

CASE STUDY 1**Context**

A is a year 2 pupil in a large LA maintained primary school. He had been absent from school for the last 10 days stating he “just couldn’t go to school”. A’s parents were not aware of any reason for his seeming refusal to attend school or that anything had changed or happened at school that would explain his reluctance. A had always been a quiet boy and sometimes nervous to try new things but had always previously attended well. A’s Mother recently reported he had recently become very clingy. A’s Mother had called the LA attendance helpline stating she is “desperate to get A back to school and doesn’t know what else to do”.

Action

In recognising the need to explore A’s reluctance further and to avoid the absence becoming any more protracted than necessary, with Mothers permission the duty helpline officer contacted the school to support and advise of Mothers call. The school were made aware of their absence reporting duties into the LA via the portal. The school advised their family support worker had made daily telephone contact with the family and had planned to make a home visit to see A at their home address this week. During the call school asked if we had any further advice or guidance of what else they could try to best support A’s return. They were aware A’s Mother was heavily pregnant and wanted to assist her in supporting A as much as possible.

School staff were advised to explore general health and wellbeing conversations, A’s usual routines (including sleep), and explain social and physical responses to anxiety as something experienced by many children and adults if this presents as a potential issue.

School staff were further encouraged to try asking one of A’s friends if they would like to write a note or make a drawing/something else for school to take with them for A to advise they are looking forward to seeing him again soon. The expected arrival of a new baby was to be explored with A also.

When asked if the school have any thrive, trauma informed or attendance training it became apparent the family support worker had accessed training and support on anxiety based non attendance. They were further advised to apply some of those approaches in this instance.

It was reported from the home visit A was highly anxious about a school spelling competition and that he was fearful of failing. He was also unsettled by having to move bedrooms recently as he hadn’t got used to this yet ‘and didn’t know what it would be like being a big brother as he was only still small himself’.

The school, A and parents agreed a graduated action plan to support A’s return.

A had a trusted member of staff and Y6 peer mentor who he could access if feeling worried or anxious in school. A was advised he wouldn’t have to take part in the spelling competition. There were some important jobs to be done to support the competition so if he wanted to help with those he could.

A’s Mother was advised of the health and community Starting Well Partnership resources both for herself, A and the new baby and also of the nearby Family Hub. She was also advised of the Holiday and Food Activity (HAF) programme by school, as many of A’s friends attended this.

Outcome

As a result of multi-agency working and identifying the barriers to attendance and drivers of A’s anxieties, reasonable adjustments were put in place to assist A’s return. A was fully supported by his father, school staff and friends to overcome the initial barriers and attendance immediately improved. A has bonded with his peer mentor and recently enjoyed the HAF activities. His parents report he’s back to his usual self. He had achieved 100% attendance for the last 5 weeks in the follow up check.

CASE STUDY 2**Context**

I, a year 7 pupil in a MAT secondary school, attended school for the first 3 days of term and had not attended since. I was known to have some attendance difficulties at primary school. The academy was made aware of this in advance, so had offered an enhanced transition over the summer term which I had attended most days. On day 2 I sought out her form tutor and reported she was feeling really low. A referral to the school counsellor was made.

Action

Following 3 days of non-attendance and sporadic communications from home the school requested a meeting with I and her mother. School had been made aware that I's Mother had her own health concerns therefore the meeting was offered to be in person or virtual with a mutually convenient time agreed. School had ensured I's form tutor; their attendance officer and school counsellor could be present for the meeting to collectively ensure any required actions to support I could be agreed. I's Mother was advised in advance who would be present in the meeting, and why, to offer supportive reassurance and best manage expectations.

During the meeting I's mother explained her own health needs, and how at times this impacted I as she did not want to leave her mother alone and there was just the two of them. I's Mother shared she didn't want I losing out on her education and she felt guilty that she had become a burden to I. I's mother shared that mornings were particularly difficult at home as I was required to assist her mother with caring responsibilities. I explained her perception was that because of this she would be late for school and consequently didn't want the embarrassment of getting into trouble, or detention so would rather not attend at all.

A collaborative action plan to support I and her mother was drawn up and agreed. This supported I in being collected by the school minibus instead of walking to school and would therefore enable I extra time to complete her carer responsibilities and avoid being late. In addition, I was allowed to have her mobile phone at intervals to text her mother and check in with her. I was offered a sixth form student peer support buddy and a weekly counsellor session in school.

I and her mother agreed for school to contact young carers as an external network to support I, as well as adult social care to see if I's Mother could have a reviewed assessment of need.

Outcome

These actions assisted I and her mother's independence and well-being. By involving I's Mother as a partner in conversations, showing unconditional positive regard and implementing simple support strategies to help to alleviate barriers, I is now attending school more regularly, and on time, and has a support network that understands her lived experience. She is enjoying school and being part of the young carer community.

I's Mother was enabled to access the Community Services Directory and online support ensuring her opportunity to explore further available support if required.

Both report their relationship has become more positive and they are better supported to access activities, not just caring activities.