

# **Promoting and supporting attendance: emotionally related school avoidance pathway and toolkit guidance**

## **Introduction**

There are underlying emotions linked to all school avoidance that need to be understood. Identifying the purpose served by non-attendance should be explored fully with the child or young person, parents, carers, social care (if involved), and key school staff. Schools have a specific duty to promote children's and young people's wellbeing and welfare, and to safeguard them. All education institutions (independent, free, academy and local authority schools), according to Section 157 of the Education Act, must do something if the child or young person is not attending school. They should take the appropriate steps to support the child or young person. Children's right to education is enshrined within the United Nations Convention on the Rights of the Child in Article 28 'Rights to Education' and Article 29 'Goals of Education'. These rights include effective education that is adequate and appropriate.

The Achieving for Children (AfC) and Royal Borough of Windsor and Maidenhead (RBWM) 'Promoting and supporting attendance: emotionally related school avoidance (ERSA) pathway and toolkit' will be disseminated to all schools by the AfC RBWM schools' forum and area special educational needs coordinator (SENCo) for guidance and immediate application by the school attendance officers, SENCo, safeguarding and pastoral teams. Schools can then be supported, as appropriate, by the relevant AfC RBWM services and stakeholders, depending on the school's core and traded partnerships, and services directly involved with the child or young person concerned.

## **Definition**

Emotionally related school avoidance (ERSA) describes a group of children and young people who experience difficulties attending school which can be linked to school, parents, carers and child factors as well as wider societal factors.

"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. It is usually a unique combination of various factors and their interaction that leads to school non-attendance, although one factor may be more salient to the problems than others in a particular child." (Thambirajah et al, 2008: p. 33).<sup>1</sup>

ERSA can be considered as a continuum ranging from children and young people who are still attending school, but present with anxiety (perhaps somatic symptoms) through to complete absence from school for an extended period of time. Although children's and young people's behaviours might not be readily recognisable as ERSA at the early stages of the continuum, it highlights their vulnerability to having a profile of ERSA if action is not taken. Children with ERSA often do want to attend school, however, their anxiety, or an absence of necessary skills or resources leaves them unable to do so.

<sup>1</sup>Thambirajah, M. S., Grandison, K. J., & De-Hayes, L. (2008). *Understanding school refusal: A handbook for professionals in education, health and social care*. Jessica Kingsley Publishers.

## Presentation and risk factors

ERSA is a combination of symptoms that indicates that a young person is experiencing emotional distress relating to school attendance. Whilst there is rarely a single cause, anxiety is typically at the core of the ERSA. Possible other risk factors include:

- peer or staff relationship difficulties
- transition to a new school
- academic demands
- loss and bereavement
- attachment and trauma
- high levels of family stress or changes in family dynamics
- parent's or carer's physical or mental health problems
- a fear of failure and poor self confidence
- special educational needs if unidentified or unsupported

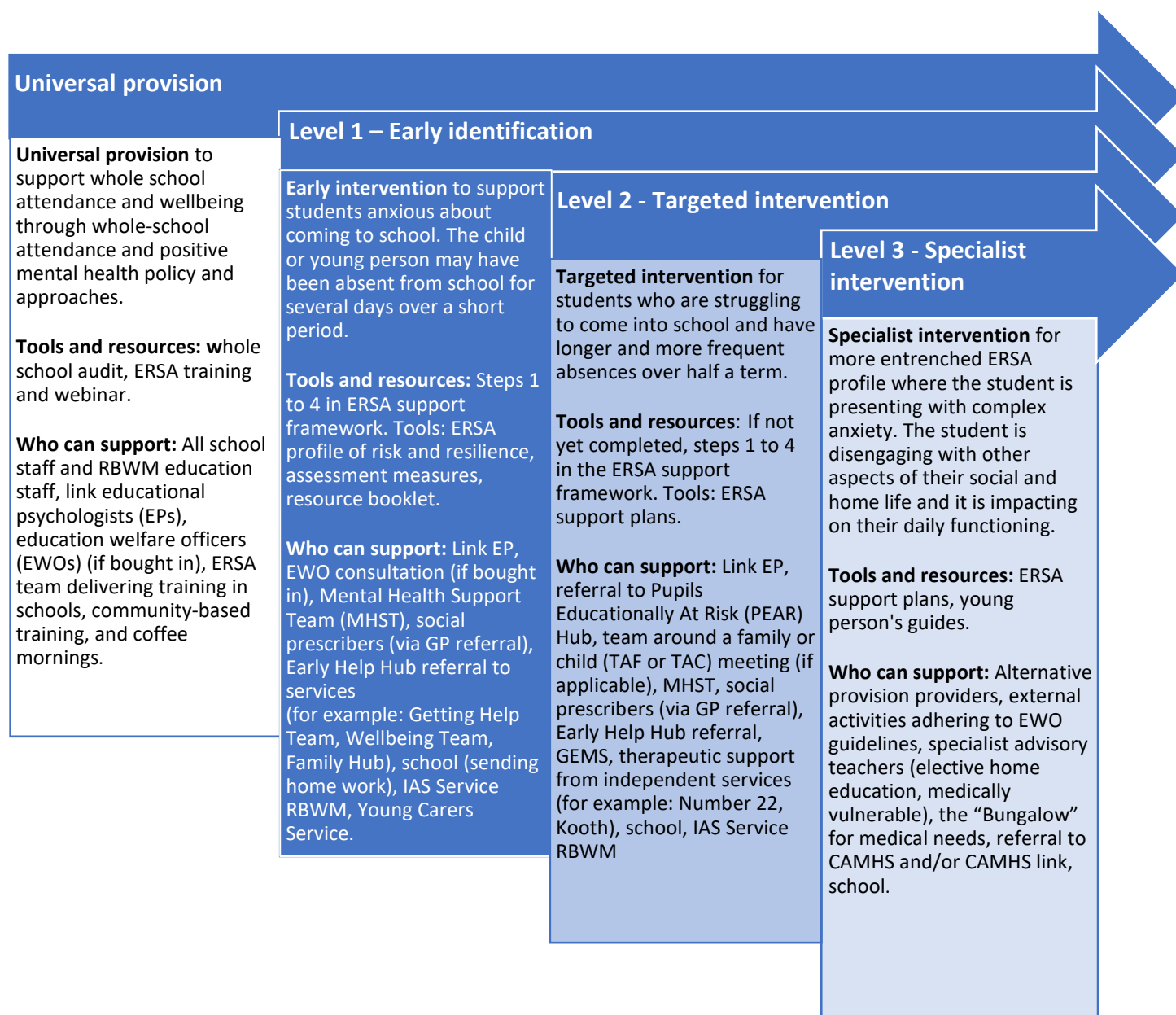
There is an acknowledgement that just as the combination of factors contributing to ERSA are complex and largely unique to the individual and their family, symptoms and associated behaviours can also present in a variety of ways. It is also important to note that children and young people experiencing ERSA can present with different behaviours at home and at school. For example, a child who is upset about coming to school in the morning, but then settles quickly when at school, may still be experiencing ERSA despite not showing any behaviours in the school setting.

Pupils may exhibit one or more of the following associated behaviours:

- crying
- refusal to get ready for school or to leave the house
- rumination and worry around school-related issues
- sleep problems
- psychosomatic illness: psychosomatic illnesses, including headache and tummy ache, occur when no underlying medical cause can be found and the basis is thought to be emotional.
- masking anxiety in school

Thambirajah (2008) explains that the child or young person may also display defensive aggression as a means of trying to control a situation that feels 'out-of-control'. Typically this might be directed towards a parent or carer who is encouraging the child to go into school and may include verbal abuse or physical aggression directed at objects or people. These behaviours can be seen as symptoms of anxiety and an attempt by the child or young person to avoid a situation that they perceive to be threatening.

## ERSA pathway



## Key guiding principles in applying the ERSA pathway

The ‘Promoting and supporting attendance: ERSA graduated multi-agency pathway’ is designed to be used by schools to support the attendance of all children and young people, with schools taking the lead on a universal approach to promoting school attendance (pathway level – universal provision) and with more individualised, targeted support for pupils identified as at-risk of ERSA (pathway levels 1 to 3). The school should continue to provide support for children and young people who are struggling to attend school at all levels of difficulty, liaising with AfC RBWM education services, CAMHS, social care, youth services and other outside agencies where appropriate.

At each level of the pathway, additional services and support have been identified that the school can approach to work alongside school staff, the children and young people, their family, and professionals already involved, to help the children and young people achieve the goals identified in their ERSA support plan. It is expected that the professionals involved at earlier levels will likely continue to be involved in supporting the child or young person as other professionals become involved. For example, the social worker may become involved at level 1 and will continue their involvement until the child or young person has achieved the goals in their ERSA support plan and is attending and engaging in school again. This will happen even if the child or young person faces greater difficulties and professionals at levels 2 and 3 are also providing support.

The pathway acts as a prompt to schools to suggest the professionals that could become involved at each level of difficulty the child and young person may be facing and what support they could provide, and should be used as a guide. For example, it is not necessarily the case that all the professionals at that level will become involved. Their involvement may not be appropriate (for example, if the child is not open to social care, then a social worker will not be involved) or if services may provide similar support (for example, the Getting Help Team and Wellbeing Team may provide similar interventions, so only one service would be involved).

Additionally, there should be some flexibility in the timescales for delivery from each service, for example, it may not be possible due to previous commitments, for the educational psychologist to hold a consultation (level 1) before the situation escalates and the concern reaches level 2. The school should use their knowledge of the services and best judgement to ensure the appropriate services are approached when needed (following appropriate school intervention first).

### **Universal provision**

Key school staff, including senior leadership, attendance officers, SENCos, pastoral leads and the designated safeguarding officer should take the lead on supporting whole-school wellbeing and positive mental health policies and approaches to reduce risk factors associated with ERSA. Schools should complete the whole school audit on profiling, preventing and awareness of ERSA within the school. Schools play a key role in identifying pupils who may be at risk of ERSA, using the ERSA profile as an intervention tool to identify risk and resilience factors, and will work with the children, young people and their families to support good school attendance. There is an ERSA training webinar available to help you to understand ERSA and how to apply the ERSA toolkit bespoke to your school context. There are also ERSA coffee mornings delivered in the community which schools can signpost families to.

### **Level 1: Early intervention**

When a child or young person is reporting being anxious about coming to school, and they have been absent from school for several days over a short period within three weeks, more targeted support is required, and the school should be aware of any further risk factors (such as, is the child or young person a child in care, changes in home circumstances or diagnosis). Information should be shared with the appropriate agencies and support service such as the Children and Young People's Disability Service (CYPDS) or social care.

The school should follow the ERSA support framework and create an ERSA support plan with the child or young person, their family and all stakeholders. Goals should be agreed with the child or young person and be achievable, with regular short-term reviews, and the support in place should be clearly specified. As part of early intervention support, schools should use their in-house mental health and wellbeing support, such as their emotional literacy support assistants (ELSAs), MHSTs or counsellors as part of the child's or young person's support plan. Social prescribers can also be involved through a referral from the GP.

The school can request support from a range of AfC RBWM services as appropriate, either through an Early Help Hub referral or through a request for involvement to the Educational Psychology or Education Welfare Officer Team (if the school is trading with the Educational Psychology and EWO services), who may be able to offer consultation services. If the child or young person is open to social care, as well as involving the social worker, it may also be appropriate to request involvement from the Family Resilience Team, family support workers, Young Carers Team, youth support workers, and personal advisors (for those aged 16 and above). The Getting Help Team and the Wellbeing Team may also be able to offer some advice to help the child with their school-related anxieties.

## **Level 2: Targeted intervention**

If the child or young person is still struggling to come into school and is having longer and more frequent periods of absence over the period of a term, the ERSA support plan may need to be reviewed with the child or young person, family and key professionals to identify additional support and review goals. This may be within the context of a TAC or TAF meeting (if the child has social care involvement), or an early education, health and care plan (EHCP) or personal education plan (PEP) review (if the child has an EHCP).

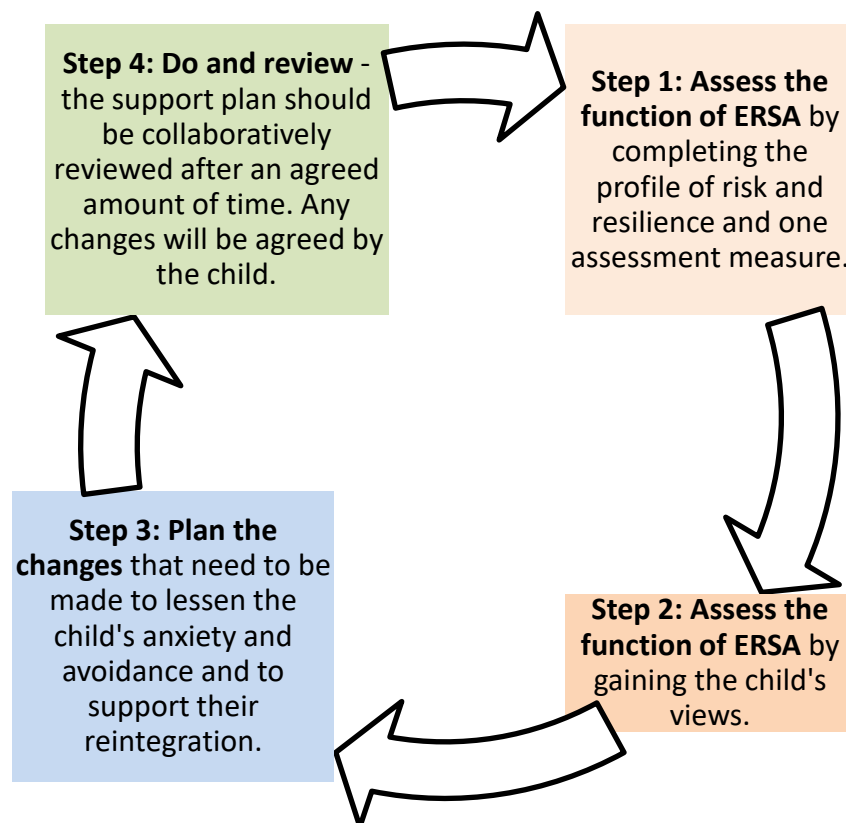
The school should consider signposting to further local services (if not done so already), ensuring efficient information sharing across the services. This could include a referral to the Pupils Educationally at Risk Hub (PEAR), who may then allocate a specialist advisory teacher to support the child or young person with their learning. At this stage, the Getting Help Team, Mental Health School Support Team or Wellbeing Team may offer direct therapeutic intervention for the child or young person. Social prescribers can also be involved through a referral from the GP.

## **Level 3: Specialist intervention**

If the child or young person is experiencing long-term absence from school and presenting with complex anxiety, more specialist help should be sought, whilst the school should retain frequent contact with the child and have an overview of their education, and continue to review the ERSA support plan to help them get back to school. Support from specialist services such as CAMHS and CAMHS link should be sought as appropriate, as well as ongoing support from the AfC RBWM support services. The Bungalow is a provision for children who have been identified as having medical needs, and a referral from the GP is needed.

A home learning programme should be in place, which may include home tuition or alternative provision if appropriate (if a child is signed off school on medical grounds, they will be entitled to receive home tuition after 15 days of absence). The focus should remain on improving the child's mental health and recovery to support their return to school. Guidelines on external activities that the child can participate in outside school to support their engagement in the world can be requested from the school or EWO.

### Four-step process of ERSA support framework



The following four step process underpins the approach in the ERSA toolkit to support individual children and young people. These steps should be embedded across the different levels of the ERSA pathway, and can inform the different tools and resources needed at each phase.

**Step 1: Assess the function of ERSA** by completing the profile of risk and resilience and one assessment measure.

**Step 2: Assess the function of ERSA** by gaining the child's views.

**Step 3: Plan the changes that need to be made** to lessen the child's anxiety and avoidance, and to support with their reintegration at school. Record this on the child's support plan or ERSA person-centred path (PC path).

**Step 4: Do and review** – after implementing the actions on the child's support plan for a minimum of one week, this needs to be collaboratively reviewed and any changes agreed by the child. Review timeframes will vary depending on the individual needs of each case.

## **Using the ERSA whole school audit**

The ERSA whole school audit is a tool for schools to use to profile the staff's knowledge and awareness of ERSA, the school's approach to mental health and wellbeing as a preventative factor, and the systems and support in place for the child or young person experiencing ERSA. This can then be used to target areas in need of development to support a whole-school ethos of positive mental health and school attendance.

## **Using the ERSA profile tool**

The ERSA profile of risk and resiliency is a tool and intervention for schools to use to identify if a child or young person may be at risk of ERSA when anxiety or non-attendance are becoming apparent. The profile of risk and resiliency can also be used to identify factors that may have contributed to ERSA, which are useful to consider when developing the ERSA support plan, so that goals and support can be targeted in the right areas.

It would be useful to complete the profile of risk and resiliency alongside the child or young person, parents or carers, and school staff who know the child or young person well, to ensure all potential risks can be identified. If the resultant profile suggests that there are several factors placing the child or young person at risk of emotionally related school avoidance, the school should work with the child or young person and their parents or carers to obtain their views, and contact the appropriate professionals identified in level 1 of the pathway.

## **Using the ERSA support plan**

The ERSA support plan is a tool and intervention to aid schools, parents, carers and the child or young person to identify achievable goals to help the child or young person move towards greater school attendance and engagement in education, including the provision needed to do so and the key stakeholders needed to provide support.

The ERSA support plan should be completed alongside the child or young person with a trusted adult to ensure the goals and support are agreed by all parties and that the child's voice is heard. The child or young person may be able to provide valuable information to create a successful ERSA support plan, including examples of support that has previously helped, steps towards goals that feel manageable for them, and key people they want to support them. The support plan should be reviewed at regular intervals to track progress and amend if necessary.

## Local resources

Please refer to the AfC RBWM multi-agency graduated ERSA pathway in the first instance, which is on page 3 of this guidance document. This pathway contains more information on what ERSA is and how to support attendance for pupils at all stages of the ERSA continuum.

### Emerging Minds:

[Back to school after lockdown. School reintegration and youth mental health](#)

### Number 22 Counselling:

[Provides free one-to-one and group counselling sessions in person](#)

### Family Friends:

[A free service offering short-term support for children up to age 13 \(or up to 19 in army families\) and their families who may be facing difficult times](#)

## National resources

[West Sussex emotionally based school avoidance toolkit and appendices](#)

[Oxfordshire emotionally based school avoidance guidance](#)

### Young Minds:

[Supporting children with school anxiety and refusal](#)

### Kooth:

[Free online counselling service for 11 to 19 year olds that can be accessed via mobile phone](#)

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