

Emotionally Based School Avoidance

Good practice guidance for schools and support agencies



Salford City Council

Contents

Contents	Page
Introduction	3
What is Emotionally Based School Avoidance?	4
Anxiety and EBSA	6
Risk and Resilience factors of EBSA	7
Identification, information gathering and planning	10
Information gathering and analysis	12
Working with the child / young person	14
Working with parents / carers	17
Working with school staff	19
Interpreting the information and planning	20
Action Planning	22
Interventions and strategies	24
Review	26
Whole school good practice	27
Transition	28
EBSA and Autism Spectrum Condition (ASC)	31
EBSA, school attendance and the law	34
EBSA and Requests for Education Health Care Needs Assessments	35
Further local support & resources	37
Further resources	44
References	46
Appendix 1 Profile of Risk of EBSA	48
Appendix 2 Information gathering from school	53
Appendix 3 Information gathering and integration	55
Appendix 4 Example support plans	56
Appendix 5 Whole School Audit	60
Appendix 6 – Strategies for Young people with ASC	62
Appendix 7—Example of a Solution Circle for Non School attendance, to explore behaviour drivers and functions of non-attendance (Early Help School Co-ordinator Team)	67
Appendix 8—Consent Form for EBSA Involvement	69
Appendix 9—EBSA Thrive Table and Good Practice Flow Chart	70

Introduction

Emotionally Based School Avoidance (EBSA) is a broad umbrella term used to describe a group of children and young people who have severe difficulty in attending school due to emotional factors, often resulting in prolonged absences from school.

It is difficult to estimate the prevalence of EBSA. The UK literature reports that between approximately 1 and 2% of the school population, with slightly higher prevalence amongst secondary school students, are absent from school due to emotional reasons (Elliot, 1999; Guilliford & Miller, 2015). It is reported to be equally common in males and females with little evidence of a link to socioeconomic status (King & Bernstein, 2001).

The impact of EBSA on young people is far reaching. Outcomes for young people who display EBSA include poor academic attainment, reduced social opportunities and limited employment opportunities (Garry 1996, Pellegrini 2007 and Taylor 2012). EBSA is also associated with poor adult mental health, difficulties can often quickly spiral requiring inpatient treatment (Blagg 1987 and Walter et al 2010).

West Sussex Educational Psychology Service have produced this set of documents relating to EBSA and have kindly consented to these being adapted for use by Salford City Council. The resources have been integrated within Salford's multi-agency approach to supporting pupils, families and schools with EBSA concerns and are referred to within the EBSA Thrive Support Pathway, contained within Salford's process document which sits alongside this guidance document.

This guidance is based on the current evidence base of the factors which are associated with positive outcomes. These include:

- intervening early;
- working with parents / carers and school staff as well as the young person;
- working in a flexible manner paying attention to the individual case and function served by non-attendance; and
- emphasising the need for rapid return to school alongside good support and adaptations within the school environment (*Baker & Bishop 2015*).

Salford have also adapted West Sussex's information booklets for parents, children and young people. Training workshops are also available for school staff to supplement this guidance, to support their effective working with children, young people and families.

This guidance, information booklets for parents/carers, children and young people and information regarding training can be found on the Salford's Thrive and Services for Schools pages:

<https://www.salford.gov.uk/ebsa>

<https://www.partnersinsalford.org/salford-0-25-advisory-board/salford-thrive-ehwb/ehwb-school-resources/emotionally-based-school-avoidance-ebsa/>

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What is Emotionally Based School Avoidance?

Definition:

Emotionally Based School Avoidance is a broad umbrella term used to describe a group of children and young people who have severe difficulty in attending school due to emotional factors, often resulting in prolonged absences from school. A clear distinction is made between those that are absent from school due to truancy and those that are absent from school due to the specific emotional distress that they experience around attending school (Thambirajah, Grandison & De-Hayes, 2008).

Although the literature in this area often cites the phrase *School Refuser*, this terminology could be considered misleading as the term 'refuser' implies that the young person has control over the school non-attendance. This is problematic as this terminology locates the 'problem' within the young person and detracts from environmental factors that could be considered instrumental in supporting a young person back to school:

"School refusal occurs when stress exceeds support, when risks are greater than resilience and when 'pull' factors that promote school non-attendance overcome the 'push' factors that encourage attendance"

(Thambirajah et al, 2008: p. 33).

Cause:

There is no single cause for EBSA and there are likely to be various contributing factors for why a young person may be finding it difficult to attend school. It is well recognised in the research literature that EBSA is often underpinned by a number of complex and interlinked factors, including the young person, the family and the school environment (Thambirajah et al, 2008).

However Kearney and Silverman's (1990) review of the literature indicates that there tend to be four main reasons for school avoidance:

1. To avoid uncomfortable feelings brought on by attending school, such as feelings of anxiety or low mood.
2. To avoid situations that might be stressful, such as academic demands, social pressures and/or aspects of the school environment.
3. To reduce separation anxiety or to gain attention from significant others, such as parents / carers or other family members.
4. To pursue tangible reinforces outside of school, such as going shopping or playing computer games during school time.

According to this model, the avoidance of uncomfortable feelings or situations described in the first two points could be viewed as negatively reinforcing the EBSA, whereas in the second two points, the EBSA could be seen as being positively reinforced by factors outside of school (Kearney & Spear, 2012).

Prevalence

The UK literature reports that between approximately 1 and 2% of the school population, with slightly higher prevalence amongst secondary school students, are absent from school due to emotional reasons (Elliot, 1999; Guilliford & Miller, 2015). It is reported to be equally common in males and females with little evidence of a link to socioeconomic status (King & Bernstein, 2001).

Difficulties children have in articulating their distress and the difficulties that parents / carers and school staff have in understanding the young person’s emotional experience of school are often key barriers in identifying and supporting young people at risk of EBSA (Thambirajah et al., 2008).

For some young people, the distress may be obvious in their presentation and chronic non-attendance. However for others, these difficulties may not be so easily identifiable. These young people may demonstrate sporadic attendance, missing the odd day here and there or particular lessons, or may only be able to attend school when provided with a high level of support and a modified timetable.

The onset of EBSA may be sudden or gradual. The literature suggests that there tend to be peaks in EBSA corresponding to transition between school phases (King & Bernstein, 2001).

It is also important to highlight that some young people with EBSA may appear to recover relatively quickly from the initial upsets of the morning and this can lead school staff and others to question the legitimacy of the EBSA; however it is important to hold in mind models of anxiety, as it is not unusual for the anxiety to quickly dissipate once the perceived threat is removed (Thambirajah et al., 2008).

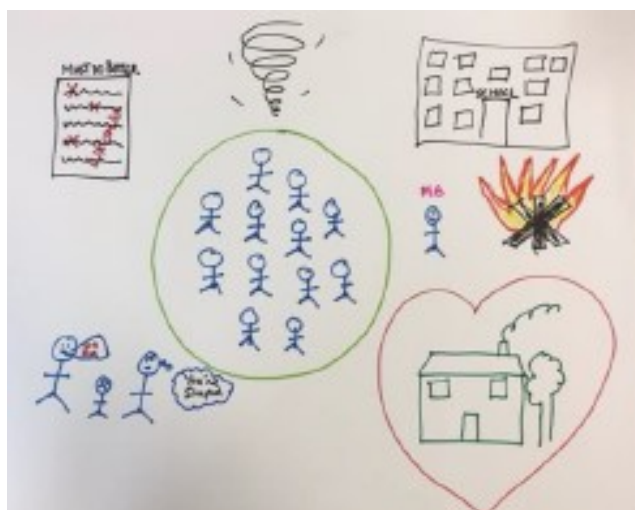


Figure 1.

Picture of a 14 year old her feelings are like a whirlwind where she is not in control, that the school is not a safe place, she worries something bad might happen, she sees school as having lots of people in it, but she is on the outside and that people are making fun of her. She has also indicated that she feels she is not doing well with her work and she loves being at home.

Anxiety and EBSA

Anxiety has also been identified as a key feature of EBSA. Although a certain level of anxiety is considered a normal and natural part of growing up, some young people may experience heightened levels of anxiety which impact on their functioning and school experiences.

When the anxiety is linked to school avoidance, the young person may experience anxious and fearful thoughts around attending school and their ability to cope with school. These feelings may also be accompanied by physiological symptoms of anxiety such as nausea, vomiting, shaking, sweating etc, and may start the night before, or even a few days before school.

In order to avoid these overwhelming emotions and the fear associated with school attendance the young person may withdraw from the situation, refusing to get ready for school or to leave the house or enter the school. The young person may also turn to hostile behaviours as a means to avoid the threatening situation and to try and control what feels like a very 'out-of-control' situation (Thambirajah et al., 2008).

These behaviours, and the avoidance of school, may then contribute to the maintenance of EBSA over time. Heyne and Rollings (2002) suggest that it is crucial to consider the child's perceptions of their ability to cope, including perceived social and academic competence, as negative thoughts about one's ability to cope can lead to further feelings of worry and if left unaddressed, may undermine attempts to improve attendance.

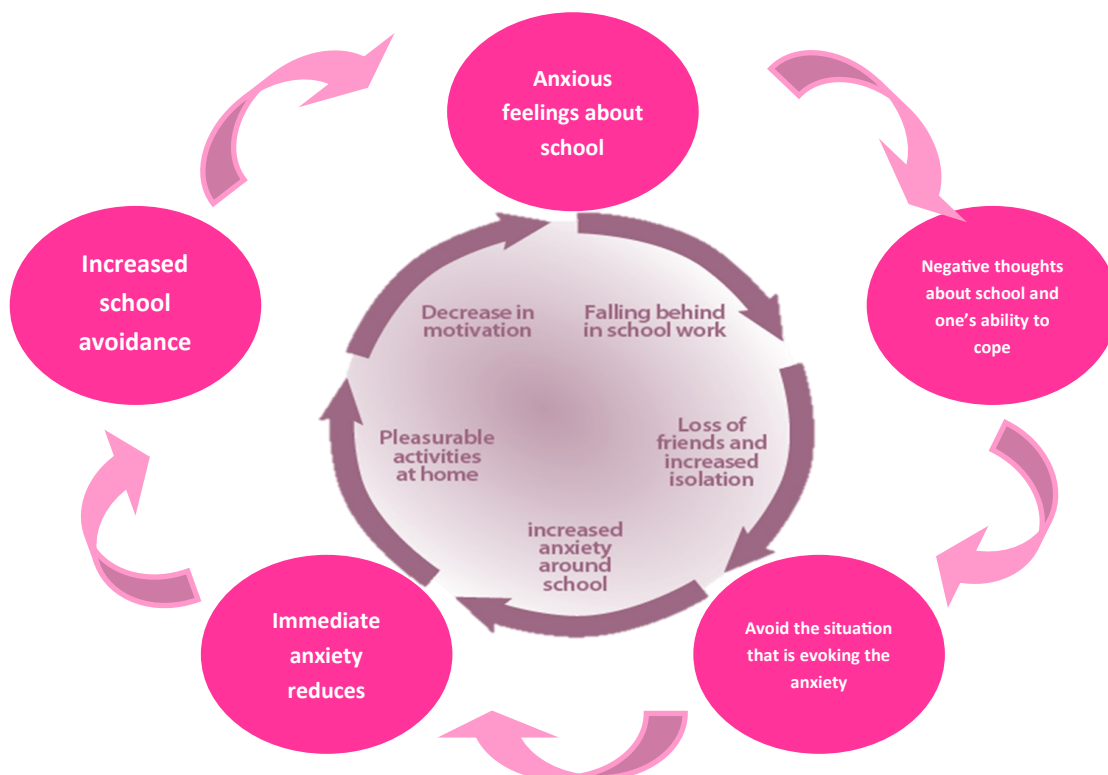
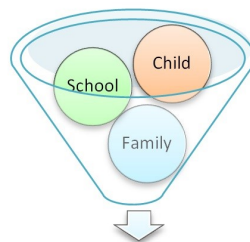


Figure 2. Diagram showing the initial anxiety causing the non-attendance and the secondary maintenance factors.

Risk and Resilience factors of EBSA

EBSA is a heterogeneous concept (Maynard et al, 2015). This means that it cannot be treated as a single condition. Different children will be hesitant to attend school for different reasons. It is usually a unique combination of various factors and their interaction rather than a single cause that leads to EBSA.

Risk: Just as with general mental health there have been factors identified that place children at greater risk of EBSA. It is usually a combination of predisposing factors interacting with a change in circumstances which leads to the pattern of behaviour described as EBSA. The predisposing factors may be present in the nature of the school, the child’s family or the child themselves.



School Attendance

The exact nature of the predisposing vulnerability and the precipitating events will vary according to an individual child’s unique set of characteristics, circumstances and experiences, but it is still possible to identify factors associated with that vulnerability and the potential triggers leading to EBSA. Being alert to these factors in relation to an absence from school can act as an early warning system enabling preventative action to be taken.

Factors associated with vulnerability of EBSA

School Factors	Family Factors	Child Factors
<ul style="list-style-type: none"> Bullying (the most common school factor) Difficulties in specific subject Transition to secondary school, key stage or change of school Structure of the school day Academic demands/high levels of pressure and performance orientated classrooms Transport or journey to school Exams Peer or staff relationship difficulties 	<ul style="list-style-type: none"> Separation and divorce or change in family dynamic Parent/carers physical and mental health problems Overprotective parenting style Dysfunctional family interactions Being the youngest child in the family Loss and Bereavement High levels of family stress Family history of EBSA Young carer 	<ul style="list-style-type: none"> Temperamental style reluctance to interact and withdrawal from unfamiliar settings, people or objects Fear of failure and poor self confidence Physical illness Age (5-6, 11-12 & 13-14 years) Learning Difficulties, developmental problems or Autism Spectrum Condition if unidentified or unsupported Separation Anxiety from parent/ carer Traumatic events

Resilience: When working with individuals it is really important to also identify and build areas of strength or resilience of the child, family and school which may help to ‘protect’ the child and promote school attendance. This may include:

- Developing ambition, aspiration and motivation
- Increasing confidence, self-esteem, self-efficacy, value in themselves
- Developing feelings of safety, security and a sense of belonging
- Having positive experiences where they can succeed
- Holding positive relationships with peers or staff
- Feeling listened to and understood
- Understanding the relationship between thoughts, feelings and behaviour
- Willingness to work in partnership between school, family and external professionals
- Developing parenting skills and understanding
- Flexibility of approaches within school, person centred listening to the voice of the child

Case study: Identifying risk and resilience factors

Alison has not attended school for three months. When the school nurse visited Alison, she locked herself in the bathroom and refused to answer any questions. The last time that she left the house was one month ago and her parents are becoming increasingly concerned about how isolated she is becoming.

On reflection, Alison’s parents thought that her problems began when she made the transition to secondary school. Alison had always been one of the most academically able in her class in primary school, but now she found herself in the top classes where there were many more bright students to compete against. Alison’s friends from primary school had gone to another secondary school in the area. Being a shy individual, Alison had not developed close friendships with any of her peers and she tended to tag along with a group of girls from her year instead. However, she was beginning to form a close friendship with one of these girls. Alison often complained of stomach aches and would ask to stay home from school or come home early. Soon before she had stopped coming to school altogether, Alison had discovered that some of the other girls in the group were making fun of her behind her back and leaving her out of social events.

The previous year, Alison’s mum had received chemotherapy after a cancer scare. Although she had now been given the all-clear, she had noticed that Alison had become much more protective of her. She constantly checked where her mum was and became distressed if she was late coming home from appointments. She frequently woke up in the middle of the night after having nightmares about her mother getting into serious difficulty or becoming ill again and dying.

Now Alison stays at home all day. She does not do any work apart from some household chores for her mother. She enjoys playing with her younger brother when he returns from school and sometimes will help him with his homework. Recently, Alison’s mum arranged for Alison’s friend from secondary school to visit the house. This meeting went well, with Alison smiling and laughing a lot, nearly behaving like her old self.

'Push' and 'Pull'

The literature suggests that these contributory factors of 'risk and resilience' can also be divided, and understood, in terms of 'push' and 'pull' factors.

- 'Push' factors (i.e. those that push the child towards attending school)
- 'Pull' factors (i.e. those pull the child away from attending school)

The literature indicates that EBSA is most likely to occur when the risks are greater than resilience, when stress and anxiety exceeds support, and when the 'pull' factors that promote school avoidance overwhelm the 'push' factors that encourage school attendance.

Example of 'Push and Pull' factors for Alison's case study

School

Home

Push (towards attending school)

- Academically bright
- Beginning to form a friendship

Pull (away from school, home factors)

- Change in family dynamics,
- Mum diagnosed with cancer
- Difficulties sleeping, night mares about mum dying
- Separation anxiety from parent/carer

Pull (away from school, school factors)

- Prolonged period of absence from school
- Isolated, not leaving the house
- Difficult transition to secondary school
 - Academic demands
 - Social difficulties, possible bullying
 - Separation Anxiety

Push (towards staying at home)

- Reduce anxiety around separating from mum
 - Reduce anxieties around attending school
- Not having to complete school work

Identification, information gathering and planning

School plays a key role in the identification of children and young people who are currently experiencing, or are at risk of EBSA. It is important for schools to develop effective whole schools systems to support young people, be vigilant to early indicators and employ a thorough assess, plan, do and review cycle placing the young person at the heart of the interventions.



Potential indicators

It is very important to be proactive with EBSA. The longer the problems remain unaddressed the poorer the outcome, as the difficulties and behaviours become entrenched. Schools need to be vigilant in monitoring attendance of young people, noticing any patterns in non-attendance or changes to behaviours.

A Profile of Risk of EBSA can be found in **Appendix 1 Profile of Risk of EBSA**. This can help practitioners identify areas of risk. The PRE schedule looks at 5 key risk areas for EBSA. The checklist is for use alongside the usual attendance monitoring systems in school, e.g. SIMS and consideration of patterns of attendance, to screen for possible EBSA in relation to non-attendance.

Possible indicators of EBSA include:
Difficulty attending school with periods of prolonged absence
Child reluctant to leave home and stays away from school with the knowledge of the parent/carer
For younger children reluctance to leave parents or get out of the car
Regular absence without indication of anti-social behaviours
Frequent absences for minor illnesses
Patterns in absences, for example, particular days and/or subjects, after weekends and holidays

Reluctance to attend school trips
The young person expresses a desire to attend classes but is unable to do so
Anxiety on separation and inappropriate dependence on family members e.g. worry expressed about the safety of those at home
Evidence of under-achievement of learning potential
Social isolation and avoidance of class mates or peer group
Challenging behaviours, particularly in relation to specific situations at school
Severe emotional upset with excessive fearfulness, outbursts of temper and complaints of feeling ill on school days
Depression and sense of isolation resulting in, low self-esteem and lack of confidence
Confusion or extreme absent mindedness shown in school due to lack of concentration resulting in, lower attainments
Physical changes i.e. sweating, sickness, aching limbs, headaches, panic attacks, abdominal pain, rapid weight loss or gain

Where significant risks of EBSA are identified, it's really important to gather further information from the young person, parent/carer and school staff involved with the young person and put into place strategies to support the young person as soon as possible. Swift action can prevent EBSA from becoming entrenched and result in much better outcomes. School should follow a thorough assess, plan, do and review cycle placing the young person at the heart of the planning and interventions.

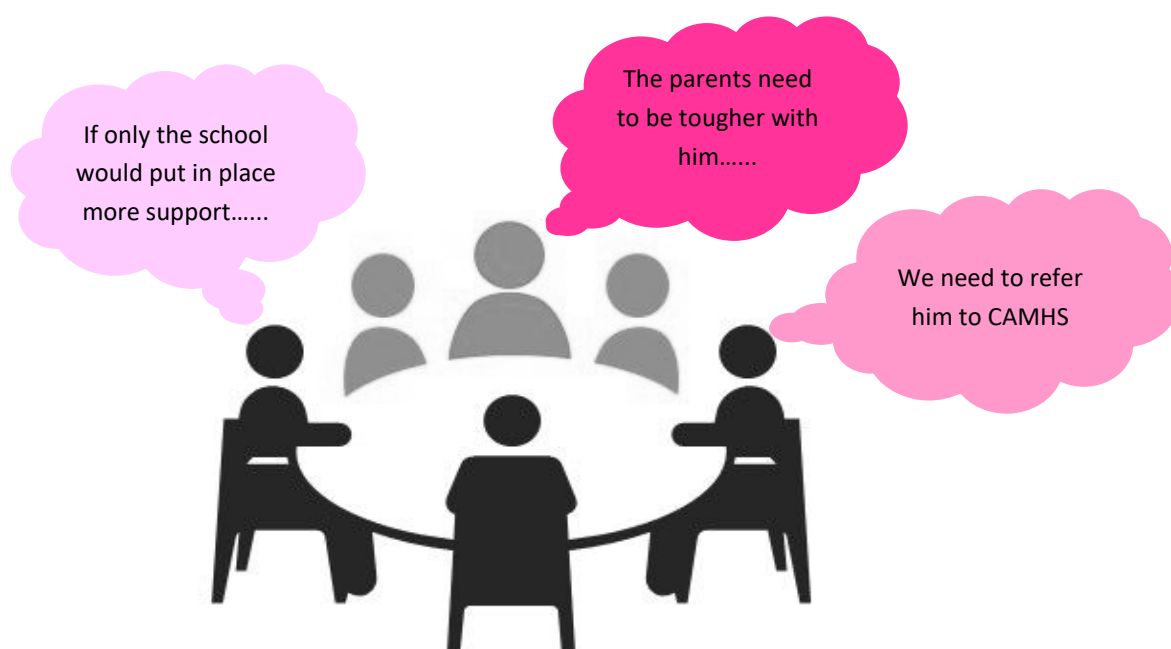


Information gathering and analysis

Once a difficulty has been identified there should be a prompt investigation into the reasons for the difficulties. In order for any intervention or support plan to be successful it is essential to gain an understanding of the various aspects causing and maintaining the EBSA behaviours. Thambirajah et al. (2008) state that the main aims of this analysis is to:

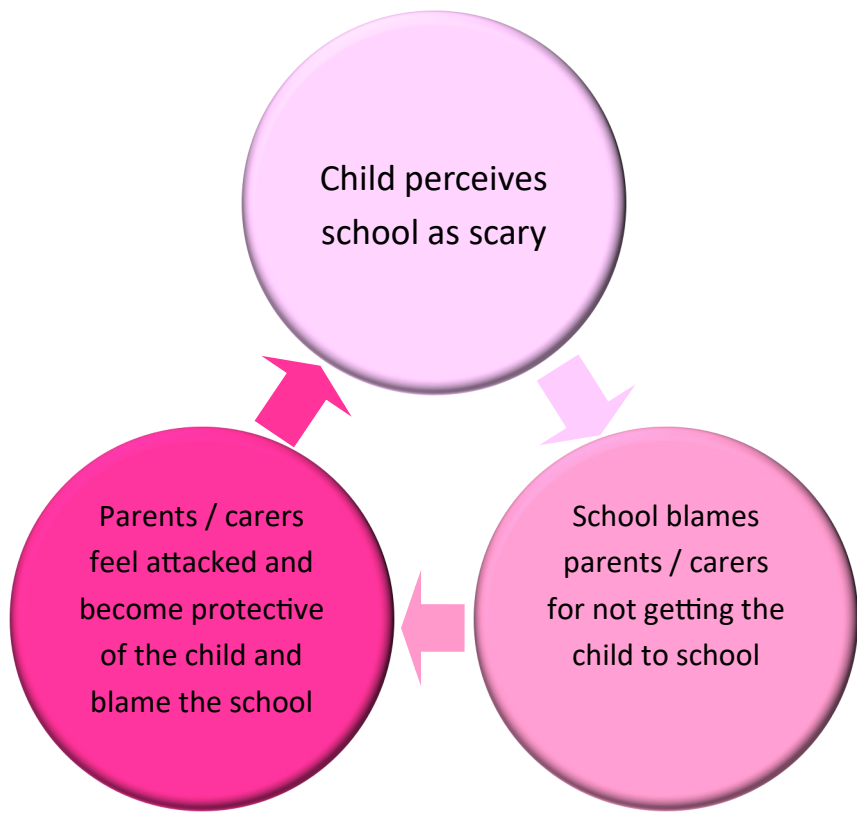
- To confirm that the child is displaying EBSA as opposed to truancy or parentally condoned absence (e.g. a solution circle for non-school attendance might be a good starting point, please see an example in Appendix 7)
- To assess the extent and severity of (a) a school absence, (b) anxiety and (c) ascertain the types of anxiety
- To gather information regarding the various child, family and school factors that may be contributing to the EBSA in a given child
- To integrate the available information to arrive at a practical working hypothesis as a prelude to planning effective interventions

It is often tempting to try to locate a simple reason and simple solution for the behaviour

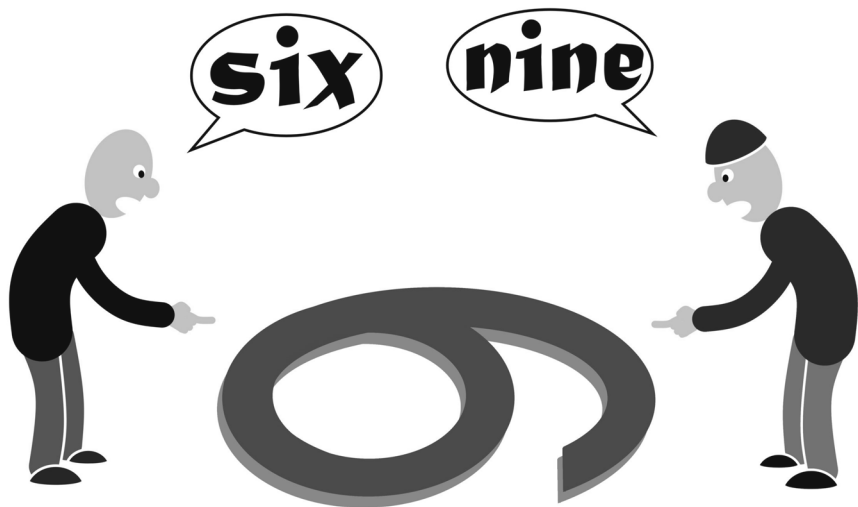


However as identified earlier it is often an interaction of a number of factors and trying to find simple causation often encourages blaming and individuals can then become anxious and defensive. Parents / carers may feel blamed for the absences, feel that their parenting skills are being criticised and they may be fearful that they will get into trouble or even be prosecuted for non-attendance.

Children may feel guilty or scared that they will be forced to attend school.



Each person may have a different perspective on EBSA and have a different story to tell. It is essential that different people’s views are respected and differences in views are acknowledged. When there is a difference of views it is often more helpful to focus on how the behaviour is occurring rather than why.



Due to the complex nature of EBSA no fixed ‘assessment process’ can be followed. However in all cases it is essential that the views of the young person, the family and key school personnel are gathered and listened to.

A range of tools are available to help schools and professionals access pupils' views regarding school. Some example tools are listed below. Please also see Appendix 4 for an example worksheet to gather/ record young people's views. Further information about specific tools to use are also covered in the EBSA training workshops for school staff and professionals.

Ideal Classroom - Williams and Hanke & Lego classroom - Faye Morgan Rose



This tool uses Personal Construct Psychology. Using either Lego or drawing it elicits the child's views about their ideal classroom.

<https://theidealclassroom.co.uk/>

Person Centred Planning



This range of approaches and tools is based upon a shared set of values that can be used to plan with a person- not for them. These tools can be used to help the person or organization think about what is important in their lives and also think about what would make a good future.

Card Sort Activity



These cards can be used flexibly to explore 'push' and 'pull' factors (see page 9) which may be pushing or pulling a young person from school and/or towards home, to gain an understanding of why a young person may not want to go to school (Dr. Clare Nuttall, Educational Psychologist).

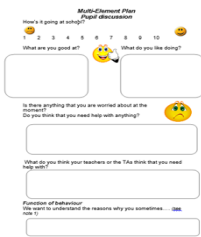
C.A.R.E Schedule

THE C.A.R.E schedule

Well-being factors	This is really true of me	This is quite true of me	This is only a bit like me	No problem
I often feel too tired for school	3	2	1	0
I don't feel very good about myself	3	2	1	0
I often feel sad or miserable and I can't shake these feelings off	3	2	1	0
I often worry a lot and can't seem to stop worrying	3	2	1	0
I don't have many friends	3	2	1	0
I have been bullied a lot	3	2	1	0
I am growing, changing physically and that sometimes worries or confuses me	3	2	1	0
I don't like to tell people how I feel	3	2	1	0
I guess the problems I have had aren't going to go away.	3	2	1	0
TOTAL				/27

This range of approaches and tools based upon a shared set of values that can be used to plan with a person- not for them. These tools can be used to help the person or organization think about what is important in their lives and also think about what would make a good future.

Multi-Element Plan (MEP)



Parent and young person questionnaires which explore more generally why a young person maybe experiencing school based difficulties (Derby Council, 2009).

School Refusal Assessment Scale—Revised

SCHOOL REFUSAL ASSESSMENT SCALE-REVISED (P)
Name: _____
Age: _____
Date: _____

Young person and parent questionnaire which explores four functions of school refusal/avoidance (Kearney and Albano, 2007).

- Please circle the answer that best fits the following questions:
- How often does your child have bad feelings about going to school because he/she is afraid of something related to school (for example, tests, school bus, teacher, fire alarm)?
- | | | | | | | |
|-------|--------|-----------|---------------|---------|---------------|--------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost Always | Always |
| 0 | 1 | 2 | 3 | 4 | 5 | 6 |

Parent version: <https://www.oxfordclinicalpsych.com/view/10.1093/med:psych/9780195308297.001.0001/med-9780195308297-interactive-pdf-004.pdf>

- How often does your child stay away from school because it is hard for him/her to speak with the other kids at school?
- | | | | | | | |
|-------|--------|-----------|---------------|---------|---------------|--------|
| Never | Seldom | Sometimes | Half the Time | Usually | Almost Always | Always |
| 0 | 1 | 2 | 3 | 4 | 5 | 6 |

Young person’s version: <https://www.oxfordclinicalpsych.com/view/10.1093/med:psych/9780195308297.001.0001/med-9780195308297-interactive-pdf-003.pdf>

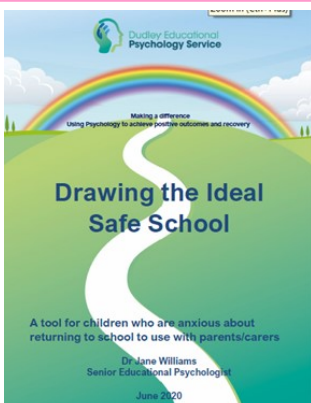
Drawing the Ideal School - Jane Williams and Diane Hanke(2007)



This tool uses personal construct psychology and drawing to gather young people’s views about the types of school provision they would like and find most helpful. It was developed for use with autistic pupils, but can be a useful tool to gather the views all young people.

<https://www.aetraininghubs.org.uk/wp-content/uploads/2012/06/3.2-The-school-that-Id-like.pdf>

Drawing the Ideal Safe School - Jane Williams (2020)



A tool combing drawing and talking for supporting pupils coming back to school post-COVID19.

https://drive.google.com/file/d/1DF9ie2Zr8rG_OXxt9pCKKDhgoE2EAmHZ/view

Working with parents / carers

As mentioned previously, parents/carers may find it difficult to talk about the concerns they have and the difficulties they experience in trying to get their child into school. It is important that school take time to build a collaborative partnership working together in the best interests of the child. Sometimes parents / carers may have had similar experiences to their child and may experience their own anxiety making it especially difficult for them.

During the initial meeting it is important to gather background information, establish the current situation and the parent/carer's views. Questions should be sensitive and the person asking should employ active listening skills, examples of questions can be found on page 18. It is advised that regular contact is made with parents / carers; school staff should identify who will be the **key person** to communicate with parents / carers and agree how they will do this.

Working with parents / carers is essential to successful outcomes. Whilst the focus is on the child, it is also important to remember that parents / carers may need their own support and consideration should be given to referrals to services such as those that can be found in the **Further local support & resources** section.



Areas to Cover	Example Questions
Developmental and Educational History	What was <i>s/he</i> like as a young child? Can you tell me about <i>their</i> early experiences at school? The primary school, at the start of secondary school?
Strengths, interests and aspirations	What is <i>s/he</i> good at? What do they like doing? Do they have any hopes for the future? Do they know what they want their life to be like when they are an adult?
Any potential changes or losses within the family or child's life	Can you tell me about your family? Who is in it, who is like whom. Who is <i>s/he</i> closest to? Have there been any changes within the family recently? (You could ask them to draw a family tree/genogram).
Relationships	Does <i>s/he</i> talk about any other children? What does <i>s/he</i> say? Does <i>s/he</i> talk about any adults within school? What does <i>s/he</i> say? Who does <i>s/he</i> get on with...who doesn't <i>s/he</i> get on with?
Academic progress	School should be aware if the young person has identified SEN needs and should ask about these needs and the support in place. If there is no identified SEN school should ask if they have any concerns, or if the child has spoken about difficulties.
The child's view what are their specific fears/worries	Has <i>s/he</i> spoken to you about what <i>s/he</i> finds difficult about school? What do they say?
The child's views, what is going well in school	Has <i>s/he</i> mentioned anything that is going well in school? (e.g. teachers, lessons, friends)
Behaviour and symptoms of anxiety	When <i>s/he</i> is worried what does it look like? What do they say they are feeling?
Typical day – when they go to school and when they don't go to school	Please describe a typical day when <i>s/he</i> goes to school from the moment <i>s/he</i> ...gets up until <i>s/he</i> goes to bed..... and when <i>s/he</i> doesn't go to school? What does <i>s/he</i> do when they do not go to school? What do other family members do?
Impact on various members of the family	How does <i>their</i> non-attendance impact on you? And on other family members? Who is better at dealing with the situation? Why?
Parental views on the reasons for the EBSA	Why do you think <i>s/he</i> has difficulty attending school? (ask each parent/carer separately) If (other parent/ sibling/Grandparent) were here what would they say? Are there any differences of views about the reasons and what should be done within the family?
Exceptions to the problem	Have there been times when <i>s/he</i> managed to get into school? What was different about those times?
Previous attempts to address the problem	What has been the most helpful thing that someone else has done in dealing with the problem so far? What has helped in the past when things have been difficult? What strategies have been most helpful so far in managing their anxiety?

Salford Education Welfare Service have compiled a specific list of questions and things to consider which schools may wish to use during conversations with parents / carers when discussing children's return to school following the COVID-19 school closures (please see the EBSA Thrive Support Pathway Process document)

Working with school staff

It is essential that representatives from schools seek information from members of staff who work most closely with the child or young person. We all respond differently according to the environment, situation or task and with different people. Each member of staff may have valuable information to help identify triggers for anxiety and strategies the young person responds positively to. In particular it is important to seek out the views of any members of staff the young person speaks positively about and any member of staff where relationships may be more difficult.

Key information to gather includes:

- The young person's strengths
 - What is going well
- Any difficulties they have noticed
 - Peer relationships
 - Relationships with adults
 - Response to academic tasks
- If they have witnessed emotional distress what this looked like and what caused it
- What support or differentiation is put in place and how the young person responds to this
 - Any ideas for further support

An example of a 'round robin' form can be found in **Appendix 2 Information gathering from school**. It is also essential to consider whether the child has unidentified special educational needs, medical needs or a disability. If they are not already involved school staff should consult with the school's special educational needs co-ordinator (SENCO).

Interpreting the information and planning

Following the gathering of information from the child, family, school and any other professionals it is essential that this information is pulled together and 'sense' is made of it. This supports the development of an overview of the whole picture and various factors involved are obtained. Potential hypotheses can then be formed. These should then inform the return to school support plan.

The form below is designed to help you integrate the information gathered from the young person, school and family. It is not designed to be a questionnaire but a tool to be completed after the information gathering to help you collate, integrate and analyse the information gathered from a variety of sources. A blank copy can be found in **Appendix 3 Information gathering and integration**.

Schools should seek multi-agency support through the EBSA Thrive Support Pathway via their link Education Welfare Officer or Early Help School Co-ordinator. This will ensure a co-ordinated and graduated response to assist in the identification of the function(s) of the EBSA behaviour and inform the subsequent action planning and intervention. A parent consent form for this pathway can be found in Appendix 8.

Description of Behaviour

- What is the current rate of attendance?
- Are there any patterns to non-attendance? Particular days or lessons?
- History of behaviour; when did it first occur, have there been similar difficulties?
- Behaviour and symptoms of anxiety – what does it look like? What does the child say about any specific fears and difficulties?

Risk Factors School, Child and Family

- Developmental and educational history (health, medical, sensory or social factors)
- Any changes in family dynamic? (Separation, loss, birth of a sibling, health issues of other family members)
- Any other needs within the family?

Strengths and Protective Factors

- What strengths do they have?
 - Do they have any aspirations or ambitions?
- What positive relationships do they have at home and at school (peers and staff)?
 - What positive experiences have they had at school?
- What was different about the times when the young person was able to get into school?
 - What has been helpful in the past?

Formulation & Integration of Various Factors

- What is people's understanding of why the young person is demonstrating these behaviours?
 - Are there any differences of views?
 - What risk factors have been identified (child, school and family)?
 - What strengths have been identified that can be built upon?
- **What is the function of the behaviour – is it:**
 - To avoid something or situations that elicit negative feelings or high levels of stress (e.g. fear of the toilets; the noise in the playground; lots of people moving all together in the corridors between classes, tests/ exams)
 - To escape difficult social situations (e.g. feeling left out at playtime; reading out loud in class or other public speaking group task; working as part of a group)
 - To get attention from or spend more time with significant others (e.g. change in family dynamic, concerned about the wellbeing of parent/carer).
 - To spend more time out of school as it is more fun or stimulating (go shopping, play computer games, hang out with friends).
 - Are there any maintaining factors?

Action Planning

After the information gathering and analysis process has occurred, a return to school or support plan should be made. The Thrive Table in Appendix 9 can support with this.

All plans need to be co-produced with parents, the child and any other appropriate agencies. All parties need to be signed up.

Each plan will be different according to the actions indicated by the assessment, what worked with one child will not necessarily work with another.

The plans should always be realistic and achievable with the aim of reintegrating the young person. An overly ambitious plan is likely to fail. The return should be gradual and graded with recognition by all that a 'quick fix' is not always possible. A part-time timetable may be necessary as part of this process but this should always be temporary and not seen as a long term option as all children are entitled to a full-time education. Extended periods of time outside of school can also make it harder to return.

All parties should be aware that there may be difficulties implementing the plan and these should be anticipated and solutions found. An optimistic approach should be taken, if the child fails to attend school on one day, start again the next day. Parents and school should anticipate that there is likely to be more difficulty after a school holiday, period of illness or after the weekend.

At the start of the plan the child is likely to show more distress and all should be aware of this. School staff and parents need to work together to agree a firm and consistent approach. Any concerns about the process should not be shared with the child and a 'united front' is recommended. Any concerns should be communicated away from the child.

Schools should take an individual and flexible approach to the young person's needs. All school staff that will come into contact with the young person should be aware of the return to school plan and any adaptations to normal routines or expectations that are in place to support the child.

Once actions within a support plan are agreed with a young person, (e.g. returning to school in very finely graded steps) stick to what has been agreed for that week, even if things seem to be going really well. Pushing things further than agreed can heighten anxiety, reduce trust and backfire overall.

The format of the support plan should be flexible. If appropriate a young person's version should be created. Examples of a support plan can be found in **Appendix 4 Example Support Plans**.

Literature has identified key elements of support that should be in place in order for reintegration action plans to be successful.

Key Elements of Any Plan	Completed? Who/When?
Direct telephone contact between parent/carers and key workers in school. Agree expectations regarding frequency of contact and set realistic response times.	
A return to school at the earliest opportunity.	
Early home visits if appropriate to discuss the young person's reluctance to attend school.	
All parties to agree to actions and keep to them until the next review period.	
A personalised programme for each young person. (e.g. flexible timetable, arrangements for transport, buddying, regular 'reset' breaks, or check-in's with a trusted adult when in school, and provision of a safe haven.)	
Ensuring the young person has access to an identified member of staff who can be approached if anxiety becomes temporarily overwhelming in school (i.e. a key worker).	
Ensuring all staff (including supply staff) are informed about the young person's difficulties, particularly during changes of classes/key stages.	
Identifying a safe place or base in school that the young person can go to if needed.	
Identifying a member of staff for the young person to 'check in' with throughout the day.	
Considering whether or not a family assessment such as an Early Help Assessment would be helpful to identify whole family support.	

Interventions and strategies

Kearney and Silverman (1990) suggest that choices of intervention should be governed by a careful functional analysis of school avoidance behaviour. This will help to identify the purpose, or purposes, that avoiding school is fulfilling for the child or young person. They describe four types of variable which can maintain school avoidance behaviour, however several of these may be involved and their effects will be interactive. Interventions should be bespoke to the individual and based upon the information which was gathered in the assessment and integration stages.

- To avoid something or situations that elicits negative feelings or high levels of stress** (e.g. fear of the toilets; the noise in the playground; lots of people moving all together in the corridors between classes, tests/exams).

Interventions should include learning about anxiety and worrying and how this affects thoughts, feelings and behaviours (psychoeducation for the young people and their family). There should be a clear message that avoidance of the feared situation makes things worse. The child should be taught anxiety management techniques such as relaxation training and deep breathing. Links to resources to support schools in this can be found in the Resource Section.

There should be a gradual re-exposure to the school setting. It is important that this is agreed with the young person, based on an understanding of their anxieties about school, and takes place through small steps at a manageable pace. Constructing an avoidance hierarchy with the young person is essential; this should identify and rank situations from those which cause no or least anxiety, to those which provoke the most anxiety. School should consider the provision of safe spaces that pupils can go to (e.g. pastoral zone and library) through discussions with the young person.

Anxiety / avoidance hierarchy



For each situation the young person will need to be supported to think about:

What **coping technique** they will use (e.g. relaxation, thinking, distraction)

What **support** will be in place (e.g. key worker available, time out card, access to secure/ quiet base)

Some situations may need to be broken down into even smaller steps

To create an anxiety/avoidance hierarchy, the young person can be asked to name situations (or shown cards representing possible fears) and asked to rank them in terms of how they feel about that situation from least worried about to most worried about. When thinking about next steps it is important to start with the item that causes the least amount of anxiety, whilst also helping the young person to think about how they will cope with this situation and what support they will need.

Once the young person has overcome this fear and consolidated this a number of times, then they can begin to work his or her way up the hierarchy.

2. To escape difficult social situations (e.g. feeling left out at playtime; reading out loud in class or other public speaking/group task; working as part of a group)

As with the first function intervention should include learning about anxiety and worrying and how this affects thoughts, feelings and behaviours (psychoeducation for the young person and their family). There should be a clear message that avoidance of the feared situation makes things worse. The child should be taught anxiety management techniques such as relaxation training and deep breathing. In addition, the child should be taught social skills and given opportunities to practice coping skills in real-life social and evaluative situations, starting small and building up to those which are the most challenging. There could be pre-teaching of key work missed, buddying, peer mentoring and role playing what they are going to say when peers ask about their absence from school.

3. To get attention from or spend more time with significant others (e.g. change in family dynamic, concerned about the well-being of parent).

Intervention would usually include work with care-givers supporting them to develop skills and techniques to:

- Manage the school avoidance behaviours such as tantrums or physical/ somatic complaints
 - Establish morning routines
 - Use problem solving techniques
- Establish positive and individual time to spend with the child outside school hours
 - Focus on positive behaviours
 - Limit the attention the child receives when they do not attend school
- Establish rewards for when they attend school and where appropriate consequences if they do not

4. To spend more time out of school as it is more fun or stimulating (e.g. watch TV, go shopping, play computer games, hang out with friends).

Intervention would usually include:

- Increasing “rewards” for attendance and disincentives for nonattendance (e.g. use of a ‘contract’ which may include laptop time, access to internet, phone credit, time with friends in town etc.)
 - Limit the attention a child receives during non-attendance
 - If possible take away the more stimulating activity
 - Support their travel to and from school
 - Teach them how to refuse offers from peers
- ²⁵Make school as stimulating as possible, find out the child or young person’s interests and if possible apply this to the work completed in school.

Review

It is essential that any plan is regularly reviewed. There should be regular set dates for reviewing how any support plan is progressing. It is essential that the young people and parents/carers are actively involved in the review and key school staff and professionals are invited.

The review should identify and celebrate any progress made, and review whether further information has come to light to help inform or clarify next steps. These next steps can include:

- consolidating and maintaining the current support plan,
- setting new outcomes and or actions for the young person, school and parents/carers; and identifying that further consultation with other agencies needs to occur which may, if necessary, lead to a referral to other services or support from within a different category of the Thrive framework (see Thrive Table in Appendix 9).



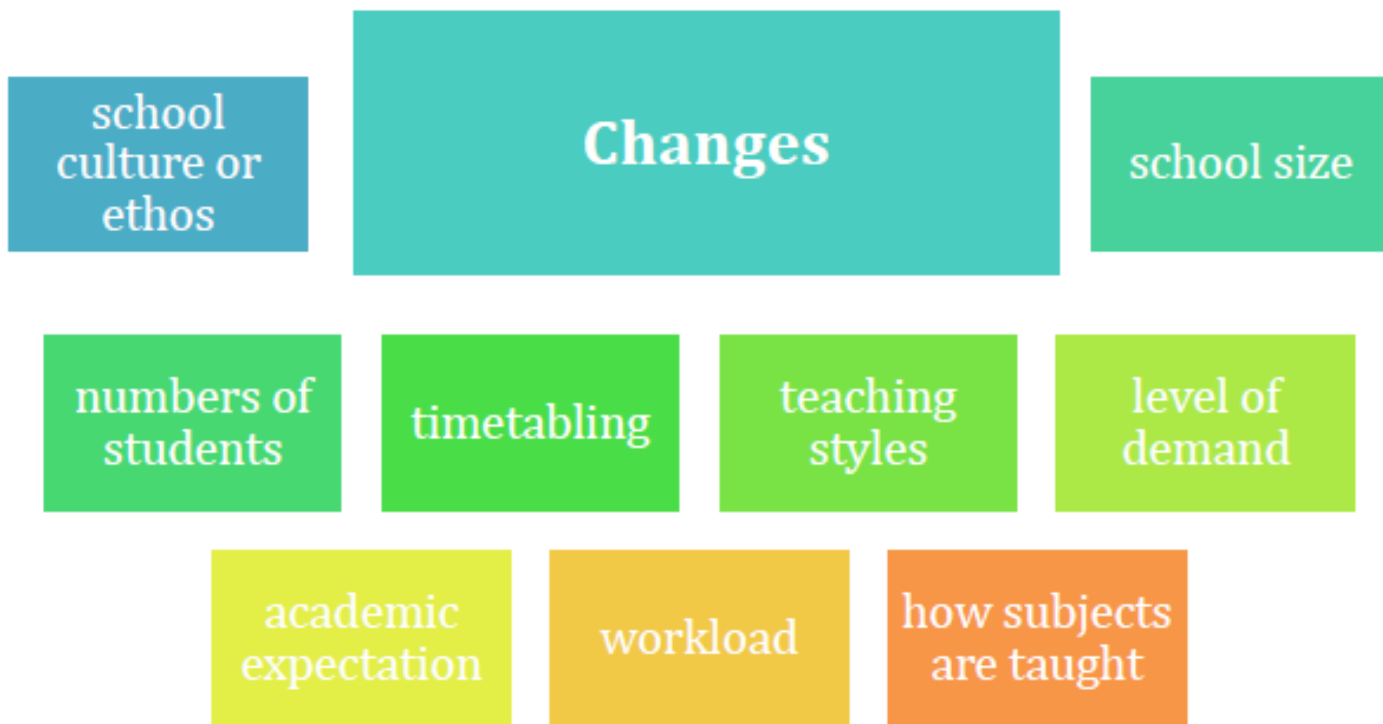
Whole School Good Practice

Any successful work with an individual needs to be embedded in whole school systems. General good practice for promoting emotional well-being and positive mental health also applies to EBSA. The figure below outlines the culture, structures, resources and practices within a school that can promote wellbeing of staff and young people, with particular reference to EBSA. **A whole school audit can be found in Appendix 5.**

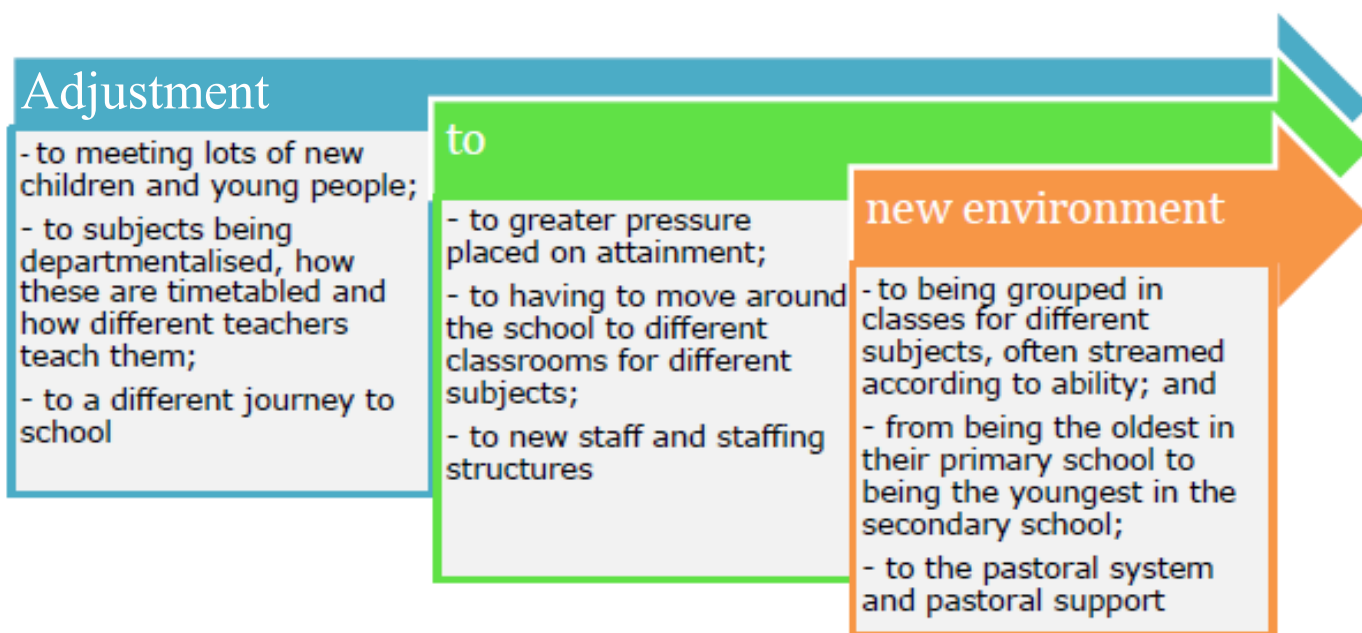


Transition

Literature has shown that peaks in the number of young people with EBSA correspond with transition in educational phases. This is not surprising as young people face significant changes at these transition points.



Successful transition involves the young person being supported to be able to make adjustments to fit in with their new environment.



Most children adjust to these changes over time. However, young people who experience higher levels of anxiety or who have experienced loss and separation may be vulnerable to developing or experiencing an exacerbation of EBSA behaviours. It is important that schools and families provide appropriate support; that any vulnerable young people are flagged up early by the feeder school and that an individual approach is taken.

Good transition practice involves the effective exchange of both pastoral and academic information from primary to secondary school. It is really important that feeder schools flag up any early separation difficulties and past EBSA even if the issues were mild and attendance is now fine. We advise that secondary schools should specifically ask these questions on any transition information-gathering.

Good transition also involves good communication with the young person and their parents / carers. Providing pupils and their families with practical information is key to this.

Key Information Required	Practical Supports
Travel to school — how will they get there	Go through journey to school, practise this, identify any companions, , provide social stories (e.g. how to use public transport safely)
Key people in school	Give a simplified structure chart, provide photos, identify a key person
Environment	Layout of school — Provide maps, give tours, quiz, colour code subjects to building areas
Structure of the day timetables, break and lunchtime systems	Provide timetables, colour code these, explain break and lunch time systems and/ or zones for different year groups
Social time — supporting social interactions and those more vulnerable, bullying policies	Identify how pupils will be supported to make new friendships, access to supported social activities, identify key adults they can raise concerns with
Academic demands — how lessons are structured. Homework	Give information about how lessons are structured, homework expectations
Support systems in place — pastoral and SEND support	Set out how young people will be supported (e.g. provide one page profiles)
Equipment needed	Provide checklist for each day

Familiar school staff should discuss with young people and their families what are they are looking forward to and what they are worried about and this should be individually addressed. An example of support for this are 'What if cards...'

If I don't know where my classroom is ...

- I will get my plan from my student planner and see if I can work it out
- I will try and ask someone in my class
- I will ask my teacher

If someone calls me an unkind name ...

- I will try and walk away and not swear or shout
- I will tell a teacher why I feel upset
- My teacher will deal with it and talk to that person

What if I have nothing to do at breaktime...

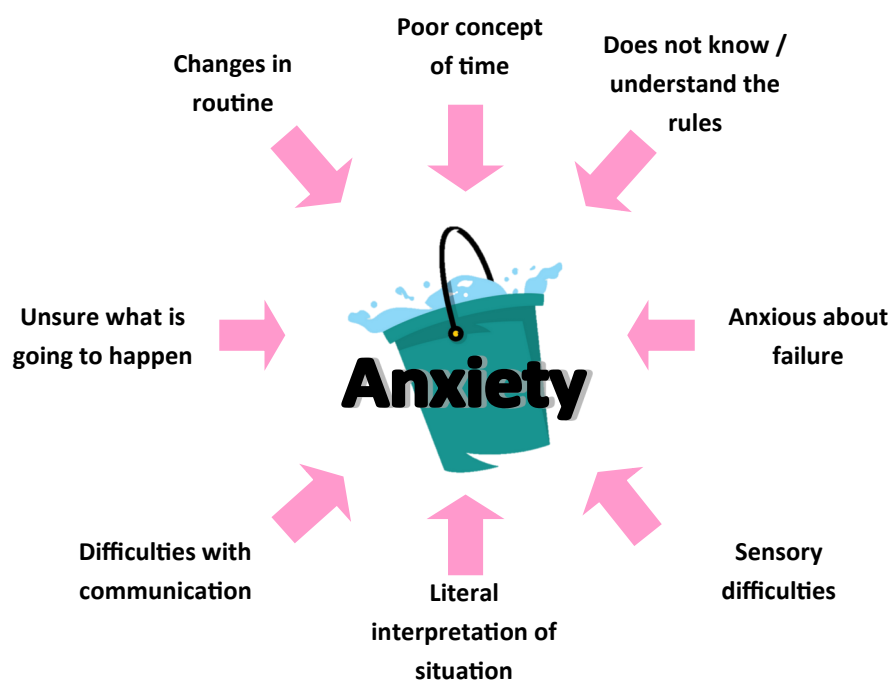
- I could go to the library
- I could buy a snack and eat it in the dining hall
- I could find my buddy

EBSA and Autism Spectrum Condition (ASC)

It is well documented that anxiety and poor stress management are common in children with autism and that anxiety may worsen during adolescence, as young people face increasingly complex social interactions and often become more aware of their differences and interpersonal difficulties. As yet, there is little research into the prevalence with autistic individuals and EBSA but evidence and experience suggests that due to the anxieties that autistic children experience they are at increased risk of EBSA.

The factors which influence levels of anxiety in autistic children and young people, as with any child, are multiple and often complex. They may be associated with context blindness, differences in executive functioning, limited theory of mind, difficulties processing verbal language, focus on detail, thinking patterns that can seem inflexible to others, and/or sensory processing differences (Ozsivadjian and Knott 2016; Gaus 2011; McLeod et al 2015; Ting and Weiss 2017). Recent research also considers intolerance of uncertainty (IU) as a key contributing factor to anxiety in autistic people.

Schools will be aware that they are complex social environments that some autistic children and young people can find exhausting; they are spending cognitive energy managing this social experience and can become overloaded. Indeed, their anxiety may become ‘overflowing’ as depicted below and place them at risk of EBSA.



Given the increased risk of autistic young people experiencing high levels of anxiety that may lead to EBSA, it is essential that there is early attention and intervention given to developing the young person’s social skills, emotional literacy, resilience and their ability to self- regulate. Steps to address these are set out below.

Working with the child/young person

Evidence and experience demonstrates that anxiety levels in autistic people can be reduced by adopting good practice approaches that are individualised to the child/young person's specific needs including visual supports, structure, managing change and generally increasing the certainty of the school day. Further details of good practice strategies can be found in **Appendix 6** – Strategies for Young people with ASC and should include all adults working with a child/young person being made aware of the affect their communication style can have.

Schools may also find it helpful to refer to the social stories provided by the ACE (Autism, Communication, Education) and the Educational Psychology Service's transition materials, which includes specific guidance on supporting transitions for pupils with ASC. Please see the Emotionally Friendly Schools website, within the blogs section).

All adults working with the child:

- **Use child's name before** delivering any instructions so that they cue into you speaking to them and recognise the instructions applies to them.
- Allow additional time for the child to process verbal information and instructions (at least **10 seconds**) and avoid repeating verbally within this time.
- If repetition of the information/instruction is necessary **use exactly the same wording** as initially used.
- Use **explicit, concise language** when addressing the child as this is likely to enable them to process the information correctly.
 - Use **short simple instructions**. Give them in order that they are to be completed.
 - Check for understanding. Ask the child to repeat them back to you

Steps to Support Reducing Anxiety

Step One

Ensure that all adults working with the child have an understanding of ASC and communicate appropriately and that adults have implemented general autism 'good practice' strategies e.g. the child uses and is engaged with a visual timetable, relevant visual supports, calm space – see **Appendix** for further suggestions.

Step Two

Key to the effectiveness of any intervention is having a sound understanding of the child's needs and how ASC specifically affects the child. Consider using a tool such as;

- Pupil Progression tool - Autism Education Trust (AET 2017):

<http://www.aetraininghubs.org.uk/wp-content/uploads/2016/02/Progression-framework.xls>

- Autism from Diagnostic Pathway to Intervention by Kate Ripley

Step Three

Plan and implement individualised, strategies to develop the emotional and social skills identified in step two. These may include those identified for children in previous chapters of the guidance or more specific strategies such as those included in the resources section.

Step Four

Review the impact of the interventions using the Pupil Progression Tool (AET) or similar. It may be that, despite the good practice and interventions, the child's anxiety continues to increase placing them at risk of EBSA and additional interventions will require implementation.

Please note that the advice in previous chapters regarding Action Planning are also relevant here and should be followed.

If there are indications that the child/young person is at risk of EBSA it will be important to build up a clear picture of exactly what elements of attending school are increasing their anxiety in order that best endeavours can be made to alleviate the anxiety. It is recommended that the tools in Autism from Diagnostic Pathway to Intervention by Kate Ripley are used. In particular, Mapping the Landscape of Fear and planning solutions.

Schools should also consider incorporating supports based on modified cognitive behaviour therapy (CBT). CBT is based on the notion that our thoughts mediate our emotional and behavioural response, implying that it is not external events such as people or situations that cause our responses, but rather our thoughts about those events. NICE (2013) recommend that CBT is considered for autistic children and young people anxiety who have the verbal and cognitive ability to engage and there is emerging and growing evidence that CBT could reduce anxiety in autistic children and young people who respond well to the concepts of CBT.

Schools could consider using resources such as:

- The Homunculi Approach to Social and Emotional Wellbeing: A Flexible CBT Programme for Young People on the Autism Spectrum or with Emotional and Behavioural Difficulties by Anne Greig
 - Starving the Anxiety Gremlin by Kate Collins-Donnelly

It may also be appropriate to seek specialist, outside agency support such as The Autism Communication and Education (ACE) team.

Working with Parents / Carers

Recent studies, (Reaven et al 2012; Steensel, Zeger and Bogels 2017, Ting and Weiss 2017) emphasise the importance of the relationship between parental anxiety and anxiety in children and young people. Many parents of children with autism report that they notice their own emotions have an impact on their child's emotions and vice versa. Therefore, it important to emphasise the need for school to build a collaborative partnership with parents in the best interest of the child, as described previously.

Parents may have received minimal guidance regarding strategies to support their child and schools should consider training courses that may be available to parents e.g. via the Neurodevelopmental Pathway. In addition, the transactional nature of anxiety highlights the need for parents and carers to pay attention to their own mental health needs and parent support groups, listed on the Local Offer may supportive, alongside resources listed on the Greater Manchester Health and Social Care Partnership – Resource Hub (<https://hub.gmhsc.org.uk/mental-health/>) and National Autistic Society Website.

Respect For All counselling are currently providing a mental health first aid-helpline and support service to people with autism or a learning disability, their families and carers from the Greater Manchester area during the COVID-19 pandemic. <https://www.respectforall.org.uk/counselling/home>

EBSA, School Attendance and the Law

The Education Act 1996 places a legal duty on all parents/carers to ensure that their child has an education. When this education is provided in a school setting, parents/carers must ensure their child attends regularly. If the parent/carer is unable to ensure this, they can be held accountable for an offence under S.444 Education Act 1996; failure to secure the regular school attendance of a child. The term regular has recently been defined to mean ‘as prescribed by the school’. For the majority of pupils, this means attending school full-time. Any unauthorised absence is therefore irregular attendance.

As with any law, the parameters are firm and the Education Act 1996 goes further as the offence is one of strict liability. This means there are only certain permitted defences the parent/carer can use for their child missing school. One such defence is the child was unfit to attend school due to ill health. The parent/carer must prove this to be the case. Only a Head Teacher can authorise absence from school. They may request supporting medical evidence from the parent/carer which shows the pupil is unfit to attend school.

This request is often made to avoid the matter moving into a legal process. Medical evidence can include appointment cards; prescriptions, reports from medical professionals etc. The weight and value of the evidence is one for the Head Teacher to consider in their decision making of whether an absence is to be authorised or not.

When unauthorised absence occurs, dependent on the length and reason for the absence, the school has the option to refer to the Local Authority via the Education Welfare Service (EWS), in order to investigate further and make consideration of subsequent intervention. The EWS discharges the Local Authority’s statutory duties associated with school attendance. On receiving the referral, the EWS will gather evidence from all involved before making a decision on next steps within the legal framework. All cases are considered on a case by case basis at the point of referral and throughout the process. If there is no evidence to support a statutory defence, the case is presented to the Senior Co-ordinators within the service, where a judgement is made about the most suitable form of legal intervention.

Interventions are offered within a legal framework with an investigation to establish if an offence can be proven. This can lead to a variety of actions including the use of Fixed Penalty Notices (FPNs) and/or Court action both in the criminal court (offences under the Education Act).

If the decision is made to go forward with a prosecution, consideration is given as to whether this will be the ‘Fast Track’ or ‘Final Warning’ pathway, as an aggravated offence. The Fast Track route is generally deemed appropriate when support is in place for the family from other agencies, and provides a further 12 week period in which the parent/carer is expected to demonstrate a significant improvement in their child’s school attendance. Similarly, a ‘Final Warning’ may be issued if previous involvement with the EWS has been evident and although initially improvement may have been seen, it may not have been sustained and a ‘Final Warning’ may be issued with a further 6 week monitoring period for the parent/carer to demonstrate significant improvements in their child’s school attendance.

For schools with young people experiencing EBSA and struggling with attendance, it is the Head Teacher’s decision whether to authorise absence or not. If a school decides to refer a student to the Education Welfare Service for investigation, the expectation would be that the school will have tried an array of strategies to encourage and support the young person’s attendance such as those as outlined in this document as well as requesting any supporting information from medical professionals.

EBSA and Requests for Education Health Care Needs Assessments

Education Health Care Plans (EHCPs) are for children and young people who have a special educational need or disability that cannot be met by the support that is available at their school or college setting. Most children and young people with special educational needs will have help given to them without the need for an EHC Plan at the SEN support level. Salford's **SEND Children Thrive: Graduated Response** to SEND document supports schools and settings with meeting pupils' needs at different stages of a graduated response.

In some cases children who display EBSA behaviours may have underlying special educational needs and require support above the SEN support level. If this is the case schools or parent/carers can request that the Local Authority undertake an Education Health Care needs assessment.

In order to be able to decide whether an assessment should occur the Local Authority will need to see evidence that the school or college have taken appropriate action following the assess, plan, do and review cycle and there is evidence that the child or young person has not made adequate progress or has only made progress because of a very high level of support.



When a child has been displaying EBSA behaviours, the Local Authority will require evidence that the school has sought and followed advice from:

- the child/ young person and their family
 - health professionals
- professionals that work with families

Examples of the services this may include can be found in the **Further local support & resources** section of this guidance.

Before making a request for an Education, Health and Care Needs Assessment schools should refer to:

Salford's SEND Children Thrive: Graduated Response to SEND Document

The Local Offer

<https://directory.salford.gov.uk/kb5/salford/directory/localoffer.page?localofferchannel=0>

The Local Authority's special educational needs page:

<https://www.salford.gov.uk/sen>

The SEND Code of Practice 2014 can be found here:

<https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

Children and young people with medical needs schools must have regards to the new DfE guidance (2015): 'Supporting children at school with medical conditions: Statutory guidance for governing bodies of maintained schools and proprietors of academies in England.'

<https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medicalconditions-->

Further local support & resources

Information about Salford Thrive and the EBSA Thrive Support Pathway can be found on Salford's Emotional Health and Wellbeing web pages:

<https://www.partnersinsalford.org/salford-0-25-advisory-board/>

Below are key Local Authority services who can offer support to schools families and young people who may be experiencing EBSA.

Special Information Advice and Support Services (SIASS)

SIASS offer information, advice and support to children, young people and parents/carers about special educational needs and disability. This includes matters relating to health and social care. SIASS have a role in ensuring views are heard, understood and respected.

It is a free, dedicated, confidential and impartial service offering a single point of regular and consistent contact. They can explain how special educational needs are identified and assessed and who you should talk to. They can also tell you what your rights and responsibilities are.

<https://www.salford.gov.uk/schools-and-learning/info-for-parents-students-and-teachers/special-educational-needs/salford-information-advice-and-support-services-siass/>

Contact the team

Call 0161 778 0343/0349 or email siass@salford.gov.uk

Early Help Services

Early help services are delivered by the Salford Family Partnership. Some services are available to everyone which can be accessed via Family Hubs across the city and each locality has an Early Help School Co-ordinator. Others are more specialised services which work together with partners to identify children and families who need help, support or guidance at the earliest possible opportunity. Salford Family Partnership enables families' to identify their own strengths and achieve positive outcomes for themselves. Each locality has an Early Help School Co-ordinator.

How to access support

<https://www.salford.gov.uk/children-and-families/early-help-for-families/early-help-services/>

Educational Psychology Service (EPS)

The Educational Psychology Service (EPS) promotes the development and learning of all children through the application of psychology. Educational Psychologists work at the level of the educational organisation, with individuals and groups of children, teachers and other adults in schools, families, other local authority officers and health and social and care colleagues.

How to access support

The Educational Psychology Service can be contacted on 0161 778 0476 or by email : EPS@salford.gov.uk

<https://www.salford.gov.uk/schools-and-learning/info-for-parents-students-and-teachers/educational-psychology-service/>

Educational Welfare Service

The Education Welfare Service provide help, advice and support to those children, young people and their families who are experiencing education related difficulties especially around regular attendance at school.

Families and pupils are supported by:

Monitoring the progress of children and young people, targeting the appropriate support

Making home visits to help parents/carers with school attendance problems

Working directly with pupils to solve difficulties affecting their rights and responsibilities within the education law

Helping parents/carers to understand their rights and responsibilities within the education law

Acting as a link between home and school when communication has broken down

Providing a link with other agencies on behalf of families

Providing information on education otherwise than at school

However, persistent failure in ensuring your child attends school regularly can lead to prosecution.

How to access support

The Education Welfare Service can be contacted by email : EWS@salford.gov.uk

<https://www.salford.gov.uk/schools-and-learning/info-for-parents-students-and-teachers/school-attendance-behaviour-and-welfare/education-welfare-service/>

Primary Inclusion Team (PIT)

The Primary Inclusion Team supports mainstream primary schools with early intervention for pupils with Social Emotional Mental Health (SEMH) needs. We do this through classroom observations, advice on effective strategies to enable children to overcome barriers to learning, SEMH Resources, CPD and training, pupil interventions and multi--agency working.

How to access support

PIT can be contacted by calling: 0161 921 2653/ 1830 or by emailing: admin@pitreferrals.org

Learning Support Service (LSS)

LSS provide support to children with SEND and school staff to ensure every child has the best access to education to be able to achieve their potential. This may take the form of direct work with a child, small group work with several children, planning work with a class teacher offering practical support and ideas for getting the best from your class, help and guidance with planning, differentiation and target setting, or more strategic work with a SENCo or school leadership. Every school has a named dedicated member of staff from the LSS who is available to meet with school SENCos on a termly basis to look at SEN provision generally across schools. The LSS are then split into four teams:

Cognition and Learning (including Speech Language and Communication Needs, dyslexia, dyscalculia, Moderate Learning Difficulties, Irlen and physical disabilities)

Autistic Spectrum Conditions

Hearing Impairment

Visual Impairment

Each of these teams is made up of dedicated teachers and teaching assistants who have both experience and additional qualifications in their area of expertise, and each team also has access to additional members of staff with other specialised knowledge (eg mobility officers, Speech and Language Therapist).

How to access support

<https://www.salford.gov.uk/learningsupportservice>

Thrive in Education Mental Health Support Teams

Salford's Thrive in Education teams are launching in September 2020 and will be an integrated or 'blended' delivery team, bringing together our existing CAMHS School Link and I-Reach Practitioners, with Mental Health Practitioners from Place2Be and 42nd Street and will also include support from the Educational Psychology Service and Early Help School Co-ordinators. All schools will be allocated support from these teams as part of a three year programme. The focus will be on providing effective and timely 'information and advice' and 'getting help'. It will have limited capacity to provide interventions for young people with higher level or more complex needs, but it will manage transition and escalation to appropriate pathways and into core mental health services for those who need to 'get more help' or 'risk support'.

Contact details:

- Salford Thrive in Education Lead Commissioner emily.edwards@salford.gov.uk
- Salford Thrive in Education Delivery Partners:
 - ◇ MFT CAMHS Jane.davies@mft.nhs.uk
 - ◇ 42nd Street Natalie.lunn@42ndstreet.org
 - ◇ Place2Be Julia.barker@place2be.org.uk
 - ◇ 39 EP service EPS@Salford.gov.uk
 - ◇ Early Help Schools Co-ordinators patrick.cox@salford.gov.uk

Child and Adolescent Mental Health Service (CAMHS)

CAMHS provides specialist evidence based clinical interventions for children and young people aged 5 –18 years . CAMHS offer assessment, therapeutic intervention, case and risk management for children and young people presenting at the 'Getting More Help' and 'Getting Risk support' domain of the Thrive model. This would usually relate to a situation where there has been a deterioration in a child or young person's mental health impacting negatively on their day to day functioning such as sleeping, appetite, accessing education, concentration, irritability or where interventions have been offered with little or no positive change and an increase in risk concerns. This service is commissioned by Salford CCG and as such, children and young people are required to be registered with a GP in the Salford area to access support.

How to access support

9am-5pm Monday –Friday:

CAMHS Single Point Of Access: provides information, advice and consultation prior to making a referral as well as risk support - 0161 518 5400

CAMHS Single Point Of Contact: a dedicated CAMHS clinician links into Children's Services and is contactable via the main CAMHS number

CAMHS YOS: a dedicated clinician offering joint assessments, clinical interventions and case management based at Salford YOS on 0161 607 1900

STARLAC: a dedicated service targeting children and young people who are Looked after and based at Salford Civic Centre

MSEDS: specialist Eating Disorder Service, referrals via main duty service number on 0161 7015683

Emerge 16-17 Team: a specialist service for older adolescents who accept self-referrals and can be contacted on 0161 226 7457

Salford Core CAMHS: This service can be accessed via referral from GP, School Health Adviser or the Schools Mental Health School Lead as part of the

CAMHS School Link: Additional referral guidance can be found on the Royal Manchester Children's Hospital website, searching under Salford CAMHS.

Where there are concerns about a child or young person's mental health in relation to immediate risk or harm, please contact the duty team, out of hours GP, or present at the PANDA unit, Salford Royal Hospital.

Salford's Local Offer

The Local Offer provides information on what support services are available in Salford for children and young people with special educational needs and/or disabilities and their parents/carers

<https://directory.salford.gov.uk/kb5/salford/directory/localoffer.page?localofferchannel=0>

Emotional Health and Wellbeing Directory

The directory provides a guide to emotional wellbeing and mental health services for children and young people in Salford. If you're a young person, a parent or carer or someone who works with young people, this guide will help you find the right advice and support and see what services are available locally. The Directory contains a lot of information about the support and services available in Salford and to make it easy for people to use there are lots of shortcuts and hyperlinks in the document, including web links to national websites.

<https://www.partnersinsalford.org/salford-0-25-advisory-board/salford-thrive-ehwb/emotional-health-service-directory/>

Emotionally Friendly Settings

The Emotionally Friendly Schools (EFS) programme is a flexible, whole-school approach to improving children's mental health and wellbeing. It is supported by Salford Educational Psychology Service and covers Early Years to Post 16 to promote educational environments that support positive mental and emotional health in children and young people to effectively identify and respond to a broad range of emotional needs. The website can be used to access monthly blogs and the EFS manuals (login in required).

Email: emotionallyfriendlysettings@salford.gov.uk

<https://www.emotionallyfriendly.co.uk/>

Greater Manchester Health and Social Care Partnership – Resource Hub

Free access to a useful range of documents and films around mental health, includes a COVID-19 specific section.

<https://hub.gmhsc.org.uk/mental-health/>

Support for young people in Salford

Wuu2

A website for young people in Salford aged 11-9 with activities, events, news and videos:

<https://www.wuu2.info/>

IYSS

Integrated and Targeted Youth Support Services (IYSS), offers youth work and targeted sessions, alongside a range of specialist projects for young people:

<https://www.salford.gov.uk/children-and-families/youth-service/youth-work-in-the-community/>

42nd Street

Supporting young people with their emotional wellbeing and mental health. If you're aged 12 to 25 and you're struggling, they can help. 42nd Street are a charity based in Greater Manchester. They offer a range of individual therapeutic support, learning opportunities, groups and creative activities for young people, encouraging them to find their voice, develop new skills, have fun and demonstrate that they can manage their mental health and well-being to achieve their full potential.

Phone 0161 228 7321 (Mon – Fri 9.30am – 5.00pm)

Email: theteam@42ndstreet.org.uk

<https://www.42ndstreet.org.uk/>

Place2Be

Provide mental health support in schools through one-to-one and group counselling. The Place2Be mental health professionals work closely with pupils, families and staff to improve emotional wellbeing and provide mental health support for the whole school.

<https://www.place2be.org.uk/>

For support around anxiety and stress, the following services are currently available to young people in Salford:

Kooth

Online mental wellbeing support which is free, safe and anonymous. Includes access to online tips and advice from other young people and the Kooth Team, discussion boards, a chat service and online journal.

<https://www.kooth.com/>

Shout 24

24/7 text service, free on all major mobile networks, for anyone in crisis anytime, anywhere. A place to go if you're struggling to cope and you need immediate help. Text 85258.

<https://www.giveusashout.org/>

SilverCloud

Online therapy programme proven to help with stress, anxiety, low-mood and depression, with courses specifically adapted for young people.

<https://www.silvercloudhealth.com/uk/our-solution>

National support services

Childline

Childline comforts, advises and protects children 24 hours a day and offers free confidential counselling.

Phone 0800 1111 (24 hours) www.childline.org

Young Minds

The UK's leading charity championing the wellbeing and mental health of young people. They publish a range of information for parents/carers and they also have a parent/carers helpline.

Calls are free Mon-Fri from 9:30am to 4pm 0808 802 5544

Website: <https://youngminds.org.uk/find-help/for-parents/>

The Mix

The Mix provides information, support and listening for people under 25.

Phone 0808 808 4994 (24 hours) www.themix.org.uk

Further resources

Anxiety Management

- **Starving the Anxiety Gremlin: A Cognitive Behavioural Therapy Workbook on Anxiety Management for Young People** By Kate Collins-Donnelly
- **What to Do When You Worry Too Much: A Kid's Guide to Overcoming Anxiety** By Dawn Heubner
 - Information about Anxiety Young Minds
https://youngminds.org.uk/findhelp/conditions/anxiety/?gclid=EAlaIqObChMI0NyXycXX1wIV7LDtCh0sBQ5pEAMYAyAAEgKEWfD_BwE
 - **Mighty Moe** by Lacey Woloshyn
<http://www.cw.bc.ca/library/pdf/pamphlets/Mighty%20Moe1.pdf>
 - Worksheets for anxiety – Anxiety BC
<https://www.anxietybc.com/parenting/worksheets>
 - Anxiety self help guide – Mood Juice
https://www.mcgill.ca/counselling/files/counselling/anxiety_moodjuice_self_help_guide.pdf
- Cognitive Behavioural Therapy Skills Training Workbook – Hertfordshire Partnership NHS
<http://inabook.co.za/wp-content/uploads/2016/08/CBT-workbook-good-to-use.pdf>
 - **Anxiety** by Paul Stallard -Examples of activities
<http://tandfbis.s3.amazonaws.com/rt-media/pp/resources/CBTCHILD/worksheets.pdf>
 - Understanding anxiety and panic attacks Mind
https://www.mind.org.uk/media/1892482/mind_anxiety_panic_web.pdf
- The Anxious Child: A booklet for parents and carers wanting to know more about anxiety in children and young people.
<https://www.mentalhealth.org.uk/publications/anxious-child>

General Emotional Wellbeing & Mental Health Literature

- **Managing Your Mind: The Mental Fitness Guide** By Gillian Butler and Tony Hope (for older young people)
- **Get Out of Your Mind and Into Your Life for Teens** By Joseph V. Ciarrochi , Louise Hayes and Ann Bailey.
- **Stuff That Sucks: Accepting what you can't change and committing to what you can** By Ben Sedley
 - Promoting Emotional Resilience - Toolkit
<http://hbtg.org.uk/wp-content/uploads/2015/06/KAN-Emotional-resilience-toolkit.pdf>
- **The Thriving Adolescent: Using Acceptance and Commitment Therapy and Positive Psychology to Help Teens Manage Emotions, Achieve Goals, and Build Connection** By Louise Hayes
 - Feeling Good: Promoting children's mental health Centre for Mental Health
<https://www.centreformentalhealth.org.uk/Handlers/Download.ashx?IDMF=5614ec71-49db-46ca-9dfa-82a85f4ecdfc>

- Parent survival guide

<https://youngminds.org.uk/find-help/for-parents/parents-survival-guide/>

- **Dealing with Feeling** by Tina Rae. Published by Lucky Duck
- **I am special** by Peter Vermeulon. Jessica Kingsley Publishers
- **A Volcano in My Tummy** by Elaine Whitehouse and Warwick Pudney.
- **Emotional Literacy assessment and intervention** by Southampton Psychology Service. Published by GL Assessment Limited. (Available for both Primary and Secondary)
- Online course on how to support young people with mental health difficulties www.minded.org.uk
 - MindEd for families :

MindEd for Families has online advice and information from trusted sources and will help you to understand and identify early issues and best support your child.

<https://www.minded.org.uk/families/index.html#/>

- MindED for professionals:

MindEd has e-learning applicable across the health, social care, education, criminal justice and community settings. It is aimed at anyone from beginner through to specialist.

<https://www.minded.org.uk/Catalogue/TileView>

Local Authority Guidance

West Sussex: <http://schools.westsussex.gov.uk/Page/10483>

Devon: <http://www.babcock-education.co.uk/ldp/absa>

<https://www.devonsafeguardingchildren.org/documents/2016/07/guidance-on-anxietybased-school-avoidance.pdf>

Derbyshire: <https://schoolsnet.derbyshire.gov.uk/site-elements/documents/keepingchildren-safe-in-education/emerging-school-safeguarding-themes/emotionally-basedschool-refusal-guide.pdf>

North Somerset: <https://thinkleftdotorg.files.wordpress.com/2015/10/ebsr.pdf>

Books for young children

- **The Goodnight Caterpillar: A Relaxation Story for Kids** by Lori Lite
 - **Huge bag of worries** by Virginia Ironside
 - **The Koala that could** by Rachel Bright
 - **Silly Billy** by Anthony Browne
 - **Willy the Wimp** by Anthoy Browne
 - **Owl Babies** by Martin Wadell
 - **How to catch a star** by Oliver Jeffers
- **Willy and the Wobbly house** by Margot Sunderland
 - **The boy and the bear** by Lori Lite
 - **Starting school** by Janet Ahlberg
 - **Back to school tortoise** by Lucy M. George
 - **Gotcha Smile** by Rita Philips Mitchell
 - **Halibut Jackson** by David Lucas
 - **Giraffes can't dance** by Giles Andreae

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Appendix 1 Profile of Risk of EBSA

The PRE Schedule consists of five key areas, each of which contain a number of items you are asked to consider in terms of their possible importance in influencing an emotionally based attendance problem. The rationale for the schedule content is based on risk factors identified in the guidance.

When completing the schedule, it is important to be as objective as possible, and to base assessments on evidence. Thus it is recommended that completion of the schedule is a joint venture, wherein checking and questioning can lead to the best judgements in terms of item importance.

During the process of completing the schedule, it may be useful to note factors associated with particular items, such as:

- ◇ This has been an issue in the past, but doesn't appear to be now
- ◇ This has been an issue in the past and has persisted as an important item

Items are not quantified by a typical rating scale. This is because it may be that one single item (e.g. death of a parent/carer) is so important it cannot be rated numerically in the same way other items might be rated. Its influence could be proportionately much greater than a rating scale could accommodate. As such the schedule asks you to make notes on the key items of importance you identify. These can then be visually represented in the five overlapping circles that follow the schedule.

If the resultant profile suggests to you that the pupil is at risk of emotionally based school refusal, the next step is to obtain the views of the pupil, parents/carers and other staff.

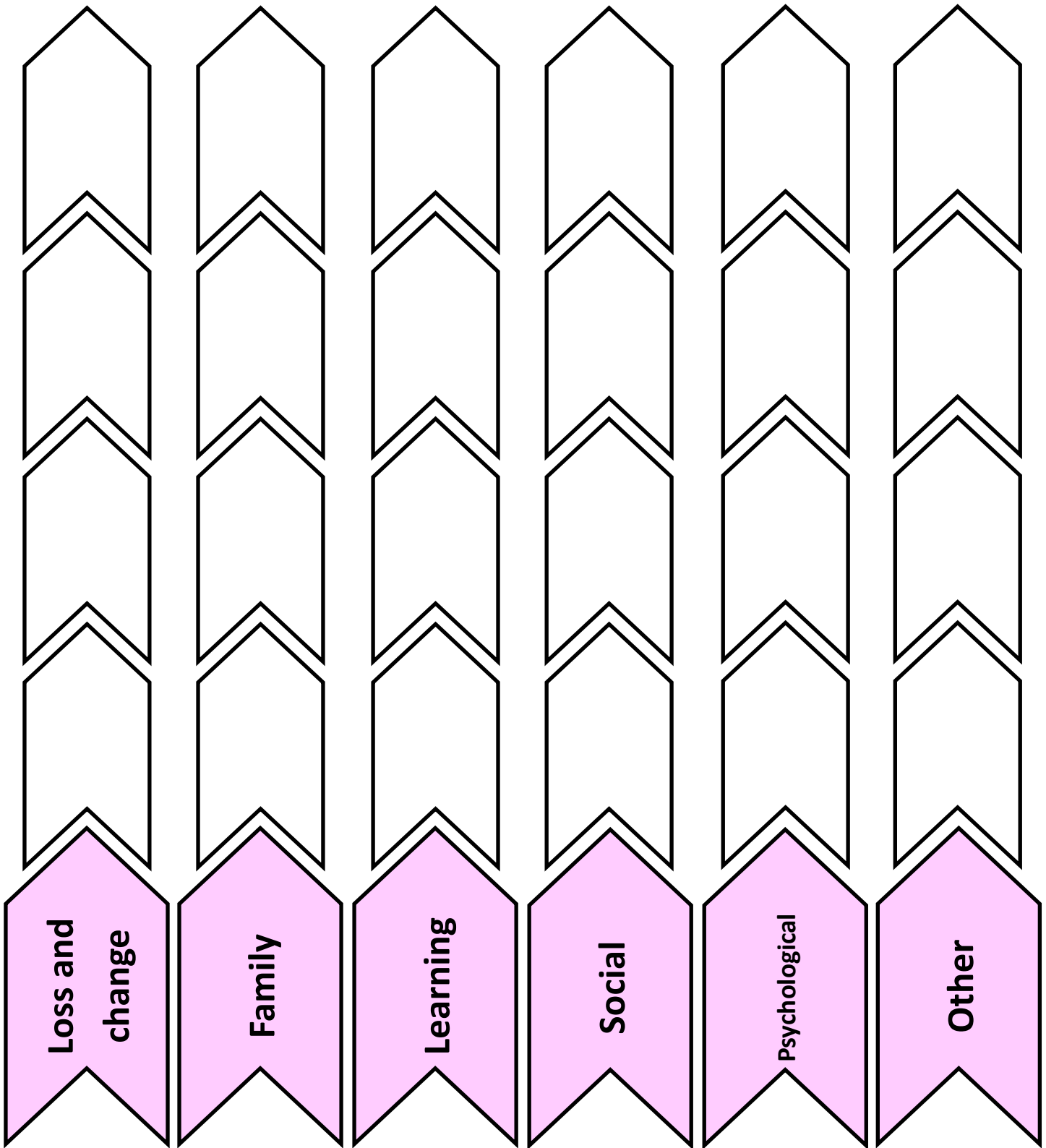
Profile Risk of EBSA

	Level of Concern				
Loss and Change	High	Med	Low	Not an issue	Not Known
Death of a parent/carer, relative, friend					
Death of pet					
Sudden traumatic event					
Sudden separation from a parent/carer					
Moving house, school or area					
Loss of a classmate					
Parent/carer, relative, friend illness					
Note on key items					
Family Dynamic	High	Med	Low	Not an issue	Not Known
Inappropriate parenting					
Birth of new child					
Parents/carers separated					
Parents/carers arguing/fighting					
Practical problems bringing the child to school					
Problems with parental control					
Jealous sibling at home					
Note on key items					

	Level of Concern				
Curriculum / Learning Issues	High	Med	Low	Not an issue	Not Known
Low levels of literacy					
PE and/or games issues					
General learning difficulties					
Specific subject issues					
Exam or test anxiety					
Difficulties with a particular teacher/adult					
Problems keeping up in lessons					
Note on key items					
Social/Personal	High	Med	Low	Not an issue	Not Known
Being bullied					
Seems to have few friends/friendship issues					
English as a second language					
Dislikes play/break times					
Few leisure interests					
Note on key items					

Psychological Wellbeing	Level of Concern				
	High	Med	Low	Not an issue	Not Known
Often seems tired					
Low self esteem					
Appears depressed					
Appears anxious					
Keeps feelings to themselves					
Has a pessimistic nature					
Note on key items					
Other Issues	High	Med	Low	Not an issue	Not Known
Note on key items					

Overview of key risk factors actors identified



Appendix 2 Information Gathering from School

_____ is currently experiencing difficulties attending school which we feel may be due to emotional distress. We would like to gain a picture of how they are in school. As an adult who works with _____ please complete the questionnaire below.

Your name	Lesson Activity
-----------	-----------------

Please describe _____

What are _____'s strengths?

What is going well for _____?

What does _____ find difficult?

How does _____ get on with their peers?

How does _____ get on with you and other adults?

Is _____ engaged and motivated with their learning. Are they making progress? If not, why not?

Have you observed any emotional difficulties at school? What have these been? When did/do they occur?

What support do you provide for _____? How do they respond to this?







What is your understanding of _____'s attendance problems?

What do you think would help _____ in school?

Appendix 3 Information Gathering and Integration

Name		School	
Year Group		Key School Staff	
Other Agencies Involved			
Description of Behaviour			
Risk Factors School, Child and Family			
Strengths and Protective Factors			
Formulation and Integration of Various Factors			


Appendix 4 Example Support Plans

Support Plan			
Name		Date	
At school these things can make me feel upset			
			
My key adult(s) in school is/are:			
When I can speak to my key adult(s):			
Where I can speak to my key adult(s):			
Until _____ my return to school plan includes the following changes to my attendance:			
<i>(Identify any changes to days or time they come in)</i>			
Changes to my timetable include:			
<i>(Identify any changes needed and what should happen/ where they should go instead)</i>			
			
Any other changes include:			
<i>Identify any other changes to routines, (break, lunch times, changes between lessons etc.) classroom expectations (not expected to read aloud, work in pairs etc.) or homework.</i>			
			
When I start to get upset, I notice these things about myself:			
			


Things I can do to make myself feel better when I'm at school:




Things that other people (staff and friends) can do to help me feel better when I'm at school:



Things that my family can do to support me to attend school:



Places in the school I can go to where I feel safe and supported:



This plan will be reviewed regularly so that it remains helpful.

Review date:

<i>My Signature</i>	<i>Key Adult's Signature</i>	<i>Parent/Carer's Signature</i>

Other people who have access to the plan are:

Support Plan

Name		Date	
-------------	--	-------------	--

At school these things can make me feel upset

My school support person(s) is/are:

Details of checking in with my school support person (When, where)

Until _____ my return to school plan includes the following changes to my attendance:

(Identify any changes to days or time they come in)

Changes to my timetable include:

(Identify any changes needed and what should happen/ where they should go instead)

Any other changes include:

(Identify any other changes to routines (break, lunch times, changes between lessons etc) to classroom expectations (not expected to read aloud, work in pairs etc) homework

When I start to get upset, I notice these things about myself:

Things I can do to make myself feel better when I'm at school:

Things that other people (staff and friends) can do to help me feel better when I'm at school:

Things that my family can do to support me to attend school:

Places in the school I can go to where I feel safe and supported:

This plan will be reviewed regularly so that it remains helpful.

Review date:

<i>My Signature</i>	School Support Persons' Signature	Parent/Carer's Signature

Other people who have access to the plan are:

Appendix 5 Whole School Audit

Whole School Systems for Promotion of Emotional Well-Being and Prevention of EBSA			
	Whole School Provision Currently Available	In Need of Development	Comments/Next Steps (Including by Whom and When)
School Culture and Ethos			
Committed and inclusive senior management team—values all students and allows them to feel a sense of belonging			
All staff working within school are valued. Clear protocols regarding emotional support and stress management for staff including supervision			
Continuous professional development for all staff which makes clear the promotion of positive emotional health and wellbeing is everybody's responsibility (including EBSA)			
The importance of pupil voice and viewing the child holistically are approaches which are embedded within the culture of the school.			
Recognition of the importance of communication and partnership working with parents/carers and external agencies			
School Systems, Policy and Practice			
Clear policies on attendance, behaviour, bullying, equality and transition which sets out the responsibilities for all and the support in place			
Curriculum includes the teaching of resilience, coping and social skills.			
Curriculum appropriately differentiated according to individual need			

Whole School Systems for Promotion of Emotional Well-Being and Prevention of EBSA			
	Whole School Provision Currently Available	In Need of Development	Comments/Next Steps (Including by Whom and When)
Promotion of supportive literature regarding emotional well-being and mental health for young people and parents/carers.			
Clear roles and responsibilities for SENCo and emotional wellbeing leads.			
A member of senior staff is responsible for over-seeing arrangements for EBSA students			
Clear systems in place for the early identification of school avoidance.			
Nominated member of who has a responsibility to investigate and act on concerns			
Staff are aware as to whom they should convey any concerns regarding EBSA.			
Provision of interventions within a graduated response - assess, plan, do & review			
Staff are aware of the role of other agencies and local arrangements with regard to assessing and supporting students experiencing EBSA.			
Access to indicated provision e.g. safe places within the school, key person.			
All staff are aware of specific strategies and programmes in place to support those experiencing EBSA			

Appendix 6 – Strategies for Young people with ASC

General Strategies for Supporting Young People with Social Communication Disorder and Autism Spectrum Condition in the Classroom

All adults working with any student should be made aware of the following:

Each autistic individual is unique and whilst one strategy may work for one child, it may not work for another.

Also to note that one resource for one child or young person may need to be adapted and personalised for another – generic templates can sometimes be a hinderance rather than a help.

ANY resource or strategy should be discussed with the individual in the first instance -where possible, so the child or young person feels included and not 'done to.'

Don't give up- make time and be persistent and consistent with approaches to managing anxiety – as long as it is reviewed in good time and evaluated with the young person.

- **Use student's name before** delivering any instructions so that they cue into you speaking to them and recognise the instructions applies to them.
- Allow additional time for the student to process verbal information and instructions (at least **10 seconds**) and avoid repeating verbally within this time.
- If repetition of the information/instruction is necessary **use exactly the same wording** as initially used.
- Use **explicit, concise language** when addressing the student as this is likely to enable them to process the information correctly.
- Use **short simple instructions**. Give them in order that they are to be completed. Check for understanding. Ask the student to repeat them back to you.
- **Do not** insist on **eye contact**, for many students with autism this can be uncomfortable and in extreme cases even painful. Instead consider agreeing a strategy with the student and all staff to enable them to indicate that they are listening.
- Be aware that direct answers from the student are often related to their **literal understanding** and lack of social awareness rather than due to **rudeness**.

Ideally consider developing a **pupil profile** to share with all staff, including office staff and midday meals supervisors to ensure awareness of the above.

Appendix 6 – Strategies for Young people with ASC

Classroom Strategies to consider;

Ensure the student understands how to use their planner; colour coding the information including the map will be beneficial. This will lower the anxiety levels associated with

SCD/ASC and enable the student to predict what is coming next.

Be aware that clear explanation needs to be provided, supported visually where possible, to explain any unplanned changes of routine to the student in advance.

Use visuals to remind students of expected behaviours, classroom rules and routines for example, use symbols to indicate noise levels i.e. partner voices, group voices, classroom voice, social voices.

This will also encourage independence.

Provide the student with a symbol card to display when he or she wants help.

Provide an area of classroom free from busy displays and distractions. Try to keep the area around the whiteboard / IWB 'clutter free'.

Wherever possible provide the student with a visual set of simple step by step instructions that they can use as a tick list. This will also support independence.

It is common for young people with SCD/ASC to be resistant to writing. There are numerous skills involved in writing from retrieving ideas/memories to fine motor skills. Therefore, consider providing opportunities to complete learning objectives using alternative means of recording e.g. scribe, keyboard, audial recording etc.

Consider the use of mind mapping software to support students through visual learning.

Various packages are available. E.g. Inspiration 9 from Inspiration Software Inc.

Consider allowing the student to achieve the learning objective through writing about their own interest instead of the topic under consideration.

The student will benefit from being given a clear indication of the expected outcome of a task before they start i.e. what finished will look like. Set tasks with clear goals e.g.

“Write ‘x’ number of sentences on” rather than “Write about...”, or the use of a green dot to indicate where the writing will start and a red dot where it will end or state the number of calculations etc.

Prevent repetitive questioning or commenting during class discussion by giving the students set number of cards (talk tokens) to give you each time they wish to contribute to discussion – when cards are gone, no more questions. Alternatively, use them to encourage participation from students who are reluctant to contribute

Managing sensory processing difficulties

- The student with sensory processing difficulties often struggles with the basic skills of managing his/her responses to ordinary sensations, of planning and organising their actions and of regulating their attention and activity levels. They may present sensory seeking or sensory avoiding behaviour. Completing a sensory checklist (available from the Autism and Social Communication Team) can help to identify such sensory responses.
- Sensory activities should be timetabled into the student's day reflecting the needs identified in the sensory checklist.

Motivating the Student

- Use **incentives based on an activity that is personally motivating** to the student/their interests e.g. I.T. based activities/games, Dr Who, Pokemon Go.
 - Use **individualised reward systems** e.g. collecting a number of points or ticks that achieve a personally motivating reward. Earned points/ticks should not be removed for poor behaviour. The collection of point/ticks should not be linked to specific periods of the day.

Self-regulation

- The student who has difficulties with self-regulation may have difficulty managing/moderating their behaviour, their emotions, their sensory reactions or the focus of their attention (cognitive self-regulation).
- It is important to observe students and use tools such the **ABC or STAR behaviour charts** to unpick where they may have difficulties in self-regulation then begin working with them to develop strategies to manage their difficulty including **traffic lights, scaling and self-advocacy**. Consider using resources such as '**The Incredible 5 Point Scale**' – see below for details.

Developing Social Understanding

- A **small step target approach** should be taken using checklists/resources to set the targets and assess the Student (available from the Autism and Social Communication Team).
 - Link any social target to a reward system that is personally motivating to the student.
 - Use '**catch me cards**' to target specific social targets throughout the school day e.g. 'Catch me doing as I am asked', – each time an adult witnesses the student achieving the target they initial or stamp the card so they can see their progress and it can be rewarded.
 - Develop the student's understanding of social rules and situations using **Comic Strip**

Conversations and Social Stories; (<http://www.autism.org.uk/living-with-autism/strategiesand-approaches/social-stories-and-comic-strip-conversations/what-is-a-comic-stripconversation.aspx>) These will help the student to begin to understand how other people feel in different situations and provide them with strategies to use.

Consider including the student in a **social skills group** that uses explicit teaching of the skills required to achieve their social target e.g. **Lego Therapy**. The Autism and Social Communication Team can provide training for staff to implement this.

Recommended Resources Autism

Books:

- **Autism from Diagnostic pathway to Intervention: Checklists to support diagnosis, analysis for target setting and effective intervention strategies** by Kate Ripley published by Jessica Kingsley.
 - **Autistic Spectrum Disorders – Practical Strategies for Teachers and Other**
- **Professionals** by Northumberland County Council Communication Support Services UK. David Fulton Publishers
- **Autistic Spectrum Disorders in the Secondary School (Autistic Disorder Support Kit)** by Lynn Pimley published by Sage Publications Ltd
- **Autism in the Secondary Classroom** by Joy Beaney and Penny Kershaw published by The National Autistic Society
- **Understanding How Children and Adolescents Think and Learn** by Paula Jacobsen. Published by Jessica Kingsley Publishers.
 - **Education and Care for Adolescents and Adults with Autism** by Kate Wall Published by Sage.
- **Exams: Guidelines for parents and teachers of young people with autism** published by The National Autistic Society
 - **Autism: Supporting your teenager** by Caroline Hattersley published by The National Autistic Society
- **Understanding How Asperger Children and Adolescents Think and Learn** by Paula Jacobsen published by Jessica Kingsley Publishers
- **Sensory Strategies: Practical ways to help children and young people with autism learn and achieve** by Corinna Laurie. Published by The National Autistic Society
 - **The Social Play Record: A Toolkit for Assessing and Developing Social Play from Infancy to Adolescence** by Chris White. Jessica Kingsley Publishers
- **Teaching children with Autism to Mind Read** by Patricia Howlin, Simon Baron-Cohen and Julie A. Hadwin. Published by Wiley-Blackwell
- **The Incredible 5-point Scale** by Kari Dunn Buron and Mitzi Curtis. Published by Autism Asperger Publishing Company
 - **Starving the Anxiety Gremlin: A Cognitive Behavioural Therapy Workbook on Anxiety Management for Young People** (Gremlin and Thief CBT Workbooks) by Kate Collins-Donnelly
 - **Starving the Anger Gremlin: A Cognitive Behavioural Therapy Workbook on Anger Management for Young People** (Gremlin and Thief CBT Workbooks) by Kate Collins-Donnelly
 - **Banish Your Self-Esteem Thief: A Cognitive Behavioural Therapy Workbook on Building Positive Self-esteem for Young People** (Gremlin and Thief CBT Workbooks) by Kate Collins-Donnelly
 - **Banish Your Body Image Thief** (Gremlin and Thief CBT Workbooks) by Kate Collins-Donnelly

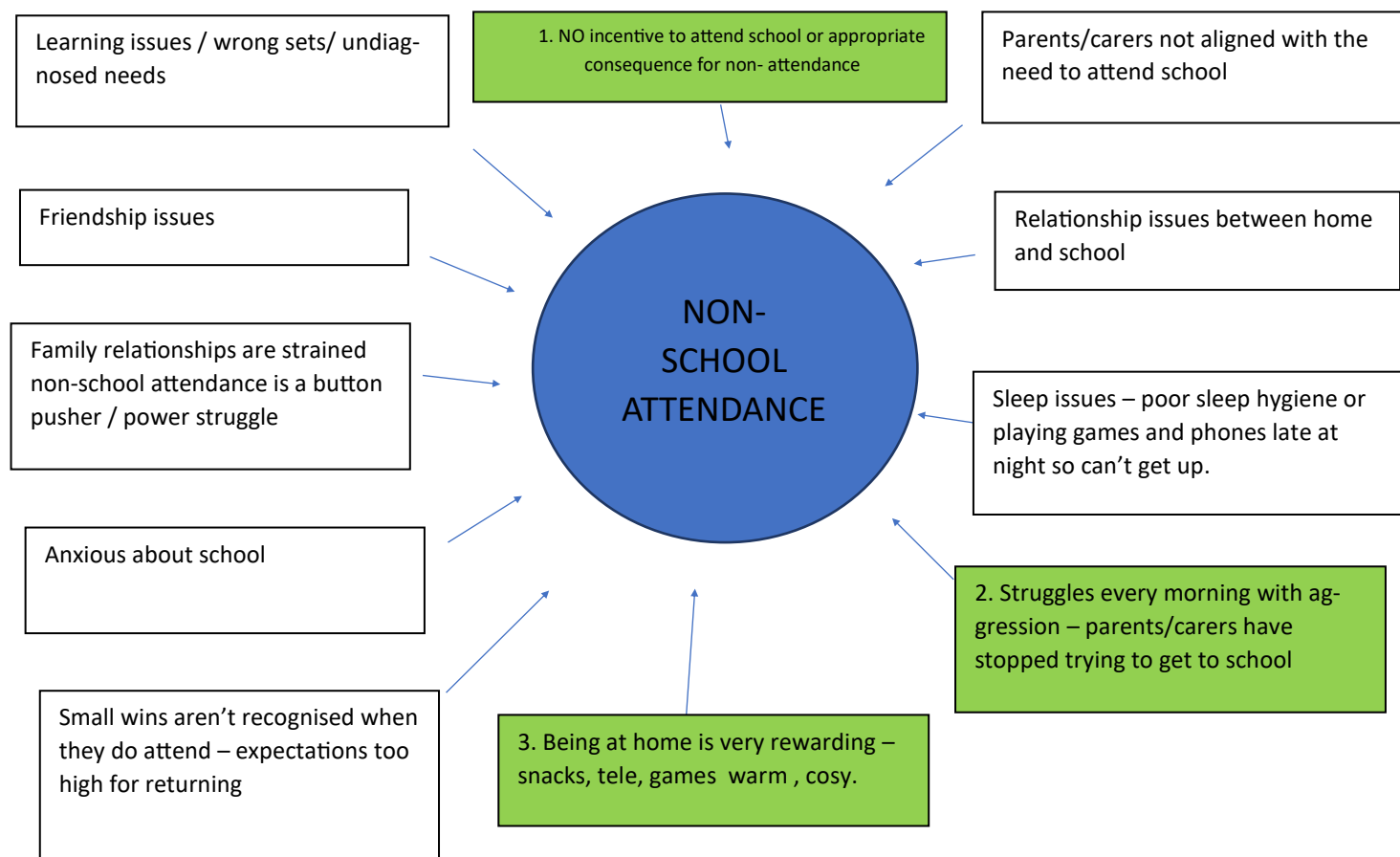
- **Martian in the Playground: Understanding the Schoolchild with Asperger’s Syndrome** by Clare Sainsbury. Published by SAGE Publications Ltd
 - **The New Social Story Book** by Carol Gray. Published by Future Horizons Incorporated.
 - **Comic Strip Conversations** by Carol Gray. Published by Future Horizons Incorporated
 - **Time to Talk** by Alison Schroeder. Published by LDA
- **Talkabout: A Social Communication Skills Package** by Alex Kelly. Published by Speechmark Publishing Limited
 - **Dealing with Feeling** by Tina Rae. Published by Lucky Duck
 - **I am special** by Peter Vermeulon. Jessica Kingsley Publishers
 - **A Volcano in My Tummy** by Elaine Whitehouse and Warwick Pudney. New Society Publishers
- **Emotional Literacy assessment and intervention** by Southampton Psychology Service. Published by GL Assessment Limited. (Available for both Primary and Secondary)
- **Subject Specific Top Tips for supporting students with Autism** – available from the Autism and Social Communication Team.
 - **Inclusion Development Programme**
<http://www.idponline.org.uk/>
 - **Social and Emotional Aspects of Learning:**
<http://webarchive.nationalarchives.gov.uk/>

Websites:

 - **Do2learn** - www.do2learn.com/
 - **Setbc** - <https://www.setbc.org/students/Pages/PictureSET.aspx>
 - **Resources for Inclusion:** www.resourcesforinclusion.co.uk/
 - **The Gray Center (Comic Strip Conversations and Social Stories):** www.thegraycenter.org/
 - **Visual aids for learning:** www.visualaidsforlearning.com
<http://autismteachingstrategies.com/wp-content/uploads/2013/05/CBT-Worksheets-Sets.pdf>

Appendix 7: Example of a Solution Circle for Non School attendance, to explore behaviour drivers and functions of non-attendance (Early Help School Co-ordinator Team)

1. CONSIDER DRIVERS/ REASONS ; individual, family , school, peers and community



2. Pick the top three / avoiding drivers that are individual to the child such as anxiety. THIs may be an issue but may be a longer road to changing. The behavioural drivers may get us a bigger outcome quicker.

3. From the top three drivers/ reasons we create a plan. See example below.

The Actions

1. NO incentive to attend school or appropriate consequence for non- attendance and 3. Being at home is very rewarding – snacks, tele, games , warm , cosy

Develop and incentive plan

EH practitioner to work with the family to develop a plan considering loopholes and what motivates the child. Parents/carers to speak to child about what motivates them.

2. Struggles every morning with aggression – parents/carers have stopped trying to get to school

Work on relationship and increase warmth

EH practitioner to support parents/carers on de-escalation skills and techniques, parents/carers to implement two changes in the next week. Develop a script for mornings linked to the incentive plans. Predict what may happen, Plan for responses and Practice to increase confidence to use in the moment.

Appendix 8: Consent Form for EBSA Involvement



EBSA Thrive Support Pathway CONSENT FORM -

Multiagency response to children anxious to return to school (emotionally based school avoidance; EBSA)

From September 2020 to co-ordinate multiagency support around children and young people who are anxious about returning to school, either as a result of pre-existing concerns about attending school (emotionally based school avoidance; EBSA) or more specific COVID-19 related anxieties, a new way to access support has been developed.

This will include a single referral point (via the Education Welfare Service) and a graduated response to meeting need using the Thrive Framework. Collaboration between the following services will offer support to school staff, parents/carers, children and young people:

- Education Welfare Service
- Early Help Team
- Educational Psychology Service
- Primary Inclusion Team (PIT)
- CAMHS (including i-Reach)
- Place2Be and 42nd Street—Mental Health Practitioners

This consent form will allow your child/ young person’s needs to be discussed as part of this multi-agency team. Further consent from you for the direct involvement of services will be sought (e.g. Educational Psychology, CAMHS) as needed.

Child/ Young Person’s Details										
Name of child/ young person:										D.O.B:
Name and Role of Key Contact in school (e.g. SENDCO/ Pastoral) Lead.....										
Contact number/ email for the school:.....										
Name of parent/carer:										
Contact number for parent/carer										
Services already involved:										
How concerned are you about your child/ young person’s difficulties?										
0	1	2	3	4	5	6	7	8	9	10
<i>Not very concerned</i>						<i>Extremely concerned</i>				

Appendix 8: Consent Form for EBSA Involvement

PARENTAL CONSENT:

- For the information on this form to go on the computer database (Educational Management system).
- For liaison with other professionals including (but not limited to) those listed above (this could be conversations or sharing written information).
- For advice/ support to be given to your child/ young person’s school by professionals from the services listed above. This may include the use of tools to gather your/ your child’s views in relation to school.
- Referrals for direct support (e.g. assessment, observation, consultation with staff, direct work with your child). Further consent for the direct involvement of services will be sought (e.g. Educational Psychology, CAMHS).

Please sign below:

Parent/carer:.....Date.....

Name and role of person who obtained consent:.....

Please return completed forms to: EWS@salford.gov.uk

Appendix 9: EBSA Thrive Table and Good Practice Flow Chart

EMOTIONALLY BASED SCHOOL AVOIDANCE (EBSA) THRIVE SUPPORT PATHWAY



THRIVING

An understanding that all children, families and staff returning to school from lockdown will require support and information as part of an adjustment and re-integration process that regulates concerns and anxieties about returning to the 'new normal'.

APPROACHES may include social stories about returning to school, asking children and young people on their first day back in school to note down [one trusted adult in school who they can talk to](#), whole school projects, assemblies, photo journals and IT projects with a focus on supporting the emotional wellbeing of staff, pupils and community recovery. Supportive and flexible systems that are consistently adhered to throughout school and are regularly reviewed and updated.

RESOURCES

Education Welfare Service's '**Return to school - Questions to consider**' prompt sheet for school staff.

Educational Psychology Service's **trauma-informed transition materials** and virtual support sessions which focus on community recovery as well as individual needs.

Primary Inclusion Team (PIT)'s **virtual training sessions** focusing on managing risk, des-escalation strategies and supporting children who are anxious (joint with CAMHS) <https://www.pitreferrals.org/cpd-courses/>

Emotional Wellbeing [check in](#) for all pupils.

Use of online resources and support from [Place2Be](#) and [42nd Street](#).

EBSA School audit tool included in the [West Sussex Guidance for Schools](#) (page 58).

SEND Children Thrive Graduated Response document (in particular the Social, Emotional and Mental Health sections).

Appendix 9: EBSA Thrive Table and Good Practice Flow Chart

Getting Advice and Signposting	Getting Help	Getting More Help	Getting Risk Support
<p>Identifying CYP/families who may require additional information, guidance or support to address their concerns via pastoral team, online information to families, apps, and virtual support.</p> <p>APPROACHES</p> <ul style="list-style-type: none"> • Use of social stories and videos on school websites to explain the differences to the school environment and school routines to ensure social distancing / safety measures. • CYP contacted by familiar/trusted adult at school ahead of returning to school to welcome them back and explain the changes and what their first few days at school will look like. • Staff training / awareness raising around trauma-informed transition 	<p>Identifying CYP/families who are presenting with recognisable symptoms of anxiety as either a direct result of lockdown or an exacerbation of pre-existing anxiety about attending school. This may also be due to the family's worries and need to keep the CYP at home or the CYP's fears about being in school/separated from parents/carers.</p> <p>APPROACHES</p> <ul style="list-style-type: none"> • Use of the EBSA good practice flow chart (first stages). • EBSA training for staff (especially those involved in supporting the CYPs return to school). • Use of specific measures to try and identify any issues that seem to be linked to the CYP's/Parents individual needs (see tools and assessments detailed in the 	<p>Identifying CYP who are presenting with more entrenched anxiety related difficulties resulting in a reduction in attendance, longer or more frequent absences from school, withdrawal from social situations and negative impact on their mental health.</p> <p>APPROACHES</p> <ul style="list-style-type: none"> • Joint, multi-agency approach including school staff, EWO, EPS, CAMHS and Mental Health Practitioners (as appropriate) with possible referrals to other services such as adult mental health, Early Help to support the family as needed. • Identification of a key adult and communication link in school who will maintain contact with the CYP and their family on a regular basis (especially important if CYP is 	<p>CYP where non-attendance has been prolonged, are presenting with complex anxiety accompanied by disengagement from education, complex family circumstances, involvement harmful/risk behaviours and may have a history of services being unable to complete assessment or treatment, or where there are safeguarding concerns.</p> <p>APPROACHES</p> <ul style="list-style-type: none"> • Joint, multi-agency approach including school staff, EWO, EPS, CAMHS and Mental Health Practitioners (as appropriate), with possible referrals to other services such as adult mental health or Children's Services/ complex safeguarding to support the CYP/family as needed. • Identification of a key adult and communication link in

Appendix 9: EBSA Thrive Table and Good Practice Flow Chart

<p>approaches and anxiety (see Thriving section).</p> <ul style="list-style-type: none"> • Staff training/awareness raising around EBSA. • Use of materials from Emotionally Friendly Schools manual and website. • Signposting/ discussion of EBSA model during EH Co-ordinators pastoral meetings. • EBSA posters around school/ within pastoral spaces. • Encourage conversations about emotional wellbeing e.g. sentence starters and Emotional Wheel. • Provide extra breaks (re-set points) at planned times during the day for check-ins and to complete relaxation or grounding activities. • All staff making phone calls home in relation to attendance to be aware of the good practice flow chart. • ‘Return to school - Questions to consider’ used to gather and record information in a 	<p>good practice document and flow chart, alongside suggested timescales).</p> <ul style="list-style-type: none"> • Involve EWO in interpreting the information gathered and devising an action and intervention plan based on the identified function of the behaviour. • Consider an Early Help Assessment (to explore wider contextual/ family needs and use of Family Partnership Model to empower parents/ carers to make changes/ support CYP to make changes). • Involve PIT team for primary aged pupils. • Access to interventions in school: using CBT informed resources (e.g. Starving the Anxiety Gremlin), CAMHS i-Reach CBT informed interventions, Mental Health Practitioners or counselling services based in school (Place2Be or 42nd Street) and/ or use of services from the EHWB Counselling Directory. 	<p>not in school), who is part of the multiagency group.</p> <ul style="list-style-type: none"> • Early and co-ordinated planning to explore the possibility of returning to education before settings reach maximum capacity in the Autumn Term (EWO/EPS/ EH). • Referrals into core CAMHS to be supported by the use of robust measures and information gathering tools to obtain CYP views about School Refusal Assessment Scale – Revised). • Approach to provide more intensive anxiety based interventions including: <ul style="list-style-type: none"> ◇ Psychoeducation for the CYP and their family (EPS/ MHP/ CAMHS); ◇ Coaching /mentoring/ individualised goal setting with young person, and/or; CBT via CAMHS ◇ as part of an individualised return to school care plan 	<p>school who will maintain contact with the CYP and their family on a regular basis (especially important if CYP is not in school), who is part of the multiagency group.</p> <ul style="list-style-type: none"> • Early and co-ordinated planning to explore the possibility to returning to education before settings reach maximum capacity in the Autumn Term (EWO/EPS/ EH). • Referrals into core CAMHS to be supported by the use of robust measures and information gathering tools to obtain CYP views about attending school (e.g. School Refusal Assessment Scale – Revised). • EWO/EPS/CAMHS support to school to develop an anxiety/ avoidance hierarchy or personalised plan with CYP that can that can inform the setting and reviewing of short and long term targets.
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Appendix 9: EBSA Thrive Table and Good Practice Flow Chart

<p>consistent way when making phone calls home.</p> <ul style="list-style-type: none"> Involve EH School Coordinator to explore behavioural drivers (e.g. solution circle) and prioritise top three things to work on. Review after an agreed timescale (e.g. 2 weeks). Problem solve with EWO. Psychoeducation materials shared with parents/carers and families using Family Partnership Model e.g. EWO or EH) to develop their understanding around anxiety. <p>RESOURCES</p> <ul style="list-style-type: none"> CYP person's views gathered (e.g. using the Are you feeling sad or worried about school? Booklet). LSS adaptable social stories. Example return to school booklet for secondary schools. BBC Bitesize transition resources. 	<ul style="list-style-type: none"> Access to support and projects via the Youth Service (YSS), as appropriate. Psychoeducation materials for parents/carers and families to develop understanding around anxiety and EBSA (e.g. brief CBT informed parent/carer sessions such as Helping your Child with Fears and Worries; CAMHS -led anxiety workshops for parents/carer). If attendance becomes a concern, meeting in school with parents, school staff and ideally the young person arranged ASAP (may need to consider alternatives e.g. home visit; virtual meeting using a secure online platform such as Microsoft Teams). Using the EBSA good practice flow chart an action plan to support a return to school is agreed and recorded (this may include the development of an anxiety/ 	<p>based on robust information gathering around the functions of the EBSA behaviours (see later stages of EBSA good practice flow chart).</p> <ul style="list-style-type: none"> Use of psychoeducation materials for parents/carers and families to develop understanding around anxiety and EBSA. EWO/EPS/CAMHS support to school to develop an anxiety/avoidance hierarchy or personalised plan with CYP that can that can inform the setting and reviewing of short and long term targets. Outreach support from the Canterbury Centre (for secondary aged CYP) or Alderbrook (for primary aged CYP). Ongoing support from Mental Health Practitioners as appropriate. Involvement in Youth Service Projects if out of school. Agreed plan to allow access to education whilst out of 	<ul style="list-style-type: none"> Ongoing support from Mental Health Practitioners as appropriate. Interventions (in addition to those included under Getting More Help) may include referrals to the Canterbury Centre, Children's Society, Education On Track, Integrated Community (ICR) Service and exploration of Alternative Provision options to support learning and re-engagement with education. Identification of a mentor who can provide 1:1 coaching/mentoring in an environment CYP feels most safe in (e.g. at home initially) and support to identify and work towards short-term goals (e.g. confidence to leave the house, access lessons/sessions in the community/ visit an educational setting) – such as City Wall. Links to post 16 settings as a goal to work towards for KS4 cyp).
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Appendix 9: EBSA Thrive Table and Good Practice Flow Chart

<ul style="list-style-type: none"> • EPS trauma-informed transition materials (e.g. Returning to school what you may expect to see; Support for CYP with SEMH needs). • Signposting to online resources and support services (e.g. Greater Manchester Mental Health Hub – resources to support the return to school, Place2Be, 42nd Street and Young Minds. Kooth – online mental wellbeing support. Shout24 – 24 hour text service, Silvercloud – online CBT). • Signposting to support services for parents (e.g. Local Offer and SIASS; Greater Manchester Health and Social Care Partnership Hub). • EH School Co-ordinator’s Solution Circle guide (see Good Practice Guide). • Staff training (PIT/EPS; see Thrive section, EFS training and/or bespoke packages). 	<p>avoidance hierarchy with support from the EWO/EPS).</p> <ul style="list-style-type: none"> • Include an agreed plan for the first day back at school and the night before. • Agree a short timescale to review any agreed plans (e.g. 2-4 weeks). <p>RESOURCES</p> <ul style="list-style-type: none"> • ‘Return to school - Questions to consider’ used during phone call(s) home at initial stages of non-attendance. • Staff training on EBSA (whole school and follow up session for key staff – EBSA team/ leads in school). • Use of tools and resources to gather CYP views (see Guidance document): <ul style="list-style-type: none"> ◇ School Refusal Assessment Scale - Revised (YP and parent version) ◇ Card sort activity to explore push and pull factors ◇ C.A.R.E Schedule (versions for parent/YP). 	<p>school (e.g. online access, access to tuition at home), to reduce longer-term anxieties about missed school work.</p> <ul style="list-style-type: none"> • Consideration of an Education, Health and Care needs assessment. <p>RESOURCES</p> <ul style="list-style-type: none"> • Staff training on EBSA (whole school and follow up session for key staff – EBSA team/ leads in school). • Psychoeducation materials for parents and families covering anxiety and EBSA shared using Family Partnership Model (e.g. Greater Manchester Health and Social Care Partnership Hub) • Psychoeducational materials for young people covering anxiety and EBSA. • Use of tools and resources to gather CYP views (see Guidance document): <ul style="list-style-type: none"> ◇ School Refusal Assessment Scale - 	<ul style="list-style-type: none"> • Completion of risk assessments and safety plans as needed. Links to specialist MH services or Rapid Response Teams as necessary. <p>RESOURCES</p> <ul style="list-style-type: none"> • As for the Getting More Help section, but with more direction from the specialist services and teams involved. • Use of apps such as Blueice - app to help young people manage their emotions and reduce urges to self-harm.
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Appendix 9: EBSA Thrive Table and Good Practice Flow Chart

	<ul style="list-style-type: none"> • Use of information and materials from the Good Practice Guidance document to support information gathering and support planning: <ul style="list-style-type: none"> ◇ Profile of risk of EBSA (Appendix 1 p. 46-50). ◇ Information gathering (p. 12-20 and Appendix 2 pp.51-3). ◇ Action planning guidance (p. 21-22) and Example support plan (Appendix 4 p.54). ◇ Intervention and strategy ideas including the development of an anxiety/avoidance hierarchy (p.23-24). • Psychoeducational materials for CYP covering anxiety and EBSA e.g. Greater Manchester Health and Social Care Partnership Hub Mental Health and return to school resources, EFS manual, Starving the Anxiety Gremlin (versions available for primary and secondary age 	<p>Revised (YP and parent version)</p> <ul style="list-style-type: none"> ◇ Card sort activity to explore push and pull factors ◇ C.A.R.E Schedule (versions for parent/YP). • Use of information and materials from the Good Practice Guidance document to support information gathering and support planning: <ul style="list-style-type: none"> ◇ Information gathering (pp. 12-20 and Appendix 2 p.51-3). ◇ Action planning guidance (p. 21-22) and Example support plan (Appendix 4 p.54). ◇ Intervention and strategy ideas including the development of an anxiety/avoidance hierarchy (p.23-24). • Psychoeducational materials for young people covering anxiety and EBSA (e.g. Greater Manchester Health and 	
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Appendix 9: EBSA Thrive Table and Good Practice Flow Chart

	<p>range), Think Good, Feel Good. Online CBT such as Silvercloud.</p> <ul style="list-style-type: none"> • Psychoeducation materials for parents/carers and families covering anxiety and EBSA shared using Family Partnership Model (e.g. Greater Manchester Health and Social Care Partnership Hub) • Parent/carers workshops covering anxiety (CAMHS). 	<p>Hub Covid-19 and return to school resources) and those included within the Getting Help Section, alongside materials or resources recommended by professionals involved (e.g. EP/MHP/ CAMHS).</p> <ul style="list-style-type: none"> • Psychoeducation materials for parents/carers and families covering anxiety and EBSA shared using Family Partnership Model (e.g. Greater Manchester Health and Social Care Partnership Hub). • Parent/carers workshops covering anxiety (CAMHS) / further individualised support offered through CAMHS. 	
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EBSA Good Practice Flow Chart

