

Emotional Wellbeing & Behaviour Support Service – Supporting Information

- Please complete all sections **(A to K)** of this tool and send it with your referral to the EWBS service.
- It is designed to provide us with relevant targeted information AND support schools to develop understanding of what factors may be having an impact on the current behaviours of concern. It is an information gathering tool, not a diagnostic one. Please complete to the best of your knowledge with the current information you have in school.
- Tick the column that best reflects the experiences of the pupil in the LOW/MEDIUM/HIGH/VERY HIGH columns
- Highlight / tick information in the left-hand column where appropriate.
- Your referral form should still give a written account of specific concerns, how you have already implemented the graduated approach to support the pupil and what outcome you would like to achieve.

PUPIL NAME:	DOB:
SCHOOL:	COMPLETED BY:

Any other professional services involved in the last 3 years (Tick) ☐ Yes ☐ No (Please give name and contact details)

<input type="checkbox"/> School Health	<input type="checkbox"/> CYPS / Paediatrician	<input type="checkbox"/> HINT
<input type="checkbox"/> Primary Mental Health	<input type="checkbox"/> Educational Psychologist	<input type="checkbox"/> LINT
<input type="checkbox"/> Inclusion Team	<input type="checkbox"/> EWO	<input type="checkbox"/> Children's Social Care
<input type="checkbox"/> Early Help	<input type="checkbox"/> Youth Justice Service	<input type="checkbox"/> Any other services (specify)

Are you referring to other services at the same time as this referral? ☐ Yes ☐ No Please specify

VULNERABILITY FACTOR	LOW / NA	MEDIUM	HIGH		VERY HIGH
A. Moves of school (last 3 years) (including managed moves & PERMEX)	0	1	2		3+
B. Attendance	100-90%	89-80%	79-70%		Below 70%
C. Attainment - in relation to Age Related Expectations (ARE)	ARE/GD	Just below ARE (up to 1y)	Below ARE (1y – 2y)		Well below ARE (2y+)
D. Exclusions	No FTE or PERMEX (last 2 years)	1X FTE (last 12 months)	Multiple FTE (last 12 months)		At risk of PERMEX
E. Special Educational Needs	Initial concerns	Pupil Passport	SEND Support		EHCP
F. Additional SEND (other than SEMH) (highlight)	0	1	2		3+
<input type="checkbox"/> SpLD (dyslexia / dyscalculia / dyspraxia) <input type="checkbox"/> Autism / social communication <input type="checkbox"/> ADHD (diagnosed) <input type="checkbox"/> Speech & Language <input type="checkbox"/> Cognition & Learning <input type="checkbox"/> Sensory <input type="checkbox"/> Physical &/or medical					
G. Behaviour concerns (highlight)	0/1	2	3		4+
<input type="checkbox"/> Regular low-level disruption <input type="checkbox"/> Oppositional <input type="checkbox"/> Swearing <input type="checkbox"/> Lack of respect <input type="checkbox"/> Attention and concentration <input type="checkbox"/> Impulsive behaviours <input type="checkbox"/> Risk behaviours <input type="checkbox"/> Verbal aggression <input type="checkbox"/> Physical aggression <input type="checkbox"/> Disengaged <input type="checkbox"/> Truancy / absconding <input type="checkbox"/> Withdrawn <input type="checkbox"/> Anti-social behaviour					

<input type="checkbox"/> Other (please detail)	
H. Attitude to learning concerns (highlight) <input type="checkbox"/> Lack of engagement <input type="checkbox"/> low resilience <input type="checkbox"/> poor goal setting / organisational skills <input type="checkbox"/> Fixed mindset <input type="checkbox"/> Unrealistic expectations of themselves (perfectionism) <input type="checkbox"/> self-sabotage <input type="checkbox"/> low aspirations <input type="checkbox"/> Other (please detail)	<div> <div>0</div> <div>1</div> <div>2</div> <div>3+</div> </div>
I. Emotional Wellbeing / mental health concerns (highlight) <input type="checkbox"/> Anxiety <input type="checkbox"/> Self-Harm <input type="checkbox"/> Low mood / depression <input type="checkbox"/> Lacking resilience <input type="checkbox"/> Emotional dysregulation <input type="checkbox"/> Eating Disorders <input type="checkbox"/> Substance misuse <input type="checkbox"/> Identity issues eg. Image, esteem, cultural, gender etc. <input type="checkbox"/> Other (please detail)	<div> <div>0/1</div> <div>2</div> <div>3</div> <div>4+</div> </div>
J. Relationship concerns (highlight) <input type="checkbox"/> Difficulty making / maintaining relationships with peers <input type="checkbox"/> Difficulty trusting adults <input type="checkbox"/> Bullying (bullied) <input type="checkbox"/> Bullying (the bully) <input type="checkbox"/> Difficulties with online relationships <input type="checkbox"/> Socially immature / vulnerable <input type="checkbox"/> Other (please detail)	<div> <div>0/1</div> <div>2</div> <div>3</div> <div>4+</div> </div>
K. Known adversity and trauma (highlight) <input type="checkbox"/> Acute trauma eg. One off incident <input type="checkbox"/> Domestic violence <input type="checkbox"/> Parental conflict <input type="checkbox"/> Inconsistent parenting <input type="checkbox"/> Lack of emotional warmth <input type="checkbox"/> Mental health issues	<div> <div>0/1</div> <div>2</div> <div>3</div> <div>4+</div> </div>

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<ul style="list-style-type: none"><input type="checkbox"/> Substance misuse<input type="checkbox"/> Illness loss / bereavement of significant other<input type="checkbox"/> Separation / divorce<input type="checkbox"/> Young carer<input type="checkbox"/> Attachment issues<input type="checkbox"/> Asylum seeker<input type="checkbox"/> Childhood illness<input type="checkbox"/> Birth trauma<input type="checkbox"/> Financial hardship<input type="checkbox"/> Temporary housing<input type="checkbox"/> Other (please detail)	
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