30 September 2018. This was considerably higher than looked after children in England¹⁷, where 85% had their immunisation up to date.

Immunisation rates for Northern Ireland generally are not published on a client basis but rather by type of immunisation¹⁸ and are therefore not comparable with the way the immunisation rates are collected within this publication.



3.3. Dental Checks

This relates to all children and young people in care who had their teeth checked during the year ending 30 September 2018. For very young children, these checks may be undertaken by a dentist, a paediatrician or other health care professional and these would count as dental checks.

Of the 2,421 children in care for 12 months or longer at 30 September 2018, 96% (2,336) had their teeth checked the previous year; 12 percentage points higher than the corresponding figure for England¹⁹ (84%).

¹⁷ Children looked after in England (including adoption and care leavers) year ending 31 March 2018, DfE.

¹⁸ Public Health Agency Core Tables http://www.publichealth.hscni.net/

Placement

Children in care can be cared for in a variety of placement types depending on the individual child's situation and needs²⁰. For the purpose of this report, five main placement categories will be used; non-kinship foster care (including children placed for adoption²¹), kinship foster care²² (including emergency foster care), residential care, placed with parent and 'other' placement types.

At 30 September 2018, 46% (1,111) of the children in care for 12 months or longer were placed in non-kinship foster care, 34% (835) were placed in kinship foster care, 12% (290) were placed with a parent, 5% (132) were in residential care, and 2% (53) were in 'other' placement types. These are similar proportions to those in 2017.

Of the 1,111 children in non-kinship foster care, 57 were placed for adoption. Fewer children were placed for adoption with 'others' (20 children) compared to those placed with their former foster carers (37 children).

Of the 53 children in 'Other' placement types, 23 (43%) were living independently, with the remaining 30 placed in assessment centres, community placements, supported accommodation, hospitals, juvenile justice centres and other placements not elsewhere described.

Table 4.1 below shows the main placement categories, broken down by HSC Trusts. For all Trusts, apart from the Western HSC Trust, the most prevalent placement was non-kinship foster care followed by kinship foster care. There were however some variations in the distribution of placements between the Trusts. The South Eastern and Western HSC Trusts had lower proportions of children placed with parents and slightly higher proportions of children in residential care compared with the other Trusts.

	Northern Ireland	Belfast Trust	Northern Trust	South Eastern Trust	Southern Trust	Western Trust
Non-kinship foster care*	46%	46%	46%	53%	49%	39%
Kinship foster care	34%	32%	35%	31%	30%	44%
Placed with parent	12%	16%	12%	6%	15%	8%
Residential care	5%	5%	4%	8%	5%	6%
Other	2%	1%	3%	3%	2%	3%
	100%	100%	100%	100%	100%	100%

Table 4.1 Placement type by HSC Trust year ending 30 September 2018

* Non-kinship foster care includes children placed for adoption.

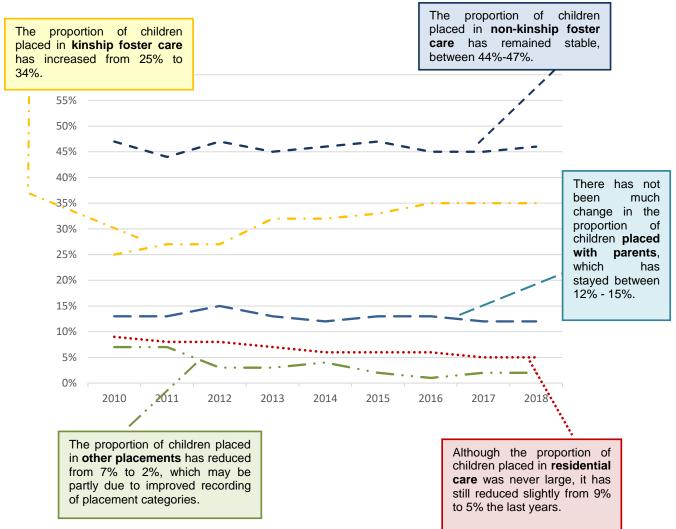
¹⁹ Children looked after in England (including adoption and care leavers) year ending 31 March 2018, DfE.

²⁰ Appendix C sets out descriptions of different placement types

²¹ Being placed for adoption is a stage in the adoption process and a child will still be considered as looked after until the granting of an Adoption Order ²² In this publication "kinship foster care" covers formal kinship care arrangements as opposed to informal kinship care which are

private arrangement. Please see appendix C for further details





The age of the child in care may influence the suitability of placement types. For all age groups, non-kinship foster care and kinship foster care were the main placement types. The circumstances of every child is unique, however it is generally understood that where possible children under eleven years old will not be placed in residential care. This is reflected in the charts below (Figure 4.2). Those aged 16 & over, as may be expected, showed the greatest variation in placement type.

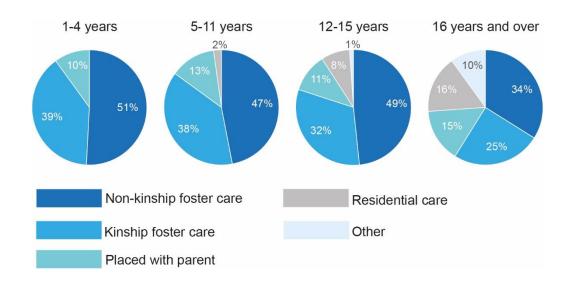


Figure 4.2 Placement type at 30 September 2018 by Age

4.1. Placement Changes

A sixth²³ (16% or 393 children) of all children in care for 12 months or longer changed placement at least once during the year ending 30 September 2018. This was two percentage points lower than in 2016/17. Of those with a placement change 12% moved once only, 2% twice only, and 1% had changed placement three times or more (Figure 4.4).

A higher proportion of females experienced placement changes than males (17% and 15% respectively). The South Eastern and Western HSC Trusts had the lowest proportion of children with placement moves during the last year (14%), whereas 19% of children in the Southern HSC Trust had a placement change.

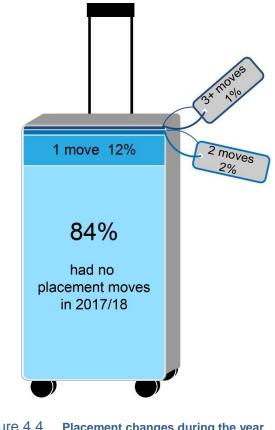
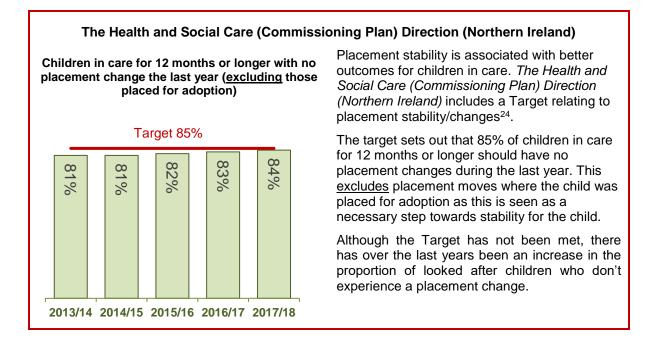
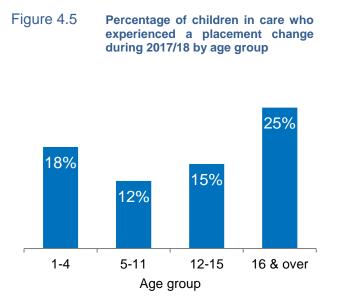


Figure 4.4 Placement changes during the year ending 30 September 2018



²³ Including those placed for adoption

²⁴ Health and Social Care (Commissioning Plan) Direction (Northern Ireland) http://www.health-ni.gov.uk/publications/ministerial-priorities

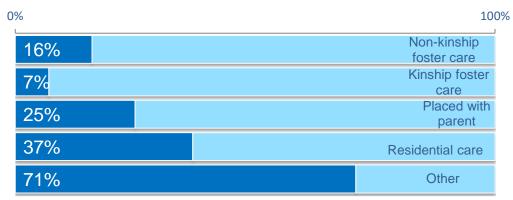


Children under 5 years of age together with the children aged 16 and over saw the highest proportion of placement changes during 2017/18 (18% and 25% respectively) (Figure 4.5). Compared with 2016/17, there was a decrease the proportion in of placement changes within the under 5 age group (7 percentage points).

Of the children under 5 years of age, 16% (12 children) had a move which represented being placed for adoption. In total, 13 children's moves represented placements of adoption²⁵.

Figure 4.6 sets out the proportion of placement changes by the child's current placement type at 30 September 2018. Of the children in care for more than 12 months, children who were in kinship foster care at 30 September 2018 had the highest stability during the previous year (7% with a placement change). Some 71% of the children in 'Other accommodation' had a placement change, which may be due to the nature of the placements included in this category (see appendix C for details).

Figure 4.6 Percentage of children in care who had experienced a placement change during 2017/18 by their current placement type at 30 September 2018



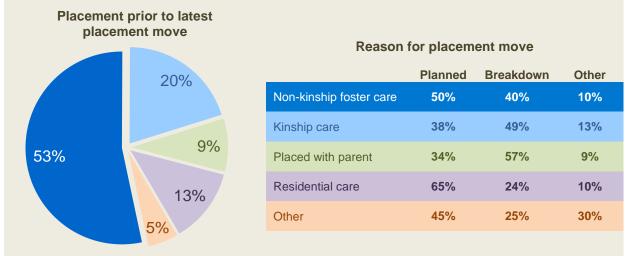
²⁵ Being placed for adoption is a stage in the adoption process and a child will still be considered as looked after until the granting of an Adoption Order

Many placement moves are planned as part of the child's care plan. Other moves are the result of a placement breakdown. The HSC Trusts reported that for 48% of the 393 children with a placement move during 2017/18, the latest placement change was planned whereas 41% were due to a breakdown and 11% for other reasons. These figures were similar to those reported in the previous year.

Males were more likely than females to have a placement move due to a placement breakdown (45% compared to 37%). Over half of all placement moves for the 12 - 15 age group related to a placement breakdown (54%). In comparison, 24% of the placement changes for the under 5 year olds related to a placement breakdown.

Of the 393 children who experienced one or more placement changes during 2017/18, just over half originated from non-kinship foster care prior to the latest move. A tenth (11%) of the planned moves from non-kinship foster care were children placed for adoption.

Figure 4.7 Placement prior to the latest placement change and reason for placement move (2017/18)



This relates to the 393 children with at least one placement move during 2017/18

'Other' reasons for a placement change include death or change of carer's or parents circumstances.

4.2. Statutory reviews

During 2017/18, 57% (1,371) children and young people in care continuously for 12 months or longer at 30 September 2018, were invited to attend their latest statutory review. Some 30% (409) of children invited attended their last statutory review. A further 47% of children invited did not attend but sent views in writing to the review panel, while 11% did not attend but briefed an advocate to speak on their behalf. Just under a tenth of all children invited did not attend their review panel.

Of the 43% (1,050) children who were not invited to attend their review almost nine in ten (79%) were considered to be too young to understand and fully participate in the process. A further 3% could not engage in the review due to the level of their disability, while 3% did not want to participate in the review²⁶.

Looked After Children Reviews

Health and Social Care Trusts are obliged to carry out reviews of the arrangements of looked after children. The first review must be carried out within two weeks of the child becoming looked after, with the next review no later than 3 months after the initial review and each subsequent review taking place on a six monthly basis.

The review records the implementation of the 'Care Plan' establishing whether or not agreed steps have in fact been taken. It also records both positive and negative developments in the child's life including health, education, developments within the birth family and the child's relationship with members of their family.

²⁶ Other recorded reasons given were that the child was at school when the review took place and potential emotional distress caused by the process. No reason was supplied for 34 children.

5. Pre-School Provision

Information on pre-school provision relates to children under 5 years of age. In 2017/18 it related to those children whose date of birth fell between 2 July 2013 and 1 July 2014.

Three quarters (76%) of the 106 looked after children eligible for funded pre-school provision had been allocated a free place during 2017/18.

A larger proportion of girls (80%) than boys (73%) in care aged under 5 had a funded preschool place in 2017/18 (Figure 5.1). In terms of religion, a smaller proportion of Catholics (75%) than Protestants (79%) under 5 years had a funded pre-school place.

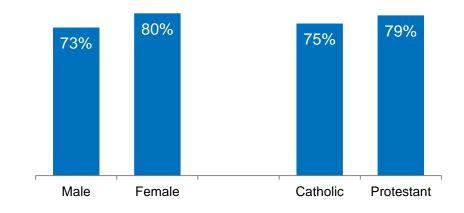


Figure 5.1 Children in care aged under 5 who had a funded pre-school place (2017/18)

6. School Age Children

Education is a vital component of all children's lives and can impact on their chances for future employment and their general wellbeing. This applies particularly to looked after children who continue to have lower educational achievements than their peers in the general school population. There are a number of initiatives in place to maximise the benefit of education and make real improvements in outcomes for these children and young people.

> Family & Children's Policy Directorate Department of Health

6.1. Compulsory School Age

Compulsory school age in this publication refers to all children whose date of birth fell on or between 2 July 2001 and 1 July 2013, whether or not the child was in a position to attend school, i.e. any child who received or should have received full-time schooling during the school year.

The number of children and young people of compulsory school age, who had been in care for 12 months or longer at 30 September 2018 was 1,828. Of these, one hundred and fifty²⁷ children in care identified in the OC2 returns could not be linked with school data provided by the Department of Education. The total number of school aged children included in the following analyses is therefore 1,678²⁸.

Of those children of compulsory school age in care continuously for at least 12 months at 30 September 2018, 50% attended Primary School the previous school year, 37% were at Non-Grammar School, 8% were at Special School and 5% attended a Grammar School.

Historically, school related information reported in this publication has been obtained from the child's school by social workers. Since 2015/16, a data sharing agreement has been in place between Department of Education and Department of Health in regards to looked after children's school information. This relates to specific, but not all, school information covered in this publication.

Further details on the variables covered by this agreement, the linking rates and changes to methodology can be found in the Technical Notes.

²⁷ A number of these children were either not attending school or attending school outside of Northern Ireland ²⁸ Please see Technical Notes for further details

²⁸ Please see Technical Notes for further details

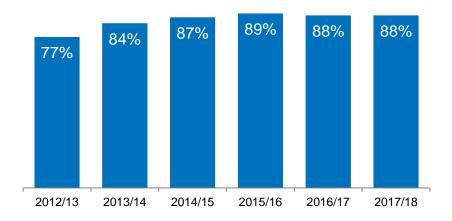
6.2. Personal Educational Plans

Of the school aged children in care for 12 months or longer at 30 September 2018, 88% had a Personal Education Plan (PEP). Of those children who had a PEP, 90% had had it reviewed within the previous six months. The proportion of children with a PEP ranged from 82% in the Southern HSC Trusts to 94% in the Western HSC Trusts. PEP Reviews within the last six months ranged from 85% in the Northern HSC Trust to 94% in the Belfast HSC Trust.

The level of school aged children with PEP has been stable the last three years, however there has been an increase of eleven percentage points between 2012/13 and 2017/18, from 77% to 88%. There has been a similar increase in the number of PEP reviews from 74% to 90% over the same period of time.

A Personal Education Plan (PEP) is a continuous record of the child/young person's school history and identifies what needs happen to for а child/young person in care to fulfil their potential by planning and establishing clear targets for the child/young person relating to learning achievements. A PEP should be completed for all looked after children/young people of school including statutory age, children/young people in secure accommodation and in custody, at the 3 month LAC Review, 6 month LAC Review, and at 6 monthly intervals thereafter to coincide with LAC Reviews. The importance of educational outcomes for adult life was highlighted when PEP was included in the Health and Social Care Indicators of Performance Direction in 2014/15 and subsequent years.

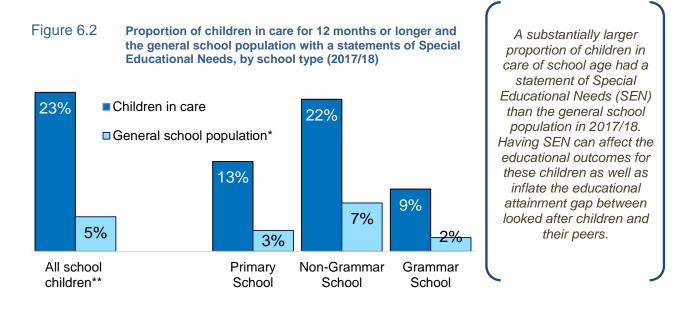
Figure 6.1 Proportion of children in care for 12 months or longer with a Personal Education Plan (2012/13 - 2017/18)



6.3. Children with statements of Special Educational Needs (SEN)

Children have special educational needs if they require special educational provision. Learning difficulty means the child has significantly greater difficulty in learning than children of similar age, and/or has a disability which hinders using everyday educational facilities (or, where the child is below school age, would hinder such use if the child were of school age). Special educational provision is different from, or additional to, that made for children of comparable age. Further information is provided in the Code of Practice on the Identification and Assessment of Special Educational Needs (SEN) published by the Department of Education NI²⁹.

Almost a quarter of children who had been in care for twelve months or longer and were of compulsory school age in 2017/18, were covered by a statement of SEN (23%)³⁰, which was substantially higher than the general school population in Northern Ireland³¹ (5%). This proportion was, however, similar to that for children in care in England³² (27%).



* Source: "Annual enrolments at schools and in funded preschool education in Northern Ireland, 2017/18", DE ** Includes children in Special Schools

Of the children in care with a statement of SEN, just over a third (36%) attended a Non-Grammar School, 33% attended a Special School, 29% attended a Primary School and 2% attended a Grammar School.

A higher proportion of boys (28%) than girls (17%) were covered by a statement of SEN; this is similar to the proportions in previous years.

²⁹ Code of Practice, Department of Education NI <u>https://www.education-ni.gov.uk/articles/special-educational-needs-code-practice</u>

³⁰ Special Educational Needs status was not recorded for 11 children

³¹ Department of Education NI, Enrolments at Schools and in Funded Pre-School Education in Northern Ireland 2017/18

³² Outcomes for Children Looked After by Local Authorities in England, as at 31 March 2018 – DfE

6.4. Education Other Than at School (EOTAS)

Of those looked after children of compulsory school age, 5% (82) were educated somewhere other than at school sometime during the past year. A fifth (20%) of these children were educated outside of school due to mental health or behavioural problems, with a further 23% due to a refusal to attend mainstream school and 10% were unable to cope in a mainstream education setting.

65 Attendance and absenteeism

Absenteeism from school, whether authorised or unauthorised, can be detrimental to a child's educational progress. Reducing the levels of school days missed can aid in enhancing the educational attainment of children in care. Emphasizing the importance of this issue, school attendance for children in care has been included in the Health and Social Care (Indicator of Performance) Direction since 2014³³.

During the 2017/18 school year, 10% of the looked after children of school age had full attendance at school^{34, 35}. Some 82% had missed between 1 and 24 school days. A further 8% of children in care had missed 25 or more school days for any reason, a similar proportion as in 2016/17. There was a small difference in the proportion of girls and boys in care who had missed 25 days or more (7% and 8% respectively). Looking specifically at the absence for those missing 25 or more school days, some 48% of the missed days were recorded as authorised absence; the remaining 52% was recorded as unauthorised absence ³⁶.

Figure 6.3 Percentage of children in care for 12 months or longer of compulsory school age who missed school days for any reason (2017/18)



Note: Excludes 155 young people who either did not attend school in Northern Ireland or for whom no absence data was recorded

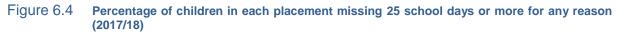
³³ http://www.health-ni.gov.uk/publications/ministerial-priorities

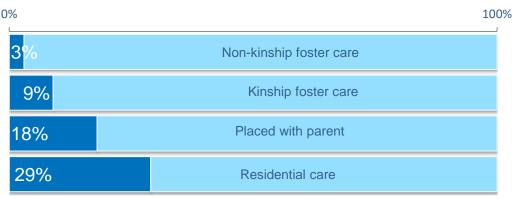
³⁴ Information on the number of school days missed was not provided for 150 young people in 2017/18, mainly because they did not attend school, were educated outside of school setting or no absence data was recorded

³⁵ Please note that Department of Education also publish attendance information for looked after children, however use a slightly different methodology. Please see the Technical Notes for details ³⁶ See Technical Notes for description of authorised and unauthorised absences

Compared with the general school population (5%), slightly less looked after children attending Primary School missed 25 or more school days (4%). The trend was reversed for those children attending post-primary schools, where 14% of looked after children missed 25 or more days compared with 9% of the general school population³⁷.

A substantially larger proportion of the school aged children who were in residential care missed 25 or more school days in 2017/18 compared with children in foster care (non-kinship and kinship) (Figure 6.4). These figures are in line with those above as young people placed in residential care are generally older than those in other care placements and are therefore more likely to be attending a post-primary school. However caution must be taken when interpreting these figures due to the relatively small numbers involved.





Note: Excludes 155 young people who either did not attend school in Northern Ireland or for whom no absence data was recorded

Placement stability may influence school attendance. Of the school aged children with no placement moves during 2017/18, 7% had missed 25 or more school days for any reason. The corresponding figure for children who had experienced a placement move was 14%. This survey however cannot confirm if the placement moves caused the school absence, only that there is a correlation between the two.

The Department of Education reports school absence in half day units recorded as authorised or unauthorised. The following section is comparable with this data examining absence data for looked after children by half day units.

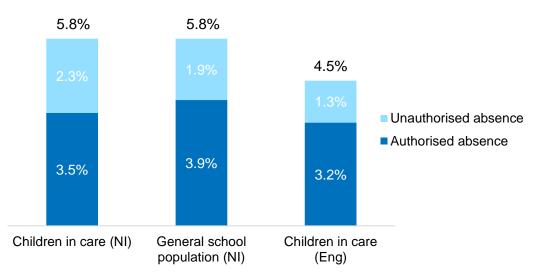
The overall absence rate for looked after children during 2017/18 was 5.8%, the same as the figure reported for the general school population of 5.8%³⁸ during the same period. Authorised absence accounted for 3.5% of half days missed with the remaining 2.3% considered to be unauthorised. In comparison, the unauthorised absence was somewhat lower for the general school population (1.9%). Furthermore, the overall absence rate for looked after children in England during 2017/18 was lower than for both looked after children

³⁷ Attendance at grant-aided primary, post-primary and special schools in Northern Ireland 2017/18: DENI 2019

³⁸ Attendance at grant-aided primary, post-primary and special schools in Northern Ireland 2017/18: DENI 2019

and the general school population in Northern Ireland, at 4.5%, with authorised absence accounting for 3.2% and unauthorised absence $1.3\%^{39}$ (figure 6.5).

Figure 6.5 Percentage of half days missed for children in care (Northern Ireland), general school population (Northern Ireland) and children in care (England) (2017/18)



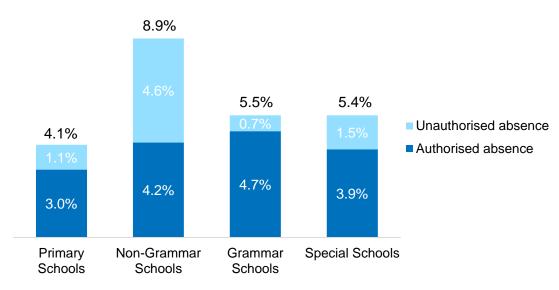
Sources: School Census; "Attendance at grant-aided primary, post-primary and special schools in Northern Ireland 2017/18"; and "Outcomes for children looked after by local authorities in England 31 March 2018".

For the children in care of school age in Northern Ireland, the absence rate for males (6.0%) was higher than females (5.5%), with authorised absence accounting for 3.7% and 3.4% respectively. Unauthorised absence accounted for 2.4% of all half days missed for males and 2.1% of all half days missed for females.

The absence rate for looked after children varied by school type. In primary schools 4.1% of all half days were missed comprising 3.0% authorised absence and 1.1% unauthorised absence. In contrast, in secondary schools, 8.9% of all half days were missed comprising 4.2% authorised absence and 4.6% unauthorised absence (figure 6.6).

³⁹ Outcomes for children looked after by local authorities in England 31 March 2018: DE 2019

Figure 6.6 Children in care for 12 months or longer; proportion of half day absence by school type (2017/18)



Note: Excludes 155 young people who either did not attend school or for whom no absence data was recorded

Differences in absence rate were also evident by placement type. Young people in care in a residential placement missed 16.0% of all half days, compared to 3.8% of all half days missed for those children placed in non-kinship foster care.

Illness was the most common reason for absence⁴⁰ in all school types. Illness is an authorised absence and accounted for 50.5% of absences in primary schools, 28.8% in secondary schools, 37.3% in grammar schools and 47.5% in special schools. This equated to 2.1%, 2.6%, 2.0% and 2.6% of total half days respectively.

Absences for which no reason had been provided was the most common unauthorised absence in 2017/18, accounting for 19.5% of all half days missed. It was the most common unauthorised absence in all school types.

6.6. Suspensions

Children in care were more likely to be suspended from school than children in the general school population; 7% (112) of children in care had been suspended in 2017/18, compared with 1.4% of the general school population in Northern Ireland⁴¹. The proportion of children in care that had been suspended during 2017/18 was the same as in the previous year.

Suspensions are included in absence statistics and are treated as an authorised absence.

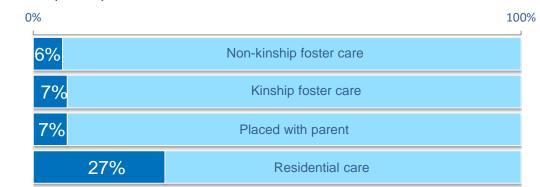
As in 2016/17, a higher proportion of boys than girls in care had been suspended from school during the academic year; 11% of boys compared with 3% of girls had been suspended at least once during 2017/18.

⁴⁰ See technical Notes for all reasons for absence

⁴¹ Pupil suspensions and expulsion, Department of Education NI 2017/18

Some 16% of children attending Secondary School had been suspended during 2017/18, compared to 14% of those attending Grammar School, 5% of those in Special School and just 2% of children attending Primary School.

Children in residential care were more likely to be suspended than children in any other placement types (Figure 6.7). This must however be viewed in conjunction with the fact that most children suspended were in the older age groups at the same time as the majority of children in residential care were also in the older age groups.

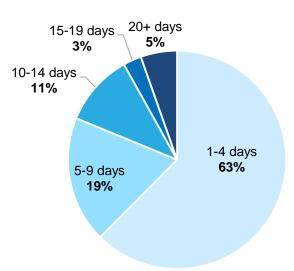




Note: Excludes 155 young people who either did not attend school or for whom no absence data was recorded

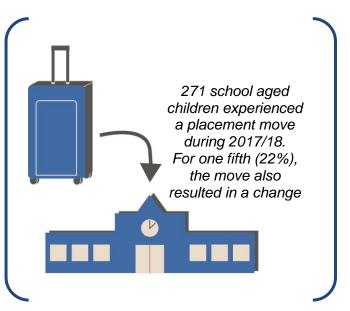
During 2017/18, 63% of the 112 children in care who had been suspended, had been suspended for less than 5 days, whilst 6 children (5%) had been suspended for 20 days or more (Figure 6.8). These figures were similar to those recorded in the previous year though a smaller proportion of children had been suspended for 15 days or longer in 2017/18 than in the previous year.

Figure 6.8 Children in care who were suspended; school days missed through suspension (2017/18)



6.7. School changes

During the school year 2017/18, 93% of children in care of school age had not changed school at any time, while 7% had changed school at least once during this period. These are the same or similar proportions as observed in the last four years. There was no difference in the proportion of school changes between girls (7%) and boys (7%).



7. Educational Attainment

7.1. Children eligible to sit exams

In this chapter, attainment results will be analysed for Level of Progression assessments Key Stage 1 (year 4) Level 2 or above, Key Stage 3 (year 10) Level 5 or above and Year 12 GCSE results. These assessment results have been compared with the results from the general school population in Northern Ireland. There will always be some differences in the way attainment results are captured or presented between these cohorts. However, since 2015/16, a new methodology has been applied to the attainment results for children in care in this publication, which aligns better with attainment results for the general school population, which will aide a fairer basis for comparison. Please see Technical Notes for further details.

Please note that due to ongoing school industrial action, it has not been possible to present Key Stage 2 attainment results for 2017/18.

			Children in care for 12 months or longer	General school population
Ę	y Stage 1 :vel 2 or above	Communication	79%	87%
Level of Progression	Ke	Using Maths	79%	88%
Leve	(ey Stage 3 Level 5 or above	Communication	36%	71%
Ā	Key Stage Level 5 o above	Using Maths	39%	73%
	sa	1 or more GCSE grades A*- G	90%	100% ⁴³
r 12	E or It Pass	5 or more GCSEs grades A*- G	76%	99%
Year 12 GCSE or Equivalent Passes	5 or more GCSEs grades A*- C		54%	86%
	E	5 or more GCSEs grades A*- C inc GCSE English and Maths	43%	72%

Table 7.1Educational attainment for children in care for 12 months or longer and the Northern
Ireland general school population42 (2017/18)

Level of Progression attainment results: Please note that due to industrial action, 2017/18 data for the general school population have been weighted to account for non-response bias⁴⁴. Figures reported are the best estimate of the mean figure drawn from the sample. Of the same reason, attainment results for children in care are based on a proportion only of the children who were eligible to sit the exams.

⁴² Source: Department of Education NI

⁴³ Please note that this figure has been rounded, with 0.1% of all pupils achieving no GCSEs at grades A* - G

⁴⁴ Please see technical notes for further information.

7.2. Key Stage 1 Level of Progression – Level 2 or above

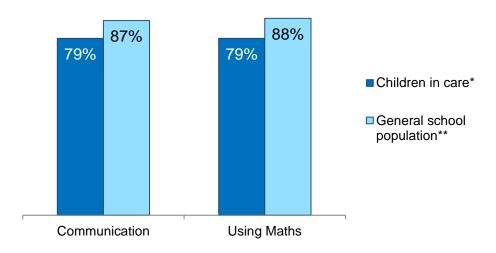
Of the 124 children eligible to sit KS1 assessments (e.g. they attended Year 4 in a primary school in 2017/18), only 24 (19%) were assessed. The remaining 81% were not assessed due to school industrial action, they were exempt from sitting the exam or the school carried out different assessments.

Figure 7.2 details the percentage of the children in care and the general school population in Northern Ireland who achieved Key Stage 1 Level of Progression Level 2 or above in Communication and Using Maths.

It shows that almost four fifths of the children in care achieved Level 2 or above in Communication or Using Maths (79% respectively), compared with 87% in Communication and 88% in Using Maths for the equivalent general school population.

Due to the low number of assessment results available, no further breakdown is provided.

Figure 7.2 Children achieving Level 2 or above in Communication and Using Maths Assessments for children in care and NI general school population⁴⁵ (2017/18)



*Figures are based on assessment results for 19% of the children in care eligible for assessment. **General school population figures are weighted to account for non-response bias.

⁴⁵ Source: Department of Education NI

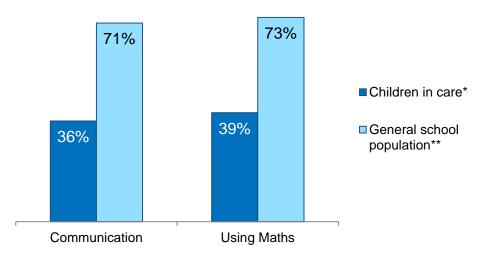
7.3. Key Stage 3 Level of Progression – Level 5 or above

Of the 152 young people eligible for KS3 assessment (e.g. they attended Year 10 in a postprimary school in 2017/18), only 28 (18%) were assessed. The remaining 82% were not assessed due to school industrial action, they were exempt or the school carried out different assessments.

Figure 7.4 details the percentage of young people in care and the general school population in Northern Ireland attaining Level of Progression Level 5 or above for Key Stage 3 assessments. While almost three quarters of the general school population achieved Level of Progression Level 5 or above for both Communication and Using Maths, 36% of young people in care achieved the same in Communication and 39% in Using Maths.

Due to the low number of assessment results available, no further breakdown is provided.

Figure 7.4 Young people achieving Level of Progression Level 5 or above in Key Stage 3 Communication and Using Maths assessments for young people in care and the NI general school population⁴⁶ (2017/18)



*Figures are based on assessment results for 18% of the children in care eligible for assessment. **General school population figures are weighted to account for non-response bias.

⁴⁶ Source: Department of Education NI

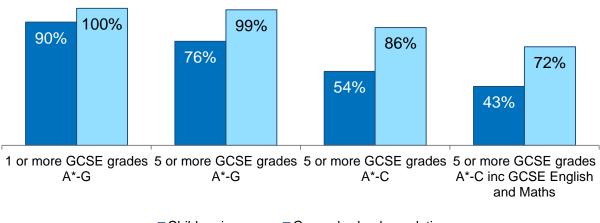
7.4. GCSEs

One-hundred-and-nine young people who had been in care for more than a year sat GCSE exams in 2017/18. A further 47 were eligible to sit the exam (e.g. they attended Year 12 in 2017/18) however they did not sit these exams due to special educational needs, having been placed on the EOTAS scheme or other welfare issues. Of those who sat exams, 18% (20 young people) had a statement of SEN.

Figure 7.5 details the percentage of young people in care who sat exams and attained GCSE or equivalent qualifications. It shows that 90% of the young people attained at least one GCSE at grades A*- G. This compares with close to 100% of the general school population in Northern Ireland^{47,48}.

Over half (54%) of young people in care attained 5 or more GCSEs at grades $A^* - C$, with 43% achieving 5 or more GCSEs at grades $A^* - C$ including GCSE English and Maths. These figures were substantially lower than the general school population in 2017/18, with 86% achieving 5 or more GCSEs at grades $A^* - C$ and 72% achieving this feat including GCSE English and Maths.





Children in care General school population

Note1: The percentage of the general school population achieving GCSEs at grades A* - G has been rounded by 0.1%. Note2: GCSE English and Maths.

A smaller proportion of girls (70%) than boys (83%) achieved 5 or more GCSEs at grades A*- G, similarly a lower proportion of girls achieved 5 or more GCSEs at grades A*- C, (51%) compared to boys (58%).

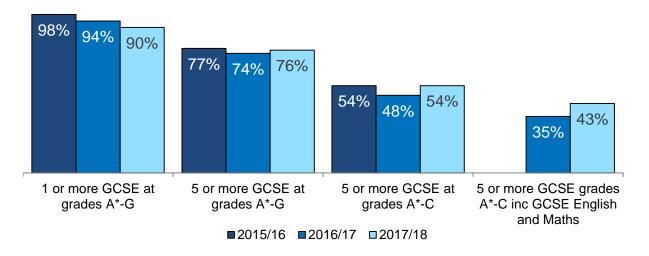
Lower proportions of children in non-kinship than in kinship foster achieved at least one or more GCSEs at grades A*- G (83% and 89% respectively). Similar proportions achieved 5 or more GCSEs at grade A*-C (59% and 58% respectively). Please note that the number of children in each placement type eligible for these tests were small.

⁴⁷ Please note that this figure has been rounded with 0.1% of all pupils achieving no GCSEs at grades A* - G

⁴⁸ Year 12 and Year 14 Examination Performance at Post-Primary Schools in Northern Ireland 2017/18: DENI, 2019

A higher proportion of young people achieved 5 or more GCSE's at grades A^* - G in 2017/18 than in 2016/17. However, the number of children assessed each year for these tests were small and the trend therefore may be subject to volatility due to small numbers.





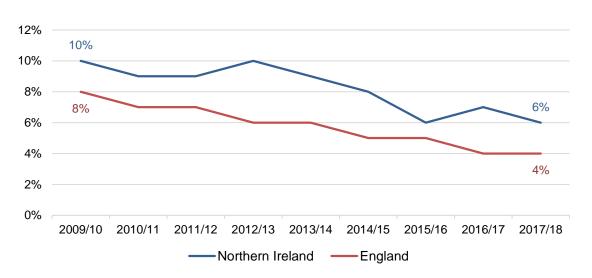
Please note that figures for 5 or more GCSE grades A* - C including GCSE English and Maths were not available for 2015/16

8. Cautions / Convictions

8.1. Children Cautioned or Convicted

Of children in care aged 10 and over at 30 September 2018, 6% (81) had been cautioned or convicted of an offence whilst in care during the year. The equivalent figure for England was two percentage points lower at 4%. For both England and Northern Ireland, the proportion of young people in care cautioned or convicted has reduced over the last years (Figure 8.1).

Figure 8.1 Children in care for 12 months or longer, aged 10 and over, cautioned or convicted in Northern Ireland and England⁴⁹ (2009/10 – 2017/18)

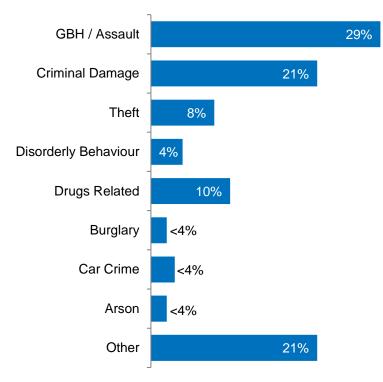


For young people in care aged 10 and over, a higher proportion of boys (7%) than girls (5%) had been cautioned or convicted during 2017/18. Furthermore, cautions and convictions were more prevalent in the older age groups, with one-seventh of children aged 16 and over having been convicted or cautioned (14%). The proportion of Protestant children in care that had been cautioned or convicted during 2017/18 was the same as in 2016/17 (7%). The proportion of Catholic looked after children cautioned or convicted decreased, from 8% to 6% during the same period.

Children placed in foster care were the least likely to be cautioned or convicted in 2017/18 (2%) compared with the other placement types. This must be seen in conjunction with the older age profile of those placed in residential care and the fact that higher proportions of the older children were cautioned or convicted.

⁴⁹Children looked after in England (including adoption and care leavers) year ending 31 March 2018 – DfE





Of the 81 looked after children cautioned or convicted, 189 separate offences were recorded. Almost a third of recorded offences were for grievous bodily harm (GBH)/assault and a fifth were for criminal damage (Figure 8.2).

8.2. Substance Abuse

Of the 2,421 children in care for twelve months or longer at 30 September 2018, 95 (4%) were identified as having a substance abuse problem; the same proportion as that for England⁵⁰ (4%). A higher proportion of boys (5%) than girls (3%) had been identified as having a substance abuse problem.

Substance abuse was most common among older children, with one sixth (17%) of young people in care aged 16 and over identified as having a problem.

Substance Abuse in this publication is defined as 'substance taking which harms health or social functioning'.

The majority of children identified as suffering a substance abuse problem in 2017/18 were offered intervention (94%), with three fifths (58%) having accepted this offer.

⁵⁰ Children looked after in England (including adoption), year ending 31 March 2018 - DfE



Note: These statistics are published for the first time in 2017/18 and should therefore be treated as Experimental Statistics. Please see Technical Notes for further information.

Note2: Long-term care is for this analysis defined as at least two consecutive years. Source: OC2 community returns for children in care 2012/13-2017/18.

9. Children who finished compulsory schooling in 2017/18

Standard school progression expects children to finish compulsory schooling at age 16 after having completed Year 12. Of the young people who had been in care for 12 months or longer, 156 completed Year 12 in 2017/18.

9.1. School changes

Of the 156 young people aged 16 in 2017/18, 74% had attended one primary school only and 26% had changed primary schools at least once. A larger proportion of boys (32%) than girls (21%) looked after had changed primary schools at least once (Figure 9.1).

Four fifths (81%) of the young people attended a single secondary school, whilst a fifth (19%) had changed secondary schools at least once. The same proportion of boys and girls changed secondary schools at least once during their post primary school years (19%) (Figure 9.1).

Figure 9.1 Primary Schools and Secondary Schools changes by children in care who had completed Year 12 in 2017/18, by gender

MALES who attended same Primary School 68%	changed at least once 32%
FEMALES who attended same Primary School 79%	changed at least once 21%
MALES who	
attended same Secondary School	changed at least once 19%
81% FEMALES who attended same Secondary School 81%	changed at least once 19%

Note: figures exclude young people where data was not recorded

9.2. Gaps in Mainstream Education

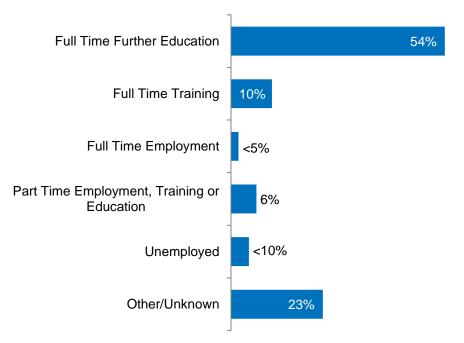
Just over a tenth (14%) of young people aged 16 in 2017/18, had at some stage during their school years been out of mainstream education and continued to be educated in other ways.

9.3. Current Activity

Figure 9.2 details the activity of young people in care aged 16 during 2017/18. Over half (54%) of these were in or about to start full-time education and one tenth were in full time training.

Girls (59%) were more likely than boys (48%) to have started or about to start full-time education (see Appendix D for details).

Figure 9.2 Current activity of young people in care for 12 months or longer who had completed Year 12 during 2017/18 in Northern Ireland



Appendix A – Technical Notes

Data Collection

The information presented in this bulletin derives from the tenth collection of 'OC2' annual returns of children and young people in care in Northern Ireland. The returns were provided by each of the five Health and Social Care Trusts in Northern Ireland to Community Information Branch (CIB) in the Department of Health (DoH).

Information is entered online by nominated HSC Trust staff using a secure web-based application. Records are anonymised to ensure confidentiality and to protect the identities of individual children. Guidance notes and other documents associated with the OC2 survey are available to view or download from the DoH website:

https://www.health-ni.gov.uk/publications/children-care-return-and-quality-report

Looked after children included in this survey

For inclusion in the OC2 returns, children had to be looked after continuously for at least 12 months at 30 September 2018. Children looked after under an agreed series of respite placements were excluded from the survey. As such, the reference period for the present survey was 1 October 2017 to 30 September 2018. This is distinctly different from other statistical collections by the DoH, which are based on the year ending 31 March. The period chosen for OC2 is designed to align with the academic school year.

The main aim of the OC2 returns is to inform on educational attainment for children in care, however it also collects information on a range of other areas such as religion, ethnicity, disability, placement, health assessments, economic activity and criminal convictions (see appendix E for the full questionnaire). Together with its companion surveys OC1 (care leavers aged 16-18) and OC3 (care leavers at their 19th birthday), it provides a comprehensive series of data on children and young people in care in Northern Ireland.

Change of data source

Historically, school related information reported in this publication has been obtained from the child's school by social workers. To both ease the data collection burden on the social workers as well as streamlining information with that published by Department of Education (DE), and through this ensure improved quality and consistency of data, a data sharing agreement was put in place in 2016 between DE and DoH in regards to children in care. The data supplied from the DE relates to three sources; the School Census; Attendance and School leaver survey.

The information shared covers:

- Key Stage 2 attainment results
- Attendance (including suspensions)
- Special Educational Needs (SEN)
- School type
- School year

The attendance, suspension and SEN information will be reported on the same way as in previous publications. However, where the new source of information allows for more scrutiny of the figures, additional analysis will be supplied. For example, reason for non-attendance can now be analysed. It also allows for comparison with the general school population on a like for like basis. Furthermore, there is a slight change to the methodology of reporting Key Stage and GCSE attainment information. This is set out in detail below.

Linking rate between OC2 returns and DE data 2017/18

Unique linking variables were used to match the OC2 returns with the DE school data without compromising children's identity.

Of the 1,828 children of compulsory school age (5-16):

• 1,678 (92%) were matched (linked) between the OC2 and DE datasets;

- 73 (4%) who were not matched, were identified as not attending school in Northern Ireland, either because they were in school outside of this jurisdiction, because they were disabled, home schooled or because they had chosen to leave education. These will be included in educational analysis only where appropriate; and
- 77 (4%) were not matched for unknown reasons and will be excluded from the education analysis within this report.

Methodological changes (from 2015/16)

Historically, Key Stage attainment results has been used to assess outcomes of an age cohort of looked after children. It is expected that children of a certain age should be in school and attending a specific school year. If a child is not attending school (school refuser), or has been held back a year, it would show that outcomes for the child are worse than what is expected for the general age population. These children have therefore historically been <u>included</u> in attainment analysis as children achieving no Key Stage results.

Although this methodology is valid on its own, unavoidably, the looked after children's attainment results are compared with attainment results from the general school population. However the general school population results only includes those children who were enrolled in school and only those who were in a specific school year (e.g. a child held back a year will be included in Key Stage results in whatever year they reach that level, and not the year they, according to their age, should sit the exam). Due to this difference in methodology, looked after children may have had slightly unfavourably low attainment results compared with the general school population.

With the additional school information supplied through the data sharing agreement since 2015/16 (see above), it is now possible to apply the methodology used for the general school population. Taking into account that the Key Stage results are in general used as a comparative to the general school population, the new methodology will be used to ensure a more fair comparison.

The change of methodology has a net result on other analyses within this publication. For example, chapter 9, which relates to children who finished compulsory schooling, will now be selected as those who were in Year 12 the last school year.

Attendance

Department of Education (DE) publish attendance information for children in care (<u>https://www.education-ni.gov.uk/articles/pupil-attendance</u>). DE attendance figures relate to all children who were looked after at a specific point in time. In contrast, the "Children in Care" publication includes only children who have been looked after for a minimum of 12 months. As such, the annual school attendance figures should relate, as much as possible, to a time when the child was continuously in care. The difference cohorts of children included in the two publications will therefore result in different attendance figures.

Attendance or absence is measured for every pupil in half day sessions (am and pm). Absence can be either authorised or unauthorised.

An authorised absence is absence with permission from an authorised school representative on provision of a satisfactory explanation. This includes:

- Artistic endeavour
- Bereavement
- Suspension
- Agreed family holiday (in very exceptional circumstances)
- Illness
- Medical / dental appointments
- Other exceptional circumstances (includes an exceptional event outside control of the school, for example, travelling children, court appearance)
- Religious observance

An unauthorised absence is absence without permission from an authorised school representative due to unexplained or unjustified absence. This includes:

- Family holiday not agreed
- Other absence (includes absence not covered by any other code or a reason which is not acceptable to the school, for example, pupil's / parent's or sibling's birthday).
- No reason provided for absence
- Late (after registration closed)

Further information on attendance and absence can be found in the readers notes of DE's Pupil Attendance publications (https://www.education-ni.gov.uk/articles/pupil-attendance).

Levels of Progression Key Stage results

From 2012/13, the new Levels of Progression replaced the Key Stage Assessments. Children were from this point on assessed in Communication and Using Maths as opposed to the previous English and Maths assessments. These results are not directly comparable with Key Stage Assessment outcomes from previous years.

Key Stage Levels of Progression are used to measure Literacy and Numeracy targets set out in the Department of Education Strategy 'Count, Read: Succeed' which contains long-term targets by 2019/20. Since 2013/14, ongoing industrial action has heavily impacted on the number of schools submitting their Key Stage data to DE. Therefore an exercise was carried out to firstly determine how representative the returns are within the NI context and, accordingly, adjust the data for non-response within each cohort. In order to accurately reflect the composition of Northern Ireland's Years 4, 7 and 10 school populations, weights have been calculated and applied to the data to compensate and adjust for non-response bias. The link below details the methodology used to produce Key Stage Assessment NI averages. https://www.education-

ni.gov.uk/sites/default/files/publications/education/KSA%202016to2017%20Methodology%20Paper.pdf

Longitudinal Analysis

The OC2 community return is an annual child level return. If a child has been in care in consecutive years, it is possible to track their care history through unique pseudoanonymised variables. Using this data source for longitudinal analysis will have some limitations. For example, a child is included only if he/she has been in care for 12 months continuously and would be excluded from an annual return should the child have a short period where he/she is not in care. The data source will therefore not allow a continuous record for all children in care.

Longitudinal analysis in this publication should therefore be treated as indicative or explorative only.

Data Quality

The data quality of the results presented in this bulletin is considered to be high. The online data collection system has built in validation checks, where Trust staff correct or amend data as required, and provide appropriate explanations if information is missing. CIB perform further checks, using historical data to monitor annual variations and emerging trends.

Furthermore, the new data source (DE data) removes elements of manual recording and ensures inter-departmental consistency of information.

A detailed quality report for children's community statistics is available on our website at: <u>https://www.health-ni.gov.uk/publications/children-care-return-and-quality-report</u>

Rounding/Disclosure Conventions

Percentages have been rounded to whole numbers and as a consequence some percentages may not sum to 100.

It has been necessary to suppress other figures whenever it would be possible to calculate the value of a suppressed number by means of simple arithmetic. The rule applied in these circumstances has been to suppress the next smallest data item.

A National Statistics Publication

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Services Act 2007 and signifying compliance with the Code of Practice for Official Statistics.

Designation can be broadly interpreted to mean that the statistics:

- are trustworthy;
- have high quality; and
- are of value to the public.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed. The most recent assessment of these statistics, Report 265, can be found at the following link:

https://www.statisticsauthority.gov.uk/publications-list/?type=assessment-report If you have any comments on this publication, please contact:

Community Information Branch Department of Health Annexe 2, Castle Buildings Stormont, BT4 3SQ

Email: cib@health-ni.gov.uk Tel: 028 90522580

Related Publications

Statistics on children and young people in care published by other countries in the UK (United Kingdom) can be found as detailed below.

Scotland

Children's Social Work Statistics are produced annually by the Scottish Government. The most recent publication was published on 26 March 2019, and is available at: https://www.gov.scot/publications/childrens-social-work-statistics-2017-2018/

Educational Outcomes for Scotland's Looked After Children is an annual summary of the educational outcomes of Scotland's looked after children. The most recent publication was published on 19 June 2018, and is available at:

https://www.gov.scot/publications/education-outcomes-scotlands-looked-children-2016-17/

Wales

Children Looked After by Local Authorities, Year Ending 31 March by Local Authorities in Wales are produced annually by the Local Government Data Unit and the Welsh Assembly Government, and are available at:

https://gweddill.gov.wales/statistics-and-research/children-looked-after-localauthorities/?lang=en

England

Outcomes for Children looked after by local authorities in England, 31 March is produced annually by the Department for Education. Figures for the year were published on 11 April 2018, and are available at:

https://www.gov.uk/government/statistics/outcomes-for-children-looked-after-by-las-31-march-2018

Children looked after in England (including adoption and care leavers) year ending 31 March is published annually by the Department for Education. The latest publication was published on 15 November 2018, and is available at:

https://www.gov.uk/government/statistics/children-looked-after-in-england-including-adoption-2017-to-2018

Other statistics produced by the DoH relating to looked after children and other areas of children's social care as detailed below can be found on:

Children's Social Care Statistics for Northern Ireland Northern Ireland Care Leavers Children Adopted from Care in Northern Ireland Quarterly Child Protection Statistics for Northern Ireland

Appendix B – Coverage of OC2 2017-18

The table below specifies the subset of children and young people covered by each category of the OC2 collection.

Definition	Which Children were included?
Scope of OC2	All children and young people in care on 30 September 2018, and who on that date had been in care continuously for at least 12 months.
Remaining items are subsets of the Sco	pe.
Total children of compulsory school age	Children and young people whose date of birth is in range 2/7/2001 to 1/7/2013
Key Stage 1	Children attending school year 4 in a mainstream school in 2017/18
Key Stage 2	Children attending school year 7 in a mainstream school in 2017/18
Key Stage 3	Young people attending school year 10 in a mainstream school in 2017/18
GCSEs	Children attending school Year 12 in 2017/18
Offending	Children aged 10 & over at 30 September 2018, i.e. whose date of birth is 30/9/2008 or earlier.
Pre-School Provision	Children in their pre-school year in 2017/18, i.e. whose date of birth is 2/7/2014 to 1/7/2015
Development Assessments	Children aged under 5 at 30 September 2018, i.e. whose date of birth is 1/10/2013 or later.
Immunisations	·
Dental Checks	All children covered by the OC2 collection, i.e. all children who were looked after on 30 September 2018, and who had been looked after continuously for at least 12 months.
Health Assessments	-
Current Activity / Past Schooling Experiences	Children attending school Year 12 in 2017/18

Appendix C – Placement definitions

Below are explanations of different types of care placements.

Foster care is when a child is placed by a Trust, or by its parents (or those with parental responsibility), with other persons who will care for, and rear the child. Foster Carers are approved by a Health and Social Care Trust and receive an allowance for their caring responsibilities from the approving Trust. In this publication it will be differentiated between those foster care placements that are kinship foster care arrangements and those that are non-kinship foster care arrangements.

Kinship care (formal) is when a looked after child is placed by a Trust with a relative, friend or other person with a prior connection to the child, who will care for and rear the child. A person with a prior connection could be someone who knows the child in a professional capacity such as a child-minder, a teacher or a youth worker although these are not exclusive categories. Kinship carers are approved by a Health and Social Care Trust and receive an allowance for their caring responsibilities from the approving Trust. Kinship care (informal) is when a child who is not 'looked after' is placed with a relative or friend on a voluntary basis with no involvement of social services. This group of children is not covered in this publication.

Placed for adoption refers to a child that has been approved to be adopted and is placed with his/her prospective adoptive parents pending affirmation from the courts. It is distinguished between children who are placed for adoption with their former foster carers and those who are placed for adoption with 'others' (not former foster carers). Unless otherwise stated, children placed for adoption will be included in 'Non-kinship foster care' in the analysis in this report.

Residential care is when a looked after child is placed by a Trust in a children's home. Residential care for children / Children's Homes are there to ensure that the needs of children are met when they cannot live with their own family. They are a place for children to develop and grow, as well as providing food, shelter, and space for play and leisure in a caring environment. Children's Homes look after children with many different needs.

Secure accommodation is provided for children on a short term basis when it is likely that the child, in any other setting, will injure him/herself or abscond and is likely to suffer significant harm when absconding. Unless otherwise stated, children in secure accommodation will be included in 'Residential care' in the analysis of this report.

Placed with parent refers to children for whom a Care Order exists and who are placed with their parents, a person who is not a parent but who has parental responsibility for the child or where a child is in care and there was a residence order in force with respect to him/her immediately before the care order was made, and who are placed with a person in whose favour the residence order was made.

Emergency foster care is when a looked after child is placed by a social worker in an emergency (short term) arrangement. All emergency foster care placements covered in the 2014/15 OC2 survey collection related to kinship carers. Unless otherwise stated, children placed in emergency foster care will therefore be included under 'kinship foster care' in the analysis of this report.

Independent living arrangements refers to children placed in independent accommodation. This would refer to young people between 16-18 years old. Independent living arrangements can further be categorised into with or without formal support from Trust. Unless otherwise stated, children in independent living arrangements will be included in 'Other placements' in the analysis of this report due to the small number of children in these living arrangements within the cohort studied.

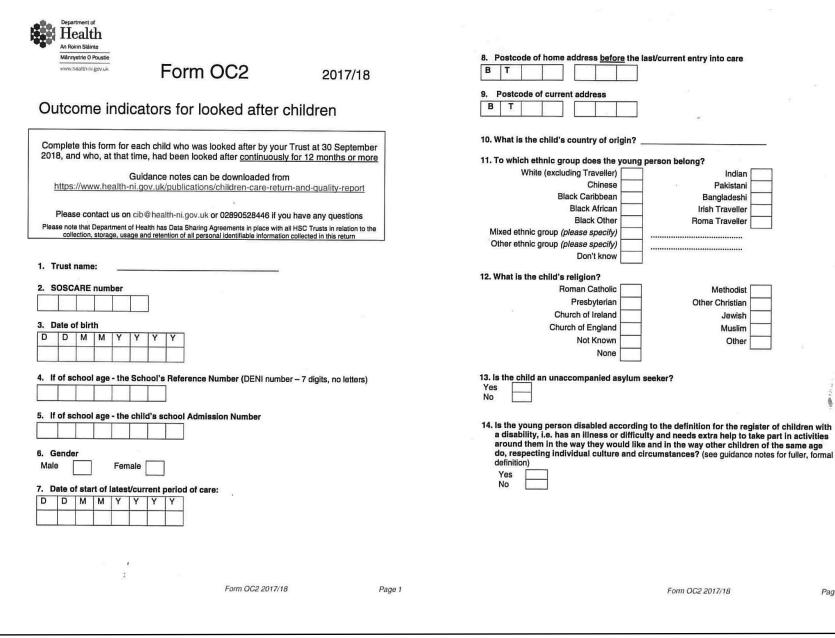
Other placements refers to any placement reported that are not covered by other categories given. This may include children in assessment centres, boarding schools etc. and also special arrangements relating to one Trust. The categories included may therefore change from year to year.

Appendix D – Tables

All tables can be found in excel format at: www.health-ni.gov.uk/articles/looked-after-children

Table 1a	Children in care for at least 12 months at 30 September 2018
Table 1b	Demographic Trends of Children in care for at least 12 months (2011 – 2018)
Table 2	Health Trend Data for Children in care for at least 12 months (2011 – 2018)
Table 3	Funded Pre-School Provision Trend Data for Children in care for at least 12 months (2011 – 2018)
Table 4	General Educational Information for Children in care continuously for at least 12 months for the year ending 30 September 2018
Table 5	Special Educational Needs Trend Data for Children of Compulsory School Age Continuously in care for at least 12 months (2011 - 2018)
Table 6	School Suspensions Trend Data for Children in care for at least 12 months (2011 - 2018)
Table 7	Days Missed Trend Data for Children in care for at least 12 months (2011 – 2018)
Table 8	School Attendance by Half Days 2017/18
Table 9	Half Days Missed by Absence Type 2017/18
Table 10	School Changes Trend Data for Children in care for at least 12 months (2011 - 2018)
Table 11	GCSE Trend Data for Children in care for at least 12 months (2011 - 2018)
Table 12a	Children in care for at least 12 months at 30 September 2018 by placement type
Table 12b	Educational Attainment for Children in care Continuously for 12 Months or longer at 30 September 2018 by Placement Type
Table 13	Cautions/Convictions Trend Data for Children in care for at least 12 months aged 10 and over (2011 - 2018)
Table 14	Current Activity Trend Data for Children in care for at least 12 months who had completed Year 12 at 30 September (2011 – 2018)
Table 15	Current Activity Trend Data for Children in care for at least 12 months who had completed Year 12 at 30 September 2018 by gender
Table 16	Personal Education Plans for Children in care for at least 12 months of compulsory school age at 30 September (2013 – 2018)
Table 17	Children in care for at least 12 months at 30 September 2018 by Local Government District
Table 18	Children in care for at least 12 months at 30 September 2018 by Assembly Constituency Area

Appendix E – OC2 Survey form 2017/18



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Page 2

15. If 'Yes', please state all disability types that apply to the child Visually disabled Learning disabled Hearing impaired Severe Learning disability Physically disabled Autism Mental health disability Other (please specify below) Not known If 'other', please specify	 19. Did the child's placement change during the last year (i.e. between 1 October 2017 and 30 September 2018)? (do not include placement changes that were due to short break/respite) Yes No 20. If 'Yes', how many placement changes occurred during the year? (do not include placement changes that were due to short break/respite)
16. Does the young person have any dependants/children? Yes If 'Yes', please enter the number of dependants No If 'Yes', please enter the number of dependants 17. Where is the child currently placed (at 30th September 2018)? Secure accommodation Other residential accommodation Placed for adoption with former foster carers Placed for adoption with others Emergency foster care (kinship or non-kinship) Kinship Care – less than 12 weeks No Unregulated – in placement >12 weeks and not approved Foster Care (Non-kinship) Placed with parents (or persons with parental responsibility) Independent living with ofrmal support Independent living with otheral support Independent living with ofrmal support Other accommodation (please specify below) Other accommodation (please specify below) Independent living with forster care, please specify if the kinship carer is: Grandparent Sibling	21. If there was a placement change during the last 12 months; what was the placement placement? Secure accommodation Other residential accommodation Placed for adoption with former foster carers Placed for adoption with others Placed for adoption with others Imergency foster care (kinship or non-kinship) Kinship Care less than 12 weeks Kinship Care Approved Stage 1/Approved Stage 2 Unregulated in placement >12 weeks and not approved Foster Care (Non-kinship) Placed with parents (or persons with parental responsibility) Independent living without formal support Independent living without formal support Other accommodation (please specify below) Other (please specify below) Breakdown Other (please specify below) Mo
Other relative Non-related connected person Form OC2 2017/18 Page 3	Form OC2 2017/18 Page 4

24. What was the child's legal status at 30 September 2018?	
Police protection in Board/Trust accommodation (Article 23)	
Child assessment Order (Article 62)	
Emergency Protection Order (Article 63)	
Accommodated under Article 21	
Interim Care Order (Article 57)	
Care Order (Article 50 or 59)	
Deemed Care Order (Paras 11 and 30 of Sch 8)	
Freed for adoption and looked after by Board/Trust	
Other (please specify below)	

25. Date of the last statutory review (prior to 30 September 2018):

D	D	M	M	Y	Y	Y	Y	1
		-	-		-	-	1	1

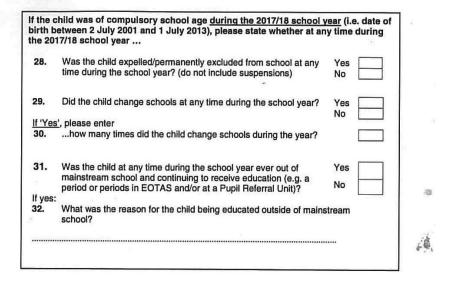
26. Was the child / young person invited to attend the last statutory review?

es	-
lo	

If no - please specify reason why:

	27. Method of participation of young person in last statutory review:
	Attended and spoke for him or herself
	Attended and an advocate spoke on his or her behalf
	Attended and conveyed views non-verbally
	Attended and did not contribute
1	Did not attend but briefed advocate to speak
	Did not attend but sent views (e.g. in writing, by phone)
	Did not attend and views not conveyed to the review
	Other (please specify below)

Form OC2 2017/18



Form OC2 2017/18

Page 6

33 W	as the child assessed at Key Stage 1 <u>during the 2017/18 school year</u> ? Yes No	36	Was the child assessed at Key Stage 2 <u>during the 2017/18 school year</u> ? Yes No
4	If 'No', please choose the reason that best describes why the child was not	37	If 'No', please choose the reason that best describes why the child was not
	assessed Child was not in Year 4 in 2017/18		assessed
	School Industrial Action		Child was not in Year 7 in 2017/18 School Industrial Action
	Child was not in school in Northern Ireland		Child was not in school in Northern Ireland
	EOTAS		EOTAS
	Statement of SEN – Severe Learning Disability Statement of SEN – exemption from Key Stage Exam		Statement of SEN – Severe Learning Disability
	Pending statutory assessment of SEN		Statement of SEN – exemption from Key Stage Exam
	Newcomer Pupil – exemption from Key Stage Exam		Pending statutory assessment of SEN Newcomer Pupil – exemption from Key Stage Exam
	Pupil Illness/In Hospital		Pupil Illness/In Hospital
	Other – please state		Other – please state
		3	
	If 'Yes', what level did the child achieve in (please use levels 0, 1, 2 etc)		in the second
0	r (for Irish medium schools) Irish?		
	Using Maths?	38	Was the child assessed at Key Stage 3 <u>during the 2017/18 school year</u> ? Yes No
		39	If 'No', please choose the reason that best describes why the child was not assessed
			Child was not in Year 10 in 2017/18
			School Industrial Action
			Child was not in school in Northern Ireland
		10	Statement of SEN – Severe Learning Disability
			Statement of SEN – exemption from Key Stage Exam
			Pending statutory assessment of SEN
			Newcomer Pupil – exemption from Key Stage Exam
			Other – please state
	e de la companya de la	1.2	
		40	If 'Yes', what level did the child achieve in (please use levels 0, 1, 2 etc)
			Communication?
		1	or (for Irish medium schools) Irish? Using Maths?
			Using ICT?
		1	
	,		
		L	

41	Was the young person in Year 12 and sat at least 1 GCSE examination during		For children who began primary school in September 2018 ONLY
	the 2017/18 school year? Yes No	46	5 Did the child have a funded pre-school place (in a day nursery, nursery school, nursery class or playgroup) in their pre-school year? (i.e. between September 2017 and June 2018) Yes
42	If 'No', please choose the reason that best describes why the young person did not sit any of these examinations		No
	Young person was not in Year 12 in 2017/18		
	Was unable to sit <u>anv</u> formal examinations due to either serious illness (including mental health issues) or pregnancy		For children aged 5 and over at 30 September 2018
	Was not in school in Northern Ireland	47	7 Has a LAC Personal Education Plan been completed for the young person? Yes
	Placed in the EOTAS scheme		No
	In Special Unit / Special School		If yes
	Statement of Special Educational Needs	48	has the LAC Personal Education Plan been reviewed within the last 12
	Serious welfare issues that have culminated in the inability to sit any formal examinations	8	months? Yes
	Other – please state		No
	-		
			For children aged 4 and younger at 30 September 2018
43	If 'Yes', please enter the number of qualifications obtained at GCSE Grades A*-C GCSE Grades D-G	4	49 Were the child's development assessments up to date at 30 September 2018? Yes
	If the child obtained 5 GCSE Grades A*-C, did this include both GCSE English		No
	and GCSE Maths? Yes No N/A	50	0 Did the child have his/her 6-monthly health assessment completed between 1 April 2016 and 30 September 2018? Yes No
44	Did the child obtain any NVQs? Yes		For children aged 5 and over at 30 September 2018
	No	51	1 Did the child have his/her annual health assessment completed during the
45	If 'Yes', please enter the number obtained at each level (see guidance notes) Number obtained at level 1 Number obtained at level 2 Number obtained at level 3		year ending 30 September 2018? Yes No
		1	
	· ·		
	Form OC2 2017/18	Page 9	Form OC2 2017/18 Pau

For all children		For children who were in Year 12 in 2017/18 and who were eligible for GCSE (or
52 Were the child's immunisations up to date at 30 Septemi Yes No	per 2018?	equivalent) examinations 59. Had the young person completed Year 12 at 1 July 2018? Yes No
53 Did the child have his/her teeth checked by a dentist dur 30 September 2018? Yes No	ing the year ending	If 'Yes': 60. What was the young person's activity at 30 September 2018? Not known Full-time further education (up to 'A' level or equivalent standard) Part-time further education (up to 'A' level or equivalent standard)
54 Was the child identified as having a substance misuse p year ending 30 September 2018? Yes No	roblem during the	Higher education Full-time training Part-time training Full-time employment with planned training
55 If 'Yes' was the child offered an intervention for this prot Yes No	olem?	Full-time employment with no planned training Part-time employment Part or full-time volunteering Parent – full-time carer
56 If 'Yes' did the child accept or refuse this intervention? Accepted the intervention and received treatment Refused the intervention		Other full-time carer Unemployed as a result of ill-health or disability Unemployed for other reason Other activity (please specify below)
For children aged 10 and over at 30 September 2018 57 Was the child convicted or cautioned during the year (1 0 2018), for an offence committed while being looked after Yes No	Oct 2017-30 Sept ?	61. How many different schools has the child attended during his/her school years? Total number of primary schools attended Total number of secondary/grammar schools attended
If 'Yes', please state below what the offence or offences were		62. Was the child ever out of mainstream school and continuing to receive education (e.g. a period or periods in EOTAS and/or at a Pupil Referral Unit)? Yes No
58 Is the child/young person involved in access to family histor work?	y through Life Story	This is the end of the questionnaire. Many thanks for your cooperation.
Yes No		
		x and the second s
Form OC2 2017/18	Page 11	Form OC2 2017/18 Page 12

This and other **statistical bulletins** published by Community Information Branch are available to download from the DoH website at:

www.health-ni.gov.uk/topics/dhssps-statistics-and-research-socialservices/social-care-statistics

Further Information on Children in Care in Northern Ireland is

available from:

Community Information Branch Department of Health Annexe 2,Castle Buildings Stormont, BT4 3SQ

E-mail: <u>cib@health-ni.gov.uk</u> Phone: (028) 90528446