

Child or young person information	
Name	XX Jeffery
Education setting	CGPS
Name of parent/carer	MXX
Address of parent/carer	
Social care status	N/A
Practitioner information	
Name of Educational Psychologist (EP)	Dr Maryam Y A Ibrahim
Role of EP	To provide statutory advice as part of the assessment of XX's education, health and care needs.
EP contact address, email and phone number	mobile: 07741692863 email:yakakaaliko@gmail.com
Date of advice	18.10.24



The Educational Psychology Service as part of City of York Safeguarding Children Partnership has made a commitment to advancing child rights under the [Convention on the Rights of the Child](#) (United Nations, 1989).

We have a duty to do everything we can to:



children and adults know about children's rights



Make rights real for children and young people



Always act in the best interests of the child/young person we are



Keep children safe and promote their well-being

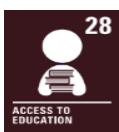


Give children a voice and help them to participate in decision-making



Work hard to recognise any forms of discrimination and to address these

Our work also aims to promote these additional rights:



ASSESSMENT OF NEED

Summary including formulation

My name is Dr Maryam Ibrahim and I work as an Associate Educational Psychologist for the City of York Council (CYC). The purpose of this report is to provide statutory advice as part of the Local Authority Education, Health and Care Needs Assessment (EHCNA).

Background to involvement from the Educational Psychology Service:

XX is eleven years old. XX has been described positively as a good natured child. He currently attends Year 6 at Clifton Green Primary School. XX's attendance was 89.9% at the end of the last academic year (2023/2024), this has been attributed to growing difficulties in school. School reports have confirmed that XX is struggling to attend school when there are special events like dress-up and sports days. XX dislikes looking different or 'standing-out,' making it challenging for him to manage a significant change in the school day. Mrs Jeffery (mum) has shared that XX is now starting to express his preference of being away from school.

XX lives with his mother and has attended Clifton Green since Reception. XX has been on the Special Educational Needs register since 2022, though his difficulties were apparent before that. Ms MXX (mum) believed that XX was showing signs of selective mutism, aspects of social communication difficulties, and sensory needs before he started Clifton Green. XX was not meeting age related expectations even at Year 1. However, during the COVID-19 Pandemic lockdowns, mum, was able to teach XX to read on a 1:1 basis. Reading has remained one of XX's strongest suits in school.

In my professional opinion, XX has shown remarkable perseverance in school despite significant difficulties. XX has a diagnosis of Autism Spectrum Disorder (ASD) which underscores his difficulties with developing social connections, back and forth interactions, understanding conversation and conveying his thoughts and feelings verbally. XX's poor memory, processing difficulties and executive functioning have made the day to day activities in school feel impossible, leading XX to experience significant anxiety and hypervigilance in the school setting. XX masks these difficulties daily and puts on a façade of a child who is 'coping.'

Despite reporting that people in school care about him, XX's experience of school has become increasingly difficult, as he struggles to manage his sensory sensitivities in a normal learning environment. At home, XX spends the time after school, 'zoned out' decompressing from all environmental input. XX has started to voice to mum, that he does not want to be in school. These feelings were confirmed in the card sort he completed for the EP, suggesting that XX may be in danger of developing emotionally based school avoidance (EBSA).

Though XX has some resilience factors that are functioning in a protective way to keep him coming to school (like friends, safe adults and family), the risk factors are growing and a transition into a new school may strip him from the fragile connections he has to his current school. XX is vulnerable as he lacks the independence to navigate a new school setting or to recognise which peers he should copy and which he shouldn't. XX will require an enhanced transition, careful planning to develop a responsive environment with a sense of safety, as well access to the curriculum in fun and dynamic ways, in order to remain in school.

Primary area of need	Communication and Interaction
Secondary or additional area(s) of need	Cognition and Learning & Sensory and Physical

Evidence

This report is based on the following sources of information:

Date	Source of Information
26.09.24	Parent Views Consultation Meeting with MXX (Mum)
01.10.24	Pupil Views, Card Sord with XX (cyp)
09.10.24	School Views- Consultation Meeting CT (SENCo, CGPS)
Various	Documents and information submitted as part of the EHCNA application

This report should be read alongside information submitted as part of the Request for Statutory Assessment (RSA).

XX's mother have been consulted regarding the content of this report.

Views, interests, strengths, and aspirations

Views of child/young person:

To explore XX's views, he was asked to complete the School Wellbeing card sort. XX completed the risk and resilience card sorts by categorizing the electronic cards into piles; 'True About Me,' 'Not True About Me,' 'Top 5/'Top 5 I'd like to change.' Due to a technical difficulty, XX relied on me to place the cards into his chosen piles. XX seemed to instruct me to sort the cards with ease. XX was unsure about a number of cards, for this reason, those cards were left unsorted.

In the Resilience card sort, XX expressed that he;

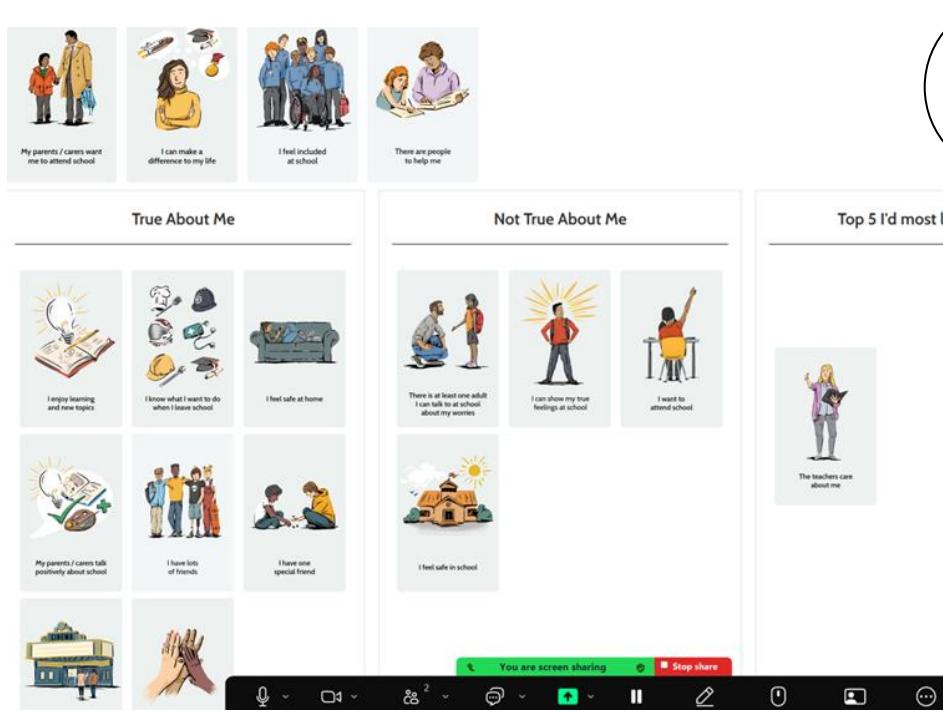
- enjoyed learning about new topics, had friends, felt safe at home, did fun things outside of school, and knew what he wanted to be when he grew up.
 - did not feel he has an adult he could share his worries with in school, he could not share his true feelings at school, did not want to attend school and did not like to be in school.

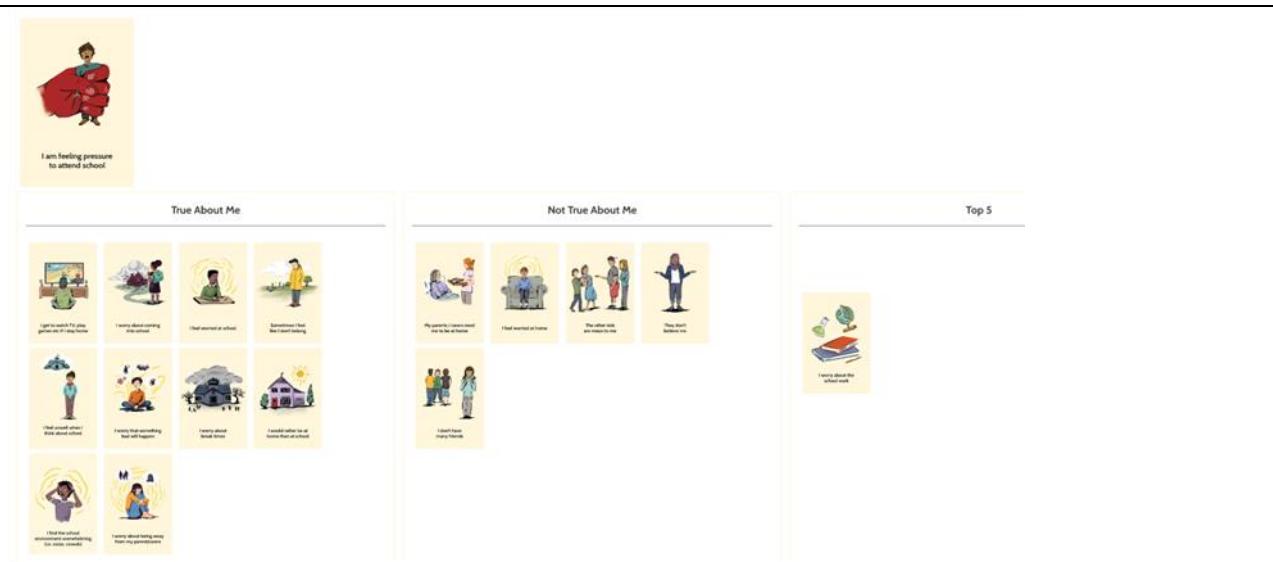
In the risk card sort, XX indicated;

- he preferred being at home, he felt overwhelmed and worried in school; during learning break times, and when he was away from his parents. XX suggested he felt ill when he thought about school and felt overwhelmed in the environment (noise and crowds etc).
 - he felt safe at home, other kids were not mean to him, had friends, and felt that people believed him.

XX indicate that he wanted to stop worrying about school work and wanted to have teachers who cared about him.

Though XX has several protective factors like strong family ties, friends, and feeling safe in school, he repeatedly cited his preference for being home and finding the school environment overwhelming and difficult. Moving to a new setting where he may lose his friends and not feel familiar with the setting, may cause further alienation from school.





XX's strengths and interests:

XX reported that he enjoys History as it allows him to learn about what happened in the past. XX likes to conduct experiments in science.

XX loves reading because it takes him to a 'different dimension.'

XX is good at drawing and modelling. He reports that he loves art because he finds it 'relaxing.'

XX loves cleaning up the roots in the garden.

XX enjoys being in the outdoors

XX loves building worlds in Minecraft and Roblox.

XX is very creative and shows great imagination in his story telling.

XX's aspirations:

XX wants to be a gamer when he grows up. He is techsavvy and shows great problem solving skills when he is using his tablet or computer.

Views of parents/carers:

MXX (mum) describes XX as a positive and happy child who is always smiling. XX enjoys being outdoors, and loves playing video games. Despite his difficulties, XX continues to attend school and does his best to follow behaviour expectations. Mum explains that XX usually requires time after the school day to decompress and manage his sensory overload before he is able to re-engage in family routines.

According to mum, XX's difficulties were evident in Nursery. XX presented as having selective mutism and still struggles to speak with adults in school. XX seems to have difficulty with emotions and often masks his difficulties in school. This makes it difficult for adults to understand what he needs and respond. Ms MXX has noticed increasing difficulties as XX has become older and fears that he is yet to develop skills required to independently manage skills like walking to and from school.

Ms MXX's hopes and aspirations for XX are for him to be in a nurturing setting that will understand his needs, and support him to integrate by advocating for him. It is vital for Ms MXX that XX learns about his emotions, forms social relationships, develops confidence in expressing

his needs and preferences while still learning. Ms MXX has named H- ERP as a preferred setting for XX. Mum is convinced that this school will be right for XX as he immediately demonstrated positive feelings about the sensory facilities when he visited. Though XX rarely presents as dysregulated in school, it was apparent that staff at H-ERP were trained to notice early signs of dysregulation.

Special Educational Needs

- *Communication and interaction needs:*
 - XX presents as a child with social communication and interaction difficulties related to his diagnosis of Autism. XX wears a communication band as he finds it hard to communicate verbally with adults in school. Staff report that even when he speaks, his volume is very low, making it challenging for him to be heard.
 - Though XX has friends in school, mum reports that his friendships are mainly confined to school. XX does not invite friends over, and prefers to stay home than go out. CT (SENCo) shared that XX seems to stay with his friend group, but often plays alone in the peripheries.
 - XX has processing difficulties which makes it difficult for him to keep in tandem with the complex back and forth interactions that take place in the classroom. According to the Child and Adolescent Mental Health Services (CAMHs) assessment using the Clinical Evaluation of Language Fundamentals, Fifth Edition (CELF-5), XX has 'moderate delays' in 'following directions.' XX often relies on peers to have an understanding of what he should doing in class.
 - XX has had the same teachers for years, but this has not improved his confidence in speaking with them. School has instituted opportunities to improve rapport between XX and his teacher.
 - XX is currently on the Speech and Language wait list. It is suspected that XX has palilalia a condition in which an individual involuntarily repeats words phrases.
- *Cognition and learning needs:*
 - *XX is creative and imaginative. XX is good at creating stories, drawing and modelling.*
 - *XX's favourite subjects are History and Science.*
 - XX has a diagnosis of Autism (April 2024). This presents as in XX's behaviour as black and white thinking, difficulty with changes in his routine, executive functioning challenges, memory and processing difficulties. Teachers and mum have reported that XX has difficulty with measuring time. He often describes the time in school as incredibly long.
 - XX is not meeting age related expectations in Maths and Literacy. School records indicate he is working at Year 3 level in Maths and Literacy and Year 2 levels in writing. His reading is comparatively better. Provision put in place to help XX to access the curriculum includes small groups (1:2-4) and 1:1 sessions. Though XX participates in all mainstream activities, he does not have the same level learning. XX described the Math lessons as a 'million calculations in one second.'
 - XX has significant difficulties with his executive functioning, memory and processing. XX requires continuous prompts to organise and complete tasks. He

needs reminders to understand what is required of him and also to remember what he is meant to do.

- Though XX can decode and comprehend texts, he often struggles to remember the questions asked on the directions given. This makes it difficult to complete set activities.
- XX depends on adults in school in order to complete tasks. His independence is impaired by his difficulties with memory and processing. Sometimes, XX will take a long time to pick food choice for lunch, forgetting that he has a packed lunch from home.
- *Ms Telford (SENCo) reported that sometimes XX displays repetitive play with objects like sticks.*
- XX's visual memory seems to be comparatively stronger than his audio memory. XX successfully completed a card sort during a pupil views session and his mother reports XX's impressive ability to memorise codes related to gaming characters he is fond of.
- XX reported that he would like to have a computer to write with, as this would help him.

- Social emotional and mental health needs:

- XX presents as a happy child who is often smiling. He is kind, considerate and is easy-going. This makes him likeable.
- XX has friends in school, however, staff notice that he usually does not engage in active play within the group, rather, he is likely to stay close when they are playing. Despite having friends, XX does not invite friends home, nor does he visit friends outside of school.
- XX has started to notice his difficulties and how this makes him different from peers. Mum reports that this is having an impact on his feelings about school. XX has shared with mum as well as in the card sort that he does not like being in school; it evokes a sense of worry and distress in him.
- XX appears to be experiencing stomach cramps due to anxious feelings around school. On days when XX has missed school, he has typically had an episode of stomach cramps. XX reported 'I feel unwell when I think about school' on the card sort.
- XX shows subtle signs of dysregulation that are sometimes hard to notice; smacking his lips, spinning and opening his mouth. Typically following these subtle behaviours, XX displays a freeze response by shutting down; withdrawing and walking away. Mum reports that when XX is upset, he does not engage with anyone.
- XX appears to experience heightened anxiety when he needs to participate in activities or events. This is especially evident when there is something out of the usual happening in school. XX expressed that he doesn't like to stand out or be singled out, this is why he struggles on non-uniform days.
- Mum reported that XX has a panic attack in school when he fell ill, as he could not share this with anyone in school.

Sensory and/or physical needs:

- XX presents with a range of sensory needs

- XX has difficulty recognising interoceptive markers in his body. XX does not recognise when he is hungry or thirsty. He was referred to the clinic for chronic constipation.
- XX wears three sets of underwear and socks to go to school. This suggests that he is seeking deep pressure.
- XX spins as a way to manage his anxiety. During kick boxing classes he would spin round repeatedly when he was starting to become dysregulated.
- XX does not appear register pain when he is hurt.
- XX wears his clothes inside out as he does not like the feeling of the seams against his skin.
- XX sprint to the bottom of the road at every pick-up. Mum believes this provides him with some sort of sensory relief.
- XX struggles with his motor control and balance. XX has had visits to Accident and Emergency due to falls.
- XX shared that he is bothered by loud noises. He dislikes singing assemblies.
- XX does not enjoy the feeling of sitting on a chair in class. He describes this feeling like being stuck.
- When XX experiences sensory overload, mum describes him as zoning out.
- XX is not able to independently walk to school and back. XX tends to forget his way and can easily get lost.
- XX is taking melatonin daily to support his sleep. Mum reports that the quality and length of XX's sleep has improved significantly.
- When XX visited Huntington ERP with mum, he was excited to use the sensory room and kept asking to go back. XX expressed that the sensory room made him feel calm.

Report completed by:	
Name: Maryam Y A Ibrahim	Signature: <i>M. Ibrahim</i>
Designation: Educational Psychologist Registered to practise by the Health and Care Professions Council http://www.hcpcheck.org	Date: 20.10.24
HCPC registration number: PYL043132	Telephone number: 07741692863
Email Address: yakakaaliko@gmail.com	Address: Educational Psychology Service, West Offices, Station Rise, York, YO1 6GA

This report will be placed in XX's Educational Psychology file and copies sent to:	
Name	Role
Ms MX	(mum)
Ms CT	SENCo, CGPS