Take Care

School Guide

An accompanying guide to the **Take Care** resource about the school experiences of children and young people who have been in care

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About the Guidance

EPIC and TESS have worked collaboratively to produce this guidance for teachers, principals and school staff, who all have a role to play in supporting children in care at primary and post-primary school. The guide has been developed with the oversight and expertise of the the Education Project Oversight Committee. EPIC and TESS would like to thank all those who have contributed to the guide, including NEPS for the section on attachment and trauma aware approaches and Kids' Own for print design. It should be read in conjunction with the Take Care resource which describes the lived experiences of children in care at school in their own words.

EPIC

EPIC, Empowering People in Care, exists because some children and young people need extra help or support arising from their experiences in care. We are independent, with a clear purpose and mandate – to advocate for the rights of care-experienced children and young people. Our team works with children in care, young care leavers, and anyone with experience of the care system up to the age of 26. EPIC works to ensure that their voices are represented and considered in decisions that affect their lives, and that their experiences inform policy and practice. We also create safe spaces for children and young people to come together to work on projects that are important to them. All of EPIC's work is grounded in the UN Convention on the Rights of the Child, particularly Article 12, which provides for the right to be heard and to participate in decision making.

TESS

TESS, the Tusla Education Support Service, operates under the Education (Welfare) Act, 2000, a piece of legislation that emphasises the promotion of school attendance, participation and retention. TESS has three strands namely the Statutory Educational Welfare Service (EWS) and the two school support services, the Home School Community Liaison Scheme (HSCL) and the School Completion Programme (SCP). The three TESS strands work together collaboratively with schools, families and other relevant services to achieve the best educational outcomes for children and young people.

Kids' Own

Kids' Own Publishing Partnership offers a space for children and young people to express themselves through professional arts practice.

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Tara Madden – EPIC Education Project Manager

CARE FAMILY
NATURAL FAMILY
M.I.C
K

Foster Child

‘I don’t like being called a foster child.’
‘Then we’ll change the letters around.
We’ll call you a forest child. How does that sound?’
‘Does that make you my forest mother?’
‘Yes, it makes me a tree.
And you are the sapling leaning on me.’
‘Am I yours?’
‘We each belong to ourselves,
but I will give you shelter with my canopy of leaves.
And I will call all the little birds to sing for you.
And the fawns will come, and the foxes too.
All the creatures of the wood.’
‘And what will they do?’
‘They will watch you grow tall and strong and true.
And I will too.
We will see you blossom, free and wild.
You will be our beloved forest child.’

© Poem by Louise Greig

Introduction

Schools today strive to uphold the right to education of every student by fostering inclusive environments where all children feel welcome and valued. This is especially important for children in care who may have encountered significant challenges, including trauma and instability, that can impact their educational experiences. These children may require additional attention and support to help them thrive. A school that is open, and thoughtful, will provide the best environment to meet the needs of all students, including those with care experience.

Care-experienced children and young people emphasise the critical role of school and supportive teachers in their educational and care journeys. They report that school plays a positive role in their lives but that sometimes there is a lack of knowledge of the care system amongst teachers and school staff, as well as a lack of awareness of care amongst their peers. They feel that they are an invisible cohort in schools, with very few members of the school community understanding the challenges of coming into care and the trauma that comes with this, in addition to the uncertainty that comes from being in the care system, such as having to change homes and/or schools.

So, what is it that children in care need to thrive in school? Care-experienced children and young people give answers to this question in the Take Care resource. Take Care has been designed by them for teachers and school staff to gain an understanding of their experiences of school, the challenges they face and what schools can do to support them. The testimonials of children and young people in Take Care show that school can be a place of safety, stability, belonging and success and that school plays a key role in developing and enhancing their wellbeing.

This guide accompanies the Take Care resource and serves as a practical tool to empower the whole school community - leaders, teachers, and non-teaching staff alike. By using the resource and the guide, schools can build their capacity to respect and uphold the rights of care-experienced children, ensuring that these students have the support they need to navigate their educational journeys. It is crucial to remember that achieving equality requires equity; some children need more support to access their right to education and wellbeing fully.

While some children in care may be comfortable sharing their care story, others may not. For this reason, teachers and school staff should always be mindful that a child in their school may be in care and living in a residential centre, with foster carers or with extended family members. This is why a whole-school trauma-informed approach is so important - rather than focusing on identifying 'vulnerable or high-risk' children, supports also extend to those who fall under the radar.

If you have experience of supporting children in care at school that you would like to share with us or if we can help you in this regard, please contact EPIC on education@epiconline.ie. We would also welcome any feedback you may have on this resource.

Tara Madden, EPIC Education Project Manager
Jean Rafter, TESS Service Development Manager

My life
Support
Reassurance
Care
Care
Aware
Support
Love
Understanding
Pushing
Family

1 The Care System - a Glossary

As of December 2024, there were 5,823 children (0-17 years) in State Care in Ireland. 87% of those were in foster care and 9% were in residential care.[1]

It can be helpful to explain what we mean by the care system, or alternative care, and to describe some of the elements that may be involved in the care journey of a child. This section provides a glossary of the most common words and phrases that people use when they talk about the care system. **What is important to keep in mind is that we should listen to the child and how they want to talk about care rather than sticking closely to the definitions below.** Teachers should take their cue from the children and young people themselves, to be led by them and the language they prefer to use. For example, when asked how EPIC should refer to residential care, a young person had this to say:

"I'd always say residential home. They were my homes, not units, not centres, not placements but my homes. And I wasn't an old man so would rarely add the care to the home bit. I'd always say either "residential care" or "residential home" depending on the context."

This section outlines the different arrangements that may pertain to a child who is in the care of Tusla, the Child and Family Agency. It includes an outline of the relevant legal orders, the living arrangements and who may be the key adults in the child's life while in the care of Tusla. There are however many children living with extended family members or in different settings who are not in the care of Tusla. It is important not to assume that a child not living with their parents is in fact in the care of Tusla as this will have an impact on who the school interacts with in relation to the child's education. This guide gives just a brief snapshot of some of the elements of the care system that are relevant to schools.

1 Source of statistics: https://www.tusla.ie/uploads/content/Monthly_Service_Performance_and_Activity_Report_Dec_2024_V1,0.pdf. This figure includes 118 children under the Service for Separated Children Seeking International Protection (SCSIP). Percentages rounded to the nearest whole percent.

i. Alternative Care

When parents/ legal guardians cannot adequately care for and safeguard their children, a decision is made either with the agreement of the parents or by direction of the Court that these children are received into the care of the Child and Family Agency (Tusla). Alternative Care is defined as care provided by people other than parents/ legal guardians which is ordered by the court or under an agreement between Tusla and the child's parents.

Voluntary Consent for admission to Care

Voluntary consent for admission to care is when a parent/ legal guardian consents to their child being cared for by Tusla for a period of time. A 'voluntary consent for admission to care' form is signed between Tusla and the parent(s)/ legal guardian(s). This is commonly referred to as a voluntary care arrangement/ voluntary arrangement by professionals. Parents retain their legal rights as the child's parents and therefore in these cases consent should always be sought from the parents/ legal guardians.

Emergency Care Order

This is a court-ordered emergency entry into care where it is deemed that there is an immediate risk to the health and welfare of a child. The parent(s) retain guardianship of their child and consent in respect of the child should be sought from parent(s). An emergency care order lasts eight days, and then Tusla must either return the child to the family or apply for an Interim Care Order.

Interim Care Order

An Interim Care Order is a court order that lasts for a period of 28 days. An application can be made to extend it when appropriate. Parents retain guardianship of their child and consent should be sought from parents.

Full Care Order

A Full Care Order is a court order that is sought by Tusla when reunification with the family is not possible in the medium/long term. Tusla becomes the corporate parent and the assigned Tusla social worker gives consent in respect of decisions related to the child. A Full Care Order can be in place up to the age of 18.

ii. Types of placements

When a child is in care, they can have different types of care placements.

Foster Care

Most children in care in Ireland are living in foster families. Foster carers care for children

in their own home, providing a safe and stable family environment for children who are unable to live with their birth family. Foster placements can be emergency, short-term or long-term placements. The foster carer collaborates closely with social workers, parents and other professionals who are involved in the child's life. Foster carers are expected to support contact with the child's parents and family, when appropriate. There are two types of foster care in Ireland, general foster care and relative foster care.

a. General Foster Care:

General foster care involves the placement of a child with a Tusla-approved general foster carer - an individual or couple who complete a process of assessment and have been placed on the panel of approved foster carers. A general foster care placement can also be arranged through a private fostering agency that has been approved by Tusla.

b. Relative Foster Care

This form of care involves living with a family member such as a grandparent, aunt, uncle or another member of the family. Wherever possible, Tusla would consider relative care in the first instance (i.e. placing the child in the care of relatives) to lessen the impact of being in care for the child.

Residential Care

This involves living in a house with other children in care and being looked after by residential care staff. In residential care, the child will have a key worker who attends all their meetings and gives one-to-one help and support to the child.

Respite Care

For children in care, respite is a short period of time away from a foster care placement or a residential home. Children may be finding things a little difficult and need a break, or if they have a high level of need it may offer respite to the carer(s). It can be with another foster family or at a respite residential home. This can last for a weekend, one week or two weeks.

Special Care

Special care is a form of care for children aged between 11 and 17 who need secure care to keep them safe from harm. Special care provides short-term, stabilising care in a secure therapeutic environment, which aims to enable the child to return to a less secure placement as soon as possible based on their needs. Special care is part of a continuum of State care intervention available to children and young people. Given the restriction on the child's liberty, a placement in special care can only be made by order of the High Court. Specialised educational and clinical services are provided to promote the child's welfare and development. Each special care campus has an onsite school for their educational needs. Mainstream schools should make every effort to cooperate with the school in the special care setting by providing relevant information to them.

Separated Children Seeking International Protection

Separated Children Seeking International Protection (SCSIP) are children aged under 18 who arrive in Ireland unaccompanied by a parent or guardian and seek international protection. These children are either received into the care of Tusla or are in receipt of care through Section 5 of the Child Care Act 1991[2]. They are placed either with foster carers or in residential centres. Alternatively, the young person can be accommodated in supported lodgings which is a scheme for young people aged 16+ who are unable to live at home but cannot live independently. It acknowledges that the young person may not need intensive parenting, rather they need support, guidance and a safe, reliable home. The SCSIP Team in Tusla provides social work and other supports to these young people to assist them in accessing appropriate services including education and to support them through the process of application for international protection. Where a young person seeking international protection is enrolled in a school, the SCSIP Tusla Team can be contacted in relation to supporting the ongoing education of the young person. Consent in relation to school activities will need to be sought through the allocated Social Worker on the SCSIP Tusla Team.

iii. The Professional Bodies and Adults in the life of a Child in Care[3]

Tusla

The Child and Family Agency, Tusla, is the dedicated State agency responsible for improving wellbeing and outcomes for children. It provides supports and services to families in Ireland and is responsible for protecting children and young people. Under the Child and Family Act 2013 Tusla is charged with supporting and promoting the development, welfare and protection of children, and the effective functioning of families.

Tusla has responsibility for offering care and protection for children in circumstances where their parents have not been able to, or are unlikely to, provide the care that a child needs. To discharge these responsibilities, the Agency is required to maintain and develop the services needed in order to deliver these supports to children and families and provide certain services for the psychological welfare of children and their families. Tusla, via its Education Support Service (TESS), is also responsible for ensuring that every child in the State attends school or otherwise receives an education, and for providing educational welfare services to support and monitor children's attendance, participation and retention in education.

Social Worker

All children in care should have an allocated social worker. The key responsibilities of the

2 https://www.irishstatutebook.ie/eli/1991/act/17/enacted/en/html

3 This is not an exhaustive list. There may be other key individuals involved depending on the situation of the child.

social worker are to ensure that children are safe, their rights are protected, and that each child has an up-to-date care plan that is reviewed in line with legal requirements.

Key Worker

Every child living in a residential home has a key worker. The key worker will support the child, help with any problems, and coordinate services or supports for them while living in the residential centre.

Access Worker

An access worker supports children, young people and their families in spending time together. The access worker may organise and facilitate the time together. They may also have a role in supervising the family contact. Family time is often referred to as access. Children often call it 'time with my family'.

Guardian Ad Litem (GAL)

A Guardian ad Litem is an independent professional appointed by the court that is qualified and experienced in working with children and families. The role of a GAL is to independently establish the wishes, feelings, and interests of the child and to present these to the court.

EPIC Advocate

EPIC provides a National Advocacy Service to children in State care, and young adults aged 18-26 with care experience. An EPIC Advocate can support the child or young adult to understand their rights, and make sure that their voice is heard in decisions affecting their life. EPIC Advocates do not have a statutory role and engagement by the child/ young person is voluntary. Advocates are not decision-makers, their role is to assist and promote the voice and rights of the child/ young person in matters relating to their care. A request for an Advocate can be made to EPIC via its website.

Aftercare Worker

If a child in care turns 18 while in State care they are then no longer considered to be in the care of the State. They may be allocated an aftercare worker depending on their needs. It is the role of the aftercare worker to support them in developing their aftercare plan which maps out their plans for transition into adulthood. The aftercare worker will develop this plan at a minimum six months prior to the young person's 18th birthday.

iv. Planning for Children in Care

Care Plan

A care plan is the plan about the care of the child. It is prepared by the social worker in collaboration with the child, their foster carers, their family, residential staff and any persons who are important in the life of the child. This may at times include engagement

with the child's teachers in terms of planning for their education. It includes information about their care placement, family contact, and their educational arrangements. It also looks at the child's health and emotional needs and their interests and hobbies. Care plans should identify what is going well in the child's life that can be supported and areas that they might need some help with.

Child in Care Review

A child in care review gathers the views of the child, their parents, foster carers, and professionals such as the social worker, residential home manager, GAL or principal (on behalf of the school and teacher) in relation to the needs of the child and their views on the placement. A child in care review takes place within two months of the child being placed in care, then at six-month intervals for the first two years of a child/ young person being in care, and once a year after that. The process aims to ensure that the child's needs continue to be met in their placement and that any additional supports needed by the child are met. Following a child in care review the care plan is updated as necessary.

Education is one of the standing items on the agenda at these reviews. This is an opportunity for teachers/schools to provide positive messages about the child/ young person's achievements and to identify any areas where they may require additional support. This input can mean a lot for the child/ young person therefore it should be as full as possible.

Aftercare Plan

The Aftercare Plan is a personalised plan of action to respond to the needs identified in the assessment of need. The aftercare plan must be developed six months prior to the young person turning 18. The aftercare plan can be reviewed if the circumstances of the young adult change or if the young adult requests for their plan to be changed.

v. Terms often used in Alternative Care

Access/ family contact

Access refers to the time a child spends with their birth family while in care. It can also be called family contact or time with family. It can be parental access and/or sibling access, or it can also be with extended family members or people who are significant in the child's life. Family time can be supervised or unsupervised. Decisions about these arrangements are taken primarily by the child's allocated social worker. Family time can be difficult for children, bringing up a range of emotions that may affect their performance or mood at school. It is helpful for teachers to be aware of this, and to make accommodations to support the child if needed. You may or may not know when there is a family visit but if you notice a change in the child's behaviour, consider the possibility that this may be the cause and show understanding.

Placement moves

Children in care can experience placement disruptions and moves. These moves can be very difficult for the child and may be unplanned. Changes in the care placement can sometimes also mean changing schools. Where possible the school will be informed of any planned moves so there is time for the child to be supported in moving on. A school welcoming a new student with care experience should be cognisant of the unsettling nature of placement and school moves and provide supports for the child/young person to settle in.

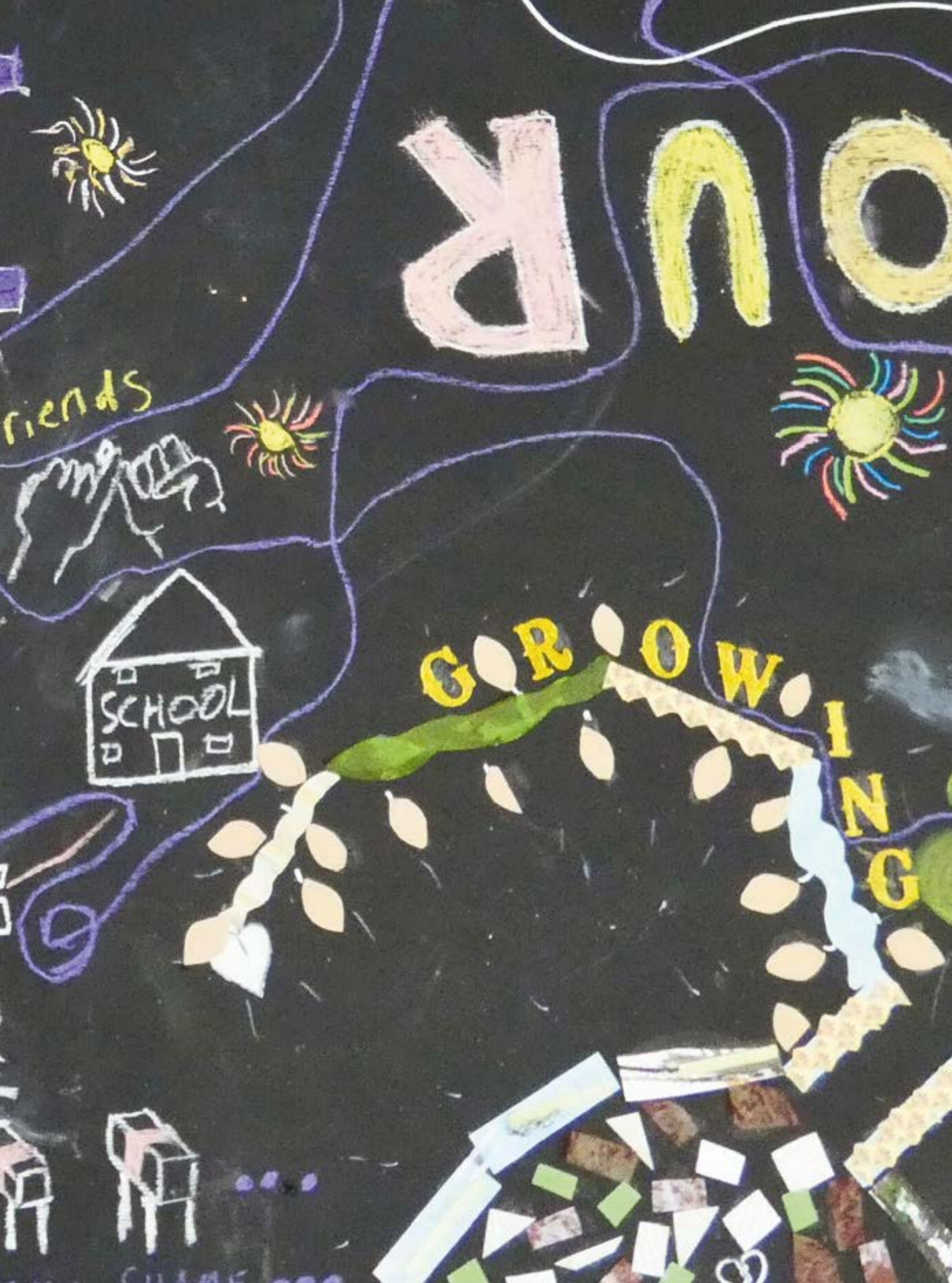
vi. What happens when a child in care turns 18?

Aftercare

An aftercare service is provided to young adults in their transition into adulthood to ensure their needs are met. The aftercare service provides support, advocacy and guidance and is a needs-led service that is tailored to meet the individual needs of all eligible young people leaving care. To be eligible, a young person must have had 12 months of care experience between their 13th and 18th birthdays.

At the age of 16, the social worker will make a referral to the aftercare service. This is to commence the planning for their transition into adulthood. An aftercare worker will be allocated to the young person, and they will undertake an assessment of need. This is a requirement set out in legislation. The assessment of need identifies the needs of the young person in terms of accommodation, employment, education, health, financial matters, personal and social development, and family matters. The Aftercare Plan is then developed to respond to the needs identified.

This transition period - before, during and after turning 18 - can be unsettling and highly pressurised for children in care. They are faced with leaving care, juggling the pressures of the Leaving Certificate examinations, deciding on their next steps in life, feeling a sense of trepidation about the responsibilities of becoming an adult, and having to manage new practicalities such as having to source accommodation for example. In addition to the aftercare worker, educators can be a significant source of support during this time as they may notice a young person that may be facing these difficulties.


OUR
GROWING
friends
me
SCHOOL

2 Practical Information for Schools

i. Consent

Consent is often needed for school trips, photos, assessments etc. For children in care, schools should take consideration of time constraints and be proactive in getting consent for relevant school activities. Securing consent when a child is in the care of Tusla should be informed by the following:

Where the child is the subject of voluntary care arrangements, emergency and interim care orders, the parent must sign the school application form and other forms. It can take time for parental consent to be obtained. It will be essential for the child or young person's social worker to have early notice of forms for completion including for planned activities that will require consent.

Where a child is the subject of a full care order the child's social worker should be requested to sign school application forms and give consent.

When a foster carer is granted Enhanced Rights by the court, they can provide consent for the child and let the social worker know.

ii. School and Home Communications

Fostering good communication between the significant adults in the life of a child in care is essential for their learning and wellbeing (McCluskey, 2018[4]). When a child in care is enrolled in a school or when a child comes into care during the academic year, the school should seek to convene a meeting with the key adults involved in the child's life. This may include their social worker, foster carers, or residential care staff. If their parents are still their legal guardians in the case of voluntary admission to care, they should also be invited. It should be agreed who should be contacted by the school for day-to-day matters, who should be contacted when consent is needed for activities and who holds overall responsibility for the child's education. Relevant contact details should be shared

4 https://ifca.ie/wp-content/uploads/2020/12/Foster-5-full-journal.pdf

① How schools can make a difference for care experienced young people?
② Areas of positive pract and experience for care experienced young people?
③ What would you like teachers to know and do differently?
④ What are the challenges in schools and gaps in knowledge of teachers of care experienced young people

with the school and any changes in personnel should be notified to the school and contact details updated.

It should also be agreed who will be contacted by the school in relation to day-to-day matters relating to correspondence, school attendance, teaching and learning, behavioural issues that may arise and who will receive the child's end-of-year school report. Attendance at parent-teacher meetings and other relevant school meetings should also be discussed with agreement as to whom shall attend.

Informal communication is also important. As one young person put it in Take Care,

"Some teachers spoke to my foster mother about how to support me and took the time to meet the foster parent at collection or drop off time. That was really good."

On enrolment or when a child comes into care during their time in a school, the school should have a conversation with the child's carers, and the child if they so wish, to discuss what they do or do not want shared about their care status in the school. Relevant school staff should be informed as to the child's wishes. Where children do not want their care status known to others, school staff should always be mindful of not referring to anything that would identify a child as being in care - referencing their social worker or any care review meetings that might take place, for example.

iii. Building a Positive School Culture for Children in Care

The positive influence of caring teachers and staff members

Schools are integral to the nurturing and care of children in the care system. With positive connections, all members of the school community can experience acceptance and belonging; this is particularly important for children in care who may have joined the school mid-year or have had to change schools several times.

"When I first went into foster care, for a two-year period I was going between two schools, going in and being taken out and spending a couple of weeks with my Mam before going into care again. One school was better at dealing with the disruptiveness than the other. They were able to help us integrate back into the class every time." Young person, Take Care.

The potential for a teacher to have a transformative role in the lives of young people and particularly so, in the lives of young people in care is evident in Take Care. In their introduction to Take Care, the young people explain:

"We want teachers to get a better understanding of how important their roles are within the lives of children in care. Also, we want to give teachers and others an insight into what being a child in care means through the lens of that child. We would like teachers to know that there is an opportunity to make a positive difference in a young person's life. Teachers provide consistency in the day-to-day life of a child in care due to the routine and structure that school brings. We all can think of that one teacher who helped us grow and who influenced our opinion of the world."

Whole-school culture to support children and young people

As Take Care indicates, the wellbeing policies and practices of the school which are implemented by all school personnel alongside the student support team, are important for children with care experience. Building children's sense of self-worth and positive identity will contribute to their wellbeing and sense of connection in the school. The Wellbeing Policy Statement and Framework for Practice (2019) for primary schools, the Junior Cycle Wellbeing Guidelines (2021) and the Framework for Junior Cycle (2015) are useful frames of reference.

Establishing a culture of trust, safety and belonging specifically for children in care can be enhanced where school staff can engage in attachment and trauma-informed training, examination of policies such as code of behaviour, relational policies and anti-bullying policies, emotion coaching and implementing practices that acknowledge the uncertainty impacting children with care experience. Teachers' encouragement and high expectations for their students can help to build self-belief and motivation.

It is important for teachers to treat any child in care the same as other students, not to single them out or make them feel different. Be mindful that children in care may not want it to be known that they have care experience and may not wish to talk about their home life or care experience. At the same time, be cognisant that they may need additional support and be proactive in providing that support in a flexible and sensitive way.

Ensure also that they are included in all school activities that other children are involved in. As one young person noted in Take Care, "There was a kind teacher who went above and beyond the call. She got us doing loads of charity stuff after school, like the shoebox appeal, packing boxes for Uganda... She got us involved in after-school activities and that helped us."

School provides an important support network for children. It can provide consistency, reliability, and an opportunity to build supportive relationships with adults and peers. A teacher spending quality time with the child and building the relationship shows that they care. Extracurricular and social activities provide important opportunities for building friendships.

The importance of supportive school structures

At post-primary level, the school's student support team is the most suitable forum to plan for and ensure the delivery of all the necessary supports. This provision should be coordinated and should involve all relevant personnel, for example, members of the senior management team, the year heads, special needs coordinator, guidance counsellor, and in DEIS schools the home school community liaison (HSCL) teacher and the school completion programme (SCP) coordinator.

At primary level, the support team for the child will include the principal, deputy principal, management team, wellbeing team members, Special Educational Needs team, and in DEIS schools the HSCL and SCP coordinators to support and liaise with parents, foster carers and workers. The provision should be holistic and child-centred and should meet the child's individual day-to-day and longer-term needs in a flexible way.

A Student Support Plan outlining the child/young person's individual strengths and areas for support is useful. *My Thoughts About School* is a resource at primary level that can support a shared understanding of strengths, needs, triggers, friendships and connections. The individual child/young person's perspectives and an outline of how the plan will support them should be included. There should also be a progression piece since there can be a lot of transitions for children in care, not only from early years settings to primary and from primary to post-primary but also moves between schools. The plan should be shared and implemented amongst relevant personnel with the consent of the child/young person.

The value of relationships in fostering personal growth and development

The relationships that children experience and witness in the school contribute to their social, personal, and health development. These relationships are even more important for children in care. A child may build trusting relationships with a teacher or another member of the school staff and one of those could become that one key person for the child in school. This key person should try to 'check and connect' with the student which can be as simple as saying hello to the student each day. It is not necessary for the staff member to know that the child is in care. Having a designated support system, such as a buddy system with another student for example, can offer support for a young person who is new to the school or returning after an absence.

The important thing is to be aware of the difficulties that children in care may experience in school and to be open to dealing with issues in a flexible and holistic manner. An example from Take Care reflects this:

"There's a good bit of support in my school, I've met the counsellor several times and all the teachers in my school are really good. I feel free to go to anyone. I don't have any behaviour problems or anything like that, so I know I can go to any of them and speak. If I was having a bad day I could go to a teacher and tell them and then they might set a time to talk to me or come and get me out of class."

iv. Being Sensitive to Care Experience in the Classroom

Have sensitivity in the classroom when exploring topics that may be awkward, upsetting or triggering for children in care - for example, be mindful about saying 'tell us about your family' in SPHE class or in preparation for the oral language component of State examinations. A child in care may wish to include both their foster care and birth family to be loyal to both. Some children may not live in a family environment. As described by a young person in Take Care,

"In primary school they have a part of the curriculum called "All About Me". I drew a family tree to include my foster family and my natural family, but I was told that it wasn't the right answer. That teacher didn't realise I was care-experienced, so my stories had loads of people in them, and I could never leave anyone out."

At primary and post primary level, SPHE is an important topic where family, relationships and community are discussed. The strand on Myself and My Family offers an opportunity to celebrate diverse family structures and promote positive messages around children in care. Be mindful around activities such as making a card for Mother's Day or Father's Day. Instead, consider an activity focused on 'the person that cares for you'. Similarly, consider the child in care when doing project work related to home life or family history (e.g. grandparents or family heirlooms). Sometimes homework in general may pose challenges and this should be discussed with the young person and their carers to see if they need support in that regard.

v. The importance of timely and comprehensive guidance and support at key transition points

The end of post-primary education or its alternative, such as Youthreach, can be particularly fraught for care-experienced young people. At 18 years of age, they face the prospect of moving away from vital supports and are often anxious about their coming independence. During this period, there is a significant need for additional time and attention to be provided in relation to supporting future steps. The whole school guidance model, where all school or alternative setting personnel, including the guidance counsellor, have an important role in supporting well-informed subject choices and choices around future pathways will be essential for children in care. It is critical that children in care receive timely, appropriate and meaningful guidance interventions to ensure that they are supported to make informed decisions.

The National Access Plan (2022-2028)[5] explicitly names care-experienced people as a specific cohort of students who are underrepresented or marginalised in Higher Education (HE) and it has put an onus on Higher Education Institutions (HEIs) to provide access to and support in HE to care-experienced people, therefore each HEI would have specific supports for care experienced students. Prospective students should investigate the support provided by a university's Access Office, as part of their university course selection process.

One national scheme is the HEAR (Higher Education Access Route) scheme, which enables successful applicants to enter their chosen course with reduced Leaving Certificate points and receive support from the Access Office in the HEI. If a student currently is or was in care, they are eligible for HEAR[6], without having to meet any of the other criteria. As a university student, they would also be eligible to apply for financial support through the 1916 Bursary[7], if they are care-experienced.

5 https://hea.ie/assets/uploads/2022/08/Online-National-Access-Plan-2022-2028-FINAL-1.pdf
6 HEAR: https://accesscollege.ie/hear/how-do-i-apply/eligibility-criteria/
7 1916 Bursary: https://1916bursary.ie/who-is-it-for/#priority-groups

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3 NEPS Guidance on adopting attachment and trauma aware approaches for children in care

This guidance has been provided by the National Educational Psychology Service (NEPS) in relation to supporting care-experienced children and young people in school.

Introduction

It is well recognised that trauma impacts many of our children and young people, however, care-experienced children and young people have often experienced high levels of relational and developmental trauma. When prolonged exposure to trauma is experienced the architecture of the brain is impacted which can have a profound effect on social, emotional, and cognitive functioning. The stress response system becomes impaired, reducing the ability to tolerate ordinary stressors/demands and this can often be misinterpreted as behavioural difficulties. It is therefore very important that all staff are trauma informed and that schools work towards reducing the impact of trauma on children and young people by adopting attachment and trauma informed practices across their schools. This section will outline how schools can become more attachment and trauma aware and sensitive to the needs of all children on an organisational, whole-school and individual level.

A whole school approach, which promotes wellbeing for all, rather than focusing on a small handful of children is most effective. Being trauma and attachment informed means being able to realise and recognise the impact and consequences that trauma and disrupted attachment have on children and on the crucial role that schools can play in responding to their needs by preventing re-traumatisation.

i. Realise the widespread impact of trauma

Traumatised children and young people are often developmentally much younger than their chronological age and teachers who develop an understanding of the child/ young person, their history and the reasons behind their behaviour are in a better position to meet their needs. It is important to realise also that whilst most care-experienced children and young people will have been exposed to traumatic events, this does not automatically lead to particular outcomes.

Examples of what this looks like in a school context:

- Provide whole school training and support on trauma to all members of staff, including auxiliary staff. Trauma informed training is available from NEPS 'Introducing a Trauma Informed Approach: The Stress factor. Getting the Balance Right".
- Recognise that behaviours may be related to trauma.
  Ensure that all staff understand the way emotional distress is underpinned by adverse experiences.
- Consider how physical and emotional safety can be promoted in school settings, giving due consideration to children and young people from different cultural backgrounds and with different experiences.

ii. Recognise how trauma is impacting a child/ young person

It is important to recognise that for some care-experienced children and young people, their experiences of trauma do not end when they enter the care system. These experiences can have a significant impact, both in terms of how they view and understand themselves, and on their relationships with others. Equally, recognising children's strengths and resilience is also very important to ensure that they are given opportunities to recover, grow and develop.

Examples of what this looks like in a school context:

- Provide opportunities for children and young people to have a voice and express their opinions, experiences, successes and challenges.
- Support children and young people who have experienced trauma to develop social skills and help them to foster positive relationships.
- Consider any developmental milestones children and young people might have missed out on. Assess whether current expectations are appropriate or realistic.
- Reflect on the child and young person's skills, interests and strengths and how these can be enhanced or built upon.

iii. Respond in a way that enables the child to feel heard, supported and empowered

When considering how to respond to the needs of care-experienced children and young people, it is helpful to consider Hobfoll's (2007) five principles that promote recovery from trauma:

Safety Feeling Safe	Safety involves creating a school environment where staff and children and young people feel safe and well supported. The school environment should be nurturing, warm and empathetic where daily interactions are used to develop skills using non-punitive approaches. It involves regular routines and supporting children and young people to cope with challenges such as managing transitions. It also involves collaborating with children and young people in a way that is age and stage appropriate to ensure that they can actively participate in decisions that affect them.
Calm Feeling Calm	The most effective way of supporting a child/ young person who is dysregulated is to remain calm yourself. The use of soothing tones which remind the child/ young person that they are safe will promote a sense of calm. It is important to view behaviour as the child or young person's attempt to communicate a need. This approach requires putting the child/ young person first, whilst trying to get to know, connect with and see the person behind the behaviour. Teachers should adopt the approach of "connection before correction" when working with care-experienced children and young people impacted by trauma.
Connectedness Feeling I belong	Research shows that safe and supportive relationships are the best predictors of recovery following traumatic experiences. It is through these relationships that children and young people learn, flourish and make behavioural changes. This should include developing positive, open and trusting relationships with teachers and school staff and creating a sense of belonging for care-experienced children and young people. It is important that school staff explicitly and implicitly convey the message that the child/ young person belongs and is an important part of the school community.
Self-efficacy Feeling I can manage	Many teachers have lower expectations for children in care. Despite the challenges facing children in care, it is crucial that they are supported to recognise their unique strengths and to be given opportunities to set achievable targets so that they believe that they have the skills to reach their goals. This involves adopting a strengths-based approach focusing on what the child/ young person can do rather than on what they can't and building on their strengths, skills, resiliencies and positive qualities.
Hope Feeling hopeful	Teachers should be hopeful for care-experienced children and young people and believe in a positive future for them. School staff should focus on praise, incentives and rewards and seek opportunities to affirm children and young people. It is also important to recognise that although care-experienced children and young people may have vulnerabilities, they also have various strengths and abilities which can be realised, when they are supported with a strengths-based approach.

iv. Resist re-traumatisation by avoiding practices that could cause further harm

When a child has experienced trauma, there is a risk that they can experience further re-traumatisation. Opportunities should be taken to recognise and respond to trauma related triggers to prevent further re-traumatisation for care-experienced children and young people. Trauma-informed practice –where the impact of trauma is understood and where systems are adapted – reduces the risk of re-traumatisation and improves outcomes for children and young people with care experience.

Examples of what this looks like in a school context:

- Reflect on current policies and practice relating to behaviour. Rather than being reactive trauma-informed schools adopt a whole school approach that draws on relational approaches such as restorative practices and positive behaviour supports.
- Ensure that consequences are logical rather than punitive. Although discipline is necessary it should be consistent, respectful, and not punitive.
- Gather, review and analyse school-wide data (e.g. disciplinary measures, student groups on part-time timetables, student referrals etc) to identify any disparities that exist for certain groups within the school.
- Ensure that structures are in place to support and promote staff wellbeing and that staff are supported to implement trauma informed supports and interventions.

Further Resources

Education and Care

Irish Foster Care Association journal *Foster 5*; Schools, partners in care, releasing potential (McCluskey, 2018)
This article looks at the vulnerability in education of young people in the care system, by examining international evidence and an exploratory study undertaken in Ireland. It highlights the potential for education to make a positive difference, through understanding the nurturing role of education, relationship-building, and partnership between schools and foster carers.
https://ifca.ie/foster/

Webinar on the educational experiences of people who are in or have been through the care system
This webinar was produced by EPIC as part of its Care Day series of events in 2021 and features insights from care-experienced young people, academics and practitioners.
https://www.youtube.com/watch?v=lQzsHGV5hGI

VOYPIC #SeeMe videos
Care-experienced children and young people working with VOYPIC (Voice of Young People in care) - the charity for children and young people with a lived experience of care in Northern Ireland - created a series of short videos depicting school scenarios, aimed at raising awareness of issues impacting care-experienced young people among those working in education. These video shorts are available at https://www.voypic.org/seeme

CSO Frontier Series Output: Educational Attendance and Attainment of Children in Care, 2018 – 2024
This data from the Central Statistics Office looks at educational attendance and attainment of children in care in January 2024 and children who left care since April 2018. It details general characteristics, educational attendance, educational attainment, and further outcomes of children in care and all children in the same age group.
www.cso.ie/en/releasesandpublications/fp/fp-eaacc/educationalattendanceandattainmentofchildrenincare2018-2024/schoolattendanceofchildrenincareandallchildren/

The Education of Children in Care in Ireland: An Exploratory Study (2013)

Commissioned by the Ombudsman for Children, this study identified several areas for action to improve the educational experiences of children in care. They include the development and implementation on an inter-agency basis of a joint action plan focused on strengthening educational opportunities for children in care; the preparation of information and training materials that build capacity among carers and professionals to assist children in care with their education; the implementation of specific approaches and measures by both education and care professionals that can directly and indirectly support attendance, participation and attainment in education by children in care; and the need for data collection and research regarding children in care and their education.
https://www.oco.ie/app/uploads/2013/05/11873_Education_Care_SP1.pdf

NEPS Guide on Mentoring a Student in Post Primary Schools ('Check and connect')

This NEPS Handout was developed by educational psychologists and provides information on mentoring a student with the aim of promoting school attachment.
https://assets.gov.ie/41321/acc32df494e94d4ea8765faf909abc48.pdf

Care Experiences

Care Experiences: Journeys through the Irish care system

The Care Experiences research project examines the lives of children in care and adults who were in care as children. It is led by the Department of Children, Equality, Disability, Integration and Youth (DCEDIY) in collaboration with Tusla.
https://www.gov.ie/en/department-of-children-disability-and-equality/campaigns/care-experiences-programme/

Language that cares: Changing the way professionals talk about Children in Care

https://tactfostering.org.uk/content/uploads/2019/03/TACT-Language-that-cares-2019_online.pdf

Care Day

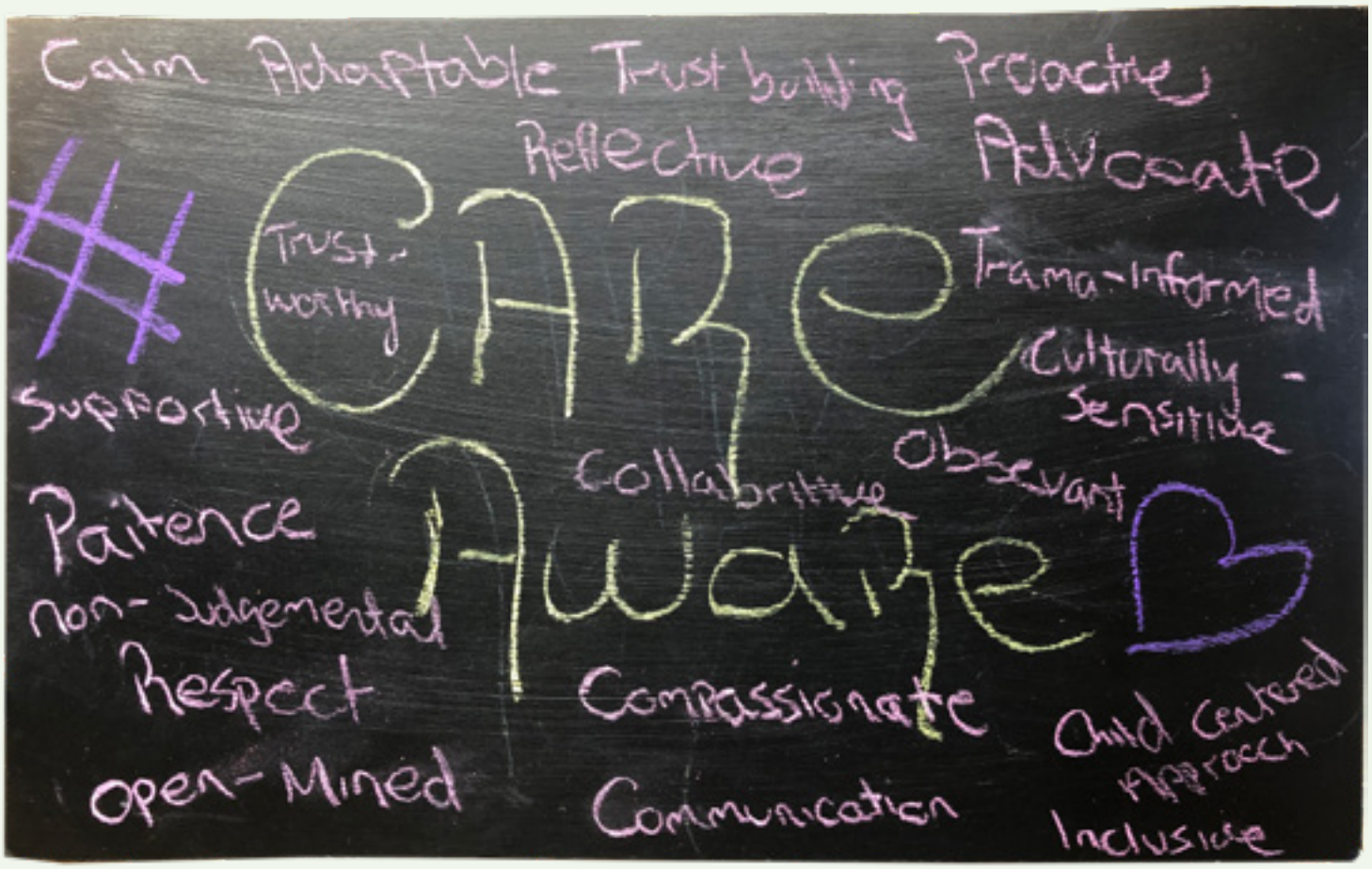
Care Day is a day to celebrate the positive experiences and contributions of children and young people with care-experience and to connect the care-experienced community. Young care-leavers from Ireland, Northern Ireland, England, Scotland and Wales created the Care Day concept in 2016. It is a joint initiative across five children's rights organisations, which are now known as the 5 Nations 1 Voice (5N1V) alliance. The 5N1V alliance includes, Become (England), Who Cares? Scotland, Voices from Care (Wales), Voice of Young People in Care (Northern Ireland), and EPIC.
https://www.epiconline.ie/care-day-epic/

EPIC's Advocacy Service

EPIC (Empowering People in Care) has an independent advocacy service available to any care-experienced child or young person up to the age of 26 who would like an independent advocate to provide support for them to have a voice, to be heard, to know their rights, to find out answers to any questions they may have, to take part in the decisions that are being made about their life or to understand the complaints system. Advocacy support can be requested by children and young adults directly (self-referral) or by Professionals or Parents/Guardians on their behalf. A referral can be made by completing one of the Online Advocacy Referral Forms on the EPIC website.
https://www.epiconline.ie/request-an-advocate/

Changing Futures

Information about Tusla and what it does, directly from young people with experience of Tusla services, for teachers who may be trying to understand a situation:
https://changingfutures.ie/



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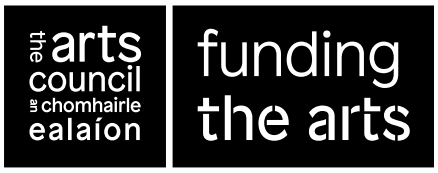
This guide was developed as an accompanying resource to **Take Care**, a book created by care experienced young people about their experiences of school.

It is relevant for primary and post-primary schools. The aim of the resource is to provide practical information to schools about the care system and about everyday supports that are helpful for care-experienced children in school. Above all, it advocates for schools to be aware of care-experienced children and young people's situation and to respond to their needs.



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