

Matching Needs and Services



National Children's Bureau

An audit of the needs of 268 children attending
Pupil Referral Units in 4 local authority areas

Liz Brown
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ryantunnardbrown

service development : children and families

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Executive summary

- The purpose of this audit is to increase understanding of the range of needs, and in particular the emotional and mental health needs, of children attending Pupil Referral Units (PRUs) in 6 local authority areas.
- This report describes the way the audit was undertaken, the pressing needs that emerged, current responses to children's needs, and the views of PRU students who took part in a 'shadow' audit.
- Twelve Need Groups emerged from the audit and these have been clustered under three main headings: family relationships, parenting, and emotional needs.
- Relationship and parenting issues obviously impact on children's mental health – 72 per cent of children fell into these two clusters. More than a quarter (28%) of children had needs directly related to their emotional and mental health issues or those of a parent.
- Children whose pressing needs are about relationships with parents, loss and trauma and improved care at home have the most serious needs and the poorest outcomes. This was found to be the case in all six sites. Lack of attention to these needs will continue to create an adverse impact on children's emotional well-being.

The important messages to emerge at this stage of the work are as follows:

- 1 The children – and their parents – have a range of needs, and these needs are serious.
 - 41% of children's needs were judged as not being met
 - More than half (62%) of these unmet needs were judged to be affecting the children's health and development in a significant way
 - 6% of children were looked after by the local authority and 4% were subject to a child protection plan
 - PRU staff are anxious about their pupils' future. In the year 11 PRU, half the children (14 out of 26) did not have a clear post-16 destination and so were likely to become NEET.
- 2 There is a marked lack of clear multi-agency planning and this is especially worrying in view of the range of need among the children and their parents. Staff make reference to Team around the Child (TAC) meetings having taken place in some cases, but they do not have an active involvement in plans that may have emerged from those meetings.
- 3 Given the seriousness of children's needs, and the gravity of children's stories, as reported in the main body of this report, it was remarkable that the researchers found all six PRUs to be calm, industrious places where children were respected and their achievements celebrated. In similar vein, recent Ofsted inspections of

these sites report that the education the children are receiving is more than adequate, with children's educational needs taken seriously and children participating in public examinations.

- 4 It is a tribute to staff that, in addition to their role as educators, they are expert at analysing children's needs holistically and delivering such a wide range of imaginative responses. In some ways they can be seen as victims of their own success in that their ability to engage with children and to address the needs that they present within the PRU appears to act as a deterrent to multi-agency involvement. Children and their families are victims too. The PRU offers children a period of respite where their more immediate needs can be responded to. Inevitably, with their wider needs left unaddressed, and without the continuing benign influence of the PRU, their outcomes when they leave school are likely to be extremely poor.
- 5 The audit raises important issues for the next stage of the project. This will focus on exploring in more detail, with two of the participating PRUs, how they might increase their own capacity to address the emotional and mental health needs of children and how children's services more broadly might share responsibility for the needs of this extremely disadvantaged and vulnerable group of children.

Pupil Referral Units-Background and policy overview

Background

The legal remit and primary purpose of pupil referral units (PRUs), under section 19 of the Education Act 1996, is to provide education to children of compulsory school age who, on account of illness, exclusion or for other reasons, are unable to attend a maintained (i.e. mainstream or special) school. In addition to pupils who have been excluded from mainstream schooling for medical reasons, PRUs may cater for school-aged mothers and pregnant schoolgirls, school refusers, phobics and young carers, and pupils awaiting placement in a maintained school. Many of the children attending PRUs will have been permanently excluded or be 'at risk of' exclusion. Despite the often challenging nature of their pupils PRUs are expected to offer a balanced and broadly based curriculum, including English, mathematics, science, PSHE, ICT and careers education and guidance ⁽¹⁾.

PRUs include a very high number (75%) of children and young people with special educational needs. These include those with formal statements (13%) and those who, though not stated, nonetheless have long-term unresolved emotional and behavioural difficulties (62%)⁽²⁾. Such difficulties may be entrenched, extending back through their primary school histories, resulting in highly disruptive behaviour ⁽³⁾. Compounding the challenges such profiles represent, pupils at PRUs often arrive in an unplanned way mid-term. Subsequent attendance can be highly erratic with far higher rates of absence, authorized and unauthorized, than for pupils in the general school population – absence rates reach nearly a third of the student roll in several areas. This results in an unpredictable student body, making the planning and methodical delivery of educational programmes extremely hard ^(4,5,6). Staff working with these children and young people require exceptional skills to respond appropriately to the challenges presented. Kinder and others concluded that having 'quality' staff was central to the effectiveness of a provision or service. ⁽⁷⁾

Statistics

In 2008 there were 448 pupil referral units in England (Hansard 3rd March 2008). These had places for approximately 16,000 pupils (Hansard Written Answers 9 Oct 2008). Numbers of pupils in a PRU will vary, the majority having up to 20 pupils but a few may have 40-65 pupils or more ⁽⁸⁾. In addition to the 75 per cent of their pupils with recognised special educational needs, many have backgrounds characterized by social deprivation, for example 26.8 per cent qualify for free school meals, compared to 14.5% in mainstream schools (Hansard 15 July 2008). Absence rates in PRUs are significantly greater than mainstream schools.

Government Policy

The previous Labour government's white paper *Back on Track* ⁽²⁾ made various proposals for improving PRUs, including closing the poorest performing units and replacing these with 'high quality alternatives' from private and voluntary sector providers. It even suggested re-naming PRUs as Short Stay Schools, to emphasise their primary aim of mainstream re-integration.

Draft statutory guidance proposed establishing better arrangements for information sharing, Individual planning and the engagement of support services. These proposals have lapsed with the election of the new coalition government.

The Schools White Paper published in November 2010 ⁽⁹⁾ sets out proposals on alternative provision which includes plans to improve the quality of alternative provision by giving all PRU management committees delegated powers on staffing and finance in the same way as community school governing bodies and enabling PRUs to seek academy status and opening Free school status to providers of alternative provision. The education bill also contains proposals to allow the secretary of state to close inadequate PRUs and specify what provision should replace them. These plans are being taken forward in the Education Bill currently making its way through the legislative process.

References

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<http://www.education.gov.uk/schools/pupilsupport/behaviour/attendance/schoolattendancedata/a009991/absence-data>
7. Kinder, and others (2000) *Working out well: effective provision for excluded pupils*. National Foundation for Educational Research.
8. Ofsted (2008) *The Annual Report of Her Majesty's Chief Inspector of Education, Children's Services and Skills 2007/08*. Stationery Office.
9. Department for Education (2010) *Schools White Paper: The Importance of teaching*

Introduction to the project and the audit methodology

The project

This Matching Needs and Services audit of the needs of children in Pupil Referral Units (PRUs) was commissioned to increase evidence and understanding about the emotional and mental health needs of these children. It is the initial phase of a three-year project, funded by the Department of Health and managed by the National Children's Bureau, to build capacity in PRUs to support the mental health needs of their children and young people.

PRU staff support, manage and educate young people, many of whom will have significant difficulties. For young people in key stage 4 provision this may be their last opportunity to access support as part of a statutory provision, before transferring to adult services. Access to child and adolescent mental health services will vary across the country and, even where off-site services are available and able to engage with young people and their families; it is unlikely that supply will fully meet demand.

Whilst it is recognised that the primary purpose of PRUs is to provide education, this project is concerned with the broader social and emotional needs of vulnerable young people which, if unmet, will continue to have a negative impact on young people's educational outcomes and future life chances. The range of difficulties faced by young people in PRUs, and the high level of pupil transience, make this a challenging group in terms of planning, commissioning and delivering services: all the more reason for exploring ways of meeting this challenge.

The next phase of the project will be about developing responses and interventions more able to address the young people's needs. It will provide the opportunity to work with two of the participating PRUs, to increase their capacity to address the emotional and mental health needs of children and to consider how children's services more broadly might share responsibility for the needs of this extremely disadvantaged group of children.

PRUs participating in the audit

Six PRUs were recruited from across England to participate in the audit work and the final participants included both rural and urban areas. We were less successful in retaining areas with a broad range and number of black and minority ethnic (BME) populations. One of the six was for a specific year group whilst the others had both primary and secondary aged pupils. The sites are referred to in this report as:

- 1 Central urban – serving a predominantly white catchment area in central England with an on-site mother and baby unit.
- 2 London Borough – a Year 11 PRU, serving a catchment area with a high BME population and with a significant number of young people involved in gangs.

- 3 Northern Mixed – serving a large, predominantly white catchment area including both urban and rural populations in the north of England.
- 4 Northern Urban – serving a predominantly white catchment area in the north of England.
- 5 Northern Rural – serving a predominantly white catchment area in the north of England.
- 6 Southern Urban – serving a predominantly white catchment area in the south of England and offering a service for children unable to attend school for health reasons.

The audits were undertaken between December 2009 and May 2010. A separate report has been sent to each PRU about their own audit and findings.

The audit work

A short audit form (attached at the end of this report) was completed in relation to each of the 268 children. PRU staff members used the form to record concise information about the child's situation across five dimensions:

- living situation
- relationships
- behaviour
- health, and
- education.

Needs

The PRU staff then make a judgement about what the key circumstances they have identified tell them about the child's needs. It is important at this stage to describe need very specifically, avoiding terms that are more descriptive of services that might address the need. For example, a child might be described as needing 'to come to terms with the death of a relative' rather than as needing 'counselling'. Or a child might be described as needing 'to be able to sit still in circle time' rather than needing 'to improve behaviour'.

Staff were asked to include the needs of parents or carers also, where this was relevant, on the basis that children's need are very often consequent on the needs of their parents. For example, it might be that a child needed to come to school on time and her mother needed to manage her alcohol use better so she could get up in the morning and get her child to school on time each day.

When staff in each of the six PRUs had completed a form for each child in their sample, they came together again as a staff group to aggregate the needs they had identified. This process of aggregation involves identifying the themes and pattern

of need that run through the sample and sorting cases into *need groups*. Each form is read by the person who completed it and then the group reaches consensus about the child's most pressing need. That case is then added to the pile of forms of children with a similar pressing need. Each staff group arrived at the separate need groups for their children and these are described in this report.

As they completed each form, the auditors had marked up the forms to provide more general information about the children's home and family circumstances. This included household composition, legal status, adult issues such as domestic violence, health and behaviour, child and parent use of drugs and alcohol, and family and social networks. This data, both quantitative and qualitative, is drawn on in the main body of the report.

Seriousness

As they recorded the above information about needs, the staff were also asked to make a judgement about the seriousness of the needs they identified in each case. This is important for planning services because, without such an understanding, it will be difficult to know what priority to give to the need identified or how to decide on the intensity of service required.

For this exercise the thresholds in section 17 of the Children Act 1989 have been modified for use as a measuring tool. Auditors were asked to decide whether, without services, the child's development:

- | | | |
|---|---|--------------------|
| 1 | was likely to be impaired in the future | (lower-level need) |
| 2 | or was currently being impaired | (additional needs) |
| 3 | or was currently being significantly impaired | (complex needs). |

The decisions made about this are reported for each Need Group.

Outcomes

Finally, auditors were asked to make a judgement about the extent to which the needs they identified were being met. They scored each case as needs 'met', 'partially met' or 'not met'. This information is also recorded for each Need Group, together with more qualitative information about the services that the PRU offered to the children in each group.

The auditors

Thanks are due to the staff from all six PRUs involved in the audit. It was a huge organisational task to bring together such a large sample and demanded a significant amount of time from an already hard-pressed group of professionals.

Their knowledge of individual children is extensive and has led to a richness of information not usually available to researchers. The knowledge arises from the relationships staff are able to make with children who have not been able to respond to adults in other settings. Their success in forming such relationships is based on a very real commitment to understanding the nature of the difficulties children are

facing, and working out how to respond effectively. Being clear about need was universally seen as crucial - it is of note that several of the PRUs valued the way in which the short audit form helped them with this task and have adapted it as an assessment tool for planning for all their pupils.

The staff felt confident that the range of children in their own sample, the range of PRUs involved overall, and the discussions that are an essential ingredient of this type of audit, meant that their views and the needs of the children they are working with were represented fully.

Shadow audit: Consultation with young people

A group of three young people from the Year 11 PRU met to look at an anonymised sample of six children from one of the other PRUs. Their work used a shortened version of the methodology used by the professionals. Their views and insights were invaluable and are reported here. It is hoped that this work may be built on, with a group of student consultants helped to become an integral part of the next stages of the work.

General characteristics of the children

The sample

Broadly, staff included all the children they felt they knew well. New entrants to the PRU, or those receiving off-site home tuition, were not included. Cases were drawn from the six PRUs as follows:

PRU	No	%
Southern Urban	77	29
Central Urban	63	24
Northern Mixed	37	14
Northern Rural	35	13
London Borough	30	11
Northern Urban	26	10
Total	268	100

Age/year group

Year	No	%
1	9	3
2	2	1
3	4	1
4	7	3
5	10	4
6	15	6
7	14	5
8	35	13
9	45	17
10	50	19
11	74	28
12	3	1
Total	268	100

Gender

There are 205 (76%) boys and 63 (24%) girls.

Ethnicity

The census codes have been used to record the children's ethnicity.

Ethnicity	No	%
White British	234	87
Black Caribbean	13	5
White and Black Caribbean	7	3
Any other White Background	6	2
White and Asian	2	1

Any other mixed background	2	1
African	2	1
Any other Asian background	1	0.4
White Irish	1	0.4
Total	268	100

Living situation

Half the children (50%) are living in a lone-parent household.

Child lives with	Total	%
Mother	117	44
Both birth parents	67	25
Mother and mother's partner	34	13
Looked after child – foster/residential carer	19	7
Father	17	6
Other relative	8	3
Non relative	3	1
Father and father's partner	1	0.3
Adoptive parent	1	0.3
Independently	1	0.3
Total	268	100

Domestic violence a feature of family life

	No	%
Domestic violence	46	17

Behaviour

More than half the children (61%) are described as having behaviour problems at home. More than a quarter of them (27%) are involved in offending behaviour. Almost half (45%) have poor social skills. Bullying is an issue for a quarter (25%) of children.

	No	%
Child has behaviour problems at home	164	61
Poor social skills	121	45
Child has offending behaviour	72	27
Bullying issues	68	25
Adult has offending behaviour	23	9
ADHD diagnosed	22	8

Health

Almost half the children (47%) are described by auditors as having low self-esteem. A similar proportion (44%) is described as having emotional and mental health

difficulties. A quarter (25%) have a parent with a mental health problem. Almost a fifth of the children (16%) have a physical health problem and over one in ten of the sample (11%) has a parent with a physical health problem.

	No	%
Child described as having low self-esteem	126	47
Child has emotional/mental health difficulties	117	44
Adult has emotional/mental health difficulties	67	25
Child has physical health difficulties	43	16
Adult has physical health difficulties	29	11
Housing problems	25	9
Poor home conditions and domestic routines	18	7

Substance Misuse

A fifth of the children (20%) have a parent who misuses drugs and/or alcohol. More than a quarter of the children (27%) misuse drugs and/or alcohol.

	No	%
Adult misuses alcohol	29	11
Adult misuses drugs	25	9
Child misuses alcohol	29	11
Child misuses drugs	42	16

Education

Not surprisingly, children continue to struggle at school. Almost three quarters (68%) have current behaviour problems. More than a third (36%) have been excluded. Almost half (41%) have attendance issues. The auditors did not collect information about children's learning difficulties as they have that information recorded elsewhere. But they logged information about learning difficulty in parents – it featured in 4% of cases.

	No	%
Child has behaviour problems at school	181	68
Exclusions	96	36
Attendance issues	111	41

Legal orders and procedures

Auditors recorded what they knew about legal orders and procedures affecting children and parents. The categories below are not mutually exclusive.

Legal order	No	%
Care Order	15	6

Prosecution for school non attendance	11	4
CP plan	10	4
Anti-Social Behaviour Order	12	4
Supervision Order (Youth Justice)	9	3
Referral Order	9	3
Penalty notice (not sending child to school)	6	2
Remand	4	1
Custodial (Detention Training Order, part of which is completed in the community)	3	1
Anti-Social Behaviour Contract	2	0.7

Seriousness

In planning and evaluating services it is important not only to identify need but also to make a judgement about the seriousness or severity of need. Without such an understanding it will not be clear what priority should be placed on the need identified or what intensity of service will be required and over what time period. In order to make a judgement about severity, the thresholds in section 17 of the Children Act 1989 have been modified for use as a measuring tool. Auditors were asked to decide whether, without services, the child's development was:

- 1 likely to be impaired in the future, or
- 2 was currently being impaired, or
- 3 was currently being harmed in a significant way.

This way of measuring differs from the way levels of seriousness are measured in the static matrices of need which now exist in many children's services authorities (for example, the model using levels 1, 2 and 3) because it is based on prediction about the way needs will develop if they are not attended to. This allows for a more accurate prioritisation of needs and a greater chance of determining which should be addressed at an early stage, in order to prevent difficulties from escalating.

The three levels above have been translated into:

- 1 lower-level needs
- 2 additional needs, and
- 3 complex needs.

How auditors judged the seriousness of the children's situation

The needs of almost all the children (98%) were considered to be moderate (additional) or serious (complex).

	No	%
Likely future impairment (lower-level needs)	6	2
Current impairment (additional needs)	96	36
Significant impairment (complex needs)	166	62
Total	268	100

Meeting need

Auditors were asked to make a judgement about whether the services the child was receiving were addressing the needs they had identified. It was stressed that this was not a comment on the quality or otherwise of the service itself, nor a comment on the processes followed, but rather a factual question about whether the needs they had identified, in the context of the audit, were being addressed.

Given the seriousness of need coming to attention, it is encouraging that more than half the children (59%) are having their needs in full or part. Conversely, it is of concern that needs are not being met for almost half the children (41%).

Service addressing need	No	%
Fully	27	10
Partially	131	49
Not meeting needs	110	41
Total	268	100

Summary of quantitative data

The points below provide a more detailed summary analysis of the information recorded on each side of each child's audit form (see form attached at the end of the report).

- Children in the sample and their parents have a wide range of needs and those needs are serious. More than half the children (62%) are judged to have reached the significant impairment threshold.
- Half the children (50%) live with a lone parent.
- For almost a fifth of children (17%) domestic violence is an issue in their life.
- More than half the children (61%) have behaviour problems at home and over a quarter (27%) have been involved in offending behaviour. Almost half (45%) have poor social skills. Bullying is an issue for a quarter (25%).
- Health issues are a problem for many parents and children. Almost half the children (47%) are described as having low self-esteem. A similar proportion (44%) is described as having emotional and mental health difficulties. A quarter of children (25%) have a parent with a mental health problem. Almost a fifth of children (16%) have a physical health problem. One in ten children (11%) have a parent with a physical health problem.
- Many children and families are struggling with substance misuse issues. A fifth of children (20%) have a parent who misuses drugs and/or alcohol. This is so for a quarter of the children overall (27%). For a quarter of them (26%), alcohol misuse is the problem, with drug misuse the problem for 29%.
- Not surprisingly, children continue to struggle at school. Almost three quarters (68%) have behaviour problems in school, more than a third (36%) have been excluded, and almost half (41%) have attendance issues.
- The wide range and severity of need cannot be expected to be met by one service working in isolation. They will need to come from a broad spectrum of agencies, working in a well integrated manner and with a clear focus on the outcomes that need to be achieved in response to the needs identified. Responses will need to cater for the needs of both children and their families.
- Given the seriousness of need coming to attention, it is encouraging that more than half the children (59%) are having their needs met in full or part. It is of concern that needs are not met in the case of almost half the children (41%).

The Need Groups that emerged

The table below gives an overall picture of the Need Groups that emerged from the aggregation exercise described earlier (page 7). Each Need Group is based on the auditors' judgements about the child's *most pressing need*, with children then allocated to a Need Group with children with the same pressing need. The Groups are listed and described in descending size order.

Need group (NG)	NG key	No
Need to improve adult/child relationships	ACR	77
Need to reduce the impact of loss and trauma	L&T	61
Need for much improved care at home	MIC	33
Need for consistent boundaries at home	CBH	32
Need for behaviour to be understood and managed	BUM	14
Need to overcome the impact of domestic violence	DV	13
Need for improved emotional/mental health	MH	13
Need for adult relationships to improve	AR	11
Need for child to learn to make friends	LMF	4
Need to reduce the impact of physical illness	PH	4
Need to continue education	CED	3
Need for parent to manage their substance misuse	PSM	3
Total		268

Spread of Need Groups across PRUs

It is of interest that the three largest need groups are common to all six PRUs. These needs are about improved adult/child relationships, reducing the impact of loss and trauma, and providing much improved care at home.

There are differences, too, that will be relevant to explore at the next stage of work, when considering appropriate service responses. For example, the largest group in the Year 11 PRU (London Borough) is where the need is for improved adult/child relationships: 43 per cent of the children fall into this group. This finding is interesting in terms of the gang culture prevalent in the area – it might point to young people finding in a gang the sense of belonging that is lacking in their family. It is also interesting to note the way that the need groups about providing consistent boundaries at home, and understanding and managing behaviour, are spread across the PRUs. These may be similar children, clustered differently because of the way in which different PRUs interpret the cause of behaviour difficulties.

Clustering the Need Groups

The table below clusters the Need Groups around three main themes: family relationships (41% of cases), parenting (31%), and the emotional needs of parents and children (28%).

	Relationships	No	%
1	Adult/child relationships to improve	77	
2	Overcome impact of domestic violence	13	
3	Adult relationships to improve	11	
4	Learn to make friends	4	
5	Reduce impact of physical illness	4	
	Sub-total	109	41
	Parenting		
6	Much improved care at home	33	
7	Consistent boundaries at home	32	
8	Behaviour to be understood and managed	14	
9	Continue education	3	
	Sub-total	82	31
	Emotional needs		
10	Impact of loss and trauma to be reduced	61	
11	Emotional/mental health to improve	13	
12	Parent to manage substance misuse	3	
	Sub-total	77	28
	Total	268	100

Detailed description of the Need Groups

In this section we provide a more detailed description of the children in each Need Group, with an analysis of the seriousness of the needs of the children in the group and the extent to which needs are being addressed. Services provided by the PRU, and comments about why needs are being met only partially, are also included.

Cluster A – Family relationships

1. **Adult/child relationships to improve** **77 children**

The primary need is for relationships between parents and their children to improve. For some parents relationship difficulties go back to the child's birth and, for most, the ending of a relationship with a partner has complicated the relationship with their child. Many parents are overwhelmed by their own difficulties and find it hard to see the world from their child's point of view. They are not able to make the link between their relationship with their child and their child's behaviour. This can lead to rejection of their child or to a role reversal where the child is caring for the parent. Many children in the group feel they are compared unfavourably with a sibling.

These relationship difficulties are long standing and for many children they have involved a lack of clear and consistent boundaries. Some parents have been over indulgent and others disinterested. Both parenting styles have led to anti-social behaviour for the children and in some cases this is extreme. In one urban PRU there seems to be a direct relationship between relationship breakdown and gang membership where children are looking for a sense of belonging not available at home.

All the children in the group need a more positive relationship with parents and they need to understand why adults in their life have found parenting so difficult. They need to come to terms with loss and rejection and to find ways of expressing how they feel without hurting themselves or others. Many need a relationship with a trusted adult in order to compensate for the lack of a trusting relationship with parents.

The group includes:

- A year 11 child who has problems separating from his mother. His father left the family very suddenly and he fears his mother will do the same.
- A year 11 child who feels unable to live up to his parents' expectations of him. He has a very successful older brother.
- A year 11 child who is living in a hostel as a result of the breakdown of her relationship with her mother.
- A year 8 child who has very poor self-esteem and lacks self-belief. He does not believe his mother cares about him, seeing his sister to be the favoured child
- A year 11 child who is looked after. His mother misuses drugs. His relationship with her has broken down and his gang has become his family. He is violent and involved in crime.
- A year 3 child whose mother indulges him and treats him as if he were an adult. She is not able to see how her relationship with him contributes to his bad behaviour

- A year 10 child whose poor relationship with his mother is longstanding. He appears depressed and, although an able pupil, has little interest in his future.
- A year 10 child whose mother is rejecting and expresses dislike for her. She self harms, has a diagnosis of anorexia and has spent time as an in-patient in a psychiatric unit.
- A year 1 child who was violent to a teacher in mainstream school. His parents are separated. They spend little time with him and he seems to be regarded as an encumbrance.

How serious is the need?

	Total
Likely future impairment	2
Current impairment	33
Current significant impairment	42
Total	77

Are needs being addressed?

Yes – fully	6
Partially	42
No	29
Total	77

What services were in place?

Range of services offered by the PRU

- Art therapy
- SEAL group work, and being listened to
- Managing difficult behaviour course (for mother)
- Give him lots of cuddles to help him feel important, and to help him learn to write
- Building a relationship so he can come out of his bedroom and come to the unit
- One-to-one with volunteer grandfather replacement who takes him to driving range
- One-to-one work to help him understand that adults can be reasonable
- Assigned him a buddy, to take an interest in him
- One-to-one work to help him develop an independent identity
- Supporting parents to help child improve her attendance
- Support family to enable them to cope with child's behaviour and also help address the needs of individual family members
- Give child strategies to manage her behaviour so that she does not receive a custodial sentence

- Teaching life skills, implementing strategies to encourage good behaviour, providing close supervision to prevent bullying, working with mother to give her behaviour management strategies
- Support and advice about her relationship with her mother, and about housing
- Trying to rebuild meaningful relationships with the family, to sustain his position in the family and prevent him from becoming homeless
- Help him to understand why he gets angry and raise his self-esteem
- Build family relationships with mother, and improve post-16 destination
- We are working to take away the importance of gang culture and build the child's self-esteem.
- We are trying to build a better relationship between the child and parents.
- We are working to raise his aspirations and to build a positive relationship with the family.
- We are trying to encourage the parent to establish clear boundaries and help the child to understand the consequences of his actions.
- We are helping her look at her turbulent relationship with her mother.

Reasons given by auditors for why needs are only partially met

- Child needs help to develop relationship with his father.
- Child's home is erratic with little stable care, and his psychological issues not being addressed.
- I think this is about his relationship with his father and his mother's attitude to his father – not an issue we can address.
- Child needs one-to-one time with parent.
- Child has done well and is returning to mainstream – there are still unresolved issues about his relationship with his parents.
- He has made extraordinary progress in coming out of his bedroom and joining a small group but it will be hard to make real progress if relationships in the family do not change.
- Real problem is mother's need to be parented by her daughter.
- Real issue is relationship with grandmother and this has not been addressed
- Child's life in turmoil – he is moving from placement to placement and has so many unresolved issues about his family.
- CAMHS did work with mother but more sustained intervention was needed.
- Services are making his life more 'normal' but not really addressing the central relationship issue.
- Parents need to let her know that they care deeply about her.
- She and her mother need to stop blaming each other.
- Mother has not been able to accept her child needs a place at a special school – she is worried about the effect older boys will have on her child.
- The parents' ability to respond to each other appropriately and not to allow their relationship issues to affect their child have not been addressed.
- The relationship with mother has not been addressed, neither has her drug use. He needs contact with mother. This would help with so many issues eg. self-esteem, and bring about a change of direction.

- We are meeting his basic educational needs but our communities need to make the culture of gangs less attractive.
- We can sow the seeds to help him understand family relationships better but for family relationships to really develop work needs to be done with all family members face to face.
- Rather than building the relationship between mother and child social services provided a way out by providing temporary accommodation. This has led to the relationship breaking down completely and his attendance has got worse. The family need to be given education and employment opportunities. This might change the child's mindset.
- Mother and child do not cooperate with any services offered. We need to provide one-to-one learning support and give her and her family coping skills in a family environment.
- He is not engaging with support agencies. He and his family do not respond well to people they have not previously built a relationship with.
- The draw of 'the street' has a greater impact than the services we provide. The Black community as a whole needs to take responsibility for 'our children', coming together to discuss the issues of gang culture and present/deliver programmes that dispel the myths and highlight the values of our forefathers who came to the UK during the 40s, 50s and 60s.
- Parents need to work with us and with each other to try to get to the bottom of child's unhappiness.
- There needs to be a focus on the child's home life.

2 Overcome the impact of violence

13 children

The primary need is for children to be helped to overcome the impact of past violence in the home on their daily life and the life of their family. Though no longer continuing, violence has been a feature of family life for some time and families are struggling with the fear and anxiety that is the aftermath.

Children find it hard to trust adults and their feelings of anger and frustration lead to violent behaviour at home, at school and in the community. They struggle to talk about how they feel and need help to make the connection between their experiences, feelings and behaviour.

Mothers who have separated from a violent partner are coping with a range of issues, including depression and the practical difficulties of being a single parent. In some cases they have become overly dependent on their children.

The group includes:

- A year 11 child whose father was imprisoned for violence. She is angry at school, uses abusive language and has no friends.
- A year 4 child whose mother moved to the area to escape a violent partner. The mother is struggling to break ties with her partner which confuses and unsettles the child.
- A year 11 child whose stepfather was violent. She finds it hard to make relationships with peers or staff and is very isolated in her local community.
- A year 5 child whose mother has an intermittent relationship with a violent partner. The child is violent at home and in the community, distrusts adults and is not able to talk about his feelings.
- A year 5 child whose father returned to the family home after a prison sentence for violence which directly involved the child. His stepfather was violent, too, and has just left the family home. He is violent to his mother and siblings and is drawn to violent programmes and films.
- A year 11 child who worries about his mother but is also abusive towards her. Both his father and stepfather were violent. His behaviour is erratic and can be aggressive.
- A year 10 child whose father was violent to his mother who misuses alcohol. He is angry, violent, involved with the police and misusing drugs.
- A year 9 child whose violent father is currently in prison. He drinks to excess and is involved in criminal behaviour.

How serious is the need?

	Total
Likely future impairment	1
Current impairment	4
Current significant impairment	8

Total	13
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Are needs being addressed?

Yes – fully	-
Partially	8
No	5
Total	13

What services were in place?

Range of services offered by the PRU

- Individual help to get her to attend regularly and get an apprenticeship, so she can avoid going to prison
- Individual sessions working on his behaviour and helping him to manage his feelings better. Help to improve his social skills. Extra-curricular activities to provide nurturing experiences that he lacks at home
- Help to manage his anger better
- Survive – domestic violence help for mother
- Rape/sexual support from Next Link
- Provide an environment where he can feel safe and happy

Reasons given by auditors for needs being only partially met

- We need better communication with EWS so we know what's going on when child is absent.
- Child needs the opportunity to discuss the domestic violence he has witnessed.
- Child remains at risk because of the violence at home.
- Child has made huge progress but he needs intensive support to come to terms with the trauma he has experienced.
- Child has sabotaged all placements offered, through his violence.
- Mother got on well with her previous family support worker but not with the current one. Mother says she misses appointments and is unreliable. Mother was in tears at a recent meeting over the issue of her family support worker who does not appear to be fulfilling her role properly.
- He needs help to deal with his anxieties about his mother's addiction. His family needs to show commitment to him and the whole family need help to deal with trauma – none of this is happening.
- He's doing well here but we can hardly scratch the surface. He needs help to address the trauma of domestic violence and his sister's involvement in prostitution.
- The young woman needs to discuss with someone she trusts how domestic violence has affected her and why she is violent to others.

3. Adult relationships to improve 11 children

The primary need is for parents to resolve conflict in their relationship and reduce the effect of conflict on their children. Parents are living apart and relationships are acrimonious.

Adults need to understand the adverse impact of their difficulties on children. Children need their parents to be less preoccupied with feelings of resentment and bitterness. They need reassurance about where they will live in the future, and – where necessary – they need contact arrangements with parents, siblings and other relatives that are clear and agreed.

The group includes:

- A year 9 child whose parents have separated. He was living with his father but his father rejected him because of his behaviour. He has now moved to live with his mother and her partner and this arrangement too is breaking down. His contact with his father is difficult and inconsistent.
- A year 9 child who lives with his father and does not have contact with his mother. His parents do not communicate with one another.
- A year 4 child whose mother tells him his father will be collecting him on a Friday when she knows this not to be the case but wants to cast her former partner in as unfavourable a light as possible.
- A year 10 child who is anxious and insecure. He does not see his mother although she lives nearby.
- A year 10 child who had been living with his father and went to live with his mother. This relationship broke down too and he is now sofa surfing, and involved in petty crime and violence.
- A year 3 child who lives with his mother and whose relationship with his father is irregular. He is upset, angry and non-compliant.
- A year 6 child whose parents have had an acrimonious relationship since the breakdown of their marriage. He is unable to interact with other children and has angry outbursts.

How serious is the need?

	Total
Likely future impairment	-
Current impairment	3
Significant impairment	8
Total	11

Are needs being addressed?

Yes – fully	-
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Partially	6
No	5
Total	11

What services were in place?

Range of services offered by the PRU

- Individual sessions to help child fit in better, socially and educationally, so he can go back to mainstream
- Time to play and be a child. Circle time to discuss feeling angry. Regular phone contact with Mum and Dad to discuss issues from home and school
- Help child reduce his anger
- Anger management sessions, self-esteem work
- Daily contact with mother and acting as her advocate with other services

Reasons given by auditors for needs being only partially met

- Father is very reliant on the help provided by the PRU and so finds it hard to co-operate with a reintegration plan. Adult relationship issues are not being addressed.
- Parents need a mediator to settle the custody arrangements. The back-and-forth with solicitors is too time consuming.
- Support has only partially worked. Attendance remains poor. Problems persist in the home.
- The child's behaviour in school has improved but there is a need for relationship work at home.

4 Learn to make friends 4 children

The primary need is for children to be helped to learn how to make friends and fit in. All the children in the group come from families where social isolation is a feature and they have had little experience of mixing with either adults or children outside their family. For these and other reasons, their peers see them as different and odd which in turn makes it more difficult for them to mix and fit in. They need to learn the rules of social interaction and adults in their family need to help them with this.

The group includes:

- A year 8 child who comes from a very insular family. Although a bright child, her self-image is poor. Her speech is slurred as a result of the medication she takes for anxiety, she wears glasses, and she is bullied because other children see her as 'geeky'.
- A year 8 Traveller child who had not attended school before and found it hard to make sense of it at first.
- A year 7 child who is being bought up by his grandmother and has no social interaction outside his family.

How serious is the need?

	Total
Likely future impairment	1
Current impairment	2
Significant impairment	1
Total	4

Are needs being addressed?

Yes – fully	2
Partially	0
No	2
Total	4

What services were in place?

Range of services offered by the PRU

- Lots of practical help to help him get to the PRU and to feel comfortable when he got here, with support to Mum so she felt happy with what was happening to her child during the school day

Reasons given by auditors for needs being only partially met

- His mother does not accept he has difficulties and so is not accepting of services.

5 Reduce the impact of illness

4 children

The primary need is for the young women in this group to reduce as far as possible the impact that myalgic encephalomyelitis (ME) is having on their life and the life of their family and to have a life that is as normal as possible. None of the young women are able to attend mainstream school and this is affecting their learning, their social relationships and their family relationships.

The children need to make and retain friends, to be gradually reintroduced into mainstream school as and when their illness allows, and to feel that their illness will not limit their academic achievements or the choices available to them. Their parents need help in managing their feelings about their child's situation.

The group includes:

- A year 10 child who has not attended school for over a year. She is as yet unable to attend the PRU for a full hour.
- A year 7 child who is angry and frustrated that she has lost control of her life. She retains a close group of friends from primary school.
- A year 8 child whose father seems not to fully understand his daughter's illness and who finds friendships difficult.
- A year 11 child whose mother is extremely anxious. She herself appears anxious and depressed.

How serious is the need?

	Total
Likely future impairment	-
Current impairment	4
Current significant impairment	-
Total	4

Are needs being addressed?

Yes – fully	3
Partially	1
No	0
Total	4

What services were in place?

Range of services provided by the PRU

- One-to-one support and group work for a young woman whose illness makes it impossible for her to achieve a full hour
- One-to-one support so that she does not slip behind academically
- Home tuition and help to re-integrate back into school

- Help from CAMHS to deal with anxiety

Reasons given by auditors for needs being only partially met

- Agencies need to work together with parents to try and understand child's behaviour.
- Mother is not yet ready to take control.
- Child's emotional needs are not being met and this explains her emotional outbursts.
- Child hasn't integrated in to the programme provided and mother has not been able to engage.

Cluster B - Parenting

6 Much improved care at home

33 children

The need is for children to receive much better care and protection at home than at present. Parents need support and help with a wide range of issues and problems, including their own learning difficulties, mental health problems and relationship issues. Many of the children in the group are living in homes where there are few household routines and where hygiene is an issue. This is affecting children's health and development. There are concerns about inadequate diet, lack of routines and boundaries, poor supervision, lack of stimulation, children caring for themselves, children caring for siblings and parents, isolation, and emotional and behavioural problems. For some children behaviour issues are severe and include involvement with the police. The children in the group all have difficulties making friends with children and young people of their own age.

Children will need on-going support throughout childhood and parents will need help to provide them with adequate care and attention. Some children will not be able to remain at home safely.

The group includes:

- A year 10 child who is a carer for her four siblings. She is described as pale, immature and with little motivation to learn. Her mother misuses drugs.
- A year 9 child who seems to be always hungry and whose clothes are dirty and ill fitting.
- A year 11 child whose father recently died and whose mother is preoccupied with her relationship with her current partner. The child smells of urine, his clothes are dirty, he is angry and he appears to have no adult in his life who is looking out for him.
- A year 11 child who cares for her younger siblings. Her mother condones absences from school, regular drinking, and an on-going relationship with a much older boyfriend.
- A year 5 child who lives intermittently with each of his parents, who are separated. His needs are not prioritised and there are few routines in either household.
- A year 6 child who feels different because of his family's poor home circumstances. His father died recently, the home and garden are in a very poor state of repair, his mother has emotional and mental health problems and the family have been subjected to anti-social behaviour and bullying from neighbours. He is underweight, his hygiene is poor, his clothes are full of holes and he complains of toothache.
- A year 5 child who is immature and unable to interact with other children. His clothes are dirty and ill fitting, he cannot play, and sometimes he chooses not to speak.
- A year 5 child whose mother has a care history and whose father is in prison. His mother blames the child for her problems, he is dirty and unkempt, and he has to come to school even when he is unwell.

- A year 10 child who has had very little attention at home. She makes up dramatic stories to get attention.
- A year 8 child who is unkempt and smells unwashed. There has been violence in his family.
- A year 9 child whose father died recently and who has a poor relationship with her mother. She has numerous health problems, is losing weight, lacks motivation, finds it hard to make friends and has inappropriate sexual relationships.
- A year 8 child who lives with her father in a very dirty house. Her mother and brothers live in another city. Her father has learning difficulties and finds it difficult to provide the nurturing or boundaries that she needs. She cannot make friends with children of her age and refuses to go to school.
- A year 6 child who doesn't receive the care he needs at home. He comes to school without breakfast and does not get the attention he needs for his eczema. In the absence of firm and clear boundaries his behaviour is very poor.
- A year 3 child who lives in very poor material circumstances. He has head lice, poor hygiene and ill-fitting clothes. Violence is a feature of family life and his mother finds it hard to control her children's behaviour.
- A year 8 child who lives in a dirty house where there are no rules or boundaries. His parents don't know his whereabouts and he uses cannabis which he has bought into school.
- A year 7 child who was neglected at home and described as 'feral'.
- A year 9 child whose parents argue and whose mother is often ill. There are no domestic routines at home and washing does not get done. He is anxious, has few friends and severe psoriasis.

How serious is the need?

	Total
Likely future impairment	-
Current impairment	9
Current significant impairment	24
Total	33

Are needs being addressed?

Yes – fully	1
Partially	15
No	17
Total	33

What services were in place?

Range of services provided by the PRU

- Individual sessions to help him manage his behaviour better and to understand and cope with his emotions

- PSA supporting family in the home
- Helping child to fit in
- Individual sessions with mental health worker, very small group work, playing games to improve social skills (CFCS declined to get involved as family life was the cause of child's difficulties and this wouldn't change.)
- Individual mentoring, work on allotment to improve self-esteem
- One-to-one time to listen to child and to encourage conversation, and praise for achievements and recognition of good attendance
- Social/life skills, positive role modelling, new experiences, learning to play appropriately
- Helped him manage his anger and feel safe and to understand that his behaviour has consequences
- Small-group SEAL and emotional literacy classes
- PHSE group and individual work
- Provided experiences child wasn't getting at home, like sailing and climbing
- Tutorial sessions to help him cope socially and rebuild his confidence
- On-going SEAL group work to help child experience positive success in his life
- Discussion, and visualisation of difficult situations, around child's anxieties and how these impact on her life

Reasons given by auditors for needs being only partially met

- It has been hard to engage mother. She comes to some meetings but not others and does not always respond to telephone calls.
- Child should have been taken into care at an early age.
- We are trying to meet his needs but his home situation needs to improve in order for there to be a significant improvement in his life.
- We are not addressing problems that exist in her family and social surroundings. I think she may need removing from home.
- We are not fully meeting child's needs as we do not yet understand why he is so lethargic and lacking in motivation.
- Child has attachment issues and these cannot be dealt with in an educational setting. Specialised intensive work is needed with child and family so that what is done out of the home can be replicated/continued in the home.
- This family's problems are too overwhelming. The child should have been removed when he was little. He now needs to be removed because he is a danger to the younger children who are at risk of significant harm.
- The child is working well at the PRU and is well behaved. Nothing has been done to address his home situation and there are concerns about how he will manage when he transfers to secondary school.
- The needs of child and his family are too great and too complex. The family need a bigger house, they need help to overcome the impact of domestic violence, and help for mother to impose boundaries.
- Services are being offered but mother disengages when challenged and father has opted out. We feel this child needs to live away from home.

- We provided opportunities that helped him to feel better about himself but issues at home haven't been addressed.
- He has done well and will be returning to mainstream but there have been no improvements at home.
- He has made progress individually but he will continue to struggle while things at home remain unchanged.
- It took a year for him to improve his attendance and manage his behaviour in school. Things at home haven't changed.
- Mother needs to be offered help in her own right.
- Worryingly low attendance has hampered progress.
- Social communication difficulties are not being addressed.
- Personal hygiene and neglect are not being addressed.

7 Consistent boundaries at home

32 children

The primary need is for parents to be helped to make rules at home and to stick to them. In general, parents are committed to their children but for a variety of reasons they struggle to be consistent with routines and boundaries and as a result children find it hard to manage their feelings and behaviour. Many children dictate what happens at home and resort to angry and aggressive behaviour when they don't get their own way, which in turn affects their relationships with peers and their learning. Some children are involved in anti-social behaviour in the community and many struggle with routines at school.

Parents need help to attend to their own issues and to understand how these have affected their parenting. They need to understand the negative impact of a lack of boundaries on all aspects of their children's lives and to learn strategies that put them back in control as parents.

The group includes:

- A year 8 child whose parents find it difficult to impose consistent boundaries and routines due to depression and alcohol issues
- A year 4 child who dictates to his parents and is angry and aggressive to his peers
- A year 10 child whose mother finds it hard to take control
- A year 8 child whose parents are not able to present a united front to their child
- A year 1 child who pulled a knife on a teacher. His parents have separated and live in adjoining flats. His mother has little control and his father treats him like a mate.
- A year 9 child who is greatly influenced by other children, damages property and cries when he cannot get his own way. He has good attendance and is very loyal to the PRU.
- A year 6 child whose mother found it hard not to accept her child's bad behaviour
- A year 10 child whose parents make excuses for his poor behaviour and non-attendance. He has been involved in offending behaviour and also taken an overdose.
- A year 11 child whose mother panders to him to avoid outbursts of anger
- A year 5 child whose parents have conflicting ways of managing his poor behaviour
- A year 6 child whose father finds disciplining his child uncomfortable and allows him too much independence

How serious is the need?

	Total
Likely future impairment	1

Current impairment	15
Current significant impairment	16
Total	32

Are needs being addressed?

Yes – fully	4
Partially	18
No	10
Total	32

What services were in place?

Range of services offered by the PRU

- Help child learn not to over-react when challenged by adults and help adults adopt more positive parenting strategies
- Taking him on trips so he can learn how to get on with other children
- On-going group work and social skills training, with clear and structured boundaries with rewards and sanctions
- Help for mother to manage his behaviour at home

Reasons given by auditors for needs being only partially met

- Need better communication between home and mainstream school. Parents need intensive support to make rules and to stick to them.
- Child's anger is very frightening and has not really been addressed. He is likely to hurt somebody very badly.
- Mother's depression and father's alcohol misuse are not being addressed. The family as a whole need help to impose rules and boundaries.
- Behaviour at home needs to be supported.
- Needs long-term clear and focused work with parents.
- Hard to make progress because more work needs to be done with the family.
- Mother needs help to understand and manage his challenging behaviour.

8 Behaviour to be understood and managed 14 children

The primary need is for parents to be helped to understand and manage their child's behaviour better and to be consistent in setting boundaries. Challenging behaviour includes violence to staff and other children and angry outbursts. Parents are all committed to their children and there are no obvious reasons for the child's behaviour. They need help to understand why the child behaves in this way and strategies to help the child change the behaviour.

The group includes:

- A year 9 child who is aggressive and non compliant in school. His behaviour towards other pupils can be lewd and sexually aggressive. He seems to see nothing wrong with his behaviour.
- A year 8 child who is disruptive in class and has assaulted other pupils
- A year 11 child who makes friends easily but who shouts and is threatening towards staff, is sexually active with older men and finds it hard to make eye contact with adults
- A year 11 child who has poor attendance, preferring to stay in bed. His behaviour is violent and he misuses drugs.
- A year 6 child who looks up to his older brothers who are involved in gang culture. He wants to be like them. He finds it hard to separate from his mother.
- A year 5 child who cannot sit still, is reluctant to work, and complains of tiredness.

How serious is the need?

	Total
Likely future impairment	0
Current impairment	6
Current significant impairment	8
Total	14

Are needs being addressed?

Yes – fully	1
Partially	6
No	7
Total	14

What services were in place?

Range of services provided by the PRU

- One-to-one support to help her make good choices in relationships with men
- Short activities to stop him wandering, and support to prevent him disrupting others
- One-to-one counselling for student and parent. Post-16 options and advice. College visits. Advice and guidance for eating disorder
- Tier 2 mental health worker, home visits to give parent advice
- Engagement mentor/home school liaison, support at all times, building relationships and support with work
- Allotment gardening to improve self-esteem
- One-to-one tutor time to encourage relationship building and situation management

Reasons given by auditors for needs being only partially met

- Mother is not able to accept the help she needs to manage her children's behaviour. She is happy that her son isn't in school.
- We can't influence mother and child is more influenced by peers than professionals.
- We aren't meeting child's needs fully as we don't understand the underlying causes of his lack of motivation and lethargy.
- Few needs are being met at present but this is because child is new to the centre and has a whole raft of unmet need. A home visit is needed.
- He needs work to focus on his maturity and social skills so that he can accept boundaries and be more responsible for his actions.
- Much more work is needed so that child can feel she is being listened to and valued.

9 Continue education

3 cases

The primary need is for parents and young people to be supported so that the young person can remain in education. There are particular circumstances that have disrupted the children's education and had an impact on all areas of their life, causing problems which include anti-social behaviour and emotional and relationship difficulties. Young people – and their families – need help and advice to enable the young person to continue with their education and to understand how continuing education will address many of their difficulties in the longer term. They need practical help to overcome their current problems.

The group includes:

- A young asylum seeker living with foster carers. His English is not good and his low self confidence is masked by silly behaviour.
- A young man who was 'made an example of' at his previous school by being excluded for a one-off episode.
- A young man whose unrecognised learning difficulties led to behavioural issues and eventual remand to a YOI. He is now a gang member.

How serious is the need?

	Total
Likely future impairment	1
Current impairment	1
Current significant impairment	1
Total	3

Are needs being addressed?

Yes – fully	1
Partially	1
No	1
Total	3

What services were in place?

Range of services offered by the PRU

- Help child to engage in education and further develop his personal and academic skills which will help him post 16
- We are trying to address his involvement in gangs and his learning difficulty.

Reasons given by auditors for needs being only partially met

- Student's behaviour is outstanding. He needs more educational support for a better chance of a positive post-16 destination. His mother needs to be more realistic.
- If we could address his learning needs his self-esteem would improve and he would be able to re-assess his standing in society and be less dependent on his gang.

Cluster C - Emotional needs of parent or child

10 Impact of loss and trauma to be reduced 61 children

The primary need is for children to be able to cope better with past or current traumatic events and to reduce the impact of those events on their daily life. The trauma arises from a range of events including witnessing family violence, rejection, severe neglect, sexual abuse, and the death of family members. The children are showing their distress in a variety of ways – extremely angry behaviour, prolific offending behaviour, drug misuse, self-harm and dangerous sexual activity.

The group includes:

- A year 8 child who lives with his pregnant sister. His grandfather, aunt, mother and step father all died within a year.
- A year 10 child who has been abused by a family member and whose mother rejects him in favour of male partners. He is cared for by his grandmother.
- A year 9 child whose grandmother has recently died. She fights with her mother and has made allegations against her father.
- A year 11 child who has been in and out of care since she was very young. Her feelings of rejection are obvious and affect her whole life.
- A year 9 child who is rejected by his mother. He is involved in knife crime, theft and substance misuse.
- A year 8 child whose mother has never been able to put her needs first. She has attended 12 schools. She absconds, takes risks with substances and is vulnerable to sexual abuse and pregnancy.
- A year 10 child whose father's imprisonment for 18 years led to the child feeling isolated in the community and has caused the child to become extremely anxious.
- A year 11 child who cannot live with his mother because of her mental health difficulties and alcohol misuse. His father is depressed and the child has attempted suicide twice.
- A year 10 child whose mother has cancer and blames her child for her condition.
- A year 10 child who has panic attacks since being sexually assaulted.
- A year 11 child who has been sexually assaulted and attempted suicide as a consequence.
- A year 8 child whose father died from a drugs overdose and whose very violent brother is about to be released from a secure unit.
- A year 11 child who has witnessed extreme violence in his family and who suffered serious injury following a road traffic accident.
- A year 9 child who cannot live at home because it is feared he would get caught up in parental violence and alcohol misuse.
- A year 10 child who cannot live with her mother who has serious mental health problems. She self harms and has an eating disorder.
- A year 7 child who is carer for his mother and his brother. His mother is rejecting of him. He has encopresis and can be very angry in school.

- A year 1 child who lives with his grandmother. His mother is in prison and he fears she may snatch him away from his grandmother's home.
- A year 10 child who has been rejected by her adoptive mother.
- A year 7 child whose mother has poor mental health and who has intervened when she was threatening suicide. His father has another family in another city and the child is involved in keeping secrets.
- A year 7 child who found his father dead, having committed suicide. His behaviour is violent and intimidating.
- A year 11 child who was born in another country where her mother died and her father disowned her.
- A year 11 child who cannot go out because he is so fearful of gang reprisals.
- A year 11 who has been rejected by his parents and has no contact with them. He sucks his thumb when stressed.

How serious is the need?

	Total
Likely future impairment	-
Current impairment	13
Current significant impairment	48
Total	61

Are needs being addressed?

Yes – fully	7
Partially	26
No	28
Total	61

What services were in place?

Range of service offered by the PRU

- Drugs counselling for child and family
- Group work for five weeks
- Setting boundaries, explaining these and helping pupil to accept these and work within them or accept consequences of refusal to do so
- One-to-one sessions to help child like himself more and to reduce his attention-seeking behaviour
- Outdoor activities so he can learn how to behave in a group and succeed in facing challenges
- Individual sessions to help child cope with his feelings and to understand that adults are in charge

- Help child to work within rules and boundaries. Emotional support to help her understand and reduce her risk-taking behaviours. Weekly core group meetings so that agencies could discuss concerns and new problems that were arising almost daily. Group was able to look at support options and put plans in place to support the child and family.
- Farm work to improve self-esteem and support interest in animal husbandry, plus restorative justice
- Mentoring to help child open up socially and emotionally
- One-to-one tutor time to encourage relationship building and situation management. Parenting programme for mother. In-patient treatment mental health facility.
- Make him feel better about himself and help him understand relationships better
- Listen, offer alternatives, work with the whole family to take control of the situation.
- A trusting adult relationship for the first time
- Letting the family know there is someone there in times of crisis
- Offer child a safe and secure environment which is a respite from the crises of the rest of his life
- Bereavement counselling
- Providing child with a strongly supportive and encouraging environment and opportunities to engage with other children
- Child needed to be in a small group – this helped him learn to settle down and stop running around shouting and antagonising others.

Reasons given by auditors for needs being only partially met

- Child urgently needs lots of support to help him live alongside his grief. He has had some input in a group – but five weeks wasn't enough.
- There are a number of services trying to work with the family [no info given about which services – or what they are trying to do]. The family seem unable or reluctant to carry out the strategies that are explained and shown to them.
- Child has not progressed at all considering the time she has been here and the agencies that have been involved. She really needs a family placement in a home with no other children. Looking at her records, her behaviour has deteriorated every time she has been in a children's home.
- We have not been able to address her needs because we have not been told about them.
- Child has been discharged from CFCS but he needs extra support. They should see him on a bad day.
- Child is not getting help he needs to address trauma and reduce risk of suicide.
- The reasons for child's distress and trauma have not been established clearly.
- Child needs to feel valued. There has been no work to help her with family relationship issues.
- There is no support to address issues at home.
- There has been a prompt response to his issues but services need to continue on a long-term basis.
- His emotional needs and issues relating to his family are not being addressed.

- Child's learning needs should have been addressed in primary school, with a vigorous one-to-one literacy programme. This would have prevented an escalation in his poor behaviour which is making his learning and succeeding in school extremely difficult.
- No services are helping him to address his emotional and mental health needs – he needs this right now.
- I believe that services should have been identified as early as primary school. Reasons for so many changes of school should have been picked up and investigated. Services should have been more proactive.
- The child and family are not having the root of their difficulties addressed. The child is seriously traumatised and the consequences of not addressing this trauma will be serious and produce enduring mental health issues for him. He needs to be somewhere safe where he can talk about what has happened to him.
- It would be hard to exaggerate the enormity of this child's trauma. It is unlikely that it will ever be addressed completely – the aim should be to reduce the impact so the child can cope with day-to-day life. He has demonstrated he can benefit from a therapeutic relationship and this needs to continue so he can begin to come to terms with the various traumas he has suffered. If this does not happen he is at risk of murdering someone.
- We need to look at child's life outside of school in order to change his education lifestyle choices etc.
- He needs to be somewhere safe where he can understand his history and resolve the issues this raises for him.
- Child has very complex needs that should be addressed before the child can access education. Because of her mother's issues with mental health and parenting, child has experienced traumatic events that a child her age shouldn't even be aware of: drug and alcohol misuse, prostitution, violence and CP issues. The child needs to revisit her childhood and have these issues addressed which may then enable her to become a happy teenager doing teenage things rather than motherly/adult things.
- Despite the number of agencies involved they have made little if any impact on child's offending behaviour, his relationships with his family or his ability to make progress with his education. His life could be described as chaotic so services become reactive rather than proactive. He should be given a place in a therapeutic establishment to repeat Year 9 and continue his education in a stable, secure and nurturing environment.
- The relationship between father and child needs assistance.
- The family needs support to allow child to move on from family tragedy and separation anxiety. Services have been involved but withdrew after lack of family co-operation.
- Services offered reflect crisis intervention not self-harm or relationship issues.
- She needs an opportunity to talk about what happened to her and why she finds relationships with men so difficult.

11 Emotional/mental health to improve**13 children**

The primary need is to understand and address the mental health problems of parents and/or children. Parents need practical and emotional support to address difficulties that affect the life of the whole family and their ability to parent. Children need to understand more about their parent's illness, to be relieved of the anxiety and responsibility they feel about their parents, and to know they are being cared for. They need to make friends with children their own age, have a life outside their family and to know there is someone whom they trust that they can talk to about their worries.

The group includes:

- A year 2 child who has encopresis and is violent at home. His father is depressed following a serious accident.
- A year 10 child who is anxious about leaving his mother on her own
- A year 9 child whose mother is preoccupied with her own health needs
- A year 9 child who is living with foster carers as a result of his mother's mental health problems. He is extremely angry and finds it hard to make friends with children of his age.
- A year 9 child whose mother is paranoid. She takes her frustrations out on her son and is overly strict.
- A year 10 child whose parents both have mental health difficulties. She shouts and swears at home and thinks her mother doesn't love her.
- A year 11 child whose mother has severe mental health problems. He is very sad and depressed at times.
- A year 9 child who has a volatile relationship with her mother who has mental health difficulties.

How serious is the need?

	Total
Likely future impairment	-
Current impairment	8
Current significant impairment	5
Total	13

Are needs being addressed?

Yes – fully	3
Partially	7
No	3
Total	13

What services were in place?

Range of services offered by the PRU

- Worked with mother to help her understand why a period away from the family would help her child. Took him to local swimming baths to make sure he was clean. Home visits when child's behaviour was out of control.
- Provided a mentor to improve his self-esteem and a structured programme to help him achieve a sense of order which had been lacking in his life
- Karate – learning a discipline, promoting exercise and stress release
- Hair and beauty at college, drugs and alcohol advice
- Therapy at psychiatric unit
- 'Why Try?' programme to encourage sense of self worth. Alternative education activities. One-to-one tutor time to encourage relationship building and situation management.

Reasons given by auditors for needs being only partially met

- Still enmeshed with Mum therefore unable to make friendships. Mother/daughter relationship needs attention.
- Child settled well in school but he still has unresolved issues about his family and still finds it hard to manage his anger.
- No help to address mental health issues in the family.
- More support needed at home to address mental health issues and help family understand Asperger's Syndrome.
- Situation has not moved forward. Child needs to be removed from home situation.

8 Parent to manage substance misuse (alcohol) 3 children

The primary need is for parent to manage alcohol use and to reduce the impact it has on their child.

As explained earlier, other parents in the sample had alcohol and/or drug misuse problems, also needing attention. But in these three cases substance misuse was identified as the main pressing need, and in each case it was alcohol that was being misused.

The group includes:

- A year 10 child whose mother's alcohol misuse makes it difficult for her to impose boundaries
- A year 6 child who lives with his grandmother because of his mother's alcohol misuse problem. He finds it hard to cope with the situation at his mother's home and feels nobody really cares about him.
- A year 8 child whose mother has long-standing alcohol misuse problems and who has witnessed domestic violence.

How serious is the need?

	Total
Likely future impairment	-
Current impairment	1
Current significant impairment	2
Total	3

Are needs being addressed?

Yes – fully	1
Partially	-
No	2
Total	3

What services were in place?

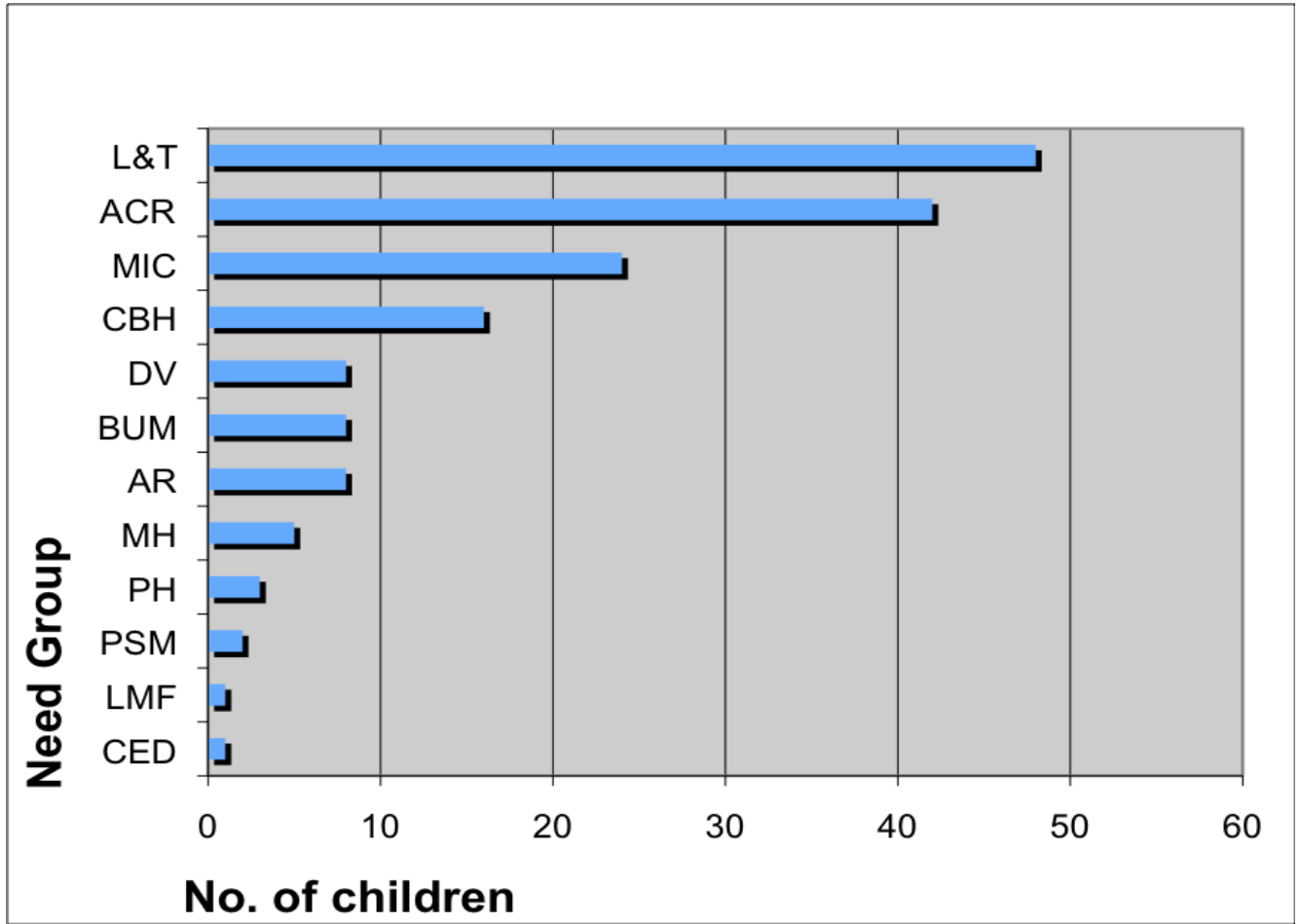
Range of services provided by the PRU

- Work to help child manage his anger in school
- Support worker supports adults at home and mediates between child and parent

Reasons given by auditors for needs being only partially met

- The child enjoys meeting with the support worker but there is no indication that underlying issues have been addressed.
- There is no mention on the child's file regarding other agencies/services. There is mention that the family have 4-6 weekly multi-agency meetings but there are no other details despite the school requesting information. As the information has not been shared with us it is difficult to know the extent to which the needs overleaf have been addressed.

Spread of significant impairment cases, by Need Group



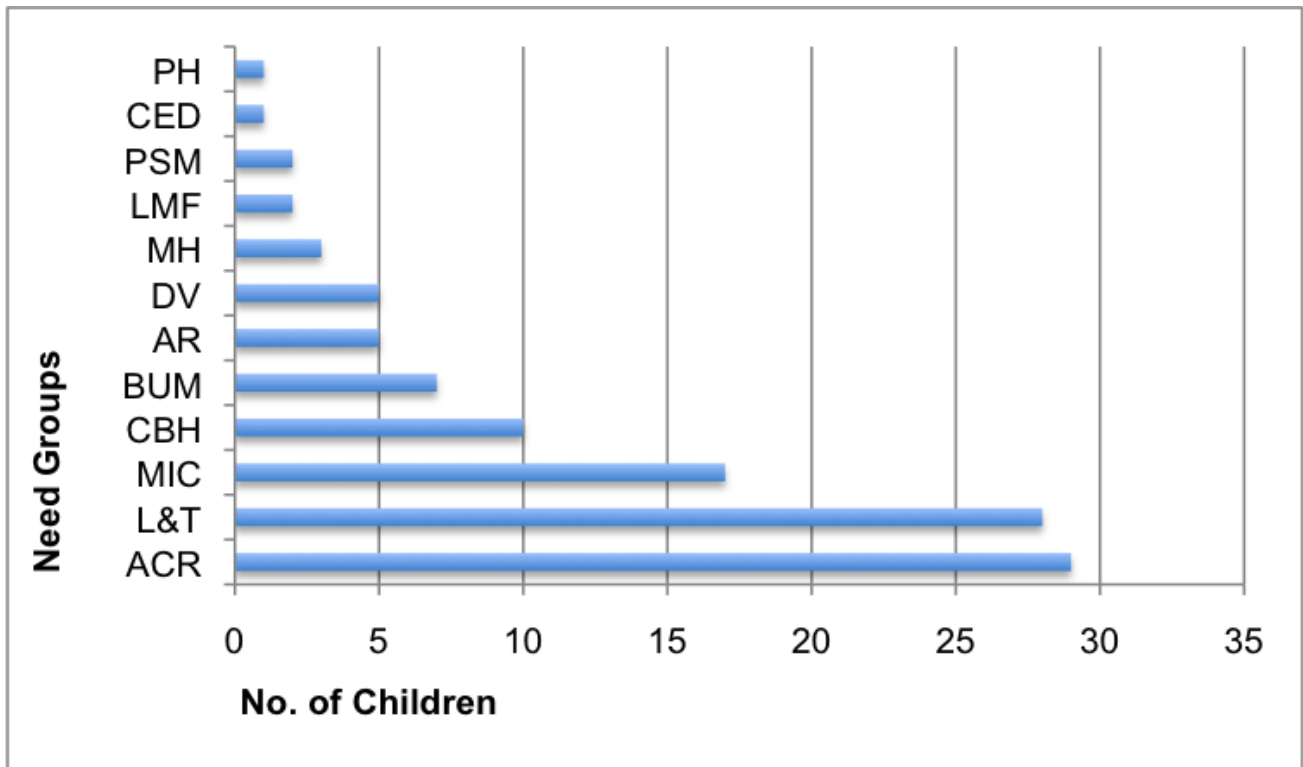
Need Group Key

- L&T Impact of loss and trauma to be reduced
- ACR Adult/child relationships to improve
- MIC Much improved care at home
- CBH Consistent boundaries at home
- DV Overcome impact of domestic violence
- BUM Behaviour to be understood and managed
- AR Adult relationships to improve
- MH Emotional/mental health to improve
- PH Reduce impact of physical illness
- PSM Parent to manage substance misuse
- LMF Learn to make friends

CED Continue education

Note: *Impact of loss and trauma to be reduced* has the largest number of children with serious needs, followed by *Adult/child relationships to improve* and *Much improved care needed at home*.

Spread of cases where needs not met, by Need Group



Note: Outcomes are poorest for children in the following groups:

- Adult/child relationships to improve
- Impact of loss and trauma to be reduced
- Much improved care at home

Shadow audit

A group of three students from the Year 11 PRU volunteered, at short notice, to identify the needs of six children who had formed part of a sample from another site. The focus here was on needs; students were not asked to consider seriousness or to comment on the services offered. Practical constraints meant that the students had limited time for preparation or for undertaking the exercise. In this context, the insights arising from the exercise are remarkable.

The six audit forms from the other site were edited, to preserve anonymity and prepare the exercise. The circumstances column, as completed by professionals, was reproduced on a blank audit form and the three students were asked to complete the needs columns in the same way as the professionals had done. They were also asked to identify each child's most pressing need.

All three students were facing major challenges in their own life and so they had a wealth of experience and understanding on which to draw. Their comments reflect this experience and indicate enormous insight, sophistication and sensitivity. Of particular note was the compassion they showed for the children discussed. It took some time to persuade them that these were real children, so shocked and distressed were they by the circumstances of the children's lives.

The audit forms the students completed and discussed are presented below. The students' comments in the needs columns are highlighted in italics, with their other comments set out under the form.

Shadow case 1 – drawn from Need Group: Adult/child relationship to improve Year 10 White British boy

Needs

	Child and family circumstances	Needs on day of audit (parents & children)
Living situation	<ul style="list-style-type: none"> • Lives with his grandparents who are quite old and have health problems 	<ul style="list-style-type: none"> • <i>A stable environment</i>
Family and social relationships	<ul style="list-style-type: none"> • Sees his Mum occasionally • Irregular contact with Dad • Mum has had a series of boyfriends she met on the internet • They usually move in for a short period only 	<ul style="list-style-type: none"> • <i>His Mum needs to stop going off with different men and focus on him</i> • <i>Needs not to be angry with his Mum</i> • <i>Needs to tell his Mum how he feels</i>
Social and antisocial behaviour	<ul style="list-style-type: none"> • Hates being told off • Is angry and damages other people's property • Runs away and puts himself in danger – e.g. goes to railway line and jumps off bridges • Is rude to grandparents and won't help or co-operate • Withdraws from peers and seeks adult attention 	<ul style="list-style-type: none"> • <i>He needs to know people understand why he is angry</i> • <i>He needs to know people understand why he does dangerous stuff (to stop him thinking about his Mum)</i> • <i>He needs to understand dangerous stuff won't help and that he could die</i>
Physical and psychological health	<ul style="list-style-type: none"> • Often seems tired • Often comes to school angry and unsettled • Was sexually abused by family member when living with Mum • Won't talk about abuse. • Very angry with Mum 	<ul style="list-style-type: none"> • <i>He needs to talk about the sexual abuse when he's ready to – not to be forced to talk</i>

Comments

- He probably blames his Mum for the sexual abuse.
- You need to start with Mum so she understands how he feels and stops going off with other men. Then she might be able to focus *on him*.

Most pressing need

- To sort out his relationship with his mother.

Shadow case 2 – drawn from Need Group: Adult/child relationship to improve

Year 11 White British/Black Caribbean boy

Needs

	Child and family circumstances	Needs on day of audit (parents & children)
Living situation	<ul style="list-style-type: none"> • Currently estranged from Mum – gone to stay with relatives some miles away • Says he'll be back in a few weeks 	
Family and social relationships	<ul style="list-style-type: none"> • Mother abandons Keith – leaves him at home on his own • Keith says older brother (currently living in a hostel) bullies him • Very loving but misdirected • Very popular with other young people 	<ul style="list-style-type: none"> • <i>Needs to be less depressed</i> • <i>Needs a better relationship with his mother and his brother</i> • <i>Brother needs to be a role model and not bully him</i> • <i>Mum needs to pay him more attention</i>
Social and antisocial behaviour	<ul style="list-style-type: none"> • Inappropriate sexual behaviour with males and females • Sexually active but doesn't use a condom • Risk taking behaviour without substances – increased with substances • No concept of danger – jumps off motorway bridges • Gets others to copy his behaviour 	<ul style="list-style-type: none"> • <i>He needs to stop showing off and pretending he's big</i>
Physical and psychological health	<ul style="list-style-type: none"> • Self harms and gets others to harm him • Issues with drugs/alcohol – has been known to lose all memory of a whole weekend 	
Education and employment	<ul style="list-style-type: none"> • Concentration poor • Attendance not good • Wants to join the army but offences are a barrier 	<ul style="list-style-type: none"> • <i>Needs to think less about his Mum so he can concentrate</i> • <i>Needs his Mum's attention</i>
Other, including family income level	<ul style="list-style-type: none"> • Mum finds it hard to go to meetings or talk to staff. Says everything is fine 	

Comments

- *He's doing drugs and other stuff to take his mind off what's going on with his Mum.*
- *He needs to stop thinking about his Mum but that's the hardest thing to do cos it's your Mum.*
- *Some kids do well at school to prove it to their parents and get their attention.*
- *If his Mum paid him more attention he wouldn't need to do all that crazy stuff.*

- *Is he mentally disturbed? If he goes on like this he will die.*

Most pressing need

- *His Mum needs to sort out her relationship with her son. Someone needs to help her with this. If it doesn't happen he'll just get worse and worse and will get himself killed.*

Shadow case 3 – drawn from Need Group: Adult/child relationship to improve

Year 9 White British girl

Needs	Child and family circumstances	Needs on day of audit (parents & children)
Living situation	<ul style="list-style-type: none"> • With mother & step father. 2 older sisters have left home but visit frequently • Mother sent her to stay with birth father 200 miles away 18 months ago – hadn't seen him for 8 years. • Father sent her back after 6 weeks 	
Family and social relationships	<ul style="list-style-type: none"> • Relationship with mother difficult • Jo wants hers to be a 'proper family' – do things together. Mum and step dad in pub every night • Step dad won't stay in same room as Jo • Mother says Jo won't do as she's told • Jo socialises with small group of young people who have poor attendance and commit offences 	<ul style="list-style-type: none"> • <i>She needs a proper family who can support her</i> • <i>Parents need a time limit</i> • <i>Parents need to understand her behaviour</i> • <i>If they can't she should go back into care</i> • <i>Mum needs to spend more time with her</i>
Social and antisocial behaviour	<ul style="list-style-type: none"> • Drinks to excess • Hospital admissions due to psychotic episode following heavy drinking • Some liver damage • Criminal behaviour – assault – damage to property. Regular arrests and court appearances 	
Physical and psychological health	<ul style="list-style-type: none"> • Concerns about alcohol induced psychosis and liver damage • Puts herself in situations of extreme danger • Says she felt safe in YO1 – placement with foster carers on release very positive. Drinking stopped 	
Education and employment	<ul style="list-style-type: none"> • Bright girl but behind academically because of attendance • Can only learn in one-to-one situation 	

Comments

- *Her parents are selfish – they shouldn't be given more chances.*
- *If nothing happens she will be seriously ill or go to prison.*
- *If she has kids she may be a better mother than her mother was.*

Most pressing need

- *Her Mum needs to understand why her daughter behaves like she does and that it's not her daughter's fault even though she has been in a YOI.*

Shadow case 4 – drawn from Need Group: Adult/child relationship to improve

Year 8 White British boy

Living situation	<ul style="list-style-type: none"> Lives with mother, step dad, sister and twins (boy and girl) 	
Family and social relationships	<ul style="list-style-type: none"> His Dad sees his brothers and sisters but doesn't see Kenneth Mum and step dad try to make this up to Kenneth and spend quality time with him when his brother and sisters are at their Dad's Gets on well with maternal grandparents 	<ul style="list-style-type: none"> His Dad needs to put more effort in to seeing him He needs to see lots of his grandparents
Social and antisocial behaviour	<ul style="list-style-type: none"> Gets into moods and is difficult to talk round Poor self control – gets into fights Rude and offensive to teachers Won't do as he is asked 	<ul style="list-style-type: none"> Teachers need to know about his situation then they might treat him differently He's obviously hurt and probably feels like 'the black sheep' of the family
Physical and psychological health	<ul style="list-style-type: none"> Health is good Has glasses but won't wear them Tries to hide his low confidence and poor self esteem 	
Education and employment	<ul style="list-style-type: none"> Is under-achieving in school May be dyslexic Finds it hard to work in a group 	

Comments

- He probably doesn't like his brother and sisters much and I don't blame him.
- His Dad needs to sort himself out and understand he shouldn't treat his child like that.

Most pressing need

- His Dad to sort himself out so he can have a better relationship with his son.

Shadow case 5 – drawn from Need Group: Reduce impact of loss and trauma

Year 8 White British boy

Needs

	Child and family circumstances	Needs on day of audit (parents & children)
Living situation	<ul style="list-style-type: none"> Lives with his sister – who is pregnant 11 year old cousin also living in the house 	
Family and social relationships	<ul style="list-style-type: none"> Ben experienced death of granddad, great aunt, step dad and Mum all in the space of a year. This has caused extreme distress in the family home Ben withdraws and finds it hard to mix with others 	<ul style="list-style-type: none"> Needs comfort Needs hugs and kisses His sister needs to be there for him
Social and antisocial behaviour	<ul style="list-style-type: none"> Hurts others when he is hurting Problems all stem from bereavements 	<ul style="list-style-type: none"> Needs to understand lots of people want to hurt others when they're hurting but it doesn't really work
Physical and psychological health	<ul style="list-style-type: none"> Very distressed and emotionally very fragile Finds it hard to talk about how he feels 	<ul style="list-style-type: none"> Help with bereavement. He won't ever get over it but he will be able to move on eventually. He needs to choose who he wants to help him.
Education and employment	<ul style="list-style-type: none"> Finds it hard to make friends. Hits other students when upset Can't concentrate 	<ul style="list-style-type: none"> Teachers and people should pay more attention to him. They should try to get through to him and understand what he's thinking.

Comments

- Wouldn't you want to be there for your little brother?
- I'd be surprised if he didn't have a nervous breakdown.
- If my Mum died I think I'd die as well.
- If he doesn't get help he's going to be very unhappy.

Most pressing need

- He needs to get over his bereavement. He needs to choose who he wants to help him and he shouldn't be made to see someone if he doesn't want to.

Case 6 – drawn from Need Group: Much improved care needed at home

Year 3 White British boy

Needs	Child and family circumstances	Needs on day of audit (parents & children)
Living situation	<ul style="list-style-type: none"> Lives with Mum , Dad and six siblings – two younger – 3yrs and 2 yrs Neighbours have complained to police and social services that house and garden are in a state 	
Family and social relationships	<ul style="list-style-type: none"> Oldest brother in prison Mother has no control. Brendan hits her and swears at her He never talks about home Wants to be like oldest brother History of domestic abuse between parents Poor relationship with females Responds badly to meeting new people 	<ul style="list-style-type: none"> He needs guidance. Seems like Mum has just let him do what he wants Parents should put child before themselves
Social and antisocial behaviour	<ul style="list-style-type: none"> Hits and kicks women in school Talks about violence and stabbing people Fascination with guns, death and violence Play is often violent Violent to taxi driver 	<ul style="list-style-type: none"> He needs role models
Physical and psychological health	<ul style="list-style-type: none"> Constant head lice Ill fitting clothes, slightly smelly and damp to touch Overweight No eye contact Memory loss episodes 	<ul style="list-style-type: none"> He needs to be looked after properly
Education and employment	<ul style="list-style-type: none"> Poor attendance since reception Low attainment – about at stage of 3 year old Needs constant one-to-one support Learning difficulties 	<ul style="list-style-type: none"> Good that he is doing some attendance at school. He needs to keep this up
Other, including family income level	<ul style="list-style-type: none"> Mum finds it hard to attend meetings or talk to staff. Says everything is fine 	

Comments

- He doesn't like being at home so he doesn't talk about it.
- He's had no childhood – he's had to grow up quick.
- At 8 he should be enjoying school, not talking about stabbing people.
- Parents should put their child before themselves and his parents aren't.
- His mother has taught him nothing and he's probably seen his Dad do stuff to his Mum.
- His Mum's lazy.
- He shouldn't live there anymore. He needs to live with foster carers or other family members if he's got any.

- *I think he's definitely on his way to the pen (penitentiary) for 25 years.*

Most pressing need

- *To live somewhere where he can be looked after properly*

Implications for policy and practice.

Needs

The children – and their parents – have a range of needs, and these needs are serious.

- 41% of children's needs were judged as not being met
- More than half (62%) of these unmet needs were judged to be affecting the children's health and development in a significant way
- 6% of children were looked after by the local authority and 4% were subject to a child protection plan

Multi-agency planning and responses

Pupil's educational needs were largely being met by the PRU, however the broader social care and health needs were much harder to address.

Given the seriousness of children's needs, and the gravity of children's stories, as reported in the main body of this report, it was remarkable that the researchers found all six PRUs to be calm, industrious places where children were respected and their achievements celebrated. In similar vein, recent Ofsted inspections of these sites report that the education the children are receiving is more than adequate, with children's educational needs taken seriously and children participating in public examinations.

There is a marked lack of clear multi-agency planning, especially worrying in view of the range of need among the children and their parents. Staff make reference to Team around the Child (TAC) meetings having taken place in some cases, but they do not have an active involvement in plans that may have emerged from those meetings.

It is a tribute to staff that, in addition to their role as educators, they are expert at analysing children's needs holistically and delivering such a wide range of imaginative responses. In some ways they can be seen as victims of their own success in that their ability to engage with children and to address the needs that they present within the PRU appears to act as a deterrent to multi-agency involvement. Children and their families are victims too. The PRU offers children a period of respite where their more immediate needs can be responded to. Inevitably, with their wider needs left un-addressed, and without the continuing benign influence of the PRU, their outcomes when they leave school are likely to be extremely poor.

Post 16 Transitions

The issue of post 16 destinations is particularly concerning given the difficulties and challenges these young people face. Many were considered by PRU staff to be ill prepared academically and emotionally for this transition and some will have missed significant periods of education. There are many similarities in the type and seriousness of needs with LAC although they represent a small proportion of the pupils involved in this audit (possibly due to legislation and policy regarding outcomes for LAC and the extent to which their progress is supported and monitored).

In the year 11 PRU despite some fantastic achievements with some very hard to reach youngsters, often in a short space of time, staff are anxious about their pupils' futures. In the year 11 PRU, half the children (14 out of 26) did not have a clear post-16 destination and so were likely to become NEET. There is an opportunity with the implementation of the duty to participate for PRUs to be better placed to improve that transition planning.

Appropriate Intervention

Whilst very few of the audited pupils were currently involved with social services, for many of them, teenage neglect was a key feature. This manifested as poor hygiene, recurring infestations, lack of access to dental care, a lack of parental interest or concern in their well being, whereabouts or behaviour (often due to parental mental ill health and SMU). It was clear from the audit that many of these concerns were ongoing and predated their arrival at the PRU- a situation which represents a marked failure of early intervention services. Whether or not a 'traditional' child protection response is appropriate or relevant is debatable but these young people are nonetheless children who face a number of recognised risk factors which are having a seriously detrimental impact on their lives. There should be dialogue at local level to clarify expectations of children and families social work.

Not all of the issues facing these pupils have a history or could have been predicted. For some, loss and trauma had precipitated their entry to the PRU either through permanent exclusion or a breakdown in their ability to function in mainstream school. The pupils routes into the PRU may be varied but the underlying issues they face are markedly similar. The PRU represents a last chance to engage with and support vulnerable young people before they reach adulthood and this opportunity should not be squandered. The implications in term of both the human cost and cost to society are extensive.

Building capacity

The audit raises important issues for the next stage of the project. This will focus on exploring in more detail, with two of the participating PRUs, how they might increase their own capacity to address the emotional and mental health needs of children and how children's services more broadly might share responsibility for the needs of this extremely disadvantaged and vulnerable group of children.

In Conclusion

There is a need for a greater clarity about the purpose of PRU provision and then to commission and resource appropriately to support that purpose. PRU staff often caught between opposing demands of reintegrating pupils back into school, the lack of opportunity for that to happen effectively whilst trying to meet the needs of pupils who are in PRU provision for a long period of time either because their needs are too great to consider re-integration at this stage, they are awaiting suitable SEN provision or there are a lack of schools willing to support reintegration. This is a particular concern at primary level where temporary placements too often leave children in PRUs for extended periods in provision which despite their best endeavours cannot meet their needs because they are not equipped or resourced to do so.

Whilst a greater diversity of providers will undoubtedly change the way in which services are delivered it is unlikely that the needs of young people will change. The need groups were remarkably consistent in all of the PRUs involved in the audit. It is vital that attention is paid to meeting educational and wider needs of these vulnerable young people and this 'evidence of need' should be reflected in local commissioning arrangements, either via traditional local authority PRUs or other alternative education providers.

APPENDIX AUDIT FORM Matching Needs and Services (front) PRU audit

BackgroundIdentifier Agency
Gender Male Female Age In years Ethnicity Legal Action Has legal action been taken? Is legal action planned? **Statement** Describe nature of legal action **Needs**

Child and family circumstances

Needs on day of audit (parents & children)

Living situation	<input type="text"/>	<input type="text"/>
Family and social relationships	<input type="text"/>	<input type="text"/>
Social and antisocial behaviour	<input type="text"/>	<input type="text"/>
Physical and psychological health	<input type="text"/>	<input type="text"/>
Education and employment	<input type="text"/>	<input type="text"/>
Other, including family income level	<input type="text"/>	<input type="text"/>

Seriousness of needs [of child/children]

1 Likely future impairment

3 Significant impairment

2 Current impairment

4 None