Evaluation of the attendance mentors pilot: Year 1 findings

Research report

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Acknowledgements

Abbreviations and Acronyms

Acronym or abbreviation	Definition
CAMHS	Child and Adolescent Mental Health Services
CiN	Children in Need
CSM	Children's Service Manager
DfE	Department for Education
LA	Local authority
LAC	Looked after Child
SEND	Special educational needs and disabilities
TOC	Theory of change
YTD	Year to date

Executive summary

This report presents the findings of the Watchtower Project pilot evaluation, the first year of a 3 year attendance mentor intervention commissioned by the Department for Education (DfE). The pilot intervention was delivered by Barnardo's, working with schools in Middlesbrough, between October 2022 and October 2023, and pupils, between February 2022 and October 2023. It was designed to improve attendance rates for pupils that were persistently or severely absent from school, by providing individual pupil support and targeted family engagement.

The evaluation had two objectives: to understand the implementation of the attendance mentor intervention model and to assess its feasibility and effectiveness in increasing school attendance.[1] Evaluation activities included developing of a theory of change (TOC),[2] reviewing pupil action plans, analysing quantitative data (referrals and outcomes) and primary research with stakeholders (project managers, mentors, school staff, pupils, and parents or carers).

These evaluation findings are designed to inform future learnings and delivery across years 2 and 3 in Middlesbrough and an additional 4 local authority (LA) areas (Stoke-on-Trent, Doncaster, Knowsley and Salford).

The attendance mentor role

Attendance mentors were people employed to work with pupils who were identified by schools as persistently or severely absent from school. Mentors met with pupils on a weekly basis to provide bespoke support to them and their families over a recommended period of up to 20 weeks.

Initial implementation of the Watchtower Project involved recruitment and training for 8 attendance mentors. Mentors valued the training they received. Training was tailored to mentor needs and included good practice sharing.

Mentors were expected to identify and address barriers to pupil attendance through personalised one to one support for pupils and parents. Mentors and school staff identified successful aspects of the role, including that mentors enabled a better understanding of some of the pupil and family barriers to attendance, facilitated better relationships between parents or carers and the school, and where possible helped identify additional support or changes schools could make for some of the pupils involved.

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[1] See Appendix 1 – Evaluation Framework, which outlines the core research questions addressed across these objectives.
[2] See Appendix 2 – Theory of Change for the Watchtower Project.

Feedback from mentors and school staff identified some challenges in the pilot year, which impacted on model fidelity. They included:

- Capacity constraints linked to an uneven referral profile in the pilot year. Some mentors said expected caseload allocations were too high.

- Mentors undertaking tasks beyond their original remit, including academic tutoring and supporting behaviour management in schools.

- Limits on the flexibility or capacity of some schools to engage with suggestions for additional support or short-term alterations to the school day.

There was evidence that mentors would benefit from some more explicit guidance on what the role should involve. This was in relation to, for example, what sessions with pupils should look like, expectations for school engagement and communication, and tasks or activities that should not form part of the role.

Engagement in the intervention

Schools and early help[3] services in Middlesbrough referred pupils to the Watchtower Project who were either persistently absent (less than 90% attendance) or severely absent (less than 50%). A total of 339 referrals were received across 36 schools in Middlesbrough, around two-thirds of which (223 pupils) progressed to support. The most common reason for cases not to progress was because pupils, parents or carers did not engage with the mentor.

Mentors, school staff, parents and carers identified some aspects of the model that helped with successful engagement. These included:

- The role of link mentors to raise awareness and support schools to make referrals.

- The simple and effective referral form.

- The emphasis placed on the independence of mentors from schools.

- Regular updates for parents and carers.

- Communicating with pupils via phone and text messages.

Factors that constrained pupil and parent or carer engagement included the requirement for schools to obtain parental consent prior to making the referral and some families being tired of the number of different services that had previously been involved with them. Other challenges included an uneven flow of referrals, delays in the pilot launch, and a slow initial flow of referrals. These factors impacted on some mentors' ability to meet pupils weekly and limited the extent to which the project could impact on attendance in the pilot year.

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[3] Middlesbrough Council. 2023. Middlesbrough Moving Forward. Children, families, and safeguarding: Early Help.

Intervention delivery

The most common attendance barriers faced by pupils who engaged with the Watchtower Project included mental health challenges, lack of structure or routines at home, poor attitudes to school or learning, family circumstances, or having diagnosed or undiagnosed special education needs and disabilities (SEND).

On average, mentors provided 14 weeks of support and delivered a range of activities, including:

- One to one coaching on topics such as attitudes, wellbeing, career aspirations, routines and sleep patterns.

- Family engagement, including practical advice and financial support.

- Facilitating better school and pupil and parent relationships.

- Supporting pupils to get to and be in school.

- Making referrals to other support and services.

There was some variance in mentor practices, both in terms of the average length of the support delivered and delivery style. This was potentially a result of some differences in the types of case allocated, nature of the role fulfilled, mentor background and experience, and levels of school engagement.

Mentors, pupils, parents or carers and school staff identified successful practices in delivery, including:

- Approaches to understanding pupil needs and building a relationship with them.

- Practical support, for example, taking pupils to school, agreeing school day alterations or offering rewards and incentives.

- A focus on career and aspirations to encourage improved attitudes to learning.

- Barnardo's access to in-house funds to help some families with financial barriers.[4]

- Steps taken to support sustained improvements, such as embedding routines at home or identifying school staff to be a contact for the pupil post mentor support.

- Effective working relationships between mentors and schools.

There was some inconsistency in delivery across mentors and schools. As such, some success factors were also identified as challenges. Notably, school staff and parents or carers often said there should be more focus on exit planning for transition from mentor to school led support. Equally, some schools had less flexible practices or staff were less able to engage with suggestions for changes or additional support for pupils.

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[4] Barnardo's in-house funds include the Young Peoples Grant (Barnardo's. 2019. Barnardo's Young People's Grants) and Cost of Living Fund (Barnardo's. 2022. Cost of Living Crisis Fund: Frequently asked questions).

Perceived outcomes and sustainability

The indicative evidence suggests that 50% of the pupils supported by the Watchtower Project pilot achieved improved attendance. and that some of these improvements may be sustained beyond completion of the mentors' support. Of those who saw improvements in attendance, there was an average increase of 11 percentage points during the period over which the intervention was delivered, from 53% at the start of the intervention to 64% during the intervention. The average increase in year to date (YTD) attendance rates between the start and end of the intervention was 3 percentage points, from 53% to 56%.

Whilst numbers are small, slightly higher proportions of severely absent pupils had improved their attendance by the end of the intervention compared to those that were persistently absent. Also, higher proportions of pupils in primary school saw improvements in attendance compared to those in secondary schools; and higher proportions of pupils in year 6 and year 10 saw improvements compared to other year groups. There was variability across secondary schools, with some observing no attendance improvement for pupils supported and others seeing positive change for most of those supported in their school.

Pupils and families reported a range of other positive outcomes achieved including improved mental health, better routines, better attitudes to learning, engagement in positive activities, higher attainment and financial barriers addressed.

For over one third of completed cases (36%), pupils had experienced a decline in attendance during the intervention. In addition, feedback from school staff, pupils, and parents or carers identified some cases where either pupils were attending school more often but did not regularly attend lessons when in school or the improved attendance observed may not be sustained post-intervention.

Activities that mentors, parents and carers thought were likely to support sustained outcomes for pupils were skills development (including anger, time, or anxiety management strategies), support for parents and families, informing pupils and families that support was time-limited and offering post intervention contact points. Challenges that mentors and school staff thought constrained the achievement of sustained change for some pupils included some over-dependency of pupils on mentors, a lack of pupil resilience, or insufficient exit planning activities.

Conclusions

Understanding the intervention

Through the Watchtower Project pilot, attendance mentors in Middlesbrough supported pupils to attend school more regularly by helping them to address current barriers to attendance. Mentors provided one to one support to pupils and parents which sought to

improve pupil wellbeing, provide direct support to increase attendance, access financial support and change routines, behaviours and attitudes. There was some variance in mentor practices with the potential for more explicit guidance on the mentor role.

Engagement with the intervention

Pupils and parents or carers were more likely to engage with the intervention if they understood that the mentor support was independent from the school or other support agencies. Where attendance issues were more engrained or families had multiple services or agencies involved in the past, school staff and mentors found it more difficult to engage families. Pupils and parents or carers that did engage particularly valued the continuity, responsiveness, and solution-focused nature of the mentor role.

In a minority of cases, other services worked with families during the period of the mentor intervention. This included early help and social care services and some more targeted support linked to, for example, mental health or domestic abuse. Mentors also signposted and made referrals to other support services.

Outcomes and impact

Outcomes from the mentor support provided through the Watchtower Project pilot included increased attendance, improved mental health, better routines and attitudes to learning, engagement in positive activities and financial barriers addressed. For some pupils, the attendance improvements achieved would likely be sustained after the intervention, Equally, in other cases attendance had declined or the improvements observed were unlikely to be sustained.

Understanding effective practice

This evaluation identified several successful aspects of the mentor role that it would be important to maintain through delivery of years 2 and 3 of the Watchtower Project, and also may be useful to consider for the delivery of other similar mentor based programmes. They included:

- The independence of mentors from school, which often helped with initial engagement of pupils and families.
- The continuity, flexibility and one to one nature of the support provided by mentors. Mentors spent time:
  - o Developing relationships with pupils and parents.
  - o Understanding barriers from the pupils' perspective.
  - o Being responsive to individual pupil and family needs.
  - o Providing regular updates to parents and carers.
- Delivery of focused actions to address pupil and family needs, such as:

- o Identifying flexible and additional support or alterations that schools could deliver.

- o Accessing funds to address families' financial barriers (uniform vouchers, bedroom furniture, help with energy bills).

- o Developing pupils' and families' understanding of the importance of school and the consequences of not attending.

- o Facilitating improved relationships between pupils and families and the school or specific teachers.

- o Providing practical support and solutions to get pupils into school (picked up from home, financed a bike or bus pass to get to school, spent time gradually reintroducing to school).

- Undertaking exit planning activities to support sustained improvements, such as embedding routines at home or identifying school staff to be a contact for the pupil post mentor support.

There was also an opportunity through years 2 and 3 delivery for the Watchtower Project team to reflect on and address some of the inconsistencies and challenges faced during this pilot year. These had sometimes affected mentors' ability to impact on improved attendance and other positive outcomes. They included:

- Mentor capacity constraints.

- Delivery of activities outside the mentor remit.

- Different communication practices with, and varying responses from, schools.

- Some overdependence of pupils on mentors, and an insufficient focus on exit planning.

Introduction

This report presents the findings of the Watchtower Project pilot evaluation, the first year of a 3 year attendance mentor intervention commissioned by the Department for Education (DfE). The pilot intervention was delivered by Barnardo's, working with schools in Middlesbrough, between October 2022 and October 2023. It was designed to improve attendance rates for pupils that were persistently or severely absent from school by providing individual pupil support and targeted family engagement.

Background and context

Regular attendance at school is recognised by the DfE as vital for children's education, wellbeing, and long-term development. The most recent Schools White Paper (Opportunity for all: strong schools with great teachers for your child, March 2022) identified renewed concerns for attendance due to the effects of the recent COVID-19 pandemic, pledged new guidance for schools, and set expectations for local authority attendance services to combat low attendance across the nation.[5]

The DfE published the new guidance for schools and local authorities in May 2022 and has been working with the sector to embed the new ways of working.[6] The guidance set out how schools, trusts and local authorities should work together to improve attendance and emphasised the importance of treating the root causes of attendance, removing barriers, and enabling earlier and more targeted support to respond to pupils' individual needs. It also stressed the significance of developing and maintaining a whole school approach and culture promoting the benefits of attendance and the connections with mental health, wellbeing and special education needs and disabilities (SEND).

Breaking the cycle of poor attendance is critical to the Government's aim of 'levelling up' opportunity across the country. The Levelling Up White Paper also introduced Education Investment Areas as priority areas that would benefit from a wide variety of additional support, with explicit reference to new programmes to improve attendance.[7]

Overall absence rates in England are calculated by combining the total of all authorised and unauthorised absences. Persistent absence is when a pupil's absence equates to 10% or greater, and severe absence when rates are 50% or more. Overall persistent absence rates in England doubled from 10.9% in the full 2018 to 2019 academic year to 22.5% in 2021 to 2022.[8] For Middlesbrough, the persistent absence rate in the 2018 to 2019 academic year was 16.1%, rising to 28.8% in academic year 2021 to 2022.[9]

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[5] Department for Education. 2022. Opportunity for all: strong schools with great teachers for your child.
[6] Department for Education. 2022. Working together to improve school attendance: Guidance for maintained schools, academies, independent schools, and local authorities.
[7] Department for Levelling up, Housing and Communities. 2022. Levelling up the United Kingdom
[8] Department for Education. 2023. Pupil absence in schools in England 2021/22.

School attendance has been connected to attainment at both key stage 2 and key stage 4. Pupils not achieving the expected standard in reading, writing and maths at key stage 2 in 2019 had an overall absence rate of 4.7%, compared with 3.5% among pupils who achieved the expected standard. At key stage 4 those not achieving grade 9 to 4 in GCSE English and Maths had an absence rate of 8.8%, more than double that of those achieving grades 9 to 5 (3.7%).[9]

Poor attendance does not have a single contributing factor. Instead, it is commonly a symptom of a combination of factors such as family context, SEND, bullying and mental health and wellbeing.[10] This emphasises the need for individualised support for those pupils struggling to maintain high levels of attendance. As the law entitles each pupil of compulsory school age to full-time education, the parents and carers of such pupils hold the legal duty to ensure their regular attendance.[11] Thus the Working Together to Improve School Attendance guidance emphasised that advice and support should be extended beyond the individual pupil in collaboration between various relevant bodies such as schools, local authorities and governing bodies.[12]

A study by the Scottish Council for Research in Education Centre in Glasgow found that secondary school pupils were more likely to attribute their absence from school to school-related factors such as issues with lessons, teachers, bullying, social isolation, and peer pressure, than to home-related factors.[13] More recent evidence supports this notion that some children attribute their absence to school-related factors such as negative school and classroom environments and peer problems.[14] This is also evident in schools across England where deterioration in pupil mental health and a cultural shift in attitudes towards being in the classroom and attending school can be linked to the recent increase in absence.[15] Additionally, parents of children with lower attendance perceived regular school to be less important than parents of children without attendance problems. This highlights a need, in some cases, to support a whole family change in attitudes.

Mental health also plays a complex role in school attendance for young people: the prevalence of mental health disorders has risen for 5 to 16 year olds from a rate of 1 in 9 in 2017 to 1 in 6 in 2020.[16] Between 2019 and 2021, a 25% increase was observed in the

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[9] Department for Education. 2023. The link between absence and attainment at KS2 and KS4.

[10] Department for Education. 2022. Working together to improve school attendance: Guidance for maintained schools, academies, independent schools, and local authorities.

[11] The Education Act. 1996. Section 7.

[12] Department for Education. 2022. Working together to improve school attendance: Guidance for maintained schools, academies, independent schools, and local authorities.

[13] Malcolm, H., Wilson, V., Davidson, J. and Kirk, S. 2003. Absence from school: A study of its causes and effects in seven LEAs. *The SCRE Centre University of Glasgow: Glasgow*.

[14] Havik, T. and Ingul, J.M. 2021. How to understand school refusal. *Frontiers in Education (Vol. 6, issue 715177)*.

[15] Gunter, T. and Makinson, L. 2023. School attendance: analysing causes and impact in pursuit of solutions. Nesta.

[16] NHS Digital. 2021. Mental Health of Children and Young People in England 2021 - wave 2 follow up to the 2017 survey.

number of school children assessed as having a mental health need,[17] while a survey by Young Minds in January 2021 found that over two-thirds of respondents believed the pandemic will have long-term negative impacts on their mental health.[18] The National Centre for Social Research in their 2023 data suggest that 1 in 5 children aged 8 to 25 years old had a probable mental health disorder. Of this, 20.3% were 8 to 16 year olds.[19] Research also shows that pupils from low income households, those with SEND and those identifying as lesbian, gay, bisexual, transgender, queer and others (LGBTQ+) were more likely to be impacted by the pandemic and required more support on return to full time schooling.[20]

There are gaps in the evidence of what works in addressing persistent absence, although a review by the Education Endowment Foundation highlighted the importance of certain approaches for attendance.[21] Small positive impacts were found for both targeted parental engagement and communication and individual responsive support on attendance, particularly when tailored specifically to the needs of individual children. While the Education Endowment Foundation provides promising evidence for these approaches, there remains limited evidence on their long-term use to be able to conclude effectively. Equally, it is likely that the challenges associated with addressing absence post pandemic are different to those pre pandemic and so there is the potential to develop further understanding of effective approaches.

The intervention outlined in this report focuses on the pupils with the most entrenched issues with absence from school. Alongside providing direct support to these pupils, the DfE aims to improve the existing evidence base, so that all actors in the system have better information on how to address persistent and severe absence. The findings from this report should be considered as part of the ongoing work to improve the evidence base on attendance interventions, including the evaluation of years 2 and 3 of the Watchtower Project.

About the intervention

DfE funded this attendance mentor intervention within this context of high levels of school absence, evidence of the links between school attendance and attainment and other outcomes, and the currently limited evidence about what approaches may work to improve school attendance. It was designed to directly support pupils and families, expand the evidence base, and understand effective practice to improve pupil attendance at school.

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[17] Local Governance Association. 2022. Surge in children with mental health problems seen by councils during pandemic.
[18] Young Minds. 2021. The impact of Covid-19 on young people with mental health needs.
[19] National Centre for Social Research. 2023. Children and young people's mental health in 2023.
[20] Department for Health and Social Care and Public Health England. 2021. Education, schooling and health summary.
[21] Education Endowment Foundation. 2022. Attendance interventions: Rapid evidence assessment.

Design

The DfE funded pilot for attendance mentors intended to test and evidence effective practice for improving attendance through individual support and targeted family engagement. The intervention, named the Watchtower Project, was delivered by Barnardo's and focused on pupils with the most entrenched issues with absence from school, such as those who were persistently or severely absent. The first year pilot was delivered in Middlesbrough, a Priority Education Investment Area, between October 2022 and October 2023. Mentors aimed to identify, engage and support eligible pupils. Where appropriate, the support included working with parents or carers and pupils to help address barriers to attendance in school or at home. From October 2023, the mentoring intervention was rolled out and was being tested in an additional 4 local authority (LA) areas (Stoke-on-Trent, Doncaster, Knowsley and Salford).

Funding for the 3 years of planned delivery was £2.32 million with just under £600,000 of this for the pilot year in Middlesbrough. Across the 3 years of planned delivery, a target was set for 1,665 pupils to be supported. This included an initial target of 335 pupils in the pilot year in Middlesbrough. Initial roll out of the project was due to take place in October 2022. However, delays resulted in the first referrals being received in February of 2023 with the pilot delivery continuing to October 2023.

Eligibility

To be referred to the project, pupils required attendance of below 90%, which included those who were persistently or severely absent from school. Given that absence issues are most acute in secondary schools, pupils in years 6 to 11 were targeted. Prior to referring pupils, schools were asked to reflect on the reasons behind the absences and exclude those that the mentor would not be able to have any influence on. For example, for pupils who were absent due to medical reasons such as hospital appointments or procedures or where pupils' absences were in relation to poor behaviour (and thus fixed-term exclusions). Finally, Barnardo's asked schools to consider the number of services already involved with some pupils and families and the likely impact of adding another service.

About the evaluation

This was a process evaluation of the first year of the Watchtower Project in Middlesbrough, with the following evaluation objectives:

- Understand the implementation of the attendance mentor intervention model and enable refinement through a 'test and learn' approach.

- Assess initial evidence of the feasibility and effectiveness of the intervention to increase school attendance.

The evaluation framework in Appendix 1 outlines the core research questions addressed through this pilot evaluation which were across five themes as follows:

1. Understanding the intervention

2. Engagement with the intervention

3. Working with other services

4. Outcomes and impacts

5. Understanding effective practice

A mixed method approach was undertaken to address the objectives of the evaluation. Appendix 2 outlines the evaluation methodology in detail. Evaluation activities included:

- Development of a theory of change (TOC). Included at Appendix 3, this was used to inform the evaluation framework and research tools, and to ensure the evaluation explored the delivery, outcomes and outputs from the pilot year.

- A review of 113 pupil action plans. Plans were completed by mentors at the start, mid-point and end of the intervention with individual pupils.

- Analysis of quantitative data including referral, attendance, and outcome star data. Outcome stars were a tool for measuring change for pupils supported by the Watchtower Project. Across 6 themes pupils rated themselves on a 5 point scale at the start, mid-point and end of the intervention. The 6 measures were:
  - Mental health and wellbeing.
  - Structure and routines of family life.
  - Attendance at school.
  - Attitude to learning.
  - Engagement in activities in and outside of school.
  - Feeling listened to and understood.

- Interviews with stakeholders, including project managers, mentors, school staff, pupils, parents and carers.

- For 40 of the pupils supported in the pilot, triangulated analysis of evidence from action plans, attendance and outcome star data, and perceptions from the mentor, school staff, pupil, parent or carer.

Quantitative data

The main components of the quantitative data analysis were:

- An assessment of trends across referral and pupil characteristics.

- Year to date (YTD) attendance data was analysed to establish changes between the start and end of the intervention, a rate of attendance during the intervention delivery, and any movements out of the severe and persistent absence categories.

- Outcome star ratings at the start and end of the intervention were analysed in terms of average change for each outcome theme, and variance within and across outcome themes in relation to the number of pupils recording improvements, declines or no change.

There were some challenges associated with collecting data from schools involved in the intervention. As a result, there were several quantity, quality and consistency issues with the pilot monitoring and outcomes data provided to the evaluators, including:

- Detailed monitoring information was not available until the end of the pilot.

- Inaccuracies and inconsistencies in the raw data provided, including incomplete records and uncertainty about end dates.

- Attendance figures not comparable over academic years.

- Errors identified in some attendance data comparisons between start and end of intervention, resulting in further uncertainty about the remaining data used.

- Some lack of independence and consistency in the completed outcome stars.

As such, the data presented in the 'Perceived outcomes and sustainability' section of this report should be regarded as indicative only and should be considered alongside the more qualitative perspectives gained through interviews.

Qualitative data

Interviews were conducted with project managers, mentors, school staff, pupils and parents or carers over two fieldwork periods. The first round of fieldwork took place between May and July 2023 and the second in October 2023. Views were sought on the range of themes included in the Evaluation Framework (Appendix 1) including mentor recruitment and training, effectiveness of referrals and delivery, tapering of support, outcomes and impacts achieved, and sustainability of outcomes. A total of 12 schools were engaged in the fieldwork providing interviews with school staff, pupils, parents or carers, or a combination of these.

In total, the following stakeholders took part in interviews:

- 6 mentors.

- 11 school staff.

- 36 pupils.

- 30 parents or carers.

- 2 project managers.

A purposive sampling approach[22] was adopted to engage school staff, pupils, parents and carers. This included mentors obtaining informed consent from the pupils and parents or carers prior to passing details to the evaluation team. Throughout the consent process and fieldwork delivery the research team ensured participants were fully informed with confidentiality, safeguarding, and voluntary participation and that evaluation discussions were tailored to the needs and contexts of each interviewee. Further details are outlined in Appendix 2.

Triangulated case studies

Building on the evidence collected from action plans, quantitative data and qualitative stakeholder interviews, individual case studies were developed for 40 of the pupils supported by the Watchtower Project in its pilot year. The evidence available for each pupil was triangulated to develop an in-depth understanding of their barriers to attendance, the mentor activities delivered, and the progress and outcomes achieved. The triangulated case study evidence was collated in an excel spreadsheet to enable thematic analysis across the 40 cases. This was focused on identifying commonalities and differences to develop findings clustered around themes. Individual case studies were used to demonstrate and provide examples for the key findings throughout the main report.

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[22] Purposive sampling involves selecting research participants 'on purpose' so that they have the characteristics you need in your sample.

Attendance mentor role

Key findings

In its pilot year, the Watchtower Project recruited, trained and supported 8 attendance mentors. Mentors valued the training they received which was tailored to their needs and included good practice sharing across varied professional backgrounds.

Mentors were expected to identify and address barriers to pupil attendance through personalised and bespoke one to one support to pupils and parents. Successful aspects of the role were that mentors:

- Provided continuity, responsiveness and a solution-focused approach.

- Enabled a better understanding of some of the pupil and family barriers to attendance.

- Facilitated better relationships between parents or carers and the school.

- Identified changes or actions that schools could take for some of the pupils involved.

Challenges faced in the pilot year, which impacted on model fidelity included:

- Most mentors faced some capacity constraints, and some said expected caseload allocations were too high.

- In a few cases, mentors had delivered roles beyond their remit, including academic tutoring and supporting behaviour management in schools.

- Limits on the flexibility or capacity of some schools to engage with mentors' suggestions about changes or actions that schools could take for some pupils.

Mentors would benefit from more explicit guidance on what their role should involve. For example, what sessions with pupils should look like, expectations for school engagement and communication, and tasks or activities that should not form part of the role.

This section provides some initial understanding of the implementation of the pilot (evaluation theme 1)[23] by outlining the role delivered by the attendance mentors recruited for the Watchtower Project. It also considers effective practice (evaluation theme 5) in terms of the successes and challenges faced when delivering the mentor role in the pilot year. Findings were based on feedback gathered though the TOC development and interviews with all stakeholder groups (project managers, mentors, school staff, pupils, parents and carers).

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[23] See Evaluation Framework, Appendix 1.

Mentor recruitment and training

Barnardo's initially recruited 8 mentors to deliver the Watchtower Project in its pilot year. This included a Children's Service Manager (CSM) with a small caseload. However, given staff movement and vacancies, it was necessary to boost the team with temporary staff during the summer months. At the end of the pilot year (October 2023), 5 mentors remained in place to deliver the second year of the project in Middlesbrough. Further mentors had also been recruited to deliver the intervention in the 4 other LA areas identified for rollout.

Mentors were recruited from a range of backgrounds across education and social services. This diversity in professional backgrounds allowed for a variety of delivery methods and activities to be trialled during the pilot year.

Mentors undertook a variety of training which included:

- An introduction to the service, role and responsibilities of attendance mentors.
- Barnardo's mandatory induction, including their vision, basis and values.[24]
- A bespoke training package including a range of online learning and resources.

Mentors were generally appreciative of the training they received at the start of their roles. Some did mention repetition of training they had already received in other roles but understood the importance of consistency across the team. Others said that the training was also tailored to the needs and issues arising for pupils during the intervention period.

Several mentors said they did not receive enough training on what sessions with pupils would or should look like. They were aware that this was a pilot project, so they were to trial methods they all had gained from prior professional experience.

> "We had all the training on Barnardo's policies, but we are essentially guinea pigs for the new role." – *Mentor*

A number of mentors expressed their appreciation for knowledge and good practice sharing that happened between mentors during team meetings. Mentors were able to bring cases to the meetings to discuss options for session delivery and to ask other mentors for ideas and support.

> "The team of mentors have such a good mix of professional backgrounds so it's really helpful to hear their perspectives on certain cases and how they would go about supporting certain barriers." – *Mentor*

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[24] Barnardo's. 2024. Our Values.

Mentors also made use of a resource bank they developed to share resources and strategies developed throughout the pilot year.

Mentor role

Guidance for mentors in the pilot year set out the following key features for their role:

- Delivery of **one to one support** with pupils and supporting parents as appropriate.

- Provision of a **tailored approach** responding to the needs of each pupil, including referral to other services for example, Child and Adolescent Mental Health Services (CAMHS), early help and The Junction.[25]

- **Bespoke support** delivered with no predetermined time or approach. There was a recommended support time frame of up to 20 weeks, with an average of 12 weeks of support delivered.

- Mentors allocated up to **one hour per week** with each pupil and their family. Delivery to normally take place in person, but phone or online contact in exceptional circumstances.

- Mentors to **log contact attempts**, **make notes** from each session and update action plans, complete outcome stars and access attendance data from schools at the start, mid-point and end of support.

- To act as a **link mentor** to allocated schools to support with engagement and referral of pupils.

Mentors described their role as to support students to attend school more regularly by helping them address current barriers to attendance. Pupils' mental health and wellbeing was a common barrier cited, as well as relationships between pupils, parents and school staff. As such, some mentors emphasised their role to provide advocacy for pupils and parents in communicating with their school and other agencies with which they are involved. It was common for mentors to work with parents to increase their understanding of attendance proceedings and broker better relationships with school.

School staff also viewed the role of mentors as a tool to improve attendance for pupils by helping to identify and address pupils' barriers to attendance. Some school staff said mentors were able to find out about families' home lives and situations, thereby enabling appropriate support to be delivered.

> "The mentors work with pupils and parents at home so get to know their challenges a lot better than what is presented to us during

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[25] The Junction is a charity which offers services related to children and young people's mental health, emotional wellbeing, youth employment, youth services and specialist children, young people's transport and also support for young carers.

school time. They are able to source a lot more information to help the pupils." – *School staff member*

"In one case, I identified paying for transport to school as a barrier. I spoke to the school who were able to allocate subsidised funding for this family." – *Mentor*

School staff were appreciative of the role mentors played when advocating for pupils and families, attending meetings and building relationships between school and the parents or carers which may have previously broken down.

"We struggled to communicate with [parents] for months. They stopped responding to us. Since working with [mentor] they have attended meetings and are happy communicating with us again." – *School staff member*

In a few cases, school staff said they were able to evidence that external interventions had been used in cases where legal action was required; and that mentors helped reduce workload so they could focus on other pupils or roles within their school.

"We also see it as a tool for evidence when going through attendance and legal proceedings as [local authorities] require more and more evidence from schools." – *School staff member*

Understanding effective practice: success factors

Mentor responsiveness

The continuity and responsiveness of the mentor role was valued by parents and school stakeholders, particularly when compared with other school or early help support. School staff said mentors could be flexible and were not subject to protocols in the way schools and other services are. Mentors were able to spend time with pupils and parents at home, and out in the community to help build relationships away from the school environment. Some schools also valued the continuity of support over holiday periods as for some pupils this provided some consistency of messaging of the importance of school.

"The mentors are not restricted by protocols; they can try anything to see if it helps." – *School staff member*

"Before trying to get [pupil] back into school, they worked on just getting out and about and going to shops. This built their confidence before going back to school. I don't think this is anything school could have ever done." – *Parent or carer*

School staff, pupils and families said that mentors were responsive and always looking for a solution. Mentors also responded to the needs of the child, for example, delivered sessions at home where needed, or picked up and brought to school.

> "It was good that [mentor] could work with [pupil] at home to build up their confidence before going back into school. The school was so focused on getting them back into school but [mentor] could see they needed work at home first." – *Parent or carer*

One to one support

Some pupils and parents said they valued the mentor role to provide one to one support for pupils. They said a person to listen and understand barriers from the pupils' perspective was important.

> "[Mentor] really listened to me and tried to help me with my anxiety. I never got on well with my other workers because they never listened to me. [Mentor] really wants me to do well." – *Pupil*

Time in school

School staff were supportive of mentors attending school for set periods of time for example, one day a week to conduct sessions. This made it easier for school staff to develop relationships with the mentor and create strong lines of communication, allowing for greater collaboration to tailor support in school for the pupils.

Understanding effective practice: challenges

Delivering beyond mentor remit

There was evidence that some mentors may have undertaken tasks that were beyond the remit implied by the Barnardo's guidance provided for mentors and the general stakeholder perceptions cited above. This was, for example, through the delivery of academic tutoring or parental support more in line with an early help role. In a few cases, mentors explained that some schools had used the mentor in a student services or behaviour management type of role. An example shared by a mentor included when school staff sent pupils who displayed poor behaviour in lesson to spend the day with their mentor (on a day when the mentor was stationed at the school).

Mentor caseloads

Most mentors said that they had faced capacity constraints, with caseload management being a challenge at times. During the summer term months, this likely resulted from a mix of staffing shortages and an uneven referral profile. Some mentors suggested

caseloads may have been easier to manage with a more even referral and allocation profile throughout the pilot.

Some feedback also suggested that overall expected caseload allocations may have been too high for mentors to consistently meet the needs of all pupils and families with which they were working. This impacted on model fidelity in some cases as mentors did not meet pupils weekly or were not able to deliver all aspects of the role within the 'hour per pupil per week' time allotted. Notably, some mentors expressed concerns about being able to (within the 'hour per week' allotted per pupil):

- Manage paperwork.

- Meet or speak to all pupils in their caseload on a weekly basis.

- Travel between session locations (schools, homes, in the community).

- Deliver other activities such as parent contact, liaison with school, attendance at school attendance meetings for the pupil, making referrals, or accessing financial support.

    "I feel as if I've been able to support some pupils and families really well – but for most others, I've seen them but have not been able to have a deep impact with the quality time or consistency needed." – *Mentor*

    "It's difficult to manage your working week when you need to manage caseloads, data requirements, admin and travel between schools, homes and other venues." – *Mentor*

Mentors commonly spoke about paperwork being a barrier to spending more time with pupils or being able to support more pupils. Activities that were difficult to keep on top of when caseloads were high included tracking contact attempts, providing session summaries and updating action plans. There was also some potential duplication in the recording activities mentors were expected to complete (between session summaries and action plans). The evaluation review of 113 action plans identified some variability in detail and completion of action plans across mentors. This may have been a function of the time and duplication constraints identified by mentors.

Communication between mentors and schools

Both mentors and school staff referenced some differences in communication practices across mentors and schools. In some cases, mentors had regular update meetings or check ins with school staff to update on pupil progress and actions moving forward. In other cases, mentors struggled to get in regular contact with school staff or to access school attendance records for pupils they were supporting.

Some school staff recommended more information sharing from mentors, to include:

- Upfront information about which mentor had been allocated and when support would start.

- A discussion between the mentor and school staff at the outset to obtain the school perspective of issues and barriers faced by the pupil and family.

- Regular updates on actions taken for individual pupils and progress made.

- Discussion and agreement at the end of support about support or next steps that the school could put in place for the pupils.

Schools' capacity and attendance management approach

Mentors identified some variability in response and approach taken by schools. In some cases, schools were receptive to mentors' suggestions regarding additional support or alterations to the school day for pupils.

> "Where we have built strong relationships with school staff, it is easier to communicate and deliver any support needs for the pupils such as reduced timetables, time out of lessons and school arrival alterations." – *Mentor*

Other schools were more focused on pupils' full-day attendance from the start of their support and had less capacity to respond to suggestions made by mentors. In these cases, the schools tended to have less flexible attendance management policies and practices.

> "In some schools they are happy to make short-term alterations to pupils' school day or timetable, whereas others do not allow this which makes it more difficult to support the pupil. It is also demotivating for the pupil as it feels like the school is trying to work against them." – *Mentor*

Engagement with the intervention

Key findings

Schools and early help services in Middlesbrough made referrals to the Watchtower Project using 2 thresholds: that pupils should be those where school absence is either persistent (less than 90% attendance) or severe (less than 50% attendance).

A total of 339 referrals to the Watchtower Project were received from 36 schools and some early help services across Middlesbrough. There was an uneven profile of referrals over the pilot year.

Around two-thirds of the referrals made (223) had either completed or were being provided with ongoing support at the end of October 2023. The remaining third (116) were early closure cases that were either unsuitable or families and pupils had not engaged with the mentor.

Delivery aspects that supported successful engagement with the intervention included the role of link mentors, simple referral processes, the independence of mentors from schools and effective communication with parents or carers and pupils.

Challenges for engagement related to obtaining parental consent, previous involvement of multiple services with families and mentor capacity constraints.

This section presents evidence regarding engagement with the Watchtower Project (evaluation theme 2).[26] This includes an outline of processes in place for referral and the overall referral and engagement numbers. Successes and challenges for engagement are also addressed (evaluation theme 5). The evidence base included project management information supplied by Barnardo's and feedback from project managers, mentors, school staff and parents or carers.

Referral and engagement process

Referrals to the Watchtower Project were made by schools (or, in a small number of cases, early help teams) to the Barnardo's mentor team, using 2 thresholds: pupils should be those where absence is either persistent (less than 90% attendance) or severe (less than 50% attendance). Other factors that referrers were asked to consider before making referrals included medical reasons for absence, suspensions or fixed term exclusions, involvement of other services and language needs. Schools were provided with a link mentor who advised and supported school contacts in the identification of potential referrals and gave a point of contact for any queries.

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[26] See Evaluation Framework, Appendix 1.

Prior to making a referral to the Watchtower Project, it was necessary for the school or early help team to obtain consent from the pupil and their parent or carer for the school to pass their details to the Barnardo's mentor team. Parents or carers therefore first heard about the Watchtower Project from school staff. The referral role was commonly undertaken by attendance staff within schools, but also sometimes involved Heads of Year or other pastoral staff.

The method schools used to advertise the project varied. Some introduced the project during home visits when a pupil had not attended school for a few days, some introduced them in support meetings with parents or carers and others sent advertising leaflets with letters home. Generally, school staff said that where there was still some communication between parents and school, this worked better. Involving the early help teams in referrals was viewed as particularly helpful for the families where their relationship with school had completely broken down.

Following referral, mentors would send an engagement letter to the pupil's home address, and within one week they were expected to make an initial phone call to arrange the first session. Mentors would make a number of attempts to contact or engage pupils and families.

> "If I don't have any contact from parents or pupils for 3 consecutive weeks, the case is closed due to lack of engagement." – *Mentor*

Analysis of referral data showed that there were up to 18 weeks between referral and start dates, with an average of 2.5 weeks. Those cases with longer times between these 2 dates commonly asked for support to commence after the summer holiday. In a couple of cases there was a change in mentor or parents or carers had initially not engaged but did reach out at a later date.

During the first session with the pupil and their parent or carer, mentors sought to clarify the purpose of the intervention for the family and gain further consent from pupil and parent or carer to engage with the intervention.

Profile of referrals

During the pilot year, the target number of referrals for the intervention was met: 339 referrals were received compared to a target of 335. Referrals were made for pupils who attended 36 schools across Middlesbrough, including all 8 secondary schools, 2 independent schools serving secondary aged pupils, 2 special schools and 24 primary schools. The school with the greatest number of referrals was a secondary school with 57, whereas the most referrals from a single primary school was 8. Although referrals mainly came from schools directly, LA early help teams were also permitted towards the end of the academic year to refer pupils they were working. This helped to target referrals from some of the most disengaged pupils.

There was an uneven profile of referrals across the pilot year. Initially, schools were capped on the number of referrals they could make across the pilot year to ensure all referrals were not made at once and all schools had the ability to make a successful referral to the project. However, a later start to the project and slower than anticipated referrals (due to initially low levels of awareness and capacity in schools) led to the removal of capped referrals for schools. This, coupled with promotion of the project, resulted in peaks in referrals during the months of March and June.

An influx of referrals towards the end of the academic year was likely a result of increased awareness across schools, schools embedding a referral approach, and schools observing some positive outcomes from previous referrals. The intervention continued to be advertised at headteacher and designated safeguarding lead briefings to ensure referral targets were met by the end of the pilot year. A few schools were also keen to refer pupils for support over the summer break to help secure good attendance from the start of the new academic year.

Around two-thirds of the pupils referred went on to engage with the intervention. As of 23 October 2023, 223 had completed or were receiving ongoing support. The third of referrals that did not progress (116) were either unsuitable referrals or the families did not engage with the mentor:

- **Unsuitable referrals:** In 15 cases, the referral was closed early because the pupils' low attendance was found to be due to external factors such as medical appointments, holidays in term times or special educational needs and disabilities (SEND).

- **Lack of family engagement:** Most early closures were due to the family opting out after initial consent was given or a lack of engagement from the families or pupils. In a small number of cases families said improvements in attendance had already been achieved so did not want continued support; or there had been a change in circumstances (such as moving out of Middlesbrough, attending new provision or exploring options with other services).

The characteristics of pupils referred to the intervention is outlined in Table 1.

Table 1 Characteristics of referred pupils

Referred pupils' characteristics	Number of referred pupils (percentage)
SEND	8 (2%)
Social care status (CiN, CPP or LAC*)	32 (9%)
Male	174 (51%)
Female or other sex	165 (49%)

Base: 339 referred pupils

Source: Barnardo's management information (23 October 2023)

*Child in Need, Child Protection Plan or Looked after Child care status

Understanding effective practice: success factors

Link mentor support

The assigned link mentor for a school sought to raise awareness, support and encourage school contacts to make referrals to the intervention. Whilst school senior leaders had initially signed up, further work was often required from link mentors to encourage schools to make referrals or to identify the right person within a school to seek pupil and family consent and make the referrals. Link mentors commonly said it helped with school engagement if they stepped through the referral form with school staff to show them how straightforward it was.

> "School staff are so used to having to fill out long cumbersome referral forms which require a lot of detail, so they were sceptical at first. Once I showed them how simple it was, they were very impressed and much happier to start sending over referrals." – *Mentor*

Referral form

School staff were appreciative of the short referral form developed for the Watchtower Project, which was succinct and easy to complete. This enabled school staff to make multiple referrals where needed in quick succession. Some also said they had valued the opportunity to share further information with mentors once a referral had been made. A few school stakeholders asked that a space be added to the referral form so they could outline (for the allocated mentor) their understanding of the context and issues faced by the specific pupils and their families.

Independent mentor support

Mentors and school staff alike found pupils and families were often more likely to engage with the intervention if they emphasised the independence of the mentor support and that it was external to school. This was especially true for those pupils and families where relationships with school staff had broken down. Parents and carers were more likely to engage well with the process once they understood that support was coming from an independent agency.

> "Some parents want to verbalise their frustrations and say how bad the school is for making their child come into school. They like the idea of being able to vent to someone else." – *School staff member*

Mentor and parent or carer communication

Parents and carers were appreciative of updates and communication they received from mentors. They particularly valued being told about progress made and how they could support with achieving goals at home. In a couple of cases where this had not happened, parents said they would appreciate more information about sessions so they could re-enforce messages at home.

> "[Mentor] told my [parent] how well I was doing in school and getting in on time. [Parent] is now paying for me to go on a trip I've always wanted to go on because of how well I've done and what [mentor] has been telling her." – *Pupil*

Alongside contact with parents and carers, mentors valued being able to communicate with pupils outside of sessions through phone calls and text messages. This was an easy way to remind pupils of their sessions, to check in on them (especially when support was tapered towards the end of the intervention), and for pupils to ask mentors for any additional support.

> "In most cases pupils prefer to text. It's much easier to communicate with them to explain when sessions are or if they aren't doing well, they text me rather than ring me." – *Mentor*

> "I always text [mentor] whenever I wasn't feeling great or if I hadn't gone into school. A lot of times [mentor] motivated me to go in after lunch." – *Pupil*

Understanding effective practice: challenges

Parental consent

The requirement for schools to obtain parental consent prior to referral is likely to have been a barrier to engaging some of the most disengaged pupils and parents. Just 34 (15%) of completed cases, or those still being supported, had an initial attendance rate of 0-25%. This contributed to the decision to enable early help teams to make referrals and to offer self-referral as an option towards the end of the pilot year (via schools leafleting all parents and carers whose children met the referral thresholds).

Multiple services engaged

Where attendance issues were more engrained or families had multiple services or agencies involved in the past, school staff and mentors found it more difficult to engage these families. A common perception was that another agency would not be able to help. Some frustrations were shared by school stakeholders where they had worked to gain consent for some families to later find they had opted out or not engaged in the project.

> "It is frustrating to know [pupil] didn't end up having support from a mentor. We really think this intervention could have worked for them and their [parent], but we are now having to escalate to the Local Authority." – *School staff member*

Matching mentors to pupils

In a small number of cases, parents believed there could have been better suited mentors to support their child's needs. They suggested a matching process at referral, so that the strengths of mentors are matched to the needs of the pupil.

Flow of referrals

As referenced earlier, the flow of referrals and starts was uneven across the pilot's delivery. This impacted workloads for mentors and in some cases their ability to meet weekly with pupils. Some mentors commented that it was difficult to manage cases at different stages of their interventions as those towards the start required more support at home, or taking into school which complicated their planned timetables and set times in certain schools.

The later than originally planned launch and slow initial flow of referrals meant that referrals and starts were later in the academic year than initially intended. Both mentors and school staff said this had limited the potential effect of the intervention on pupils' yearly attendance. This was both in terms of the shorter time available for any improvement to impact on the year to date attendance rate, and due to more entrenched issues.

Mentors and school staff also cited factors that influenced the initially slow rate of referrals, including low levels of awareness, confusion regarding referral criteria and limited capacity within schools to make referrals.

> "We were sending through referrals quite slowly at first because we thought the initial limit we had still applied." – *School staff member*

Intervention delivery

Key findings

Barriers faced by pupils engaged with the Watchtower Project included mental health challenges, lack of structure or routines at home, poor attitudes to school and learning, family circumstances, and SEND. On average, mentors provided 14 weeks of support. Activities delivered included:

- One to one coaching and discussions.

- Family advice and support.

- Access to financial support for families.

- Encourage change in routines, behaviours and attitudes.

- Facilitate better school and pupil and parent relationships.

- Support pupils to get to and be in school.

- Make referrals to other support and services.

There was some variance in mentor practices, both in terms of the average length of the support they delivered and delivery style. This was potentially a result of some differences in the types of case allocated, nature of the role fulfilled, mentor background and experience, and levels of school engagement.

Approaches adopted by mentors that worked well included delivering practical support, accessing Barnardo's in-house funds to support family financial barriers and focusing on careers, aspirations and sustained change. Effective working relationships between mentors and schools staff contributed to successful delivery in some cases.

There was some inconsistency in practices across mentors and schools. Often there was potential for a greater focus on exit planning. In some cases, schools had less flexible practices or staff were less able to engage with mentor suggestions for changes or additional support for pupils.

This section builds on evidence from the theory of change, action plan review, pupil case studies and management information to provide a description of intervention delivery (evaluation theme 1).[27] This includes an outline of the common barriers to attendance faced by pupils, the goals set to address them, the types of activity undertaken by mentors and the length of support provided. The pupil case studies and feedback from mentors, school staff, pupils, parents and carers are used to explore the delivery success

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[27] See Evaluation Framework, Appendix 1.

factors and challenges encountered (evaluation themes 3 and 5 – 'working with other services' and 'understanding effective practice').

Reasons for referral

Across the 113 action plans and the 40 pupil case studies undertaken for the evaluation, the most common barriers to attendance faced by pupils were:

- Mental health challenges.

- Lack of structured routines at home.

- Poor attitudes to school and learning.

- Family circumstances such as trauma, bereavement, changes in care or custody, family tensions and financial concerns.

- Diagnosed, or undiagnosed, SEND.

- Poor behaviour, often resulting in fixed-term exclusions.

Case example

Referral reason - mental health: Pupil 1 was referred to the Watchtower Project after an extended period of non-attendance at school. Pupil 1 was struggling with anxiety around leaving the house, suspected to have been caused by extended periods at home during lockdowns, and anxiety about returning to the school environment after a long time off.

Case example

Referral reason - routines at home: Pupil 2 was referred as they were regularly late to school and were commonly missing days at the start of the week. The mentor established that the pupil had poor sleep hygiene practices so regularly woke up late. Parents at home were also not motivating the pupil to go to school when they were late or showed a desire to stay at home.

Case example

Referral reason - SEND assessment support: Pupil 3 had been truanting from lessons and had had a poor attitude to school, showing a strong reluctance to go into school. Their parent expressed that Pupil 3 may have undiagnosed SEND which caused difficulties for their learning resulting in anger management issues. Parent was seeking support for a referral for an assessment to support Pupil 3 back into school.

Action plans included pupil goals designed to address the needs and barriers that had been identified. These were developed through an initial assessment process undertaken by the mentors with the referred pupils and their families. Generally, action plans recorded between 3 and 6 goals per pupil.

The most common goals related to building a relationship with the mentor, improving pupil wellbeing or mental health, and supporting attendance. Parental or family-based goals were also often included, such as:

- Development of routines.

- Behaviour management strategies.

- Improving parental attitudes towards school.

- Financial support.

- Accessing other support including SEND or Children and Adolescent Mental Health Service (CAMHS) referrals.

A smaller number of goals related to professionals' communication, such as mentors advocating pupil needs to school staff and engaging in conversation with other agencies involved to ensure full understanding of pupil needs.

Mentor support activities

Mentors delivered a range of support activities with the aim of addressing the barriers identified and goals set. They involved working in a one to one capacity with pupils, engaging with parents or carers, and communicating with school staff and other services.

Relationship building

Mentors often used games and activities to help initial engagement and establish a relationship with pupils. For example, playing chess, card games, football and using Barnardo's facilities such as the kitchen for the mentor and pupil to cook together. The aim would be to enable pupils to become comfortable and decide what they wanted to speak about. One to one discussions were also vital to building trusting relationships, acting as a forum for pupils to share their barriers to attendance.

> "I like it when we play games because we get to chat at the same time, so the sessions don't feel as intense. We're not just sat talking about why I don't go to school all the time." – *Pupil*

Coaching and discussions

Mentors regularly delivered one to one discussion and coaching sessions with pupils, tailored to individual needs. This included addressing issues such as:

- Attitudes to school and learning, including why attending school is important, exploring the benefits of school and linking to further studies or careers.

- Mental health and wellbeing, including how to manage emotions and anxiety, building confidence and self-esteem, regular mental health and wellbeing check ins.

- Future career aspirations and opportunities, considering next steps for GCSEs or further studies. This involved finding roles to match their areas of interest or researching entry requirements for certain courses or qualifications.

- Routines and sleep hygiene practices. Mentors explored and encouraged good practices for timekeeping, routines and sleep patterns, such as setting alarms in the morning, setting out uniform and equipment, and independent dressing (for young pupils) and breakfast routines.

> **Case example**
>
> Pupil 4 was displaying anxiety and anger management issues resulting in fixed-term exclusions and reluctance to go to lessons and school in general prior to referral. The mentor worked through some scenarios and role play in sessions with Pupil 4 to discuss more appropriate responses and anxiety management techniques.
>
> > "I always remember the breathing techniques [mentor] taught me and how to stay calm when people are agitating me, or I don't like the lesson. It's been really helpful, and I get in trouble a lot less with my teachers." – *Pupil*

Family engagement and support

Mentor activities also often included support for the pupils' parents or carers. This involved, for example:

- Building trusted relationships with parents and undertaking coaching, for example to encourage more positive attitudes to learning, improve perceptions of school, and develop better home routines and behaviour management.

- Accessing financial support, largely from Barnardo's funds, for example for foodbank and uniform vouchers, the purchase of bedroom furniture and support with household bills.[28]

- Practical support including filling in forms for referrals, offering advice, facilitating solutions, accessing foodbanks and other services.

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[28] Barnardo's in-house funds include the Young Peoples Grant (Barnardo's. 2019. Barnardo's Young People's Grants) and Cost of Living Fund (Barnardo's. 2022. Cost of Living Crisis Fund: Frequently asked questions).

- Referral to other support agencies including social care, mental health and LGBTQ+ charities where appropriate.

> **Case example**
>
> Pupil 5 had been sharing their bed with a younger sibling which was leading to disrupted sleep and conflicts within the family. The mentor spoke with the parent of Pupil 5 and found they did not have the finances to afford a separate bed. The mentor applied to the Barnardo's Cost of Living Crisis Fund to purchase a bed for the pupil.
>
> Pupil 5 reported less conflicts within the family and overall improved routines. They reported an improved outcome star in relation to family routines from 5 to 2.
>
> > "We all get along better now. I don't get as annoyed and angry at [sibling] like I used to." – *Pupil*

Facilitating better school, pupil and parent relationships

Mentors advocated for pupils (and parents) by attending meetings in schools. They suggested and agreed additional support or alterations including flexible timetables or bespoke plans to get pupils into mainstream classes more often, and ensured any external appointments pupils had during the school day were pre-approved for authorised absences, rather than left as unauthorised. Mentors worked with schools for school day alterations to support gradual re-integration.

> "[Mentor] came to meetings with me at school. They helped me understand what the meetings were about and why they had to happen. [Mentor] also helped me communicate to the school that I was having similar struggles at home with [pupil] behaviour" – *Parent or carer*

Supporting pupils to get to and be in school

Mentors sometimes undertook very specific practical steps to help get pupils into schools, to build confidence and improve familiarity with the school environment, or to support gradual re-integration. This included:

- Observing and developing morning routines at home with pupils.
- Picking pupils up and taking them to school.
- Accessing finance to purchase a bike or bus pass.
- Agreeing changes or actions that the school could take to support some pupils, for example, late arrival and early leave times, time out areas or designated staff

members to see, and reduced timetables building back up to full mainstream timetables.

- Sitting with a pupil in reception or remaining with a pupil in the classroom or support base.

- Offering rewards and incentives to encourage pupils to come into school or to attend certain lessons.

- Taking pupils to college appointments and supporting with applications.

> **Case example**
>
> Pupil 6 had not attended school for a few months in the lead up to support from the mentor. As a result, their confidence in attending school was very low. The mentor worked with the pupil out in the community attending cafes and shops before slowly reintegrating to school.
>
> School reintegration started with the mentor taking Pupil 6 into school for their sessions in a private room and built up to the mentor attending lessons in the school's SEND support base with the pupil before they were confident to attend alone. At the point of interview, Pupil 6 had attended sessions in the SEND support base without their mentor.

Other services and referrals

In a minority of cases, other services worked with families during the period of the mentor intervention. This included early help and social care services and some more targeted support linked to for example mental health or domestic abuse. Mentors also signposted to and made referrals to other support services, including mental health agencies (such as, CAMHS, Kooth[29] and Mind) and for SEND assessments.

Practice styles

Evaluation feedback identified some differences in mentor practice styles linked to mentors' previous experiences and skills. Mentors had different approaches to session style with some more structured, some using rewards and incentives, some using games and worksheet activities and others discussion led. For example, one mentor discussed the use of small goal setting at the end of each session as beneficial for pupils to work on and report back in the next session. Whereas another said setting goals each week could potentially set pupils up for a further feeling of failure if they were not meeting these

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[29] Kooth is an online emotional wellbeing tool for children and young people. https://www.kooth.com/

goals. There is scope for mentors to share and learn from each other to develop consistency and good practice.

Support over summer holidays

Mentors delivered some support for pupils and families over the summer holiday period. This tended to be tailored to the needs of the pupil. Some received weekly one to one sessions, others received support in the couple of weeks leading up to school return and some had sessions as and when needed. For example, a group bowling session was organised by mentors for those pupils that were transitioning in September from year 6 to 7. This was intended to help pupils to get to know others attending the same secondary school as them, and to ease anxiety around school return.

There was a mix of stakeholder views on the value of summer support. In some cases, school staff, parents and carers reflected that the support had helped with re-integration back to school and provided continuity over the 6 weeks. The bowling transition event also resulted in some new pupil friendships which supported a positive start for some pupils at secondary school. Conversely, some pupils, parents and carers did not want summer-based sessions as it felt "too much like school" and school-based attendance issues were best supported during term time. Some school staff were also concerned that sessions delivered during the summer holidays could take up allotted weeks of support that was better suited to term time delivery.

Tapering support

Mentors used a variety of tapering techniques as they moved towards the end of support for individual pupils and families. These included:

- Reduction in frequency of sessions, for example, once a fortnight.
- Reduction in the length of sessions.
- Weekly check-ins to take place over the phone, rather than in-person.
- Text and phone communication as and when needed, rather than designated sessions.

Mentors commonly shared with pupils that even though sessions may have ended, pupils were still able to get in contact with their mentor if they needed. This included texting, phone calls or dropping in to speak to the mentor on their designated days in schools.

> "[Mentor] said we can contact them if I think [pupil] needs any extra support in the future. It's nice to know they aren't just leaving us to it."
> – *Parent or carer*

> "I think I'll keep coming to school and doing better in lessons, but I can always text [mentor] or pop in to see them at school if I think I need to." – *Pupil*

Length of intervention

Information leaflets for the Watchtower Project outlined that mentor support would last an average of 12 weeks. However, guidance for mentors allowed for pupils to receive a tailored number of sessions depending on their specific need, and during evaluation fieldwork mentors commonly mentioned a timescale up to 20 weeks of support.

At the end of October 2023, data was available for 116 completed cases. Across these, the average number of weeks of support provided by mentors was 14. This ranged from 4 to 33 weeks in total. Just over half of completed cases (52%) involved between 12 and 20 weeks of support inclusive, and three-tenths involved (31%) less than 12 weeks of support. The number of weeks of support delivered tended to be higher for those that were receiving ongoing support on 23 October 2023 (107 cases).

Table 2 Length of intervention by case status

Length of intervention	Completed cases	Ongoing cases	Total cases
Less than 12 weeks	36 (31%)	22 (21%)	58 (26%)
12 to 20 weeks	60 (52%)	40 (37%)	100 (45%)
More than 20 weeks	20 (17%)	45 (42%)	65 (29%)
Total	**116**	**107**	**223**

Source: Barnardo's Management Information (23 October 2023)

This data supports the views of some stakeholders who reflected that some types of issue or barrier could be supported or addressed more quickly than others.

> "Some pupils just needed the support to physically get into school such as having the right uniform, equipment or travel arrangements, others needed a familiar face in school to talk to. Others needed more intensive support to tackle engrained barriers to attendance." – *Project manager*

Variance by mentor

There was some variance in the average length of intervention delivered by individual mentors. This is demonstrated in part by the difference in the proportion of cases that

had been completed at the end of October 2023: this ranged from 26% to 52% for individual mentors. Further analysis showed that half of the mentors had delivered an average of 12 weeks or less for their completed cases; compared to the other half who had delivered an average of 16 weeks or more.

It was not possible from the available evidence to establish with any certainty the reasons for these variances across mentors. Nevertheless, they were potentially a mix of:

- Some differences in the types of case allocated to different mentors, with some maybe requiring less or more support depending on the barriers faced by the pupils concerned. This might also have been a function of the types of case referred by different schools.

- Some distinction between the nature of the role fulfilled by different mentors. Whilst some focused on short-term actions to get pupils into school, others were more able to support underpinning challenges or barriers. A couple also delivered beyond the remit of the expectations set out in mentor training guidance.

- The caseloads and capacity of mentors to engage and support all pupils in a consistent way.

- Variability in the capacity and attendance management approach of some schools to effectively engage and support mentors to address some pupil barriers to attendance.

Views on length of intervention

Commonly, school staff, parents, carers and pupils said they thought the mentor intervention should be longer than it was. This was referenced both in relation to the 12 week average and what some considered to be a 20 week cap (the data above shows that whilst this was the guidance; the cap had not existed in reality).

Some school staff, parents and carers thought pupils would benefit from a longer-term intervention, sometimes up to 6 months. They thought without this that pupils might go back to old patterns once their mentor had ceased support.

> "I know [pupil] has done well for going to school more often. I wish the sessions could go on a bit longer just to make sure it stays this way." – *Parent or carer*

Pupils commonly expressed wanting longer sessions, increased frequency of sessions and overall length of support. This was often due to enjoyment of the sessions and time spent with their mentors, their appreciation of the support they had received and some nervousness about no longer having someone to talk to.

Understanding effective practice: success factors

Relationship-building strategies

Relationship building was commonly identified as an important stage for the mentoring intervention. Approaches which pupils and mentors identified as successful included:

- Pupil-led conversations to direct sessions and learn about the issues pupils were struggling with.

   "I thought [mentor] was just going to be another worker. I've had quite a few and I've never really got on with them, but it was different with [mentor]. I felt like they really wanted to listen to me and help me." – *Pupil*

- Exploring interests or hobbies and tailoring sessions around these.

In addition, some school staff said they particularly valued that mentors had an awareness of the local area, the school and professional knowledge and skills from previous employment in some instances. This meant they easily understood the background of pupils and the challenges they might face.

Practical support from mentors

School staff valued some of the practical support that mentors were able to provide, such as physically picking pupils up to come into school, agreeing school day alterations or offering rewards or incentives. These were activities that school staff themselves were not able to deliver. They saw these actions as short-term solutions to boost attendance whilst mentors also worked on addressing other barriers faced by pupils.

Supporting sustained improvements

Some mentors, school staff, parents and carers identified activities that supported longer term or embedded change for pupils and families, such as when mentors:

- Shared work phone numbers for pupils or parents and carers to access post intervention support.

- Encouraged or provided help with completion of SEND assessments or CAMHS support.

- Identified a key member of school staff that could be a point of contact for the pupil post mentor support.

- Supported parents and carers to develop and embed routines at home.

- Discussed and collaborated with other support agencies.

Focus on aspirations

Where pupils struggled with poor attitude to learning and school, mentors often worked with them to explore career aspirations. Pupils, parents and school stakeholders valued this aspect of the support. It encouraged pupils to focus on future career goals and entry requirements, which led to improved attitude in lessons and a better grasp of the importance of learning.

> "I want to work in nurseries when I'm older, so we've looked at what I'd need to get in my exams to get onto the college course." – *Pupil*

Access to financial support

Mentors were able to access in-house Barnardo's funds such as the Young Peoples Grant[30] and Cost of Living Fund.[31] These enabled mentors to use rewards and incentives for pupils and to address barriers faced by pupils and families such as supply of uniform and equipment, or furniture such as beds.

School capacity to respond

Mentors said that where schools were more able to be flexible and respond to requests for additional support or short term alterations to the school day, this contributed to success for certain pupils. This enabled mentors to focus on gradual re-integration into school, or mainstream lessons. Pupils would be supported to build their confidence up towards being back to full attendance with a full timetable.

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[30]Barnardo's. 2019. [Barnardo's Young People's Grants](#).
[31] Barnardo's. 2022. [Cost of Living Crisis Fund: Frequently asked questions.](#)

Case example

Pupil 7 struggled with mental health, especially with anxiety in lessons. Pupil 7 had experienced long periods of non-attendance at school. The mentor worked with school staff to develop a reduced timetable with some lessons scheduled in the school's support-base. Over the length of the intervention the number of mainstream lessons the pupil attended gradually increased to full attendance of mainstream lessons. Arrangements were also in place for Pupil 7 to attend the support base if required.

All stakeholders interviewed, including Pupil 7, a parent, mentor and school staff member were very happy with the progress made by Pupil 7. They all observed better attendance as a result of the reduced timetable and reintegration work.

> "The change for [Pupil 7] has been amazing to see. [Pupil 7] is back in all day and going to normal lessons. [Pupil 7] hasn't even needed the support base in a few weeks. Although attendance isn't perfect its so far from the start of the year." – *School staff member*

Pupil 7 self-reported an increase from 5 to 1 on their outcome star in relation to attendance. They were proud of the progress made both going to school more regularly and attending mainstream lessons again.

> "I'm coming into school way more often and back into normal lessons again. Although I don't like all the lessons, I am doing much better in them. I'm more focused on what I want to study at college too." – *Pupil*

Pupil 7's parent was very thankful for the support and adjustments made from the school and mentor in getting Pupil 7 back into school more regularly. This gratitude also extended to the onward referral made for Pupil 7 to have professional support with their mental health after the mentor had ceased support.

> "We argue a lot less at home now they get themselves to school because of the slow adjustments back to normal lessons. Although they still struggle with their mental health, I am so grateful for the support [mentor] gave us with the CAMHS referral." – *Parent or carer*

Year to date attendance rate: Start: 50% **End:** 59%

School and mentor relationship

School staff and mentors identified effective working relationships between schools and mentors as a key contributor to successful mentoring support. Common features of good school and mentor relationships included:

- Defined communication practices between school staff and mentors such as set meeting dates and times, and mentors dropping into offices for informal communication.

- Consistency in room location for mentors to meet with pupils.

- Link mentors and mentors having an appropriate school staff member to work with to talk about additional support or alterations.

- Schools being flexible with school day arrangements whilst pupils gradually built up attendance.

- Mentors sharing successful strategies with school contacts for particular pupils.

Understanding effective practice: challenges

Focus on sustainability

Some school staff thought that mentors should have had more focus on long-term goals for pupils and exit planning for transition from mentor led to school led support. Whilst the evaluation fieldwork did identify some examples of steps to support sustained change for pupils and families (as discussed in success factors above), this was not consistently achieved. Equally, some school staff and parents shared concerns that pupils' attendance might decline once mentor support had ended.

> "Although [pupils] attendance has improved it would be great to know how we could continue to support them in the future. I'd like to have a better understanding of their barriers to make sure this improvement is sustained." – *School staff member*

Lack of school capacity to respond

Whilst a school's capacity to engage with mentors in their endeavours to improve pupil attendance was sometimes identified as a success factor, this was not the case with all school contexts. Some schools had more rigid approaches which staff were unable to flex at mentors' suggestions, creating barriers for mentors to implement the support identified.

> "At some schools they are supportive of creating school day alterations and reduced timetables for us to build up to full-day

regular attendance. Other schools aren't open to this and just want the pupils in all day from the get-go." – *Mentor*

Equally, feedback from both mentors and school staff identified incidences of differences in opinion between school staff and mentors about the barriers faced by individual pupils and whether the changes or actions proposed were appropriate. Although mentors sought to advocate for pupils and had put some referrals and support in place, it was sometimes not clear that the understanding or support from school staff would be achieved. Furthermore, some mentors said that post intervention there was limited potential for ongoing pupil support from school staff and that any provided would not match with that offered by the mentor during the intervention.

Limited impact where other services required

Some mentors said that their ability to help pupils and families address particular barriers was limited when they required input from other services. For example, some pupils referred to CAMHS would be on a waiting list throughout the life of the mentoring intervention and mentors therefore felt that the best outcomes could not be achieved for these pupils.

Perceived outcomes and sustainability

Key findings

The indicative evidence suggests better attendance was achieved for half (50%) the pupils supported by the Watchtower Project pilot. There was an average increase in attendance rates of 11 percentage points over the period of the intervention.

There was variable performance across schools and year groups. Primary schools, year 6 and year 10 had the highest proportions of pupils achieving better attendance. Some secondary schools saw no attendance improvements whereas others had most of the supported pupils achieving positive change.

Other positive outcomes were improved mental health, better routines, better attitudes to learning, engagement in positive activities, higher attainment and financial barriers addressed.

For over one third of completed cases (36%), pupils had experienced a decline in attendance during the intervention. In addition, feedback from school staff, pupils, parents and carers identified some cases where either pupils were attending school more often, but they did not regularly attend lessons when in school or the improvement observed may not be sustained post-intervention.

Mentor activities that supported more sustained outcomes for pupils were skills development (such as anger, time or anxiety management strategies), support for parents and families, and offering post intervention contact points.

Challenges which constrained the achievement of sustained change for some pupils included some over-dependency of pupils on mentors and a lack of pupil resilience or explicit exit planning.

This section outlines the outcomes and sustainability achieved from the Watchtower Project pilot (evaluation theme 4).[32] Intended outcome measures were detailed in the theory of change[33] and evidence from quantitative data, triangulated pupil case studies and feedback from mentors, school staff, pupils, parents and carers is used to provide a view of progress towards these. Several quality and consistency issues identified with the quantitative evidence (see Appendix 2 for further details) means that quantitative findings should be regarded as indicative only and in the following, they are considered alongside the more qualitative perspectives gained through interviews.

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[32] See Evaluation Framework, Appendix 1.
[33] See Theory of Change, Appendix 3.

Attendance outcomes

Start and end attendance data was available for 116 completed Watchtower Project cases at the end of October 2023. Of these, 42 had finished in the 2023 Autumn Term which meant that YTD attendance figures were not comparable over academic years. Data quality issues in some of the remaining data meant that pre and post attendance comparisons were only available for 64 completed cases from the pilot. Of these, YTD attendance rates between the pre and post intervention points:

- Improved for 32 pupils (50%).

- Declined for 23 pupils (36%).

- Remained the same for 9 pupils (14%).

Table 3 shows a breakdown of change in YTD attendance rates based on pupils' start attendance. Whilst numbers are small, the data suggests that a higher proportion of pupils that started the intervention as severely absent had improved their attendance by the end of intervention compared to those that were persistently absent at the start.

Table 3 Year to date attendance change grouped by start attendance

Start attendance	Improved	No change	Declined	Total
Severely absent: 0-50%	13 (59%)	4 (18%)	5 (23%)	**22**
Persistently absent: 51-90%	19 (45%)	5 (12%)	18 (43%)	**42**

Base: 64 cases completed in the same academic year

Source: Barnardo's Management Information (23 October 2023)

Table 4 shows that for the 32 pupils that had improved their attendance, there was an average increase in attendance rates of 11 percentage points during the period over which the intervention was delivered.[34] The average increase in YTD attendance rates between the start and end of the intervention was 3 percentage points.

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[34] An attendance rate for pupils whilst they were on the intervention was calculated. First, the difference in YTD attendance at start and end of intervention was used, alongside start and end dates, to establish the number of days actually attended whilst the intervention was ongoing. This was divided by the total number of possible days of school attendance available between the start and end dates of the intervention.

Table 4 Change in attendance rates for pupils that improved attendance

Time points and change:	Severely absent: 0-50% (13 pupils)	Persistently absent: 51-90% (19 pupils)	All that improved attendance (32 pupils)
Average YTD attendance rate at **start** of intervention	22%	74%	53%
Average attendance rate **during** intervention[35]	35%	84%	64%
Change between start and during intervention (percentage points)	13	10	11
Average YTD attendance rate at **end** of intervention	26%	77%	56%
Change between start and end of intervention (percentage points)	4	3	3

Base: 32 cases completed in the same academic year where pupils had improved attendance

Source: Barnardo's Management Information (23 October 2023)

Other observations from the data include:

- Seven pupils moved out of the persistently absent category during the intervention. Two pupils moved out of severely absent into persistently absent.

- The smallest change was from YTD rate of 77% at the start of the intervention to 79% during the intervention. The largest was from 60% to 97%.

- Higher proportions of pupils in primary school saw improvements in attendance compared to those in secondary schools. Similarly, more pupils in year 6 and year 10 saw improvements compared to other year groups.

- There was variability across secondary schools. In some schools there was no improvement in attendance for pupils supported by the Watchtower Project. In other schools, more than two-thirds of supported pupils had improved attendance.

- There was a slightly positive relationship between the number of weeks of support provided by mentors and improved attendance for the pupils concerned.

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[35] An attendance rate for pupils whilst they were on the intervention was calculated. First, the difference in YTD attendance at start and end of intervention was used, alongside start and end dates, to establish the number of days actually attended whilst the intervention was ongoing. This was divided by the total number of possible days of school attendance available between the start and end dates of the intervention.

- There was an average fall of 17 percentage points for those pupils that saw a decline in their attendance over the period of the intervention.

Qualitative evidence from the 40 pupil case studies suggested that the YTD attendance figures did sometimes mask some shorter-term attendance improvements, including for cases where there was a decline in attendance. This was, for example, where a pupil's poor attendance had increased immediately prior to the start of the intervention. Or because of more rigid school attendance recording practices.

Case example

Pupil 8 had gone through a period of not attending school at all for the few weeks prior to the start of the intervention. The mentor worked with this pupil to reintegrate them back into the school environment. This started with developing routines and practices for getting ready at home, then involved a series of short introductions to the school building, before then moving into classroom settings.

By the end of the intervention both school staff and the attendance mentor reported an improvement in attendance as Pupil 8 had attended school some of the time.

> "There is a definite improvement in how often [Pupil 8] is in. It's not every day, but it has improved since working with the mentor."
> – *School staff member*

The intervention start and end attendance rates for Pupil 8 did not show any change. However, stakeholders did observe incremental changes over the period of the intervention. Also, at the point of the evaluation interview, the school did report an improved attendance rate of 37% in the new academic year. School staff, the mentor and pupil agreed that the slow exposure to the school environment and encouragement to develop new friendships helped to support Pupil 8 back into school.

> "I have made a new friend over summer so I'm happier in school now." – *Pupil*

School staff felt this improvement would not have happened without mentor intervention.

Year to date attendance rate: Start: 21% **End:** 21%

Case example

Pupil 9 was referred to the Watchtower intervention after a period of non-attendance to school resulting in an attendance rate of 30%. The mentor established that the pupil needed support with mental health and anger concerns and to set routines to get into school each day.

During the intervention, the pupil attended school every day but was arriving late, after the morning registration bell. The school that Pupil 9 attended had a rigid policy where pupils would not receive their morning mark if they were late. This meant the pupils' attendance rate was recorded as just 50% during the intervention.

> "It's annoying that my morning mark doesn't count. I am trying to get in on time and sometimes it's only a few minutes late." – *Pupil*

The mentor was impressed with the progress Pupil 9 had made but noted the impact of them being late. The rigid school policy meant this affected attendance data and their perception of their progress.

> "They are in school every day which is the best outcome, it is unfortunate that they don't get their morning mark when late though." – *Mentor*

Pupil 9 initially self-reported a score of 5 in relation to their attendance at the start of the intervention, the lowest score. By the end of the intervention this had improved to 2. By not recording a score of 1 this was demonstrating Pupil 9's dissatisfaction with not receiving a 100% attendance record due to late marks received.

Year to date attendance rate: Start: 30% **End:** 43%

There were also other positive changes not captured by the attendance data, such as:

- Better attitudes towards learning including less truanting, improved behaviour in lessons, reduced negative behaviour points and exclusions.

- Improved capacity to attend school including improved routines at home, gradual introduction to the school environment, financial support or purchases of uniform.

- Steps made towards improving attendance such as barriers identified and referrals to other support.

Conversely, some school staff and mentors also highlighted cases where pupils were attending school more often but did not regularly attend all their lessons when in school. This was, for example, due to ongoing poor behaviour or poor relationships with teaching staff.

Case example

Pupil 10 was a regular non-attender at school. When they did attend, they displayed poor behaviour and attitude in lessons so received multiple fixed-term exclusions. The mentor worked with Pupil 10 on getting into school more regularly and going to lessons with a more positive attitude towards teachers.

The mentor worked with Pupil 10 through different scenarios to explore how they could react differently in lessons in the future:

> "Teachers have noticed a difference with [Pupil 10] engaging more in lessons and asking for help when needed." – *Mentor*

Pupil 10 reported feeling happier coming into school and felt their behaviour was much better in lessons. They were also proud of their achievement in only having one fixed-term exclusion in the new academic year and noted this was a lot less than the previous year.

> "I get on better with my teachers because I'm not as naughty in the lessons, so they don't send me out or get me excluded." – *Pupil*

There was a marginal improvement in Pupil 10's attendance during the intervention as they were supported in the last weeks of the academic year. However, school reported that although Pupil 10's attendance was much improved in the new academic year, they were still truanting from a lot of lessons.

> "It's great that they are back in school more often, but it doesn't mean much if they are not going to lessons and learning. [Pupil 10] is at risk of more exclusions given recent truanting." – *School staff member*

Despite reporting better behaviour and engagement in some lessons it appears Pupil 10 had poor associations with some teachers and subjects so was choosing to truant from these lessons.

Year to date attendance rate: Start: 63% **End:** 66%

Despite efforts by mentors, in some cases there were no improvements in attendance for the pupils supported. Mentors, school staff and parents or carers identified a variety of reasons for this, including underlying barriers that needed support from other services, pupils' lack of desire or interest in achieving change, or parenting attitudes or approaches that did not support consistent messaging at home.

Case example

Pupil 11 displayed poor attitude towards school and experienced difficult relationships with teachers. The mentor worked with this pupil and parents to encourage a different approach and attitude towards getting ready for and going to school.

As a result, Pupil 11 did report feeling happier both at home and in school and thought they had improved their attendance.

> "I get on better with my [parent and sibling] and I do think I have come into school more often." – *Pupil*

Nevertheless, despite the support provided, the mentor said they were not able to establish the specific barriers to attendance – there appeared to be a range of ingrained and complex home-factors.

Other agencies were involved with the family. It was agreed between the mentor and school that everything that could be done by the mentor had been tried. Any future progress it was hoped would be made with the other services involved.

Year to date attendance rate: Start: 59**% End:** 58%

Post-summer attendance

As previously noted, the pre and post intervention attendance rates were not directly comparable for the 42 pupils where YTD attendance was recorded after September 2023. Nevertheless, the rates recorded for the next academic year did suggest some improved attendance for most of these pupils compared to the previous year. Around a third (16) had good attendance (of 90% or more) for the first few weeks of the new academic year.

Outcome stars

Outcomes stars were completed by mentors in discussion with pupils at the start, midpoint and end of the intervention. Comparison points at start and end were available for 127 completed or ongoing cases. Across 6 themes pupils rated themselves on a scale of 1 to 5, with 1 being good and 5 being poor. The themes were mental health, family routines, school attendance, attitude to learning, engagement in activities, and feeling listened to and understood.

There were limits on the validity of the outcomes star tool given some lack of independence and consistency with which they were applied.[36] Nevertheless, qualitative findings from the evaluation fieldwork do support the general trend observed across the outcome star data that positive change was achieved for most pupils across each of the themes.

Figure 1 shows that the average scores across the 127 cases improved, by approximately one point, for each of the 6 outcome star themes. These changes from pre to post measures were shown to be highly statistically significant (see Appendix 2 for further detail).

Figure 1 Change in average outcome star ratings
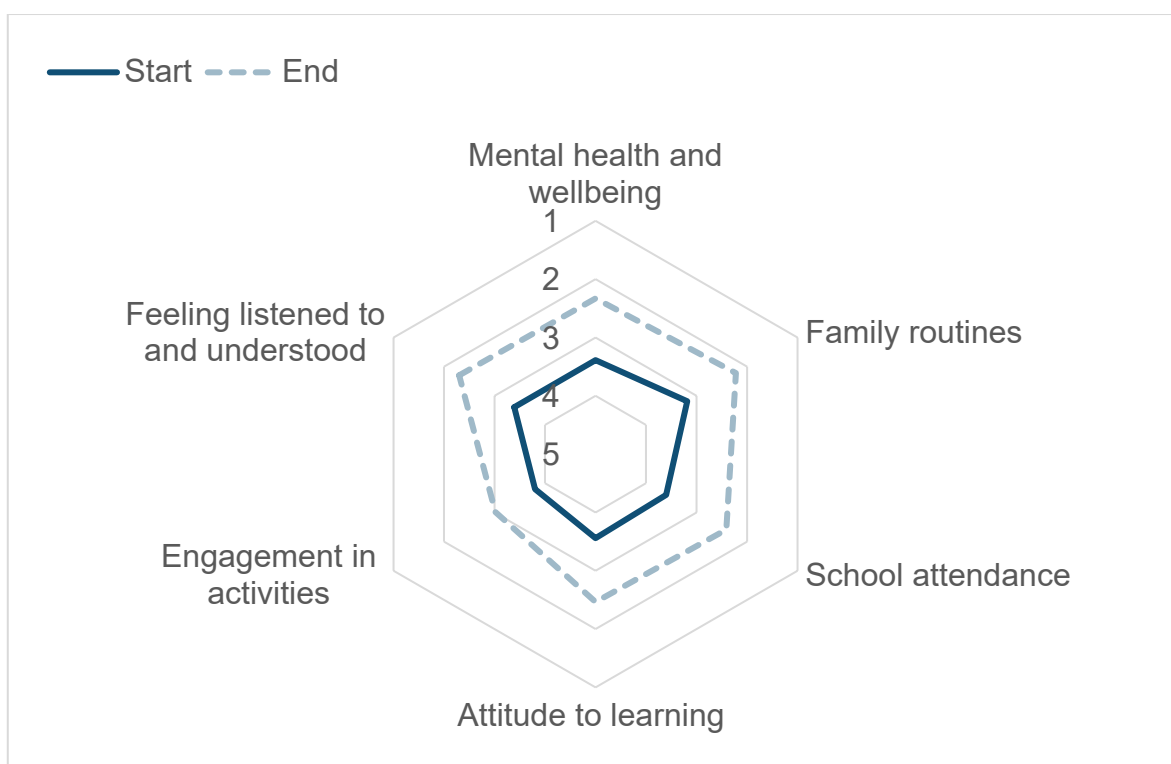
Base: 127 cases where start and end outcome stars were completed

Source: Barnardo's Management Information (23 October 2023)

Positive change was achieved for most pupils supported by the Watchtower Project: 115 pupils (91%) saw an improvement in 1 or more of the outcome themes and most of these (83 or 65%) achieved improvement on 4 or more themes. A small number of pupils (16 or 13%) saw a mix of change with some theme scores improving and others declining. Only 12 pupils (9%) reported no change or a decline across all their self-reported outcomes.

The outcome relating to pupil engagement in activities recorded the highest (worst) average score both at the start and end of the intervention. This theme was explored with

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[36] See Appendix 2: Evaluation Methodology.

pupils in interviews; many said that whilst they did not engage in activities outside of school they also did not wish to.

Mental health and wellbeing

Eighty-four pupils (66%) recorded improved outcome star scores for mental health and wellbeing by the end of their support. Five pupils (4%) reported a fall in scores and 38 pupils (30%) recorded no change. The average change (for the 127 pupils for which completed outcome stars were available) was a significant improvement of 1.03 – from an average pre intervention score of 3.36 to 2.33 post intervention.

Figure 2 shows that almost two fifths of pupils (38%) that completed outcome stars had improved by 1 on the 5 point scale by the end of their support. The few individuals that reported a fall in scores had declined by 1 point.

Figure 2 Proportion of pupils with improved, no change or declined scores for each outcome star theme
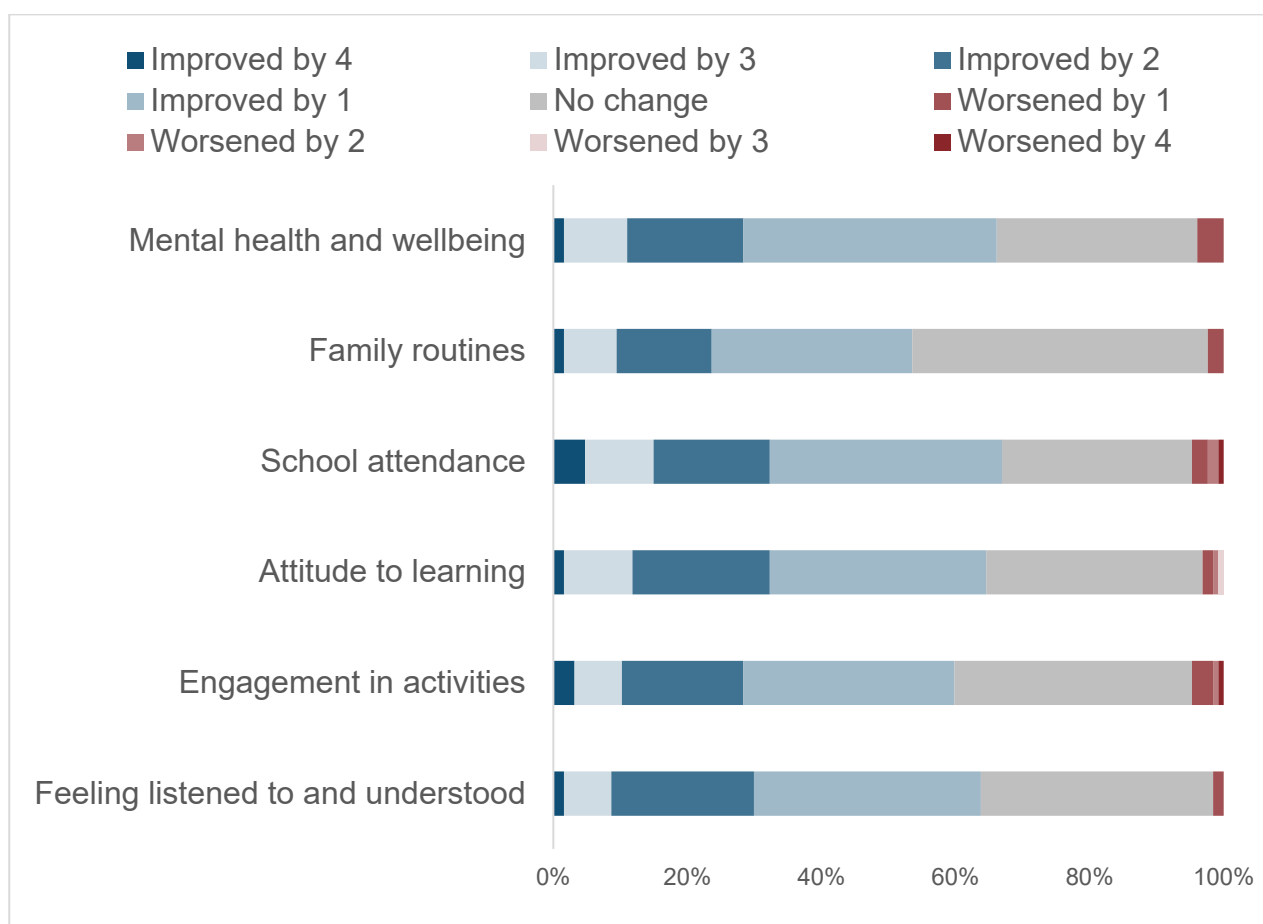
Base: Number of cases where start and end outcome scores changed. Varies by theme: mental health 89, family routines 71, attendance 91, attitudes 86, engagement 82, feeling listened to 83

Source: Barnardo's Management Information (23 October 2023)

Parents, carers and pupils identified ways in which the intervention had supported pupils' overall wellbeing. For a number of pupils, mentors had helped to reduce anxiety, developed anger management skills and built self-confidence.

> "I have a lot less bad days, and when I do, I know how to cope with them better… I will always remember the breathing techniques [mentor] taught me to stay calm." – *Pupil*

Family routines

Sixty-eight pupils (54%) recorded improved outcome star scores for family routines. Just 3 pupils (2%) recorded a worsened score and 56 pupils (44%) recorded no change. On average, scores significantly improved by 0.86 across all 127 pupils from an average pre intervention score of 3.08 to a post intervention score of 2.22.

Just under one third (30%) of those completing outcome stars reported an improvement of 1 point, while 14% improved by 2 points (see Figure 2 above). Only a few pupils recorded worsened scores, and this was a change of 1 on the 5-point scale used.

Mentors worked with pupils to improve sleep hygiene practices and develop independent routines. This included:

- Evening routines that comprised homework and setting out equipment and uniforms for the next day.

- Regulated mornings that involved, for example, use of alarms to reduce reliance on family members to wake them.

- For some younger pupils, getting dressed more independently and making their own breakfast.

> "[Pupil] gets ready for school by herself so I can focus on [younger sibling]. We have a lot less arguments in the morning as a result. Overall, we get along much better." – *Parent or carer*

Pupils and parents also reported fewer arguments and tension, and said they generally got along better at home. This was particularly apparent for pupils who had not been attending school at all for a period immediately prior to the intervention.

School attendance

Eighty-five pupils (67%) recorded improved outcome star scores for attendance. Six pupils (5%) reported a worsened score, and for 36 pupils (28%) there was no change. This outcome recorded the greatest average change and was a significant improvement of 1.1, from 3.51 pre intervention to 2.41 post intervention. Figure 2 above shows just over a third (35%) of pupils that completed outcome stars improved their school attendance scores by 1. Six pupils recorded a score that had worsened by 1 or more.

An improved outcome star attendance score was not restricted just to those pupils that saw an improved YTD attendance figure. A total of 22 pupils that had a decline in YTD attendance actually self-reported an improved outcome star attendance score. This may demonstrate some pupils' improved attitudes towards school and attendance which was masked in the actual attendance figures.

Attitude to learning

Eighty-two pupils (65%) recorded improved outcome star scores for attitude to learning, 4 pupils (3%) reported a worsened score and for 41 pupils (32%) there was no change. The average change for attitude to learning was a significant improvement of 1.05 from 3.52 pre intervention to 2.46 post intervention. Just under one third (32%) of pupils completing outcome stars reported an improved score of 1 point for attitude to learning, and the same proportion (32%) improved by between 2 and 4 points (see Figure 2).

Mentors commonly worked with pupils to improve their understanding of the importance of school, learning and qualifications. This sometimes included an exploration of career aspirations. In some cases, mentors focused on pupils' poor attitudes towards certain lessons or teachers.

Case example

Pupil 12 displayed a poor attitude to school and learning. The mentor felt this was made worse by the parents' attitude: they did not emphasise the importance of school and would let Pupil 12 stay off when they did not want to go in. The mentor delivered one to one coaching with the pupil to develop an understanding of the importance of school and different lessons. The mentor also encouraged parents to understand the effects of poor attendance. At the end of their support, the pupil recorded a score of 1 on their outcome star in relation to their attitude to learning. This was an improvement from a score of 3 at the start of their intervention.

A school staff member reported:

> "[Pupil 12] is doing so well in school now, we can all see how hard they are trying to both come to school but also engage in lessons." – *School staff member*

When interviewed, Pupil 12 displayed positivity towards school and learning in general. They were proud of how they were doing better in lessons and coming into school more often.

> "I'm doing good at school my teachers say I'm much better. I'm much better at English and Maths now and I like learning in lessons." – *Pupil*

Year to date attendance rate: Start: 74% **End:** 95% (New academic year)

Engagement in activities

Seventy-six pupils (60%) recorded an improved outcome star score for engagement in other activities in and outside of school. Only 6 pupils (5%) saw worsening in this score and 45 (35%) stayed the same. The average change was a significant improvement of 0.94 from a pre intervention average score of 3.95 to 3.02 post intervention. The pattern of change was similar to that seen for attitude to learning, with just fewer than one third (31%) of pupils that completed outcome stars recording an improvement of 1 as seen in Figure 2.

In cases where pupils had expressed their interest in engaging in activities outside of school, mentors sought to find classes, groups or activities for the young people to engage in. This included signing up for football teams, joining gyms and generally working on friendship building so pupils would have friends to meet up with and communicate with outside of school hours.

Case example

Pupil 13 was struggling with low self-esteem, poor behaviour in school and managing emotions.

The mentor discussed with Pupil 13 about engagement in extra-curricular activities. This pupil displayed an interest in a local sports club, to which the mentor signed the pupil up to. The pupil had shared with the mentor that this sport would help with managing emotions and being more disciplined. The pupil reported an improvement in their outcome star rating from 4 to 3 in relation to activities engaged with.

The mentor was then able to access funds to buy incentives for Pupil 13 to engage with this sports club outside of school. When improvements in attendance and behaviour at school was observed, Pupil 13 was supplied with sporting equipment which enabled them to be more actively engaged in sports outside of school.

> "I am determined to do better in school. I am really trying in my GCSE's now and feel happier and less angry. I don't argue with teachers as much." – *Pupil*

> "The mentor really encouraged [Pupil 13] to engage in sports outside of school. The equipment really helped encourage [Pupil 13] to engage better in lessons and go to school more often." – *Parent*

School staff reported a change in the behaviour of Pupil 13. Whilst not yet apparent in the attendance figures (see below), the school had also noticed some improvements in attendance and lateness with the pupil attending school on time some days.

> "[Pupil 13] has better relationships with some teachers now and attendance is improving. We can also see the efforts they're making to come in on time." – *School staff member*

Year to date attendance rate: Start: 87% **End:** 82%

Feeling listened to and understood

Eighty-one pupils (64%) recorded an improved outcome star score for 'feeling listened to and understood'. Just 2 pupils (2%) recorded a worsened score and 44 pupils (35%)[37] recorded no change. The average change was a significant improvement of 1.02 from 3.32 to 2.30. The pattern seen in score changes reflects that seen for mental health and

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[37] Totals may not add to 100% due to rounding.

wellbeing with just over one third (34%) of pupils that completed outcome stars recording an improvement of 1. Only 2 pupils recorded a worsened score of 1 and just less than a third (30%) recorded an improvement of between 2 to 4 as seen in Figure 2.

Case example

During the first meeting between the mentor and Pupil 14's family, one barrier to attendance was apparent: Pupil 14 was struggling with being bullied and was nervous to go into school in fear of seeing these pupils. Pupil 14 did not feel as though the school was doing anything to address the bullying.

The mentor discussed this with school to ensure they understood this was a key barrier to Pupil 14 attending school. As a result, school day alterations were made so the pupil would not come in contact with these pupils during the school day.

Pupil 14 reported a change from 4 to 1 on the 'feeling listened to and understood' outcome star. This demonstrated the change they experienced in relation to bullying. Prior to the mentor support, Pupil 14 felt that school had not listened, nor done anything about the bullying they had experienced. They felt the mentor listened and actively sought to address the bullying they experienced in school. Parents and carers at home also felt Pupil 14 was more open with feelings at home as a result of the work with the mentor.

> "[Pupil 14] engaged well with the mentor and is now more open at home with us. [Mentor] has worked hard so we all have a better relationship with school, but nothing will improve until bullying is sorted by the school." – *Parent*

Despite efforts to address this bullying Pupil 14 still had periods of non-attendance to school when they felt threatened by bullies and were nervous to see them.

Year to date attendance rate: Start: 72% **End:** 55%

Pupils commonly said they were listened to by their mentors and that they felt comfortable expressing their emotions and thoughts. In some cases, pupils said they were able to share things with their mentors that they had not told other people before.

> "[Mentor] really listened to me and I could tell they wanted me to do better at school but also feel better. I did feel really comfortable, even from the first session at home. I've spoken to them about lots of things I've not even told my [parent] or best friends before." – *Pupil*

Other outcomes for pupils and families

A number of other outcomes were cited by mentors, school staff, parents, carers and pupils (across the 40 pupil case studies), including:

- Attendance at exams.

- Improved attainment in school.

- Improved understanding and management of emotional responses such as anger management.

- Financial support for families, such as support for heating, electric bills, washing machines, cooking equipment and bedroom furniture.

- Purchases of essential items for pupils including uniform, a bike and bus passes.

Case example

Improved attainment: Pupil 15 had a poor attitude to school and would often be late due to not having an established morning or bedtime routine. The mentor worked with the family to get Pupil 15 into school on time. The mentor explored why school was important and why they needed to attend and behave in lessons. The school reported a positive change in the pupil's behaviour, work, attainment and effort.

> "[Pupil] has improved drastically in Maths and English as a direct result of coming in more consistently and engaging in lessons." – *School staff member*

Case example

Attendance at exams: Pupil 16 was in year 11 at the time of their support and the mentor focused on helping them to attend GCSE exams and with college applications. As a result, Pupil 16 attended all GCSE exams and college visits and secured a college place for the next academic year. The mentor also accessed financial aid to help with household costs.

> "[Mentor] made [Pupil 16] realise that they needed the GCSEs to learn more and to get into the college they wanted." – *Parent or carer*

Financial support: Pupil 17 struggled with attending school on time. The mentor accessed financial support to purchase a bike so the pupil could get to school on time. At the end of the support the pupil attended school more regularly and was on time more often.

Outcomes for schools

Some positive outcomes for schools were also cited by school staff, including:

- Improved relationships with parents.

    "Mentors have been able to engage with parents that we had lost all effective communication with. They now attend meetings when needed and understand why we have followed certain attendance procedures with them." – *School staff member*

- Improved engagement for some pupils that the school had previously tried numerous approaches with.

    "One pupil had not attended school for 3 years – due to the efforts of the mentor they now attend school sometimes." – *School staff member*

- Improved school understanding (via the mentors) of barriers faced by pupils and families.

    "Mentors have been able to uncover barriers that pupils or parents may have never shared with us. If adults at home don't tell us what's happening with challenges surrounding income and paying for things like uniforms, we wouldn't know." – *School staff member*

Sustainability

To assess the sustainability of outcomes, there is a need for years 2 and 3 of the expanded intervention to collect quantified evidence on sustained improved attendance. Qualitative evidence from this pilot evaluation presents a varied picture regarding the extent to which better attendance and other outcomes are likely to be sustained beyond the involvement of mentors with pupils and their families.

Some mentors and school staff identified mentor activities and approaches they thought would support sustained improvement, including, for example:

- Skills development undertaken with pupils to address some of the underpinning barriers to attendance, including anger, time or anxiety management strategies.

- Communication and support for families such as to develop a better understanding of the importance of school and build routines and practices at home.

- Being explicit that the support is time limited: letting pupils and families know that mentor support would not always be there and so there was a need to work on independently addressing barriers and developing resilience.

- Post intervention contact, such as regular check ins or providing pupils with the option of messaging should they need to.

The 40 pupil case studies also included some positive feedback from pupils and parents that barriers had been addressed that would likely lead to some sustained change, for example:

- Changes in pupil attitudes: pupils were proud of the changes made, more aware of the importance of school and implications of not going, or more career focused and wanting to do well in further studies.

  > "I know I can contact [mentor] if I need to. I don't want to though. I want to prove to myself that I can keep up my better attendance on my own." – *Pupil*

- Skills development: pupils continued to use new skills, such as managing emotions, independent routines or anxiety coping strategies, beyond the point at which mentor support was provided.

- Bullying was addressed or stopped.

There was, however, some feedback that the improved attendance achieved during the intervention may not continue beyond the point of mentor involvement:

- Some pupils expressed concerns about mentors "leaving" them, or not knowing who to speak to if they struggled again.

  > "I don't want to stop my sessions with [mentor]. I wouldn't know who to go to if something kicks off again." – *Pupil*

- Some parents and schools commented on attendance gradually or abruptly declining as the mentors' support ended.

  > "I can already see them slipping. The friends they hang around with now are all truanting lessons or not going to school. I can see [pupil] falling back into bad habits and copying their friends." – *Parent or carer*

- In some cases, there was a lack of resilience amongst pupils: if they had time off due to illness or holidays they needed support to build up routines again.

Suggested features of the Watchtower Project delivery model that could be developed or adjusted to better support sustained outcomes for the rollout of the project in years 2 and 3 included:

- **Reduce over dependency on mentors:** In some cases, mentors and school staff explained that short-term actions had been taken to get the pupils physically into school (picking up from home, offering incentives) but some mentors had not always been successful at building resilience or, in a few cases, overcoming the actual barriers to attending school (for example, building up pupil or family skills, changing attitudes or routines). Alongside this, some pupils and families had developed an over dependency on mentors achieving the change required. This view was shared by some schools and parents.

- **Focus on exit planning:** There was the potential for mentors to develop more explicit exit plan strategies for pupils, including communication with, and actions for, schools. This might include, for example:
  - An identified member of school staff to be a point of contact for the pupil or to check in with them.
  - Sharing strategies with school staff that mentors had used with pupils during their sessions.
  - Agreed times after the intervention has ended for the mentors to check in with or touch base with the pupils they had supported.

The development of more formal exit plan strategies is dependent on effective communication with relevant school staff as well as the schools' capacity to provide any ongoing support. There was some evidence that a schools' capacity to engage in additional support and alterations, and their attendance management approach may act as barriers themselves to improving attendance for some pupils. This may therefore continue to act as a constraint on any sustained improvement. Some of the successes and challenges associated with mentors' engagement of and communication with schools were discussed in an earlier section.

Conclusions and recommendations

Understanding the intervention

Through the Watchtower Project pilot, attendance mentors in Middlesbrough supported pupils to attend school more regularly by helping them to address current barriers to attendance. Mentors provided one to one support to pupils and parents which sought to improve pupil wellbeing, provide direct support to increase attendance, access financial support and change routines, behaviours and attitudes. There was some variance in mentor practices with the potential for more explicit guidance on the mentor role.

Engagement with the intervention

Schools and a few early help services made a total of 339 referrals to the intervention. Around two-thirds of these (223 referrals) were either completed or being provided with ongoing support at the end of October 2023. Around a third of cases (116) were closed early. This was primarily due to families opting out or not engaging with the mentors.

Pupils, parents and carers were more likely to engage with the intervention if they understood that the mentor support was independent from the school or other support agencies. Where attendance issues were more engrained and families had multiple services or agencies involved in the past, school staff and mentors found it more difficult to engage families. Pupils, parents and carers that did engage particularly valued the continuity, responsiveness and solution-focused nature of the mentor role.

In a minority of cases, other services worked with families during the period of the mentor intervention. This included early help and social care services and some more targeted support linked to for example mental health or domestic abuse. Mentors also signposted to and made referrals to other support services, including mental health agencies and for SEND assessments.

Outcomes and impact

Outcomes from the mentor support provided through the Watchtower Project pilot included increased attendance, improved mental health, better routines and attitudes to learning, engagement in positive activities and financial barriers addressed. For some pupils, the attendance improvements achieved would likely be sustained beyond the life of the intervention, Equally, in other cases attendance had declined or the improvements observed were unlikely to be sustained. In these cases, there was the potential to reduce pupil over dependency on mentors and provide a greater focus on exit planning strategies.

Understanding effective practice

Mentors, school staff, pupils, parents and carers identified several features of the Watchtower Project intervention model that contributed towards better attendance and other outcomes for pupils and parents. These successful aspects would be important to maintain through delivery of years 2 and 3 of Watchtower Project, and also may be useful to consider for the delivery of other similar mentor based programmes. Mentors had:

- Enabled some continuity of support, which was flexible and responsive to individual pupil and family needs.

- Provided pupils with one to one support, through coaching and discussions, and an individual to listen to and understand barriers from the pupils' perspective.

- Supported the identification of flexible and additional support or alterations with schools.

- Facilitated improved relationships between pupils and families and the school or specific teachers.

- Developed a greater understanding amongst pupils and families of the importance of school and the consequences of not attending.

- Provided access to funds to address families' financial barriers (uniform vouchers, bedroom furniture, help with energy bills).

- Offered practical support and solutions to get pupils into school (picked up from home, financed a bike or bus pass to get to school, spent time gradually reintroducing to school).

- Undertook exit planning activities to support sustained improvements (embedding routines at home or identifying school staff to be a contact for the pupil post mentor support).

Aspects of the way in which mentors delivered their role were also identified as success factors, including that mentors:

- Were independent from the school, which often helped with initial engagement of pupils and families.

- Spent time developing relationships with pupils and parents.

- Provided regular updates and information to parents and carers and were able to maintain communications with pupils through phone and text messaging.

- Had awareness of the local area, the school or had the required professional knowledge and skills.

Some project inconsistencies and challenges were faced to varying degrees across mentors and schools. These may have affected both the nature of the role delivered by

mentors but also the ability of mentors to impact on improved attendance and other positive outcomes for some of the pupils supported. They included:

- Capacity constraints for some mentors linked to staffing shortages, uneven referral and allocation profile, and perceptions of excessive caseload expectations.

- Some mentors delivered, or schools expected them to deliver, activities outside of their remit such as academic tutoring or internal behaviour management support.

- Different communication practices between mentors and schools, with the potential for more structured check ins and information sharing in some cases.

- Variable responses across schools in relation to mentor suggestions for additional support or alterations. The capacity and approach of schools to attendance management sometimes affected the ability of mentors to address some pupil barriers.

- Evidence in some cases that improved attendance achieved during the intervention may not be continued beyond the point of mentor involvement. There was some overdependence on mentors, a lack of resilience amongst pupils, or insufficient exit planning activities.

Recommendations

There was an opportunity for the project to reflect on some of the challenges experienced during the first pilot year. It would be important for years 2 and 3 of the Watchtower Project to build on and further test some of the approaches and lessons established.

1. **Engage and encourage referrals from schools**: The Watchtower Project mentor team should share experiences of school practices for referrals. This includes how link mentors engaged with and secured commitment from the "right" school staff to make the referrals; and how some schools have embedded their referral approach and successfully engaged with mentors. The Watchtower Project senior leaders should build on this to provide guidance to the rollout area teams and develop the referral process for years 2 and 3 delivery. As part of this, just over 100 additional referrals will be added to target numbers for years 2 and 3 to account for the those that did not progress in year 1.

2. **Mentor activities:** The Watchtower Project mentor team should share experiences to help develop a clearer understanding of what works or not in different circumstances to achieve positive outcomes for all pupils supported.

3. **Caseloads:** Senior leaders in the Watchtower Project team should consider overall caseload expectations and allocations, and whether this could or should be adjusted to ensure more consistent model fidelity.

4. **Define expectations:** Senior leaders in the Watchtower Project team should define (more explicitly) and agree expectations for mentors and schools, including for:

- **Exit planning:** Mentors should take actions to minimise pupils' over-dependency, support longer-term change and enable transition once mentor support has ended.

- **Communication with schools:** In initial discussions with schools, link mentors should set out expectations both for mentors and school staff. This could include sharing a formal agreement for schools to sign up to, to cover, for example:
  - The **role and activities that the mentor** will (and will not) deliver.
  - Regular **points of communication** such as
    - Referral stage (so school staff can tell mentors what they know about barriers to attendance for the pupils referred).
    - During delivery of the intervention (provide updates, check ins).
    - For exit planning.
  - **Expectations of school staff** to support and liaise with mentors regarding individual pupil and family needs. Notably to:
    - Consider and make suggested school day alterations (and have the right staff in place to organise this with mentors).
    - Support and take actions for exit planning for pupils.

5. **Mentor guidance:** Building on recommendation 4, senior leaders in the Watchtower Project Team should update guidance and expectations for the mentor teams in all rollout areas.

6. **Theory of Change (TOC):** The Watchtower Project team and DfE policy leads should further understand and define the TOC, to ensure it can be tested and evaluated further in years 2 and 3 of the intervention.

7. **Impact evaluation:** To provide a more robust understanding of the impact of the Watchtower Project, a larger scale and longer term impact evaluation should be undertaken for years 2 and 3 of the intervention. This will need to build on improved data collection (pupil level information for all those involved including pupil identifiers and attendance statistics), quality and consistency to ensure that initial and sustained attendance outcomes can be accurately assessed and potentially compared to a counterfactual.

Appendix 1: Evaluation framework

1. Understanding the intervention:

   - What is the nature of the attendance mentor intervention? For example, what work is undertaken, who is involved?

   - How and where is the intervention delivered? For example, in school, home or community and face to face, phone or text?

   - How much interaction do mentors have with pupils and families per week overall? How long do interventions last?

   - Where there are multiple barriers to attendance, how do mentors prioritise what to tackle?

   - What supports or is a barrier to successful implementation of work undertaken by the attendance mentors? For example, pupil has mental health issues but there is a long waiting list for specialist support.

   - Who is actually referred to the attendance mentor intervention and by whom?

2. Engagement with the intervention:

   - Which pupils, families and schools engage with the service?

   - What are the reasons for non-engagement or dis-engagement?

   - How and what does the delivery partner do to engage with pupils, schools and families?

   - What are the experiences of pupils, schools and families of working with the attendance mentors?

3. Working with other services:

   - Which other services are pupils, families and schools accessing?

   - What support do they receive from these services that may impact on school attendance or the management of attendance?

   - How does the attendance mentors service engage or collaborate with these other services?

4. Outcomes and impacts

   - Does the work of the attendance mentors:
     - change pupil behaviour, socio-emotional wellbeing and perceptions of themselves and their school?
     - impact on pupils from the perspectives of their families and their schools?

- o impact on the behaviour or perceptions of the pupils' family towards the pupil?

- o impact on school culture or approach to management of attendance?

- Does the intervention change school attendance rates of the pupils? What has been learned about how to improve school attendance?

5. Understanding effective practice:

- Are some pupil groups, schools or issues benefiting more or less from the intervention than others?

- Which components of the intervention are most or least effective?

- What are the opportunities, if any, for refining the intervention or its implementation to increase its success?

- Are there any unintended consequences of the intervention?

Appendix 2: Evaluation methodology

A mixed method approach was undertaken to address the objectives of the evaluation. The nature of the intended impact of the Watchtower Project combined with the barriers faced by the pupils and parents or carers involved required the evaluation to develop an in depth qualitative understanding of the issues faced, support delivered, and the potential and actual changes and outcomes achieved for pupils and families. Equally, it was important to analyse available quantitative data such as changes in attendance levels and comparative pre and post self-assessment outcomes measures that were implemented by the mentors.

Evaluation activities included:

- Development of a theory of change (TOC). This was initially drafted by DfE policy leads, then developed through workshops with DfE, senior leaders from the Watchtower Project, and mentors. Through this process, activities, outputs and outcome measures were further defined and underpinning assumptions and influencing factors were identified.

- A review of 113 pupil action plans, completed by mentors at the start, mid-point and end of the intervention with individual pupils.

- Analysis of quantitative data including referral, attendance, and outcome star data.

- Interviews with stakeholders, including project managers, mentors, school staff, pupils and parents or carers.

- For 40 of the pupils supported in the pilot, triangulated analysis of evidence from action plans, attendance and outcome star data, and perceptions from the mentor, school staff, pupil, and parent or carer.

Action Plans

Pupil action plans were completed by mentors for each pupil that they supported. A total of 113 were reviewed as part of the evaluation, with quantitative and qualitative information extracted and summarised in an excel spreadsheet. The information was analysed for five core aspects addressed in the action plans which were:

- Concerns and barriers to attendance faced.

- Goals set.

- Mentor activities delivered.

- Family and young people's voice.

- Outcomes.

A coding framework was developed for each aspect, resulting in a summary of the most common themes identified or addressed.

Quantitative data

Records were provided in October 2023 for 339 cases referred to the Watchtower Project. This included:

- Type of referral: severe or persistent.

- Start and end dates.

- Mentor allocated.

- Pupil characteristics: sex, date of birth, age, school year, SEND, social care status.

- Year to date attendance at start and end of the intervention.

- Outcome star ratings across six themes, at start, mid and end points.

Two rounds of data checking was undertaken. A range of missing data, inconsistencies and errors were identified including incomplete data and uncertainty about end dates. These were addressed where possible by the Barnardo's team and a final updated dataset was supplied by the end of October 2023.

The data was reviewed in order to categorise the status of each of the 339 referrals as shown in Table 4 overleaf.

These categories were used for the subsequent analysis of the wider datasets. This included:

- Assessment of trends across referral and pupil characteristics.

- For the 123 completed cases, comparative assessment of pre and post attendance rates and outcome star ratings.

Table 5 Status of referrals (on 23 October 2023) made to the Watchtower Project

Referral status	Number
Unsuitable referral	15
Closed	101
Closed reason: engagement	46
Closed reason: opted out	47
Closed reason: change in circumstance	8
Completed	122
Completed status: completed data	86
Completed status: completed data (no mid star)	27
Completed status: no end attendance	1
Completed status: no end star	2
Completed status: no end date	6
Still supporting	101
Total	**339**

Source: Barnardo's Management Information (23 October 2023)

Attendance data

Prior to analysing the attendance data, a further data consistency check was undertaken. Three issues were identified that affected the accuracy and comparability of the data available:

- One-third (42) of cases had finished in the Autumn Term of 2023. This meant that the YTD attendance figures provided were not comparable over academic years.

- Errors were identified in 10 cases, whereby the change in attendance rate calculated was not possible given that the number of days attended exceeded the number of available days for attendance during the intervention period.

- Given these data quality issues and the inconsistencies previously identified, there were uncertainties about the remaining attendance data used for analysis.

Analysis of attendance rates for the remaining 64 cases for which data was available included:

- Direct comparison of pre and post attendance rates to establish a change from start to end of the intervention.

- Use of intervention start and end dates to calculate an attendance rate for the period whilst pupils were supported on the intervention. First, the difference in YTD attendance rates at start and end of intervention was used, alongside start and end dates, to establish the number of days actually attended whilst the intervention was being undertaken. This was divided by the total number of possible days of school attendance available between the start and end dates of the intervention.

- Comparison between year to date start and during intervention rates to provide an indication of shorter-term change.

- Further data interrogations to consider any movements out of the severe and persistent absence categories.

Outcome stars

Outcome stars were a tool for measuring change for the pupils supported by the Watchtower Project. They were developed by the Barnardo's team, building on similar tools that they had used with young people involved in other initiatives and support. An outcome star included 6 measures, each with 5 ratings statements that pupils would choose based on how they felt or assessed their position to be at the point at which they were asked. The 6 measures were:

- Mental health and wellbeing.

- Structure and routines of family life.

- Attendance at school.

- Attitude to learning.

- Engagement in activities in and outside of school.

- Feeling listened to and understood.

Mentors discussed and obtained ratings from the pupils they supported at the start, midpoint and end of the intervention. Feedback from some mentors during the evaluation indicated that sometimes ratings would decline between start and mid points. This was not necessarily always because the pupil felt their situation had worsened but rather because (due to the work of the mentor with them) pupils were more able to be open and had a greater understanding of how they felt about the issues.

As a new tool, the outcome star developed for this intervention had not been previously tested or validated. Equally, there was some lack of independence given that mentors facilitated completion of the outcome stars for pupils that they were supporting.

Analysis of the outcome stars involved comparing start and end outcome star ratings for 127 cases (including some classified as ongoing support as they had no end date supplied but had provided end outcome star ratings). The metrics considered included:

- Average change and standard deviation for each outcome theme.

- Variance within outcome themes in relation to the number of pupils recording improvements, declines or no change.

- For individual pupils, any variance in change across themes.

Statistical Methods

All analyses compared the pre and post intervention scores. As the same pupils were evaluated at both timepoints, the analysis was performed using the paired t-test. The statistical significance of the results was determined based on the size of the p-values from the analyses. P-values of <0.05 were considered to be statistically significant.

The analyses examined the change in scores from the pre to the post intervention timepoints. A summary of the results is shown in Table 5 below. The first figures are the number of pupils in the analysis. The mean and standard deviation scores at each time are shown, along with the mean change between timepoints and corresponding confidence interval for the change. P-values indicating the significance of the change are shown in the final column.

The results suggested highly statistically significant reductions in all scores from the pre to post measurements. All scores reduced, on average, by approximately one-unit between timepoints.

Table 6 Summary statistics comparing pre and post intervention outcome scores

Outcome	n	Pre Mean ± SD	Post Mean ± SD	Change Mean (95% CI)	P-value
Mental health	127	3.4 ± 1.3	2.3 ± 1.1	-1.0 (-1.2, -0.8)	**<0.001**
Family routines	127	3.1 ± 1.2	2.2 ± 1.1	-0.9 (-1.0, -0.7)	**<0.001**
School attendance	127	3.5 ± 1.3	2.4 ± 1.4	-1.1 (-1.3, -0.9)	**<0.001**
Attitude to learning	127	3.5 ± 1.2	2.5 ± 1.2	-1.0 (-1.3, -0.8)	**<0.001**
Engagement in activities	127	4.0 ± 1.3	3.0 ± 1.4	-0.9 (-1.2, -0.7)	**<0.001**
Feeling listened to	127	3.3 ± 1.2	2.3 ± 1.1	-1.0 (-1.2, -0.8)	**<0.001**

Statistical significance was determined based on the size of the P-value. P-values of <0.05 were considered to be statistically significant.

Source: Barnardo's Management Information (23 October 2023)

Quantitative data quality and consistency

Given the various quality and consistency issues discussed above, the assessment of performance using quantified data should be viewed as indicative only and in the main report is considered alongside more qualitative perspectives.

Qualitative data

Interviews were conducted with project managers, mentors, school staff, pupils and parents or carers over two fieldwork periods. The first round of fieldwork took place between May and July 2023 and the second in October 2023. Views were sought on the range of themes included in the Evaluation Framework (Appendix 1) including mentor recruitment and training, effectiveness of referrals and delivery, tapering of support, outcomes and impacts achieved, and sustainability of outcomes observed.

All members of the mentor team that were available (there were some that had left the team before the evaluation fieldwork started) were interviewed as part of the evaluation. Mentors also provided feedback on research tools as part of a co-production approach and contributed perspectives through theory of change and feedback sessions with the evaluation team.

A purposive sampling approach[38] was adopted to engage school staff, pupils, and parents or carers in the evaluation. For schools, this included a mix of school phases, geographies and volume of school referrals. For pupils and parents or carers, mentors obtained informed consent[39] before passing details to the evaluation team to follow up. Guidance was provided to include pupils that were near the end of or had completed the intervention, and a mix across school phases and year groups.

Most evaluation discussions with pupils were conducted face to face in school, with a small number undertaken over the phone. Interviews with parents were mostly undertaken over the phone. Researchers reviewed with participants the informed consent information at the start of each interview, covering the purpose of the evaluation, confidentiality, safeguarding, that participation was voluntary and the right to withdraw consent at any point.

Discussions with both pupils and parents or carers were tailored to the needs and contexts of each interviewee, with a lead taken from the mentors on how they had engaged with the young people concerned. Researchers were mindful of the potential sensitivity of issues being addressed and the potential impact on participants. A set of

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[38] Purposive sampling involves selecting research participants 'on purpose' so that they have the characteristics you need in your sample.
[39] Informed consent materials were developed and refined through a co-production group including mentors, pupils and parents or carers.

research tools including different styles were developed for use as appropriate, such as the use of visual representations, scales, smiley faces, blob trees, and large print.

A total of 12 schools were engaged in the fieldwork providing interviews with school staff, pupils, parents or carers, or a combination of these.

In total, the following stakeholders took part in interviews:

- 6 mentors.

- 11 school staff.

- 36 pupils.

- 30 parents or carers.

- 2 project managers.

A written summary of each qualitative interview was produced. Thematic analysis was undertaken to identify commonalities and differences across and between stakeholder groups. This was further developed through the case study assessment discussed below.

Triangulated case studies

Building on the evidence collected from action plans, quantitative data and qualitative stakeholder interviews, we developed individual case studies for 40 of the pupils supported by the Watchtower Project in its pilot year. In most cases (23), researchers were able to speak to 3 or more of the stakeholders (pupil, parent or carer, school staff and mentors). In others, the perceptions of 1 or 2 stakeholders were available.

The evidence available for each pupil was triangulated to develop an in depth understanding of the barriers to attendance faced, the mentor activities delivered, and the progress and outcomes achieved. Contribution analysis was undertaken with a focus on relationships across the data to draw descriptive findings. Validation of individual case findings was undertaken through research team meetings to share, challenge and validate findings across aspects of the quantitative and qualitative data collection.

The triangulated case study evidence was collated in an excel spreadsheet to enable thematic analysis across the 40 cases. This was focused on identifying commonalities and differences to develop findings clustered around themes. The coding frameworks developed for the action plans analysis were developed further to classify and document key features which included:

- Reasons for low attendance and challenges faced.

- Activities delivered by mentors.

- Features of delivery: length of support, regularity of sessions, tapering.

- Changes achieved for pupils and families.

- Change in attendance over the life of the intervention.

- Other outcomes reported: school and activities, relationships, wellbeing, challenges, routines, behaviour.

- Likely sustainability of outcomes achieved.

- Success factors of the intervention.

- Intervention areas to improve.

Individual case studies were used to demonstrate and provide examples for the key findings throughout the main report.

Appendix 3: Theory of Change

Situation	The intervention outlined in this report focuses on the pupils with the most entrenched issues with absence from school.	**Aims**	Sustained positive engagement and attendance in education, employment or training, leading to improved attendance, reduction in risky behaviour, and wider social and economic impacts.

Inputs	- Central Government Funding - £2.32 million over 3 years - Children's Service Manager - Attendance mentors – 5 fulltime and 1 parttime mentors (one lead) in Middlesbrough - Link mentors - School contacts and liaison - LA link and other services - Recruit, train, and performance manage attendance mentors - Promotion, engagement, information materials

Attendance mentors working with LA and schools

Activities	Outputs	Short term outcomes	Long term outcomes
Engage: Link mentors engage with schools. **Allocate:** CSM allocates referrals to schools. **Refer:** Schools identify and select pupils, discuss with link mentor and complete referral forms. **Share data:** Schools share attendance data. **Liaise:** Link mentors mediate with schools to address individual barriers	Number of schools engaged. Number of pupils referred (T=335): - persistently absent - severely absent Number of signposts to other services.	Influence school attendance practice for individual young person and family. Strengthened relationships between schools and the young person and their family.	Improved whole school attendance practice.

Attendance mentors working with pupils and families

Activities	Outputs	Short term outcomes	Long term outcomes
Match: Match referred pupils to attendance mentors. **Engage:** Activities to engage young people and their parents or carers (Weeks 1-4). **Assess:** Activities to understand and assess needs, barriers and difficulties (Weeks 4-6). **Bespoke support:** (Weeks 6-14): • One to one work with young people. • One to one and joint work with parents and families. • Targeted interventions. • Liaise with schools and other services. • Signpost to other services. **Taper support:** Activities to embed engagement and attendance at school (Weeks 14-20).	Number of pupils engaged and supported. Number of parents or carers supported. Number of individual action plans. Number of school and other liaison meetings. Number of services referred to. Average weeks delivered. Trusted relationships developed between young person and attendance mentor. Young person and parents or carers more aware of barriers. Young person and parents or carers better understand importance of attendance. Improved pupil access to referred support services.	Young person barriers and difficulties addressed. Improved parent or carer support of young person in education and school. Improved young person engagement in education and school. Improved young person mental health and wellbeing. Better young person attendance at school.	Sustained improvement in pupil's attendance. Consequent longer-term benefits for young person, including: • Improved attainment at Level 2. • Improved mental health and wellbeing. Reduction in the number of pupils becoming NEET (Not in Education, Employment or Training).

The following is a full text description of the Theory of Change (TOC) logic model figure presented on pages 80 and 81. A list of assumptions for the TOC are also listed.

Context and rationale

Breaking the cycle of poor attendance is critical to the Government's aim of 'levelling up' opportunity across the country. The intervention outlined in this report focuses on the pupils with the most entrenched issues with absence from school. Alongside providing direct support to these pupils, the DfE aims to improve the existing evidence base, so that all actors in the system have better information on how to address persistent and severe absence.

Inputs

Central Government Funding:

- £2.32 million over 3 years.

Delivery Staff:

- Children's Service Manager.
- Attendance mentors – 5 fulltime and 1 parttime mentors (one lead) in Middlesbrough.
- Link mentors.

Other stakeholders:

- School contacts and liaison.
- LA link and other services.

Recruit, train, and performance manage attendance mentors.

Promotion, engagement, information materials.

Activities (activities that are key to the project)

Attendance mentors working with LA and schools:

- Engage: Link mentors engage with schools.
- Allocate: CSM allocates referrals to schools.
- Refer: Schools identify and select pupils, discuss with link mentor and complete referral forms.

- Share data: Schools share attendance data.

- Liaise**:** Link mentors mediate with schools to address individual barriers.

Attendance mentors working with pupils and families:

- Match: Match referred pupils to attendance mentors.

- Engage: Activities to engage young people and their parents or carers. (Weeks 1-4).

- Assess: Activities to understand and assess needs, barriers and difficulties. (Weeks 4-6).

- Bespoke support: (Weeks 6-14)

  - One to one work with young people.

  - One to one and joint work with parents and families.

  - Targeted interventions.

  - Liaise with schools and other services.

  - Signpost to other services.

- Taper support: Activities to embed engagement and attendance at school. (Weeks 14-20).

Outputs (directly produced by the intervention)

Attendance mentors working with LA and schools:

- Number of schools engaged.

- Number of pupils referred (T=335).

  - Persistently absent.

  - Severely absent.

- Number of signposts to other services.

Attendance mentors working with pupils and families

- Number of pupils engaged and supported.

- Number of parents or carers supported.

- Number of individual action plans.

- Number of school and other liaison meetings.

- Number of services referred to.

- Average weeks delivered.

- Trusted relationships developed between young person and attendance mentor.

- Young person and parents or carers more aware of barriers.

- Young person and parents or carers better understand importance of attendance.

- Improved pupil access to referred support services.

Shorter-term outcomes

Attendance mentors working with LA and schools:

- Influence school attendance practice for individual young person and family.

- Strengthened relationships between schools and the young person and their family.

Attendance mentors working with pupils and families:

- Young person barriers and difficulties addressed.

- Improved parent or carer support of young person in education and school.

- Improved young person engagement in education and school.

- Improved young person mental health and wellbeing.

- Better young person attendance at school.

Longer-term outcomes

- Improved whole school attendance practice.

- Sustained improvement in pupil's attendance.

- Consequent longer-term benefits for young person, including:
  - Improved attainment at Level 2.
  - Improved mental health and wellbeing.
  - Reduction in the number of pupils becoming NEET (Not in Education, Employment or Training).

Impact

Sustained positive engagement and attendance in education, employment or training leading to:

- Improved attainment.

- Reduction in risky behaviours.

- Wider social and economic impacts.

Assumptions

School culture and practice:

- Commitment to improve school attendance

- Willingness to work with external delivery partner

- Good communication within school system: capacity to link and refer

- Access to local support services: for example, MHWB support, issues such as waiting lists, communication, engagement with attendance mentors

Skills and experience of attendance mentors:

- Understand education system, safeguarding work and processes

- Undertaken direct work with young person

- Understand barriers to attendance

- Deliver trauma-informed practice

- Engagement skills, personality to engage with young person

Intervention fidelity:

- Consistent and accurate delivery across attendance mentors; also linked to recruitment, training and performance management processes

Young person and family engagement:

- Comply with the intervention. Includes exploring reasons for non-engagement

Positive reputation of delivery organisation

Local demographics and culture:

- Factors impacting on attitudes and engagement in education locally

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