



Public Services Committee

Uncorrected oral evidence: The role of public services in addressing child vulnerability

Wednesday 26 May 2021

3 pm

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Members present: Baroness Armstrong of Hill Top (The Chair); Lord Bichard; Lord Bourne of Aberystwyth; Lord Filkin; Lord Davies of Gower; Lord Hogan-Howe; Lord Hunt of Kings Heath; Baroness Pinnock; Baroness Pitkeathley; Baroness Tyler of Enfield; Baroness Wyld; Lord Young of Cookham.

Evidence Session No. 8

Virtual Proceeding

Questions 58 - 67

Witnesses

I: Catherine Roche, Chief Executive, Place2Be; David Carney-Haworth OBE, Founder, Operation Encompass; Elisabeth Carney-Haworth OBE, Co-Creator, Operation Encompass; Lucy Heller, Chief Executive, Absolute Return for Kids.

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Examination of witnesses

Catherine Roche, David Carney-Haworth, Elisabeth Carney-Haworth and Lucy Heller.

Q58 The Chair: I welcome everyone to this afternoon's evidence session in our inquiry where we are examining the role of public services in addressing child vulnerability. We have two very interesting panels this afternoon. On our first panel, we have Catherine Roche, David Carney-Haworth, Elisabeth Carney-Haworth and Lucy Heller. I thank all the witnesses very much for giving up your valuable time. You are doing real work here. We are just looking at things, but I know you are all engaged in trying to improve the opportunities for children and young people.

When I have asked my first question and you first reply, can I ask you to introduce yourself? That is partly so that I do not get it wrong, but also so that people who are watching will be able to link who you are with your face and voice. As I say, we are really grateful to you for coming to give evidence to us this afternoon.

As ever, I get the first question. During our inquiry, we have had a range of people saying that there is a growing number of children who have those things that bring them into the category of vulnerable children, such as poor mental health. They or their families are involved in crime, they have witnessed or been party to domestic abuse, and they often just slip through the net and do not receive dedicated support from the service network. In your assessment, how large is that gap between the provision of support and the number of schoolchildren who have mental health needs, are at risk of criminal exploitation or live in families where addiction, poor mental health and, indeed, abuse are present?

Catherine Roche: Good afternoon. I am from Place2Be, a charity providing school-based mental health services, so embedded in around 400 schools in local communities around the country.

In terms of children's mental health needs, we know from the most recent NHS Digital survey that the identification of unmet needs is increasing. That has gone from one in nine back in 2017, based on the prevalence study that was done then, to one in six most recently, in the study that was done last summer. From our experience on the ground, that is very much the case. Particularly following on from this last, most unusual of years, the prevalence and level of need has really come into the spotlight on the ground, in the schools.

Elisabeth Carney-Haworth: Thank you for inviting David and me. David and I created Operation Encompass, which is a police and education early intervention safeguarding partnership that enables support for children and young people who are experiencing domestic abuse. It ensures that every incident of police attending domestic abuse is shared with a child's school prior to the start of the next school day, with some context around the incident that happened. We hope this means that children can follow a pathway to protection, rather than following that pathway to harm.

In terms of children who are experiencing domestic abuse, we would say that that gap is absolutely huge. Our knowledge of children who are actually experiencing domestic abuse is patchy to say the least, because nobody is collecting data on that. One of the things we have asked for, in our response to children being recognised as victims of domestic abuse in their own right, is that we start to collect that data.

Many of the children who are known to schools and domestic abuse services are getting no external or agency support to help them to come to terms and deal with that domestic abuse. We would sit here saying that our knowledge of domestic abuse tells us that the ones we know about are the tip of the iceberg. If you put children into that, it is an even smaller tip of the iceberg that we are aware of.

David Carney-Haworth: There is a rider to that. Not all children who experience domestic abuse actually need big-T therapy or external support.

Lucy Heller: I am the chief executive of ARK. We are an education charity that, among other things, runs a group of 38 schools in areas of disadvantage around the country.

I would echo what past speakers have said. Yes, we are seeing increasing demand and certainly no closing of what was an existing gap. The year is not out yet, but we have seen already a near doubling of concerns about mental health and home life in our schools. We are hugely conscious of the lack of resource available to support those children and their families. In some cases, we are aware of schools that have had to suggest that parents take the children to A&E to be seen by a doctor in order to fast-track them for mental health support. The situation that was already existent. It has just been exacerbated by what has happened over the last 12 months.

The Chair: I would like to follow that up with Catherine and Lucy. What consequences are you seeing of there not being the mental health support? Is that having an effect on performance in schools or on attendance? How are you seeing the consequences of that joining up not happening in the way it should be?

Catherine Roche: A child in distress or who has mental health needs is not able to engage well within the life of the school. Many will act out or withdraw. There is a really important message about the link between behaviour and mental health needs. In a school that does not really understand the full picture around mental health, or cannot get the support in, a child who acts out may end up being excluded, whether that is temporary or it means moving out of the mainstream education system long term. We know that has huge consequences.

There can be challenges for parents also. There are incredible challenges around getting children to actually come to school, children who might not want to engage in school or children who struggle with friendships

and then withdraw. We know that that can be exacerbated as the child grows up, if those issues are not dealt with early on.

We know from our work in schools that you can address the issues. We know that school exclusions reduce for children who access mental health support. We also know that children can and do engage better in their learning, as it goes on. If we get the support in early and have a school with class teachers who understand children's mental health, and a school leadership and culture within the school that understands it, we know that that makes a real difference in a child's engagement in learning and academic outcomes.

The Chair: Lucy, in the academies, have you noticed that the number of children you know are vulnerable has been increasing? I want to link that to the question I asked Catherine. How is that being experienced by the children you have in your academies and what are you trying to do to get the appropriate support for them?

Lucy Heller: We have certainly seen a huge increase in the number of potentially vulnerable students. It is important to say that this is on a spectrum. Particularly over the last year, with a lot of the concerns, sometimes we meld them one into the other. The number of children with serious mental health concerns is still relatively small. It is large in the sense that it has grown significantly over the last decade or so, but it is still a small number.

In this last year, you have seen, quite reasonably, a lot of children, and indeed staff and parents, with mental health issues that come from entirely natural anxiety about living through a pandemic. For most of those students, the speediest medicine is a return to normal school and normal life. We are seeing children actually very glad to be back and recovering quickly. It still feels very low generally, in terms of the mood, but that is quick recovery.

The difficult part has been the children who have more serious issues to address. The delays in getting support mean exactly the kinds of issues that Catherine was raising. They are not coming to school. The number of school refusers has risen. It is very difficult to disentangle the reasons why they are doing that; we spend a lot of time on encouraging children and their parents to make sure they come in. Their behaviour when they get into school has worsened. Exclusions are low for us, but I am aware of behaviour issues around the place. There is then the impact on their school performance and the effect that has on the wider school community, when children are feeling under par. It is tough.

We have done lots of things. We raised money for a Covid recovery fund, which has allowed us to get resources in to identify the needs of children, both universal and more targeted needs, and provide that support on mental health particularly. Not all schools will have that ability, as we had, to raise the money. School funding is definitively a problem.

It is also a problem that school teachers, school leaders and school staff generally are themselves feeling fairly worn out. This is all just a pressure on the system. It is nothing that people are not experiencing across all sectors, but it is very tough in schools at the moment. After all, they have remained open throughout. It was not for all children, but they have remained open throughout the pandemic.

The Chair: I have lots of other questions for all of you, but I have colleagues who want to come in.

Q59 **Lord Young of Cookham:** I think Lucy said, in her first intervention, that the number of children presenting over a period of time had doubled. To what extent is this due to us being much better at identifying children who are vulnerable? To what extent is there something going on in the background that is producing more children with mental vulnerability?

Lucy Heller: The reference I made to doubling was talking specifically about this academic year, as against the last academic full year, so those are fairly startling increases. That is not about better identification. It is about the external effects of a year of pandemic.

If you were looking longer term, there has undoubtedly been an increase in mental health concerns. That is a mix. I would not want to ascribe numbers to it, but I think it is exactly as you say. We are probably more sensitised to those problems; it is being more talked about. It is also a reflection that it is harder to be a young person now than it was for you or me. There are lots of reasons for that. Social media is brought to the dock often in this case, but there are lots of things that make it tough.

Q60 **Baroness Tyler of Enfield:** Catherine, I wanted to pick up on a point that you made when you were talking, I think, about some of the children with mental health problems, how that displays itself in behavioural problems and then what you need to do. I was wondering about the children at the other end of the spectrum whose mental health problems make them completely withdraw within themselves. Unless you were looking carefully, you would not pick up behavioural issues. What are schools doing about that issue and what sort of support do those children need?

Catherine Roche: That is absolutely right. You have children at both ends of the spectrum, if you like. For children who withdraw, it is so important that class teachers and school staff are in a great position, especially for younger children, to recognise those symptoms and be alert to the more withdrawing behaviour. Training and building the understanding, skills and confidence of school staff in recognising children who might need more support is incredibly important.

There are a number of programmes. The DfE is pushing out the Wellbeing for Education Return programme. The training for designated mental health leads is soon to come into schools. That will be so welcomed. During this period, Place2Be has run an online foundation programme. We have had a phenomenal take-up from class teachers, which demonstrates schools' readiness and teachers wanting to have this

information and recognising that they need it. Over 50,000 class teachers and school staff from 42% of schools around the country have accessed the programme since we launched it in September, so it is building their understanding.

Not everybody needs to be a mental health professional. Not every child needs specialist CAMHS treatment. That is really important. Where a class teacher or member of school staff who has an understanding can listen and engage with the child, unpack some of the issues and then refer to more specialist services, that can help a lot with the earlier detection of problems.

Q61 Lord Bichard: Thank you to the witnesses for joining us today. This is a question for Catherine and Lucy, mostly. You will know that the Government announced in March an increase in the number of teams in schools to support children who do not reach the threshold of the statutory services. That resource will, from memory, increase the number of teams from something like 50 to 400. Everyone always wants more resource, but did that seem to you to be a proportionate response to the problems you have been outlining? Did you think, "That is a drop in the ocean and we desperately need more of those kinds of teams at the moment"?

Catherine Roche: It is a good response, in that it is getting more support out and following through on the commitments in the Green Paper. It is also good that the training for the designated mental health leads is going out, but it is going to reach only a quarter to a third of the country. It means that there are many schools out there that still will not have access to a mental health support team.

In terms of the level of support, the teams are not the answer to everything. They are not the magic solution. They help, without a doubt, but there are still some areas, particularly where you have complex issues of deprivation, domestic violence and more complex social issues, where there are higher levels of need. They are part of the solution. One of the challenges to going faster is the issue around the mental health workforce.

Q62 The Chair: David and Elisabeth, one of the consequences that we have heard a little about is that, for example, children who have seen violence and really have no comfort at home are the ones who are vulnerable to being targeted for county lines, by sexual abuse predators and so on. Have you seen any of that and is there anything you can tell us about that?

Elisabeth Carney-Haworth: If you think about the lived experience of a child coming from a home where there is domestic violence and abuse, the very people who should be there to love, care for and nurture them are not. Their home situation is one of fear and anxiety. We are very clear that schools have to be that safe, nurturing and trusted place for those children. As Catherine has alluded to, so often children who are living with domestic abuse will have behaviours that can cause concern

when they are in school. These children will be suffering with mental health issues because of what they are living with.

Often, that then means that behaviour can lead to them being seen as children who are naughty, deliberately disobeying school rules and not behaving. If the school does not understand that every child's behaviour is a communication to them, these children end up being excluded. Even a day's exclusion for a child like that that says to them, "Not only is my home not a safe place, but my school, where I thought that I was loved, wanted and nurtured, does not want me either". When we do that, we push these children towards becoming part of a gang, being there to be part of county lines or CSE, because those people are brilliant at telling those children, "We want you. We will be your friends. We will look after you". By behaving like that as schools, we are creating that issue.

The Chair: I have seen quite a bit of that too.

Q63 Lord Bourne of Aberystwyth: Thanks very much to the witnesses for coming in today. It has been fascinating so far. I wonder what you think can be done to strengthen the central role of schools. Obviously finance has a part in this, as we have heard. Are there other things that can be done so that schools are better able to act to support vulnerable children, whether it be around mental health or domestic abuse? In your opinion, what might help the situation?

Lucy Heller: There are several things. Resource comes into it, not necessarily resource in schools but, as Catherine has said so eloquently, we need more money. The National Health Service and mental health resources need to be stronger. Greater links and simply more communication between the various constituent parts would be helpful. That is starting right back in nurseries. It is a bit of a technical point, but if you extended the pupil numbers to nursery and made sure there was this linking through of schools and the NHS right from the beginning, with a better sharing of information, that would be hugely helpful. It would allow us to improve the interaction between the services.

We should constantly be doing more with the school buildings, which may not be huge, but they are a resource that goes unused for portions of the year. We should be seeing more early-years and medical support. The old school nurse set-up could be reinstated. I do not understand why we do not have NHS outposts within schools that would help that. Those would be some of the things you could do if we had better links.

Relating to some of what David and Elisabeth were saying about exclusions, there is a broader question about vulnerable children and particularly alternative provision and exclusions. Schools are under a lot of competing pressures and it is genuinely really tough. No head teacher I know wants to exclude children, but they are faced with a triage and are trying to do the best for the majority. They are also under huge pressure on their numbers. A rethinking about some of the league table pressures would be helpful. If schools were incentivised to do more work

with some of the most difficult and vulnerable children, that too would be helpful.

Elisabeth Carney-Haworth: I referred a little bit to this in the last answer, which is about encouraging schools to see that their first responsibility is to the emotional health and well-being of their children. They must ensure that those children can enjoy safe, secure, trusting and nurturing relationships, in an environment that is safe and secure for those children. That is absolutely key.

Schools need to have information shared with them from all agencies. We now have every single police force across England and Wales signed up to Operation Encompass, so they should be receiving that domestic abuse information. In the 42 years that I did in education, much of it as a head teacher, I know that I was lacking information from other agencies that would have helped me better support my children.

There are some particular things we can do. We have SENCOs in our schools who look after our children with special needs. They now have to have a qualification. You do not actually have to have a qualification to be a designated safeguarding lead. Perhaps we should look at something such as that, so we are making sure that our designated safeguarding leads are really skilled and very well informed about how to support these children, and the range of experiences their children might have.

In terms of children who are experiencing domestic abuse—and we have to remember the vast numbers that this can be—we could put IDVAs but for children, so CHIDVAs, in our schools as well, so that these are IDVAs who are specifically trained to understand the needs of these children. We can train our teachers to understand, so they can provide the universal support, and then have our mental health support and CHIDVAs within our schools who can work specifically with children, or groups of children. Then you can go to the very specialist support, as was mentioned earlier by Catherine, such as for those children who need to go to CAMHS. Unless we have that tier of support, there will always be children who are missing out on what they need. That is going to have lifelong implications for them.

Catherine Roche: Linking up across the systems is the key thing. I would encourage thinking about training and about the future leaders of our education, health and social care systems, especially those who are going to be on the ground, delivering the services. That is why the implementation is so key. In the programmes to train future leaders, you should have mental health in teacher training, and you should have an understanding of social care or of mental health for the other professions. That way we will get people to develop and the future leaders to think about a joined-up system, rather than what we have in some cases, which is somewhat siloed. That is not intentionally, but a system gets stuck in.

Lord Bourne of Aberystwyth: We have all been through some harrowing times. I wonder if there is anything you have seen during the

pandemic, in your experience of looking at this area, that you think has been beneficial, something that we perhaps would want to keep hold of going forward. Is there anything that you think of, perhaps with some specific examples if so?

Catherine Roche: One thing is using digital to provide training directly into teachers in schools on this area. The scale we have reached, with 42% of schools having a trained teacher with an understanding of mental health, is a start. That has absolutely transformed our services. We can be more imaginative in how we deliver services and get direct to the target audience.

Elisabeth Carney-Haworth: There are two things I would mention. First, prior to the pandemic, David and I used to travel around the country, leading briefings for front-line police officers, strategic officers and teachers. Of course, we could not do that but, fortunately, our online training had come on board in January. The online training now is there for anybody to access in a school, so whole-school communities have done it, as well as school governors and office staff. That has been a real positive.

Secondly, we have created a totally unique helpline for teachers. This comes back to what has been said by both of the other witnesses. We have to realise that our teachers are in a very vulnerable position too in school, and that they have been through this pandemic. If we want our teachers to be emotionally and mentally healthy and well, we have to support them. Our helpline means that, if they are concerned about any child, they can literally pick up the phone, with no threshold and no paperwork, totally free of charge, and that call is answered by an educational psychologist. They can get that advice, support and guidance straightaway.

I will give you the example of one case, which was a teacher of a six year-old who phoned up at 8.15 in the morning, really concerned because she had had her Operation Encompass notification. She said, "I do not know how to support this child", because the night before that child had been in the same room where there had been a non-fatal strangulation of his mother. At the end of that call, the teacher went off saying, "Thank you so much. I know what I can do". She was calm. She was in a much better place to be with that child anyway, but also had a range of strategies enabling her to support that child.

Lucy Heller: I think there are several things. Everyone has referred to the digital leap forward. We have all learned; everyone has perforce and suddenly found themselves digitally literate in a way they were not necessarily beforehand, and that has been great. We have been able to invest so that, starting from September, all our students from year 4 up will have their own Chromebook, so it is a one-to-one relationship. We are excited about what a digital transformation can do to accelerate learning and close some of the gaps.

It has helped, ironically, with parent relationships. Lots of schools have found that it gave a lot of parents a new appreciation of the role that teachers played, having had to do home schooling. Equally, the close relationship between parents and the school has brought those groups together. Digital parent-teacher meetings are something that is going to stay. We of course want to keep some of them in person, but the ability to bring somebody together is great.

Some children have actually had a positive experience in lockdown. Having one or both parents at home and having time with them has been fantastic. One of the particular features of the pandemic has been the increasing of the fault lines. For some people, it has been great; for lots of people, it has been terrible. For those who had more time with their parents, it has been a good thing.

Q64 Lord Hunt of Kings Heath: It has been compelling evidence this afternoon. I wanted to ask about the interrelationship between schools and the health service. All of you have touched upon the importance of a contribution from health. Are there some structural issues that would help you get the support you need from the health service? Lucy, perhaps you could make a start here because of your experience across a number of different parts of the country.

Lucy Heller: One thing would simply be requiring the sharing of data. If we had a standard that NHS numbers and universal pupil numbers were shared across the services, so you could know that you were talking about the same student, that would be helpful.

Longer term, more NHS presence in schools would be a helpful thing. It seems obvious to me, partly just for efficiencies of scale, that, if you did the kind of standard health checks, eye checks, ear tests, all those things, and got parents engaged at an early stage, it would be a better way to ensure full take-up. Those things seem the obvious ones.

Catherine Roche: As Lucy said, there should be more interaction and understanding across the systems. On the mental health support teams, we are starting to see NHS teams that really are beginning to get into schools. It is a start. Having a designated mental health lead with the time, it is important to say, and the training to make the most of those teams and other support will be necessary.

Elisabeth Carney-Haworth: At the moment, we are undertaking two pilots around early years, in conjunction with the Home Office. We have been wanting to do this for a long time. We have been waiting for the NHS CP-IS system, its child protection information service, and we have had a meeting with them. Other people being able to interact with their safeguarding system is going to be crucial. We have had to do our pilot minus that, because they have told us that there is no way at the moment for us to feed directly into that.

Our IT systems across police, health and schools need to be able to talk to each other. Police forces struggle to share information because of their

different systems. That is key. While we are looking at the early years work that is going on in the Government, it is absolutely key that those new family hubs are really strongly linked in with schools and are not a standalone. They need to be really closely linked with schools.

Catherine Roche: The focus on prevention and early intervention is one structural change. The NHS is looking at treatment right now, but, if we can shift resources to focus on prevention and have the NHS focus on that, that would be great.

Q65 **Baroness Pinnock:** This has been a fascinating and stimulating session, so thank you all. I ought to say that I am a councillor in Kirklees, so have some experience of some of the issues that we are discussing this afternoon. You have touched on some of the issues that my question relates to already, but it might be useful to have them all gathered into one place.

The question is about data sharing and multiagency working. Sir Alan Wood, in his review of the multiagency safeguarding arrangements, found that "some partnerships are saying schools do not get involved, while others are saying schools are kept out". Does that fit with your experience? If so, what can be done about this improved data sharing, particularly in schools, police, the NHS and local authorities?

You touched on this in your last answers and said that the systems do not talk to each other. That is a very big issue indeed. I wondered if you have any ideas of how, without having that major change, which would take a long time, data sharing can be improved, using the systems we have. Has the fragmentation of the family of schools across the country, which I have come across, hindered or helped the work you do in any way?

Catherine Roche: One challenge on the ground is people having time, so for social care or the NHS to be able to feed back to schools about what is happening with children who might be in their system. For people who are doing their best in their roles on the ground, time to feed back is needed. Schools are busy places; social care is a busy place. That is a real challenge.

We have examples in some of our areas. In Brent, there is uptake of Brent Family Front Door, where there is a single point of access. The team there has dedicated time to know the schools' leads on mental health. There is regular information sharing and some joint training, so they are very familiar with each other. It comes down to individuals on the ground, and turnover of individuals can be a challenge there.

Baroness Pinnock: Is there a solution to that?

Catherine Roche: I will be honest: I am slightly struggling, other than more time.

Lucy Heller: That is a lot of questions in one. In terms of the data sharing, I am probably with Catherine. It is not malice; it is the usual thing that people have lots to do, have very little time and do not necessarily understand each other's systems. Catherine's idea about the

joint training is a brilliant one and one I am going to steal instantly, to introduce it into our initial teacher training and the training that the front line does for children's social care workers. If people had a better understanding of how the systems work, that would help.

I do not think there are any easy, short-term answers, because of the pressure that people are working under. One of the things that schools suffer from at the moment is that we are now part of a compliance culture. Every single thing is reasonable and has good motivations for it being there, but schools feel wiped by the amount of data and forms they have to fill in. It is hard to change that.

On the fragmentation, there is no doubt that the switch from an old local authority-maintained system runs the risk that there are gaps and children fall between. Most academies would now say that they want and need local authorities to provide that structure, but it is tricky. We are moving between one system and another. There is work to be done about how we make sure every child is supported and none is allowed to fall between the cracks.

David Carney-Haworth: We have to bear in mind the actual volume and capacity. I say that because, in a recent freedom of information request that 27 police forces responded to, in 145 school days from January to October last year, there were 143,000 police Operation Encompass notifications to school. Bear in mind that that is only 27 forces and we are established in 43 forces in England and Wales. We have to think of that volume. What are we going to do with all those notifications? Those notifications can contain more than one child.

That is where we have to look at schools and what we are asking schools to do. That is why I alluded to small-T therapy. We are not asking schools to be counsellors or psychologists. We just want them to know that these children are suffering from experiencing that previous night's domestic abuse. That is a big thing that we have to consider.

To be honest, Operation Encompass is a voluntary scheme that police forces have adopted with schools. They are not mandated to do it, but they are showing the willingness to do it, to help children, and the schools are there, wanting to help children. If Operation Encompass was mandated for forces and schools to do, we would get a far better service.

Elisabeth Carney-Haworth: Picking up on what David said, having worked with schools through Operation Encompass, and from my experience in education for so long, I know that they want information. They want to know and do their very best for every child in their care, and they want to work with the other agencies. I know from my last headship that I was not invited to a single MARAC meeting. I asked to go to MARAC meetings and was politely told why it was not allowed. That is just one example.

Schools appreciate, and have always appreciated, how much information we all possess about these children, but you get the full picture only

when every piece of that jigsaw is there. We need to help our DSLs; they have a huge workload, and many of them are full-time class teachers as well. We need to help them and give them greater confidence. We still have an issue that people hide behind data protection. They do not understand what they can share, with whom they can share it, when they can share it and how much of it they can share. We have to do something about that.

Baroness Pinnock: Wow, that final point you make is really good. Are there any ideas about how that can be changed? There is a general caution about data sharing, especially about children. It is something that I totally recognise. Do you have any suggestions for how that might be improved?

Elisabeth Carney-Haworth: That has to come from central government, because this affects police right from the very top, where they are making decisions about what information they are going to share. It is the same with health and schools. Schools are scared about having data breaches. They read all the headlines about the horrendous fines they can get. Right from government, we need a very simple guidance that says to everybody, "When we are talking about safeguarding a child, that trumps data protection every time and we will support you if you shared that information appropriately".

Baroness Pinnock: I wondered if Catherine or Lucy would want to comment on that final point about sharing data, particularly about children.

Catherine Roche: It is crucial that everybody joins up. I completely agree with David and Elisabeth.

Lucy Heller: I agree entirely—but rather like the answer to your earlier question, I know that those questions about data protection are very vexed ones. Elisabeth and David are absolutely right: there is huge paranoia at school level about data protection. It would need to be very straightforward in a sense, in that data sharing between authorised bodies is fine, but within an authorised body who you can share the data with is problematic. It should be simple, but it is a more difficult question than it sounds.

Q66 **Baroness Pitkeathley:** The witnesses have all spoken very powerfully about links between organisations and interagency. When we had a witness from the Department for Education to this committee, we were told that there was no integrated government strategy on vulnerable children. Can I ask if you agree with that? If there were such a strategy, what would be the Government's first priority for schools?

Elisabeth Carney-Haworth: I would agree: there is no strategy. Having listened to one of these other sessions, I heard people unable to even say that they had any definition of what a vulnerable child is. Perhaps we need to start with that, so we are all understanding the same thing when we are talking about a child being vulnerable.

We need to have a cross-departmental strategy from the Government. We have worked with health, the DfE and the Home Office, and one thing we have learned is how difficult it is for them sometimes to work together. We need to share a range of information about vulnerable children and it needs to be with police, health, social care and education. Going back to some of the things that I said about our designated safeguarding leads in schools, we need to make sure they are trained and there is a qualification.

We need to have clearly shared values, policies and information-sharing expectations between all those bodies within the Government. What they are going to share with schools and how they share it would be a starting point for that. We do not even have that agreement between government departments.

Baroness Pitkeathley: Catherine, what is your feeling about the integrated government strategy?

Catherine Roche: I am not aware that one exists. I do not think it does. We advocate for a whole-school approach. That means early intervention and prevention. For any child, whatever the level of need, there should be support from the school, connected in with specialist services. The parents should be engaged. It is very much about that whole-school approach for mental health.

Baroness Pitkeathley: Lucy, is there an integrated strategy?

Lucy Heller: I do not think there is any question. No, there is not an integrated strategy, and there should be. There is not just a really strong moral case, because these are the most vulnerable in our society who need to be looked after properly, but there is a straightforward economic one. The problems that we do not solve in early years, childhood and adolescence, go on to be hugely damaging for those individuals, their families and their communities. They are also expensive to the community at large.

One problem is that it is not just about information sharing. It is also about budget battles. Whether you are a local authority thinking about special needs support, or a school wrestling with exclusion and alternative provision, you are not acting in the interests of people as a whole—you are faced with really difficult decisions. We need to be saying, “We need to take the right long-term decision for those children and their long-term interests, rather than the immediate term”. Finding a way to incentivise the right solutions for vulnerable children would make a difference.

It is much easier said than done, but there is more we could be doing to bring people together, not just sharing information but making that a priority and bringing it into the spotlight. If you look at school league tables and local authority measures, you are often privileging, in a sense, the children who come at the successful end. Most of the hurdles that schools have to raise are about getting those who are easiest over it. It is

how we treat the most vulnerable and disadvantaged in our society, and how we encourage people to do that, that is important.

Baroness Pitkeathley: Would that provide the incentives that you talk about, bringing it more into the public spotlight?

Lucy Heller: On the whole, institutions and people within them are very sensitive to incentives and how you do it. League tables have made a difference to the way people act. If you make how they are dealing with those problems a measure of a school, local authority or the NHS, that would help. At the moment, you are probably penalising people. If you look simply at school admissions, to take David and Elisabeth's point about exclusions, schools do not exclude children because they do not want them there—they are trying to manage difficult things, and they are going to be penalised if they do not deliver on their academic outcome targets.

Baroness Pitkeathley: Can I take you back to one of your earlier answers, Lucy? You talked about sharing NHS numbers of vulnerable children as unique identifiers. How could the Government support schools to get hold of that data that would, in your view, be so helpful?

Lucy Heller: It is for government to mandate that. Given that everybody has an NHS number and a universal pupil number, it could be a requirement that those are recorded in the different databases. In medical and school databases, you would have them both there, similar to the way that free school meals is recorded in school management information systems.

Baroness Pitkeathley: Catherine, could I come back to you about the unmet needs that you talked about initially? The Government have committed to expand their services as part of the NHS long-term plan, as we know, to ensure more children can access mental health services, and committed that 100% of children who need specialist care will be able to access it by 2029, which seems quite a long way off. Are the Government on track to meet those targets in your view? How could we encourage that to roll out more quickly?

Catherine Roche: My understanding is that the Government are on track with the 345,000 target, so the short-term one. There is no plan on how to practically reach the long-term one. We know that the child mental health workforce is a real issue. That is already going to have to double to reach the 2023-24 target. There is already a steep curve to train more mental health professionals who will operate within the NHS. There is real work to do to figure out how to get to that 100% target.

The number of children and young people with autism is terribly overrepresented in the specialist mental health services. Earlier identification, getting in earlier and getting support in earlier is also crucial. Building an understanding of that in the community provision is really important.

Baroness Pitkeathley: Can I finally come back to you, David and Elisabeth? In its written evidence to us, the Department for Education said that it provided funding to roll out Operation Encompass nationally. When do you predict that you will be able to support every school and police force? Do you need further support to do that?

David Carney-Haworth: It was actually the Home Office that provided the funding. I think we are the first people in the history of the Government who have actually returned some money; we did not manage to spend it all because of Covid. We are established in 43 police forces. That was the overall target, and we have achieved that. We work with schools and police on a daily basis. In answer to your question very briefly, we are there.

Elisabeth Carney-Haworth: We are there.

David Carney-Haworth: We are in 43 police forces. We are about to launch in Ireland, in Northern Ireland, the Isle of Man, et cetera.

Elisabeth Carney-Haworth: Even though we are in every force in England and Wales, that does not mean to say that our work here is done. There is so much more that we want to do, but we have achieved that. It was Home Office money.

Baroness Pitkeathley: Congratulations on that.

Q67 **The Chair:** We have talked about an integrated strategy. Is this something about how you change the drivers in schools, instead of just thinking about academic achievement. I understand exactly why we went down that route. Too often, for vulnerable children and children with special educational needs, to be crude, there was too much patronising, as if we were saying, "You'll be all right". A bit of challenge and encouragement to reach their full potential was often missing. How do you introduce that well-being and the ideas you have been talking about today in the midst of making sure we do not let some children down by not giving them the academic opportunities that, in the past, they have been denied?

Lucy Heller: To some extent, those things are already happening. I hope that the school inspection system, Ofsted, is looking more generally at that question of well-being. I am not sure that there is a league table equivalent on this, and I would be slightly wary of trying to create the quantitative analysis that would demonstrate that. The general emphasis on the whole child is really important. There is some rethinking to be done on assessment and how school data works, so what we are measuring. That is part of work where a number of people, including the Times Education Commission, which I am on, are trying to wrestle with those things.

There is a separate question about the most vulnerable children, which we were focused on today. First, as David and Elisabeth said, you need to decide how you are defining "vulnerable". You are talking about a very broad range of issues there. Then this is almost a separate thing from

what you need for the majority of children, but how do we make sure that those children do not get left behind? In the entirely admirable pursuit of the best outcomes for the majority, how do you make sure that those children are privileged? We need to do our best by them. That is a separate question, and I am not quite sure—but some of it is about money. Resource is a real issue. It is not across the whole system—you are talking about a small number of children. It is about more money being used effectively by making the agencies work better together. There is nothing that I expect to be happening very quickly, and it is a difficult question about how you do it. Schools really want to do that; they want to work with the other agencies. This is probably an area where a relatively small amount of well-spent resource could go very far.

Catherine Roche: Adding to what Lucy has said, a common language across the systems, and the systems understanding each other, is really important. We have talked a bit about that. The introduction of a measure around well-being within the school—although I would not want to create a league table at all—would bring that absolute visibility and understanding around what we mean by well-being, now that we have mental health on the agenda and it is so much more understood within the school system. Then the systems that each of those bodies are accountable to, whether it is Ofsted in schools or within the NHS and social care system, should be thinking about the whole child, and the development of the whole child, not just the academic outcomes.

Elisabeth Carney-Haworth: I was chomping at the bit with that one. The phrase that immediately came to mind for me was, “We measure what we value”. That is true. I quite agree with Catherine: we are not talking now about creating a league table of well-being, but there needs to be some way in which we are actually acknowledging the schools that are doing incredibly well in supporting children’s emotional health and well-being. For some schools, sadly, that means it needs to be in part of the Ofsted framework, because that is how they look at their priorities. If it is going to be in an inspection, they will make sure they do it.

We have to recruit our head teachers differently. We have to look at who ends up being the most important person who is setting the standard for that whole school. We need to look at who our head teachers are. We need leaders who have a holistic view of education and do not just take the short-term approach—“I want to get this through Ofsted; I am jumping through hoops”. We need them to understand what our children need and that every single child deserves the very best that they can have from every single day they are in school. We cannot afford to let our children have missed one day through things not going right for them. It is their right to be in school, be happy and learn well.

The Chair: On that note, I have to bring this session to a close. I am sure you know that we would all have loved to go on and ask many more questions. However, time is against us. Thank you to each and every one of you as witnesses this afternoon. If there is anything you think you have not had the chance to say that we ought to take into account,

please write to us. Thank you very much.