Profile of Risk Factors of EBSNA

Please refer to the ATTEND Framework for specific guidance for the completion of the ATTEND form for professionals, parents/carers and students. The below documents can be used in addition to those forms or as an alternative for student with specific needs to gain additional information if required.

Adapted from West Sussex EPS (2022) EBSA Guidance

The Profile of Risk Factors consists of five key areas, each of which contain items to consider in terms of their possible importance influencing an emotionally based attendance difficulty. The rationale for the schedule content is based on risk factors identified for EBSA. When completing the schedule, it is important to try and be objective and to consider available evidence for judgements. Therefore, it is recommended that completion of the schedule is a joint venture with staff who know the pupil well, 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 does not appear to be now.
* This has been an issue in the past and has persisted as an important item.

Items are not quantified, as a single item (e.g. death of a parent) may have great importance and influence that it cannot be rated in a similar way to other items. Therefore, the schedule provides a space to make notes on the key items of importance. If the resultant profile suggests to you that the pupil is at risk of EBSA, the next step is to obtain the views of the pupil, parents and other staff members.

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| --- | --- | --- | --- | --- | --- | --- |
|  | | | Level of Concern | | | |
| Loss and Change | High | Medium | | Low | Not an issue | Not known |
| Death of family member or friend |  |  | |  |  |  |
| Death of pet |  |  | |  |  |  |
| Traumatic event (sudden, recent, or historical) |  |  | |  |  |  |
| Separation from a parent |  |  | |  |  |  |
| Moving house, school, or area |  |  | |  |  |  |
| Loss of friend or peer |  |  | |  |  |  |
| Illness of a family member |  |  | |  |  |  |
| Notes on key items: | | | | | | |

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| --- | --- | --- | --- | --- | --- |
|  | | Level of Concern | | | |
| Family | High | Medium | Low | Not an issue | Not known |
| Concerns regarding parenting |  |  |  |  |  |
| Birth of sibling |  |  |  |  |  |
| Parental separation |  |  |  |  |  |
| Parental discordance |  |  |  |  |  |
| Practical problems bringing the child/young person to school |  |  |  |  |  |
| Sibling conflict/jealousy |  |  |  |  |  |
| Young carer |  |  |  |  |  |
| Known parent/family mental health needs |  |  |  |  |  |
| Known other family stressors |  |  |  |  |  |
| Notes on key items: | | | | | |

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| --- | --- | --- | --- | --- | --- |
|  | | Level of Concern | | | |
| Curriculum | High | Medium | Low | Not an issue | Not known |
| Learning needs |  |  |  |  |  |
| Difficulties in specific subjects |  |  |  |  |  |
| Exam or test anxiety |  |  |  |  |  |
| Difficulty with pace of lessons |  |  |  |  |  |
| Language needs, including early stages of learning English as an additional language |  |  |  |  |  |
| Issues in PE/Sports/Games |  |  |  |  |  |
| Notes on key items: | | | | | |

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| --- | --- | --- | --- | --- | --- |
|  | | Level of Concern | | | |
| Social | High | Medium | Low | Not an issue | Not known |
| Bullying (current, recent, or historical) |  |  |  |  |  |
| Friendship issues |  |  |  |  |  |
| Social isolation |  |  |  |  |  |
| Issues with or dislike unstructured times (e.g. play/break/lunch times) |  |  |  |  |  |
| Few leisure interests |  |  |  |  |  |
| Involvement in any issues in the local community (e.g. gangs) |  |  |  |  |  |
| Notes on key items: | | | | | |

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| --- | --- | --- | --- | --- | --- |
|  | | Level of Concern | | | |
| Wellbeing | High | Medium | Low | Not an issue | Not known |
| Often seems tired |  |  |  |  |  |
| Appears to have low self-esteem/self-confidence |  |  |  |  |  |
| Appears to have low mood |  |  |  |  |  |
| Appears anxious/tearful |  |  |  |  |  |
| Keeps feelings/emotions to themselves |  |  |  |  |  |
| Appears shy/quiet/passive |  |  |  |  |  |
| Appears to struggle to perceive positives |  |  |  |  |  |
| Physical illness/injury |  |  |  |  |  |
| Notes on key items: | | | | | |

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| --- | --- | --- | --- | --- | --- |
|  | | Level of Concern | | | |
| Environment and staff | High | Medium | Low | Not an issue | Not known |
| Issues managing sensory experiences (e.g. noise levels) |  |  |  |  |  |
| Issues managing transitions within the school day |  |  |  |  |  |
| Difficulties in relationships with staff |  |  |  |  |  |
| Notes on key items: | | | | | |

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| --- | --- | --- | --- | --- | --- |
|  | | Level of Concern | | | |
| Other issues | High | Medium | Low | Not an issue | Not known |
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| Notes on key items: | | | | | |

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| Teacher Questionnaire  A pupil you teach is current experiencing challenges attending school, which we feel may be due to school-related anxiety. We would like to gain a deeper understanding of how they present in school. As an adult who works with this pupil, please complete the below questionnaire. Thank you. |
| Your name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Lesson: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| Please describe this pupil. |
|  |
| What are their strengths? |
|  |
| What is going well for this pupil? |
|  |
| What does this pupil find challenging? |
|  |
| How does this pupil get on with their peers? |
|  |
| How does this pupil get on with you and other adults? |
|  |
| Is this pupil engaged and motivated with their learning? Are they making expected progress? If not, why not? |
|  |
| Have you observed any emotional difficulties at school? If yes, what have these been, and can you identify when they occur? |
|  |
| What support do you provide for this pupil? How do they respond to this? |
|  |
| What is your understanding of this pupil’s attendance challenges? |
|  |
| What do you think might help this pupil in school? |
|  |

Adapted from West Sussex EBSA guidance (2022)

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| --- | --- | --- | --- |
| Pupil Support Plan  I am currently struggling to attend school full time. This is how I want people to support me. | | | |
| Name: | | **Date:** | |
| Form completed by: | | | |
| At school, these things can make me feel anxious: | | | |
|  | | | |
| My key adult(s) in school is/are: | | | |
| When I can speak to them:  Where I can speak to them: | | | |
| My return to school plan includes the following changes to my attendance:  Identify any changes to days or times they can come in. | | | |
| clock | | | |
| Changes to my timetable include:  Identify any changes needed and what should happen/where they should instead. | | | |
|  | | | |
| Any other changes include:  Identify any other changes to routine (e.g. break times, lunch times, transitions in school); classroom expectations (e.g. not expected to read aloud, work in pairs etc) or homework. | | | |
|  | | | |
| When I get upset, I notice these things about myself: | | | |
| red exclamation mark | | | |
| When I start to get upset, others notice these things about me: | | | |
|  | | | |
| Things I can do to make myself feel between when I’m in 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: | | | |
| Happy Family | | | |
| Places in the school I can go to where I feel safe and supported: | | | |
| image of school building | | | |
| Review | | | |
| This plan will be reviewed regularly so that it remains up-to-date and helpful.  Next review date:  People to attend: | | | |
| My signature | **Key adult’s signature** | | **Parent signature** |
|  |  | |  |
| Other people who have access to this plan are: | | | |
|  | | | |

Adapted from West Sussex EBSA guidance (2022)

Information gathering and integration to be completed by Key Worker/SENCO

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| --- | --- | --- | --- |
| Name |  |  |  |
| Year group |  | **School** |  |
| Other agencies involved |  | **Key School staff** |  |
| Description of behaviour: | | | |
|  | | | |
| Risk factors: school, family and individual: | | | |
|  | | | |
| Protective factors and strengths: school, family and individual: | | | |
|  | | | |
| Formulation and integration of various factors: | | | |
|  | | | |
| Function of behaviour: | | | |
|  | | | |
| Strategies currently in place and their effectiveness: | | | |
|  | | | |

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EBSNA Action Plan Template

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | | School: | |
| Year group: | | **Action plan lead:** | |
| Date of plan: | | **Review date agreed:** | |
| Contributors: | | | |
| Agencies involved: | | | |
| Hoped for outcome: What do we hope to see as a result? What is a realistic expectation given the starting point? | | | |
|  | | | |
| Agreed method of communication between home and school? (Who, When, How?) | | | |
|  | | | |
| Pupil’s strengths and interests: | | | |
|  | | | |
| Identified need | **Agreed action/support** | | **Details** |
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Adapted from West Sussex EBSA guidance (2022)

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| Positive behaviour plan template: | | | | | | | | |
| Name of Pupil: |  | | | | Name of Teacher: |  | | |
| Date of Birth: |  | | | | Date of Plan: |  | | |
| Class Group: |  | | | | Review Date: |  | | |
| **Summary, strengths and interests:** | | | | | | | | |
| **Preferred De-escalation Strategies:**  **Tick the below strategies that work for this pupil.**  **Add any further strategies below:** | | | | | | | | |
| Verbal advice/support | | | Distraction | | | | | Reassurance |
| Ignoring of negative engagement seeking behaviours | | | Contingent Touch | | | | | PACE/active listening |
| Time In Offer | | | Time in safe space | | | | | Change of face |
| Reminder of Choices/Limits/Consequences | | | Sensory support | | | | | Success/achievement reminder |
| Removing other people | | | Additional Nurture/walk and talk | | | | | Decreased demands |
| Job errand | | | Frequent brain breaks | | | | | Personal space |
| Humour | | | Change of activity | | | | | Change of setting |
| Sweets to chew or food to crunch | | | Cold drink | | | | | Trusted adult |
| **Trigger Behaviours** *(Describe common behaviours/situations which are known to have led to de-escalation techniques /positive handling being required. When is such behaviour likely to occur? E.g. Teasing from other students)* | | | |  | | | | |
| **Warning Signs (***Describe and behaviours that may be observed***)**  **RISK ASSESSMENT** | | | | | | | | |
| **Description of Behaviour** | | **How likely is the risk to happen?**  High = Daily / more than once a day  Medium = Weekly  Low = Less than once a week | | | | | **How great is the risk to others?**  High = Potential to serious injury to others, self and property  Medium = Some potential to injure and harm  Low = Prevents learning – no risk of injury | |
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| **Are there any medical or diagnostic considerations?** | | | | | | | | |
| **Student de-briefing process following incident:** | | | | | | | | |
| **Recording & Notification:** | | | | | | | | |

One Page Pupil Profile template:

|  |  |
| --- | --- |
| Name: | |
| Age: | |
| What people admire and like about me: | Photo of student |
| How I communicate and feel calm: | What makes me happy: |
| How I want to be supported: | |