

‘They are always in the top of our mind’: Designated Teachers’ views on supporting care experienced children in England

Lynn De La Fosse^{1,2}  | Sarah Parsons^{2,3}  | Hanna Kovshoff^{1,2} 

¹School of Psychology, University of Southampton, Southampton, UK

²The Autism Community Research Network @Southampton [ACoRNS], Southampton, UK

³Southampton Education School, University of Southampton, Southampton, UK

Correspondence

Sarah Parsons, Southampton Education School, University of Southampton, Southampton, UK.

Email: s.j.parsons@soton.ac.uk

Abstract

Care experienced children are at substantial risk for poor educational outcomes, so it is vital to understand where the challenges and opportunities may lie in providing improved support for them. Designated Teachers have statutory responsibilities within maintained schools in England to promote the educational achievement of care experienced children, but very little research has examined their views and experiences. Following purposive sampling, in-depth, online, semi-structured interviews were conducted with five Designated Teachers during the COVID-19 pandemic to explore their experiences of the facilitators and barriers to supporting care experienced children. Four themes were developed through reflexive thematic analysis. Designated Teachers enacted change through both systemic working, and the provision of targeted support to address individual child needs. Various facilitators and barriers to role fulfilment were identified, including multi-agency working and the impact of competing roles and responsibilities. Implications for professionals are discussed and suggestions for future research are made.

KEYWORDS

care experienced, designated teachers, looked after, multi-agency, virtual schools

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INTRODUCTION

A child or young person is legally defined as 'looked after' by a Local Authority (LA) in England if they are provided with accommodation for a continuous period of more than 24 hours or are subject to a care or placement order (Children Act, 1989). There were 80 850 looked after children (LAC) in England on 31 March 2021, an increase of 1% on the previous year (Department for Education (DfE), 2022b, 2021). A previously looked after child (PLAC) is one who is no longer looked after by a LA because they are subject to an adoption, special guardianship, or child arrangements order (DfE, 2018a). Services to looked after children are provided by the LA under the 1989 Children Act, with issuing guidance for LAs overseen by the DfE (Oakley et al., 2018). Oakley et al. (2018) recognised that children who are taken into care do have better outcomes compared to the alternative of not being taken into care. Nevertheless, of significant concern is that, compared to their non-looked after peers, LAC have poorer academic outcomes at every key stage and are more likely to leave school with fewer or no formal qualifications (DfE, 2020). LAC are less likely to progress to higher education (DfE, 2022a), and care experienced children (CEC¹, including LAC, PLAC and care leavers) have poorer employment prospects and longer-term outcomes for their physical and mental health (Cameron & Maginn, 2009; Sebba et al., 2015; Simon & Owen, 2006; Teyhan et al., 2018). CEC are also over-represented in both the youth and adult criminal justice systems (Oakley et al., 2018). Given these very poor outcomes, it is vital to understand more about the context and provision targeted at supporting this very marginalised group. This paper focuses specifically on the experiences of Designated Teachers who have a statutory role in England to support and monitor the progress of LAC.

LAC are more likely to have a special educational need and/or disability (SEND) than non-looked after peers, and 52.6% of all children who had been looked after at any point on 31st March 2021 had an identified SEND (DfE, 2022b). Within the population of LAC, children with a SEND perform worse than LAC without any SEND, and children with SEND that are not looked after (Geenen & Powers, 2006). Physical disabilities, moderate learning difficulties, severe and profound learning difficulties and autism have been associated with poorer academic outcomes than other SEND amongst CEC (Freeman, 2016; O'Higgins et al., 2021; Sebba et al., 2015). Indeed, O'Higgins et al. (2021, p.1536) identified autistic children who have 'ever been permanently excluded and those who have low KS2 [Key Stage 2] scores' as requiring particularly 'urgent support'. Similarly, given the very poor outcomes for autistic LAC amongst the already poor outcomes of CEC in general, Green et al. (2016) argued it is vital to appropriately consider whether a LAC may be autistic, and for their support and educational planning to be informed by an autism-specific lens. 2%–3% of all LAC are estimated to have an autism diagnosis, though this is likely to be an underrepresentation due to under-diagnosis and underreporting (Parsons et al., 2018). Official Government statistics (DfE, 2022b) report on primary type of SEND in a range of social care groups, including children in need, children on a child protection plan and children looked after; however, specific figures for PLAC and care leavers are not included, so it is less clear what percentage of children and young people in these groups have an autism diagnosis, or autism as their primary need. Consequently, awareness and recognition of autistic children amongst the broader population of CEC is an important line of enquiry for helping to understand and address poor outcomes.

Various UK Government policies and initiatives have been implemented in England to try to improve outcomes for all CEC. In 2007, the UK Government introduced the concept of the Virtual School and the role of the Virtual School Head (VSH; Department for Education and Skills, 2007). The VSH would oversee the education of all LAC within a LA as if they attended

one school, although the children remained educated across different local schools. Following successful pilots of the Virtual School model, the Children and Families Act 2014 placed a statutory responsibility on all LAs to appoint a VSH.

Additionally, the Children and Young Persons Act 2008 (amended by the Children and Social Work Act 2017) placed a statutory duty on all maintained schools in England to designate a staff member who is responsible for promoting the educational achievement of currently and previously LAC. Known as the Designated Teacher (DT), this person must be a qualified teacher, head teacher or acting head teacher, and be working at the school at the time of appointment (DfE, 2018b). At an organisational level, DTs contribute to school policies to ensure they do not disadvantage CEC, and that there are adequate procedures in place to support children's learning. DTs also work with school staff, providing information regarding differentiated teaching strategies, and promoting greater understanding of how the emotional, psychological and social effects of children's early experiences and separation from their birth family may impact on learning and behaviour. DTs should also work closely with external stakeholders and agencies, including social workers, VSHs, foster carers, birth parents if appropriate and Governing Bodies, and be the central point of contact for CEC within the school (DfE, 2018b). This liaison role becomes especially important when children are placed out of area i.e., they may attend a school or have a care placement in a different LA than the one who took them into care (Pickles et al., 2022).

Nevertheless, despite the importance of these statutory roles and the persistently poor experiences and outcomes reported for CEC, there is very little published research in this area. A few studies have focused on VSHs (Drew & Banerjee, 2019; Pickles et al., 2022; Sebba & Berridge, 2019), highlighting their important facilitative role in promoting inter-agency working to support LAC. However, there is limited published research exploring DTs' roles and responsibilities, with most in the form of unpublished theses (Boesley, 2021; Goodall, 2014; Higgs, 2006; Simpson, 2012; Waterman, 2020; Woodland, 2010). Pickles et al. (2022) concluded that it would be helpful for future research to explore a wider range of voices and experiences beyond VSHs, including those of DTs. Consequently, this study sought to contribute to this important, emerging evidence base by exploring DTs' views and experiences of their role.

The research addressed the following research questions:

1. What do DTs perceive to be their main roles and responsibilities?
2. What do DTs perceive to be the facilitators and barriers to carrying out their role?
3. What experiences, if any, have DTs had in supporting autistic CEC?

METHODOLOGY

Sample and recruitment

Five DTs (one male, four female) were recruited from LAs in England (see Table 1 for participant information). The study used a purposeful, self-selecting sampling method (Palys, 2008). The inclusion criteria were for the participant to be (a) the DT in their school and (b) working in a LA maintained school or Further Education College. Emails were sent to all 445 maintained primary and secondary schools and Further Education Colleges in four LAs in the South and South-East of England and Greater London. The research was also advertised via national DT mailing lists or DT forums held by Virtual Schools. Prospective participants were invited to contact the researcher (first author), at which point they were supplied with a detailed information sheet and consent form and

TABLE 1 Participant information.

Participant number	Gender	Geographical location	Type of setting	Length of time in DT role	Additional roles held	Pupils currently supported
P1	Female	South of England	LA maintained specialist setting (SEMH)	Not explicitly stated	Deputy Headteacher; Assessment Lead; Curriculum Lead	Looked after children
P2	Female	South East England	Primary school	13 years	SENCo; Designated Safeguarding Lead	Previously looked after children
P3	Female	South East England	Infant school	Not explicitly stated	Headteacher; SENCo; Mental Health Lead; Class Teacher	Previously looked after children
P4	Male	South of England	Primary school	7 years	Deputy Headteacher; Head of Inclusion; Designated Safeguarding Lead	Looked after children
P5	Female	Greater London	Primary school	1 year	SENCo; Class Teacher	Looked after and previously looked after children

had the opportunity to meet with the researcher to find out more about the study. The first author had previously met one of the participants in the completion of their professional roles, but this prior contact did not influence their chances of being selected for the study, as all participants contacted the researcher voluntarily and all who consented to the research were interviewed.

Method and procedure

Data collection took place via semi-structured interviews, which was the method deemed most appropriate to answer the research questions. These interviews were carried out virtually and recorded on Microsoft Teams during the Covid-19 pandemic in 2020–21. Each interview lasted between 45 and 60 min. The interview schedule (available from the first author's thesis: De La Fosse, 2022) was informed by Government guidance on the role of DTs (DfE, 2018b), discussions with Educational Psychology colleagues in the field and a review of relevant literature (De La Fosse, 2022). Participants were asked to reflect upon the nature of their roles within school, including experiences of working with the Virtual School, and on their experiences of supporting CEC, including awareness of any autistic children amongst this group.

Interviews were fully transcribed via a paid transcription service, after which all transcripts were cross-checked against the initial recordings by the first author, with amendments made if required. Data analysis was carried out by the first author following the six-step approach to reflexive thematic analysis, as outlined in Braun and Clarke (2006, 2019; see De La Fosse, 2022 for details). As transcription had initially been carried out via a paid service, additional time was spent on the first step of familiarisation with the data to account for this. Coding and theme development was carried out via manual coding and was done inductively as the process was directed by the content of the data and not by pre-existing theories or concepts.

Ethical considerations

The study conformed to the British Psychology Society's ethical guidelines (Oates et al., 2021) and formal approval was gained from the University of Southampton Ethics Committee (ref 54850.A2). Participants were provided with an information sheet outlining the study and fully informed, written consent was gained via a consent form. Participants were informed of their right to withdraw at any point until transcription. During the interview process, the researcher was vigilant to any signs of distress, and participants were given a debrief form after the interview which identified sources of support. To ensure confidentiality, participants were assigned an alphanumeric value (P1, P2 etc) which is used to refer to them throughout this paper. Other identifiable information was removed during transcription. The data were stored on a password-protected laptop to which only the first author had access.

FINDINGS

The four themes generated from the analysis are depicted in Figure 1 with accompanying subthemes, and connections between them (note: main themes 2 and 4 do not have any subthemes). Each main theme and sub-theme are presented below with supporting quotes from the transcripts.

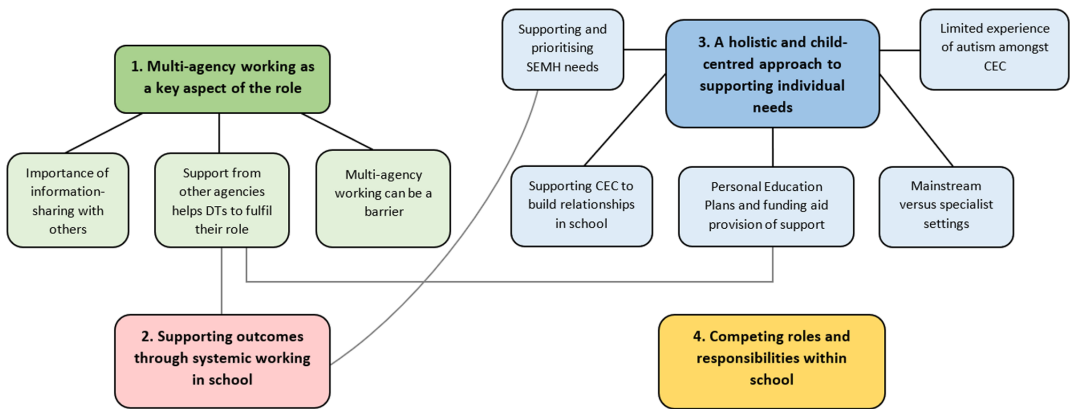


FIGURE 1 Thematic map showing themes, sub-themes and connections between them.

Theme 1: Multi-agency working as a key aspect of the role

Importance of information-sharing with others

Participants emphasised the importance of information-sharing with other professionals. For example, informing school staff about children's care status helped staff to understand their needs better, and one DT kept the Virtual School updated on children's progress outside of formal statutory processes:

P1: If I'm emailing the social worker I might copy in [Name] from the Virtual School. So, I will make sure that they know what is going on regarding a child's education, or concerns or issues that we might have in school.

DTs were a key source of information for foster carers/parents, particularly around school systems and processes. DTs also shared useful links and signposted families to appropriate services. Information sharing with families was a reciprocal process, and P5 acted as an intermediary between families and teachers, sharing successful strategies and supporting a consistent approach:

P5: And she [parent/carer] will say to me 'I've tried this and it worked' and I will say 'Great, I will let the teacher know'. And the teacher will say 'I've tried this and it works' and I will let her [the parent/carer] know.

P1 stressed the need for timely information-sharing and found herself becoming frustrated when this didn't happen:

P1: We have just received a chronology that the social worker had put together and that was only because... I'd informed the social worker about some issues that he'd been having in school and she said 'Oh, this might be helpful for you'. Well... that would have been helpful for us back in June when we knew he was going to start.

For other DTs, information-sharing had been hampered by documents getting lost (for example when a child transferred from one LA to another), which made it challenging for staff to implement appropriate and effective support.

Support from other agencies helps DTs to fulfil their role

All DTs described how the Virtual School supported them in their role, for example by offering training opportunities which helped build DTs' skills and knowledge, and made them feel valued:

P5: There's termly CPD that the Virtual School offer which are really good... And then also because we're in the Attachment Aware Schools Award there's also optional ones, optional courses you can do.

Some DTs felt improvements could be made to Virtual School training. P5 wished that the information was simplified for new DTs, as she was left feeling overwhelmed after her first course and struggled to understand the acronyms used. Two DTs also criticised that some training was unavailable to them as they only had PLAC on roll:

P3: Maybe some wider training that would be open to all staff, not just for looked after children...we have a lot of post-adopted children who still have many of the similar needs to looked-after children, particularly when they are very young.

The Virtual School also supported DTs through advice-giving, information-sharing and signposting. This was achieved through regular email contact, the Virtual School website, or being available to answer specific queries. Clarity of, and ease of access to, information was important to two participants, who commented that this could differ between Virtual Schools:

P5: I feel like the [Local Authority] Virtual School website is a little bit more... user friendly, more detailed. Whereas the [other Local Authority] one... I couldn't really find what I was looking for ... which kind of then slows things down as well when you just need to find an answer to something.

P4 found working in isolation as the only DT in his school difficult. Some Virtual Schools facilitated networking with other DTs, which enabled sharing of good practice and ideas, especially when done in smaller groups rather than as larger group 'briefings' (P2). Some DTs were supported by other schools and agencies in their local area, including Educational Psychologists (EPs), outreach services and specialist settings.

Multi-agency working can be a barrier

P4 emphasised that multi-agency working needed to be collaborative, with people 'working together', which did not always happen. P3 perceived one Virtual School to show no interest in LAC placed in her setting, and multi-agency meetings were a source of frustration for

several DTs, particularly when there was perceived lack of engagement from families and other professionals:

P2: I think social workers have their own whole load of stresses and strains but ... I listen to some people who have got lots of looked after children, and ... none of them have social workers that turn up at meetings and I just think that's really frustrating.

However, P1 recognised that conducting meetings virtually during the Covid-19 pandemic had improved attendance:

P1: I don't actually think that having to do them over Zoom has had a particularly negative impact... what it has done actually is people have made the time whereas often, particularly with the child and his parents, they would be like 'Oh no, we can't come in and we can't do it'. But... because they have been at home there has been no excuse for them not to attend.

Cross-border agreements meant some DTs had to work with multiple Virtual Schools, which presented challenges. Specifically, P5 struggled to know which Virtual School to seek support from, and P1 and P3 disliked the lack of consistency in the paperwork, finding this 'incredibly frustrating' (P3).

Theme 2: Supporting outcomes through systemic working in school

The second theme pertained to DTs enacting change by working systemically in their schools, often focusing on changing staff attitudes and practice. Whole-school approaches were often implemented, including an Attachment Aware Schools Award, Emotion Coaching and being an Empathy Lab pioneer school. For both P2 and P5, the 'Attachment Awareness' initiative had created a noticeable shift in attitudes within the staff team, with P5 describing it as 'the best thing that we've done'. DTs also cascaded training they received to other staff members, and devised their own whole-school training e.g. 'Behaviour as Communication', which helped change staff views:

P2: I think it has changed the way some of us look at the function of some children's behaviours ... And also it's given us ... a little bit more of an insight into... what children have lived through and maybe what parents have lived through.

DTs also had a whole-school influence through writing and contributing to school policies. For example, P5 was working on amending the school's Behaviour Policy to be more attachment and trauma informed.

Theme 3: A holistic and child-centred approach to supporting individual needs

Participants recognised the need for a holistic approach to supporting CEC, which considered academic attainment, social skills, sense of belonging, emotional well-being and mental health,

teaching behaviour for learning and physical or sensory needs. Crucial to providing the right type of support was assessment of academic and non-academic progress, which was used to inform interventions. In P1's school there was a school-wide, formalised approach to assessing social, emotional and mental health (SEMH) needs:

P1: So the assessment for the social, emotional and mental health – we call it our pupil profile – that will be used to inform the teaching that the child will have in those kinds of skills. And then...we also assess them for reading, writing, maths and science.

Supporting and prioritising SEMH needs

Interventions and strategies were put in place to support SEMH needs, including physical spaces for children to use when overwhelmed, pastoral support, targeted support around regulating emotions, whole-school approaches such as emotion coaching and restorative justice and buying in external agencies such as a counsellor. Some DTs emphasised how the support offered was not unique to CEC:

P3: ...we would do the same for children who weren't looked after if they had similar needs because it isn't just always looked after or post-adopted that have those anxieties and needs.

Two DTs recognised that SEMH needs might be prioritised over learning and academic progress, which led to academic pressures and expectations being reduced, for example:

P5: At some point I think she will need it. But her emotional side of things is... we have to... not 'fix it' because that's the wrong term, but help her with that first because I think that comes first for her. Then she will attain.

Supporting CEC to build relationships in school

A recurring subtheme was that of relationships, and their importance for CEC:

P3: I think it's our relationships with them. So I think it's being their constants. And it can even be that... just checking in with them. As we are walking down the corridor it's making sure I say something involving their name and about a conversation we might have had. So that they are always in the top of our mind.

All DTs regularly took time out of their day to 'check-in' with their CEC. P2 and P5 provided more formal opportunities for regular contact through a 'mailbox' system where children could send notes, or through weekly mentoring. Relationships with other key adults in school were also important, however staff changes (e.g. between academic years) could be challenging, so the DTs were consistent adults during these times.

The DTs also recognised the importance of supporting CEC to foster relationships with other children. Consequently, the DTs and other school staff helped to provide a sense of belonging, which may previously have been lacking:

P1: We give our children a sense of belonging and, particularly with the looked after children that we have here, even if their foster placements haven't broken down over the years their school placements possibly have, or they have been educated in a cupboard away from other children because of the volatile nature of their behaviour and things like that.

Personal education plans and funding aid provision of support

DTs were positive about statutory processes to support LAC, to which they contributed. Key to monitoring LAC's progress and attainment was the personal education plan (PEP). DTs and class teachers reviewed progress against previous targets and set new ones. DTs also gathered LAC's views ahead of the PEP meeting, which was attended by key staff including DTs, social workers, foster carers and sometimes Virtual School staff. DTs liked that the PEP meeting presented an opportunity to focus on positive achievements:

P5: And, yep, we just use that time to really focus on a lot of what's gone well which has been so lovely for this child because he's made amazing progress.

DTs worked with teachers to identify the provision needed to support progress. Thus, the process was viewed as individualised and child-centred:

P5: We choose which ones need the most work and together we come up with the targets. And then it's a case of 'Right, can I support you with this? Do you need me to take him out one to one? Do you need me to do this? Do you need help with resources?'

Three DTs referred to the Virtual School's involvement in statutory processes. The online PEP format provided by the Virtual School was praised by DTs, who found it clear and easy to complete. Two DTs liked that VSHs quality-assured their PEP documents, as this motivated them to produce more comprehensive plans.

Pupil premium plus (PP+) funding was utilised to support both learning and SEMH needs. Reflecting the broader context of the research, some DTs described how the Covid-19 pandemic had limited the provisions they could put in place because children were educated at home during the lockdowns or because usual clubs/groups were unable to run. Therefore, Government-granted funding could not be used as effectively during this time.

Mainstream versus specialist settings

One DT worked in a specialist school and perceived that the needs of CEC could be better supported within specialist schools than mainstream ones, due to specialist schools being more flexible and providing more individualised support, and thus being more child centred. For example, her school's behaviour policy was reportedly more flexible and less punitive when children showed dysregulated behaviour, which enabled the school to be more inclusive. This DT gave examples where children had previously been taught outside of the mainstream classroom,

or on part-time timetables, or who were unable to remain in a mainstream school as their needs were not being adequately met:

P1: ...for some children it was heart-breaking. They would find themselves out of class. It still is, because we get them coming into us and we read their history. Parents having to come up and collect them after half an hour of being in school because they're sensory, and they are having a sensory overload.

This DT also felt the higher staff: student ratio in the specialist setting made it easier to provide an individualised curriculum and cater to children's needs. Additionally, both time and expertise could affect teachers' ability to support pupils in a mainstream school:

P1: But actually mainstream teachers don't have the time. They have the commitment and they have the desire but they are under so many other pressures that I just think...supporting a child with autism in a mainstream school, supporting a looked after child in a mainstream school is more difficult.

Limited experience of autism amongst CEC

None of the DTs interviewed currently supported CEC with an autism diagnosis, and so had little to no experience of working with this population. P1's school had one LAC on the waiting list for an autism assessment, which was delayed due to COVID-19; P3 said a post-adopted child in Reception had been flagged by a health visitor as showing autistic traits; and P5 also had a child in Reception whose foster carer had raised the possibility of him being autistic. P3 reflected on how she had never considered autistic CEC as a distinct group, although her participation in the research had since prompted discussions within her staff team around this. Differentiating between autism and attachment needs was discussed as a challenge:

P3: Because what we've started to think about is there are so many similarities between that sort of attachment children and autistic children, if that makes sense ... But it isn't a connection we've probably naturally made.

Related to this, some DTs perceived the similarities between autism and attachment needs to lead to conflicting views between foster carers/parents and school staff regarding diagnosis, and also potentially to mis-diagnosis of autism within the non-looked after population.

P1: We have some children who have a diagnosis of autism, a diagnosis of ADHD, but knowing their backgrounds we are kind of thinking it's more early developmental trauma.

Despite their current lack of experience in supporting autistic CEC, some DTs felt confident that they would be able to utilise the existing skills in the staff team to provide effective support to this population. In this way, they perceived support for autistic CEC to be the same as support for autistic pupils who were not care experienced. Others identified areas where they felt they did not have sufficient knowledge and expertise about specific needs, and would require additional support from other agencies to effectively meet the needs of children:

P3: I think we would probably want to get some advice from somewhere. Probably our EP to start with. But somewhere about how to marry up... and which bit to start on first. That would be very personal to the child, wouldn't it? 'What is the priority?' 'Which bits do we need to get in place first for this child to be successful?'

Theme 4: competing roles and responsibilities within school

All DTs held additional roles in school, and those with more roles found they had less time dedicated to their DT responsibilities. This was particularly evident in smaller schools with a small senior leadership team:

P3: But we are a three-class school so I have lots of roles because there aren't lots of people (laughs).

P1 and P4 reflected on how additional time pressures were created due to staff absences during the Covid-19 pandemic. DTs took on additional responsibilities and other work was prioritised over the DT role:

P1: ...time is always a bit of an issue. But actually, it's the staffing, the pressures on staffing, that is causing them. Our SENCO is currently off and so I am picking up her annual reviews as well.

The number of LAC in school also influenced capacity, with greater numbers leading to more time pressures:

P4: ... at the moment, it's easier in respect of we only have two children. If you've got a much bigger number - and we have in the past, we've had up to ten in school at any one time - that's much harder to manage.

Two of the DTs interviewed were only supporting PLAC at the time of the interviews so had fewer time pressures as the statutory timescales for LAC did not apply.

DISCUSSION

This study focused on the under-researched role of DTs, the facilitators or barriers to their role fulfilment, and their experiences of supporting CEC, including those on the autism spectrum. All five DTs emphasised how working systemically was a key facilitative factor for supporting CEC. Whole-school, multi-modal approaches that emphasise skills work, school ethos and teacher education have been shown to be most effective in supporting the mental health of young people in schools (Weare & Nind, 2011). In line with this, DTs described how they delivered staff training and implemented whole-school approaches, thus ensuring support moved beyond focusing on the individual child, the classroom, or the curriculum.

A holistic approach was evident in accounts of assessment and intervention, and support for non-academic progress was reported in all interviews. LAC are more likely to have a diagnosed mental health disorder (Bazalgette et al., 2015; Meltzer et al., 2003; Oakley et al., 2018),

and LAC with a diagnosed mental disorder are more likely to be delayed in their overall school achievement, and to have marked difficulties with reading, mathematics, and spelling than those without a mental disorder (Meltzer et al., 2003). DTs in the present study assessed both academic outcomes and those relating to SEMH and physical needs, sometimes prioritising SEMH over academic learning goals to support CEC's access to learning.

This did not mean that academic aspirations and attainment were not important, and DTs applied a range of approaches to support academic progress, including booster sessions for English and maths, and small group teaching where appropriate. In many cases, academic interventions were funded by the PP+ grant awarded to the school. Statutory processes such as the PEP and Annual Reviews require schools to review progress, and therefore to informally evaluate the effectiveness of any interventions put in place. However, the academic interventions described by participants have a limited evidence base for LAC, which reflects a wider lack of research in this area (National Institute for Health and Care Excellence [NICE], 2021) that requires urgent attention.

It was notable that these DTs were positive about the PEP process, while previous research has found mixed views (Goodall, 2014; Mann, 2012; Waterman, 2020; Woodland, 2010). For example, in Woodland's (2010) study, the PEP was viewed by some DTs and Virtual School staff as a 'tick-box exercise' (pp. 97) which led to varying degrees of engagement. The method of producing and reporting the PEP may be important here since three DTs in the present study used electronic formats ('e-PEPs') supplied by their Virtual Schools. In line with previous findings that e-PEPs improved practice and helped with monitoring of progress (Rivers, 2018; Sebba & Berridge, 2019), this format provided clarity around what information DTs needed to supply, supporting their contributions to the process.

Interestingly, the context of the COVID-19 pandemic seemed to facilitate the process, with two DTs commenting that virtual meetings increased stakeholder engagement and thus improved multi-agency working. This observation aligns with the views of social workers interviewed by Manthorpe et al. (2021), who found the virtual format to increase attendance as travel requirements were removed. One DT was considering continuing with virtual multi-agency meetings, representing a potential step change for her school. It is unclear whether this reflects a wider shift in practice amongst schools in England, and future research exploring this could be beneficial.

DTs valued the relationship they had with the Virtual School, who served as a key source of support, training and information. This echoes previous findings that DTs required support in areas such as completing PEPs, accessing additional funding, accessing useful resources, and training to support pupils' educational attainment and emotional needs (Boesley, 2021; Drew & Banerjee, 2019; Simpson, 2012). DTs particularly valued staff availability and clear, user-friendly websites or regular email updates. As some DTs utilise less than 1 day a week to meet their obligations (Boesley, 2021), easily accessible information supports role fulfilment by minimising the time spent searching for information and resources. All five DTs held sole responsibility for CEC in their schools and the role could feel isolating as a result. Consequently, they valued opportunities provided by the Virtual School to network with other DTs and share good practice.

In alignment with the findings of Pickles et al. (2023) and Gilligan (2001), the building of positive relationships with CEC was also recognised as crucial for supporting the children's resilience. Levels of individual contact with CEC varied, ranging from regular mentoring sessions, or delivering interventions, to more informal contact, but all DTs perceived the CEC in their school to value this contact. DTs also recognised the importance of fostering positive working relationships with other key stakeholders, such as foster carers or parents, echoing Goodall's (2014) findings.

Nevertheless, despite these positive accounts of systemic working, relationship building and collaboration, these DTs also reported longstanding and substantial barriers to supporting CEC. DTs worked closely with a range of professionals and agencies, most commonly social workers, VSHs, Virtual School staff and foster carers and families. Other professionals not fulfilling their responsibilities prevented a joined-up approach, which negatively impacted on DTs' provision of support. DTs were also frustrated by poor information-sharing within and beyond LA teams, also found by Goodall (2014). As noted by Pickles et al. (2023), this information-sharing situation is exacerbated by the statutory requirements of the 'Belonging Regulations' (The Education [Areas to which Pupils and Students Belong] Regulations 1996). These regulations apply where some LAC have a care placement outside of the boundary of the LA which took the child into care. The child would typically be educated in a school close to their care placement but would still 'belong' to the placing authority. DTs reported having LAC on roll who were cared for by different LAs and so under the remit of different Virtual Schools. This created inconsistencies regarding the paperwork required in each case, which was very challenging for DTs, a finding echoed by Waterman (2020). Unfortunately, these challenges with multi-agency working are familiar and persistent, and all too often cited as a barrier to the progress of CEC (Harker et al., 2004; Mann, 2012; Oakley et al., 2018; Parker, 2017; Waterman, 2020). Multi-agency working could be improved through better co-location of staff from different agencies, better information-sharing and increased accountability, and the reduction of competing individual and organisational priorities (Atkinson et al., 2005; Oakley et al., 2018; Tomlinson, 2003). Oakley et al. (2018) suggest these objectives could be achieved through implementation of a new Charter for Looked-After Children which is a suggestion that warrants further exploration.

Challenges with multi-agency working were also magnified given that DTs were often themselves fulfilling more than one role. The Designated Teacher (Looked-After Pupils etc) (England) Regulations 2009 stipulate the DT must be a qualified teacher or a head teacher/acting head teacher, and all participants in the current study had at least one other job role, with many holding several (see also Boesley, 2021). In line with guidance that the most effective DTs have a leadership role, some participants were part of the senior leadership team (DfE, 2018b). Perhaps unsurprisingly, DTs found it difficult to manage their time effectively given these multiple job roles. This was particularly the case in smaller schools with fewer staff, and when a school had a greater number of LAC on roll (also found by Fletcher-Campbell et al., 2003). Although DTs recognised that time had always been a barrier, staff absences caused by the Covid-19 pandemic further exacerbated this pressure. This raises concerns about the extent to which the complex and wide-ranging needs of CEC can be effectively managed and met if they cannot be prioritised amongst other competing demands.

None of the DTs interviewed supported any CEC with a formal diagnosis of autism, and one stated that, prior to her involvement in the research, she and her colleagues had never considered them as a distinct group of learners. Diagnostic dilemmas regarding autism and attachment disorders are common, and professionals can find it challenging to differentiate between them (Davidson et al., 2022; Pickles et al., 2023). Consequently, some children's needs may be misattributed and therefore not supported in the most appropriate way. It is important that professionals and researchers recognise autistic CEC as a distinct population (Green et al., 2016) yet there is a paucity of empirical research in this area (Davidson et al., 2022), suggesting that further exploration is needed to understand what is happening on the ground to impact on children's poor outcomes (O'Higgins et al., 2021). With regards to addressing issues of potential misdiagnosis, the Coventry Grid is a clinical tool designed to aid clinicians in distinguishing between attachment

disorders and autism (Moran, 2010, 2021) and there is scope for future research on the potential usefulness of this tool for educational professionals in non-clinical settings.

STRENGTHS AND LIMITATIONS OF THE STUDY

Although the DT role has been statutory since 2009, there is limited published research exploring their roles and responsibilities, so this small-scale study provides important insights from an under-researched group. While the COVID-19 pandemic presented some limitations with recruitment, this study generated novel findings which could be utilised to improve future support, such as the use of virtual meetings to overcome practical barriers to multi-agency working. Owing to the exploratory, qualitative nature of the study, the sample size was small and so no assumptions can be made about the extent to which findings generalise to the wider group of DTs. Future research should seek to capture the voices of DTs more comprehensively using quantitative or mixed methods approaches, to generate a national picture of experiences of supporting CEC generally, and autistic CEC specifically. Most crucially, as this research was carried out during national lockdowns, it was not possible to capture the voices of CEC themselves.

CONCLUSIONS

DTs enacted change for CEC through both systemic working and the provision of individualised, targeted support to address children's needs. Evidence of whole-school approaches to support SEMH is positive given that a combination of universal and targeted interventions appears to be the best-informed approach. None of the DTs interviewed supported any CEC with a formal diagnosis of autism, which limits the conclusions that can be drawn in this regard, and so this remains a key area for future research. Facilitators to DTs role fulfilment included positive working relationships with the Virtual School, and the statutory Personal Education Plans, which provided additional funding that DTs used in a multitude of ways to meet children's individual needs. Several barriers to role fulfilment were identified including the impact of competing roles and responsibilities and challenges related to multi-agency working. Concerningly, these barriers remain familiar and stubbornly persistent. Nevertheless, the research produced some novel findings, such as the use of technology during the Covid-19 pandemic increasing stakeholder engagement, which warrants further exploration. By exploring the under-represented views of DTs, this study contributes to a limited evidence base, although limitations in terms of the sample size are noted. Wider research with DTs, alongside research with other key stakeholders including CEC themselves, is vital.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

ORCID

Lynn De La Fosse  <https://orcid.org/0000-0002-3068-6643>

Sarah Parsons  <https://orcid.org/0000-0002-2542-4745>

Hanna Kovshoff  <https://orcid.org/0000-0001-6041-0376>

ENDNOTE

¹ 'Care experienced' is an umbrella term that encompasses any child or young person who is, or has been, in the care of a local authority at any point, and for any period, in their lives. The term includes LAC, PLAC and care leavers - three distinct but closely related populations. Where more specific terms are used throughout this paper (e.g., LAC/PLAC) it is because the findings or figures being discussed are specific to that population.

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AUTHOR BIOGRAPHIES

Lynn De La Fosse is an Educational Psychologist currently employed by Achieving for Children, a not-for-profit organisation providing children's services for Kingston, Richmond, and Windsor and Maidenhead councils. This research was completed for her Doctorate in Educational Psychology at the University of Southampton, which was awarded in 2022.

Sarah Parsons is Professor of Autism and Inclusion at Southampton Education School, University of Southampton. She co-directs the Autism Community Research Network @ Southampton [ACoRNS], which is a search-practice partnership focused on addressing research questions that come from, and matter to, practice through placing the experiences and voices of autistic children and young people at the centre of the work.

Hanna Kovshoff is Associate Professor of Developmental Psychology and Deputy Head of School for Education in the School of Psychology at the University of Southampton, and is co-director of ACoRNS.

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