


Case Study 1: Risk Review

Individual Risk Review Tool for MJP

Year/Group: 14

Notes: _____

Risk Category	Risk Factors	Interaction with risks in other categories
<p>Structural Factors</p> <p><i>e.g. lack of transport routes, lack of course availability locally, cuts to local services.</i></p>	<p>Transport issues mean accessing support, work, or training is a significant barrier.</p> <p>M will lose support from her EHCP because this support can only be accessed if M is in a college environment.</p> <p>Transport links have been reduced.</p>	<p>Compounds personal challenges with mental health because the closing of the EHCP means M feels that support has been taken away despite that support still desperately needed.</p>
<p>Institutional features</p> <p><i>e.g. school environment and policies etc. Behaviour management approaches, access to support</i></p>	<p>Poor school experience only accessing an EHCP in Year 11. Her Asperger was not supported appropriately, and M considered naughty rather than to have SEN.</p>	<p>Poor School experience impacts Social Relationships- she feels let down by adults who she feels should have been more supportive and now reluctant to trust adults to provide support. Interacts with family circumstances. Parents feel 'let down by the system' and don't know where to turn next for help with M</p>
<p>Social relationships</p> <p><i>e.g. bullying experiences, limited friendships, isolation, social skill development, difficult relationships with adults, social confidence</i></p>	<p>BF has moved several hundred miles away. Her friendship group at school have moved on and M feels isolated and left behind.</p>	<p>Adds to personal challenges of depression. Since leaving school 2 years previously M has been out with friends less and less, the previous year less than 5 times. M stays at home in her room while mum goes to work.</p>
<p>Family Circumstances</p> <p><i>e.g. caring demands, socio-economic situation, family relationships, EAL, CLA, highly mobile, turbulent home life</i></p>	<p>Family break up in her GCSE year further impacted M's anxiety. Complete breakdown of her relationship with her father means M is very anxious around male authority.</p>	<p>Interacts with personal challenges. Parents have always been supportive of M but her father struggled to understand Asperger and left mum to "deal with it."</p>
<p>Personal Challenges</p> <p><i>e.g. SEND, neurodivergence, anxiety, low confidence, Gender identity challenge, health.</i></p>	<p>M's Asperger has resulted in a young person who is highly anxious, struggles to cope with change and with very low confidence and self esteem</p>	<p>Impacts M's Social Relationships. Lack of support for Aspergers led to a lack of trust in adults. Created further personal challenges; low self-esteem and anxiety. Now she has no desire to leave the house finding outside too noisy, busy, stressful and scary</p>



M is 18 yr and lives in a village with limited transport links. M relies on her single mum who works full time to transport M where she needs to go. M has Asperger Syndrome and had an EHCP. M left secondary school with one GCSE and in further learning has gained her Maths and English GCSE. M has suffered with anxiety since entering her teens and now also struggles with depression due to increased isolation and lack of friends who have either moved out of the area or at University etc. M has had a poor educational experience and refuses to consider further school/college placements.

Case Study 2: Risk Review

Individual Risk Review Tool for BEN

Year/Group: 11

Notes: _____

Risk Category	Risk Factors	Interaction with risks in other categories
<p>Structural Factors</p> <p><i>e.g. lack of transport routes, lack of course availability locally, cuts to local services.</i></p>	<p>Limited public transport. Village location</p> <p>Has struggled to find an opportunity within a location he is able to travel to. He is therefore likely to become NEET</p>	<p>Interacts with personal challenges and family circumstances. His ongoing health and mobility challenges meant he can't walk for. Limited public transport reduces his Post 16 study options</p> <p>Family responsibilities influence his desire to work and support his family. Low family income and family needs makes travel to other locations for college/ work difficult. Caring duties for younger siblings makes travelling too far challenging for school pick ups</p>
<p>Institutional features</p> <p><i>e.g. school environment and policies etc. Behaviour management approaches, access to support</i></p>	<p>Current school does not offer an appropriate Post 16 course that he can access with his grades, however he is very reluctant to move on to another provider.</p>	
<p>Social relationships</p> <p><i>e.g. bullying experiences, limited friendships, isolation, social skill development, difficult relationships with adults, social confidence</i></p>	<p>Very few friend.</p> <p>Very anxious about moving from school to somewhere new, as he struggles to make friends.</p>	<p>Interacts with personal challenges (health and mobility) – limited him to social places he can access in school. Low income means he can't socialise outside school. Isolation and reliance on very small bubble makes him extremely anxious to go to college and make any changes – compounds personal challenges</p>
<p>Family Circumstances</p> <p><i>e.g. caring demands, socio-economic situation, family relationships, EAL, CLA, highly mobile, turbulent home life</i></p>	<p>Cares for younger siblings who have additional needs.</p> <p>Many daily chores. Home is overcrowded, difficult to find quiet space to do homework. Grandparents have minimal education.</p> <p>Family breakdown; his male role model, his "father", was unemployed and unable to care for his children due to some poor life choices. This has caused a big family rift and father is not allowed to see the children.</p>	<p>Impacts social relationships and institutional features. Limited time for socialising with peers and doing homework. Impacted attainment, progress and anxiety. Difficulties (sleeping makes it hard to concentrate in schools – working not to his full capabilities. Academic choices driven by practicalities of travel rather than aspiration. As eldest he feels pressure to succeed but is also anxious as first in family to be leaving school</p>
<p>Personal Challenges</p> <p><i>e.g. SEND, neurodivergence, anxiety, low confidence, Gender identity challenge, health.</i></p>	<p>Mobility issues have restricted his socialising and access to opportunities outside school. Anxiety means he struggles to have the confidence to be the first to do something new/ different.</p>	<p>Interacts with family factors. Feels worried about leaving his 'secure' setting and about the impact of moving on in terms of being able to support his siblings and family.</p>



Ben is 16 years old, lives with his grandparents and 3 younger siblings in a remote village, with little transport links other than school buses. They are a low-income family. Ben has poor health and intermittently sees specialists for an ongoing condition which impairs his mobility. Ben is a mature young person, but academically finds some subjects quite challenging, obtaining some GCSEs, but retaking English & Maths, therefore limiting his choices for post 16 study. He is keen to progress into work but his remote location limits him and he is not keen to go to College due to his anxiety over change.

Case Study 3: Risk Review

Individual Risk Review Tool for Sam

Year/Group: 13

Notes: _____

Risk Category	Risk Factors	Interaction with risks in other categories
Structural Factors <i>e.g. lack of transport routes, lack of course availability locally, cuts to local services.</i>	Legislation around prior attainment limiting options. Society's view of those with criminal convictions might limit his opportunities.	
Institutional features <i>e.g. school environment and policies etc. Behaviour management approaches, access to support</i>	Expectations around attendance and behaviour were not easy for him to attain meaning that he was having to have lots of negative conversations with staff. Lack of previous qualifications meant he was limited on the courses/ levels he could undertake which led to frustration and the feeling that he was wasting his time repeating things he already knew	
Social relationships <i>e.g. bullying experiences, limited friendships, isolation, social skill development, difficult relationships with adults, social confidence</i>	Peer pressure to maintain 'status' amongst peers. Lots of issues with girlfriends and ability to maintain a positive relationship.	
Family Circumstances <i>e.g. caring demands, socio-economic situation, family relationships, EAL, CLA, highly mobile, turbulent home life</i>	Lack of parental support. Low income family which may have contributed to initial involvement in crime. Family perception of him is negative.	
Personal Challenges <i>e.g. SEND, neurodivergence, anxiety, low confidence, Gender identity challenge, health.</i>	Feelings of worthlessness and feeling trapped in a situation. ADHD is uncontrolled/unmedicated impacting on ability to focus. Difficulty verbalising feelings and handling them in an appropriate manner leading to outbursts of violence and aggression. Doesn't view prison as a negative place. Feels he would be away from his issues there at least.	



Case Study 4: Risk Review

Individual Risk Review Tool for D

Year/Group: 12

Notes: _____

Risk Category	Risk Factors	Interaction with risks in other categories
<p>Structural Factors</p> <p><i>e.g. lack of transport routes, lack of course availability locally, cuts to local services.</i></p>	<p>Curriculum bears little relevance. Standardised testing approach doesn't suit him. Wants vocational option</p> <p>Criminal policy – severe penalty for carrying weapons. Law does not take into account his vulnerability to being coerced by others. Wants to go into army but mental health and violence is a barrier with their policy/ safeguarding</p>	<p>Lack of diversity of curriculum compounded his personal challenges with regulation and made school less appealing. This impacted social relationships leading him to be more vulnerable to peer pressure to find connection.</p>
<p>Institutional features</p> <p><i>e.g. school environment and policies etc. Behaviour management approaches, access to support</i></p>	<p>Feels no support at school. Couldn't cope with teachers shouting. Felt different - due to EHCP. Low confidence due to the curriculum.</p>	<p>Low confidence carried forward from school to post 16. Now sees education as scary, pointless and mistrusts 'shouting' staff. His family circumstances (shouting/conflict) may impact his view of teachers, making him feel scared. Trauma re-experienced.</p>
<p>Social relationships</p> <p><i>e.g. bullying experiences, limited friendships, isolation, social skill development, difficult relationships with adults, social confidence</i></p>	<p>Feels different. Wanted to fit in, but didn't so was vulnerable to peer pressure from others who had dropped out. Social media used to entice D in. Rejection from family led to feeling accepted by Gang</p>	<p>Family circumstances impact social relationships - lack of belonging and friendships due to being CLA and in a different area. Not fitting in due to being away from the city.</p>
<p>Family Circumstances</p> <p><i>e.g. caring demands, socio-economic situation, family relationships, EAL, CLA, highly mobile, turbulent home life</i></p>	<p>Volatile relationship with parents. Both live separately. One rural, one city. Argues with parents. Cannot bond, constantly rejecting. If he visits, he gets kicked out. A lot of volatile shouting.</p>	<p>Family's negative view of education influences D's choices. Impacts his personal challenges. Wants a job working for himself but is too anxious to work in a group, prevents him accessing college. No family support impacts all other areas.</p>
<p>Personal Challenges</p> <p><i>e.g. SEND, neurodivergence, anxiety, low confidence, Gender identity challenge, health.</i></p>	<p>Difficulty regulating emotions. Finds it difficult to focus. Takes cannabis to calm down, but this can exacerbate mental health issues.</p> <p>Is at CAMHS level but will not engage as he thinks it will impact on future. Difficult to trust people and make new friends.</p>	<p>Personal challenges exacerbated by location CSC have moved him to – lack of placements in other areas – moved from city to rural. Struggles intensely due to mannerism, persona, accent, dress, identity. Seen as 'weird' by others in rural town. Worsens mental health.</p>



Boy D is 16, he left school with no GCSEs and he hardly attended school in year 10 and 11. D lived in the City when he was school age. He is now 16 (year 12) and NEET, he also has got caught up in serious criminal activity involving weapons. D has not been to court yet so has lots of worries. He is a recent child in care (Child Looked After) and has been moved to a rural small town far away from his home City. He has court proceedings that are ongoing. D has an EHCP and struggles to concentrate. He has minimal contact with parents, who are split up, when he does have contact it often ends up in an argument and fight, D is rejected from his parents and now is feeling isolated as he is in Care away from his friends and his familiar surroundings.

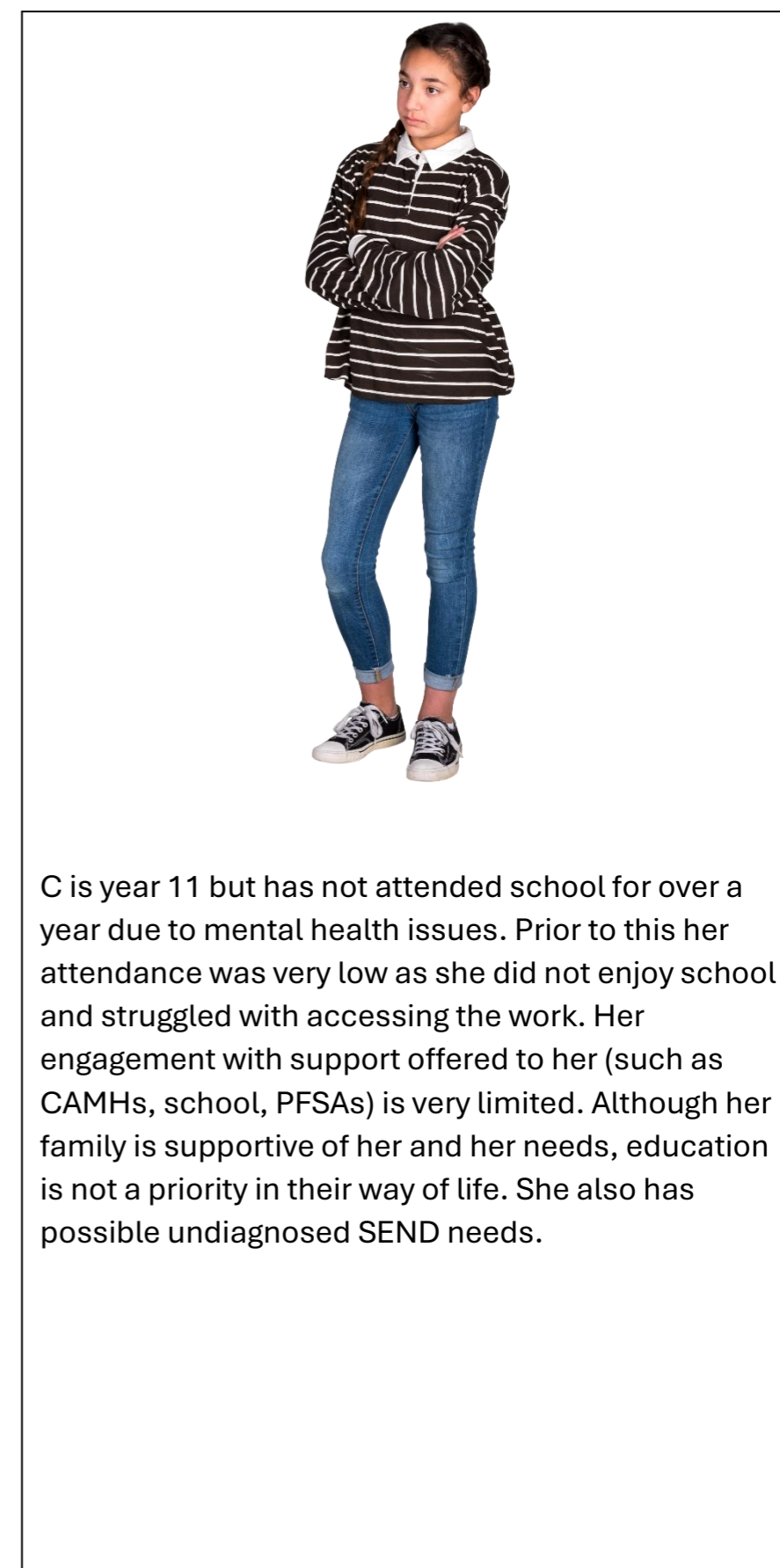
Case Study 5: Risk Review

Individual Risk Review Tool for CJT

Year/Group: 11

Notes: _____

Risk Category	Risk Factors	Interaction with risks in other categories
Structural Factors <i>e.g. lack of transport routes, lack of course availability locally, cuts to local services.</i>	<p>Lack of funding means medical tuition could only offer her 1 hour per day. School could not meet C's needs within their facility as she needs 1:1 support to access her education.</p>	<p>Institutional and structural factors exacerbate family circumstances and personal challenges. Lack of support for diagnosing and supporting SEND needs and focus on punishing attendance compounds family stress, sense of isolation and mistrust</p> <p>Family circumstances compound her social relationships because spending all her time with family, not attending school means she doesn't get access any other role models or other ideas about her future.</p> <p>C's family circumstances and their negative experiences with education and professionals impact on C's views of her future. Her personal challenges with poor mental health and depression also affect her ability to make and maintain friendships and other social relationships.</p>
Institutional features <i>e.g. school environment and policies etc. Behaviour management approaches, access to support</i>	<p>C struggled in the large classes within her school setting and her SEND needs were not picked up on. Their focus on her poor attendance put stress on the fragile relationship between school and the family.</p> <p>Once receiving medical tuition, her attendance is still very poor, and only attending, on average, 2 out of 5 sessions a week.</p>	
Social relationships <i>e.g. bullying experiences, limited friendships, isolation, social skill development, difficult relationships with adults, social confidence</i>	<p>Spends all of her time with her family. Has very limited friendships of her own (she has 'friends' that are her brother's friends). She spends a lot of time on social media. Says she has lots of friends but never sees them, preferring to stay at home or be with her older siblings.</p>	
Family Circumstances <i>e.g. caring demands, socio-economic situation, family relationships, EAL, CLA, highly mobile, turbulent home life</i>	<p>2 older siblings. Neither sibling stayed in education or went into employment. Mum doesn't work. Her younger sibling doesn't attend school (they are being homeschooled) due to his SEND needs & behaviour that the family felt the school didn't support. One of her older siblings is married with a young son & spends most days at the family home with the rest of the family. C is rarely without at least one member of her family, even when out of the house</p>	
Personal Challenges <i>e.g. SEND, neurodivergence, anxiety, low confidence, Gender identity challenge, health.</i>	<p>suffers with anxiety and mild depression. She has undiagnosed SEN and a history of self-harm. She has had lots of negative experiences that she hasn't fully overcome, which affect her self-esteem and mental health. C finds it hard to engage with CAMHs and the support on offer to her, which may be due to her SEND needs. C has no real interests or hobbies and her commitment to something is very short lived.</p>	



C is year 11 but has not attended school for over a year due to mental health issues. Prior to this her attendance was very low as she did not enjoy school and struggled with accessing the work. Her engagement with support offered to her (such as CAMHs, school, PFSAs) is very limited. Although her family is supportive of her and her needs, education is not a priority in their way of life. She also has possible undiagnosed SEND needs.

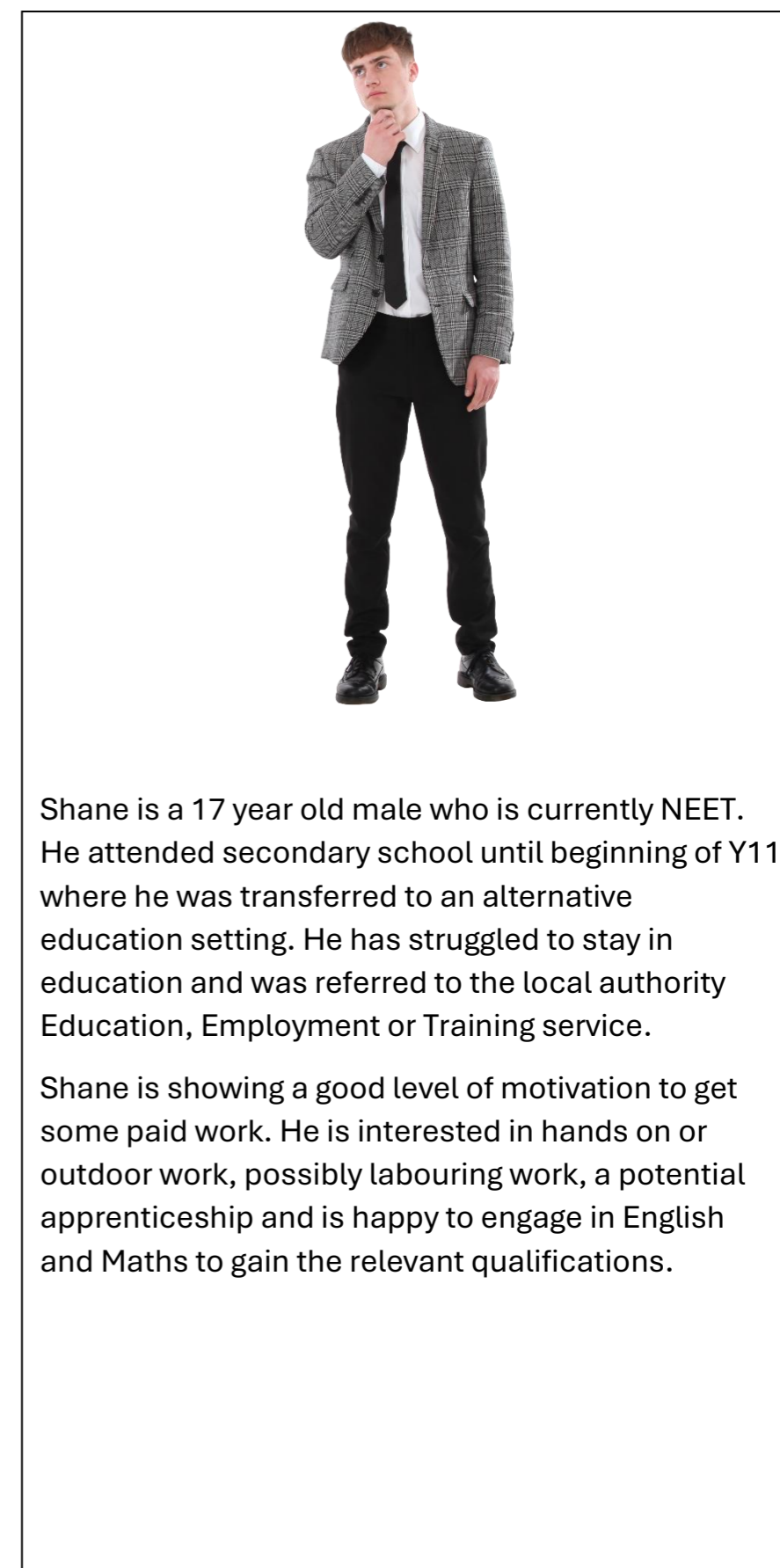
Case Study 6: Risk Review

Individual Risk Review Tool for Shane_____

Year/Group: 12__

Notes: _____

Risk Category	Risk Factors	Interaction with risks in other categories
Structural Factors <i>e.g. lack of transport routes, lack of course availability locally, cuts to local services.</i>	<p>Performance targets led school to refer S to alternative provision. Requirement for Eng and Maths qualifications is frustrating for him as he wants to do manual work. Lack of youth support organisations in the area that he wants to get involved with.</p>	<p>Placement in alternative provision changed his peer group. Drive to not have low academic attainment reflected in their results impacted his social relationships and compounded his personal challenges. His low self-esteem was worsened by move to AP</p>
Institutional features <i>e.g. school environment and policies etc. Behaviour management approaches, access to support</i>	<p>Gaps in education and history of poor attendance. Struggled with behavioural expectations. Attended reengagement provision at local college but didn't complete it.</p>	<p>Family circumstances impact insitutional factors – disruption at home led to running away and not attending. Lack of stable family and role models lead hin to mistrust authority. Equally insituational concerns have caused family arguments and further strained relationships at home.</p>
Social relationships <i>e.g. bullying experiences, limited friendships, isolation, social skill development, difficult relationships with adults, social confidence</i>	<p>Has relationships with friends and relatives but his mum considers these as a bad influence. Involved with gang culture – negative peer role models.</p> <p>Lack of positive relationships at school – mistrust of educational settings.</p>	<p>Lack of positive role models through school (Institutional features) and home (family factors) have led him to seek approval and sense of security through gangs. Personal challenges with low-self esteem has impacted social relationships as he has sought to prove a point by making money through drug gangs.</p>
Family Circumstances <i>e.g. caring demands, socio-economic situation, family relationships, EAL, CLA, highly mobile,turbulent home life</i>	<p>Little contact with birth father. Disruptive home life with social services involved. Mother has suffered from depression from an early age.</p> <p>S has poor behaviour at home, becoming angry and violent. This has led to S going missing and being reported to the Police.</p>	
Personal Challenges <i>e.g. SEND, neurodivergence, anxiety, low confidence, Gender identity challenge, health.</i>	<p>Attended alternative provision but left with no qualifications.</p> <p>Police have reported that they have concerns S is at risk of exploitation by being involved with County Lines / Drug supply.</p> <p>Possible mental health concerns. Substance / alcohol misuse. Money issues / debts owed for drugs.</p>	<p>Low self esteem from no qualifications, not being able to succeed, negative impact on hope and belief he can succeed</p> <p>Limited options to progress into education or work along with mistrust of institutions.</p>



Shane is a 17 year old male who is currently NEET. He attended secondary school until beginning of Y11 where he was transferred to an alternative education setting. He has struggled to stay in education and was referred to the local authority Education, Employment or Training service.

Shane is showing a good level of motivation to get some paid work. He is interested in hands on or outdoor work, possibly labouring work, a potential apprenticeship and is happy to engage in English and Maths to gain the relevant qualifications.

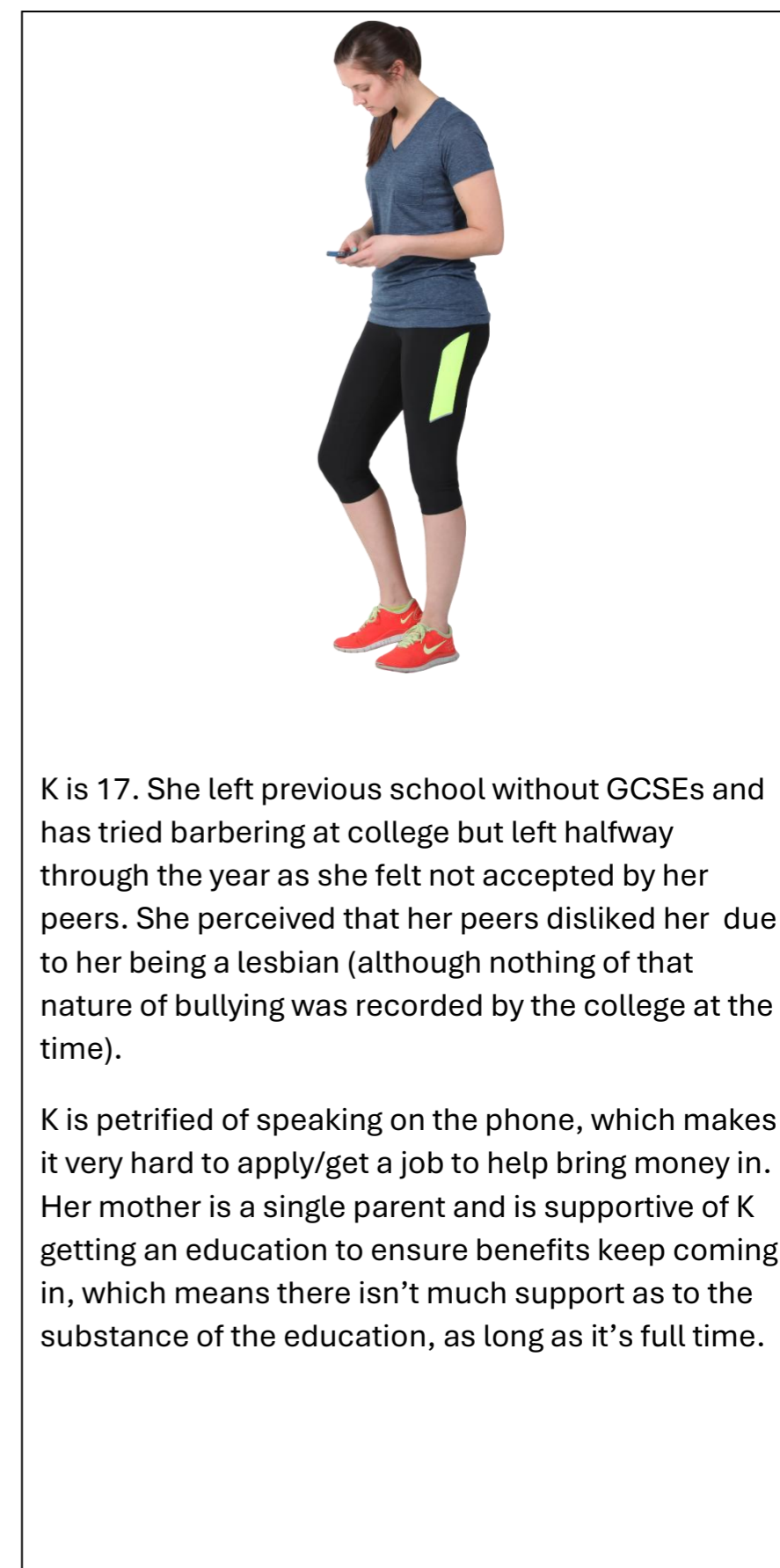
Case Study 7: Risk Review

Individual Risk Review Tool for Katie

Year/Group: 12

Notes: _____

Risk Category	Risk Factors	Interaction with risks in other categories
Structural Factors <i>e.g. lack of transport routes, lack of course availability locally, cuts to local services.</i>	No EHCP. Now too late to put one in place. Long waiting list for CAMHS meant mental health worsened before even low level of support accessed. Lack of public transport makes it difficult to get to interviews and opportunities	Lack of support due to long waiting lists and lack of capacity and training among educators to recognise and support her needs compounds family circumstances and mistrust of authorities. Lack of EHCP and statutory support compounds family circumstances as no access to many support opportunities post 16 or help for travel costs.
Institutional features <i>e.g. school environment and policies etc. Behaviour management approaches, access to support</i>	Little support from previous school. Lost faith in education system. Slow handling of process of EHCP means she should have EHCP as is autistic.	Impacted her personal challenges as now unsure about her educational path so she is uncommitted and more likely to drop out of courses without achieving.
Social relationships <i>e.g. bullying experiences, limited friendships, isolation, social skill development, difficult relationships with adults, social confidence</i>	Few friends. Felt shunned at college. Few friends at secondary school. Difficulty with communicating and opening up. The friends she did have moved on. She is now very isolated	Lack of relationships skills or support to develop social relationships compounds her personal challenges with social anxiety e.g not taking phone calls or communicating with unfamiliar people
Family Circumstances <i>e.g. caring demands, socio-economic situation, family relationships, EAL, CLA, highly mobile, turbulent home life</i>	Volatile relationship with absentee father. Relationship with mother stable, but not very supportive with life-decisions. Low income so activities (bus fare) dependent on benefit payments or Mum's odd job money.	Low income means Mum prioritises bringing money in so no encouragement to get more education, and K is not ready yet for a workplace.
Personal Challenges <i>e.g. SEND, neurodivergence, anxiety, low confidence, Gender identity challenge, health.</i>	Autism and mental health issues. Sexual-Orientation bullying. Low trust and self confidence. Little drive or knowledge to change her current circumstances.	Relationships and institutional factors affected by Autism and communication challenges. Structural and institutional factors compound this as no EHCP to validate this and access support



K is 17. She left previous school without GCSEs and has tried barbering at college but left halfway through the year as she felt not accepted by her peers. She perceived that her peers disliked her due to her being a lesbian (although nothing of that nature of bullying was recorded by the college at the time).

K is petrified of speaking on the phone, which makes it very hard to apply/get a job to help bring money in. Her mother is a single parent and is supportive of K getting an education to ensure benefits keep coming in, which means there isn't much support as to the substance of the education, as long as it's full time.

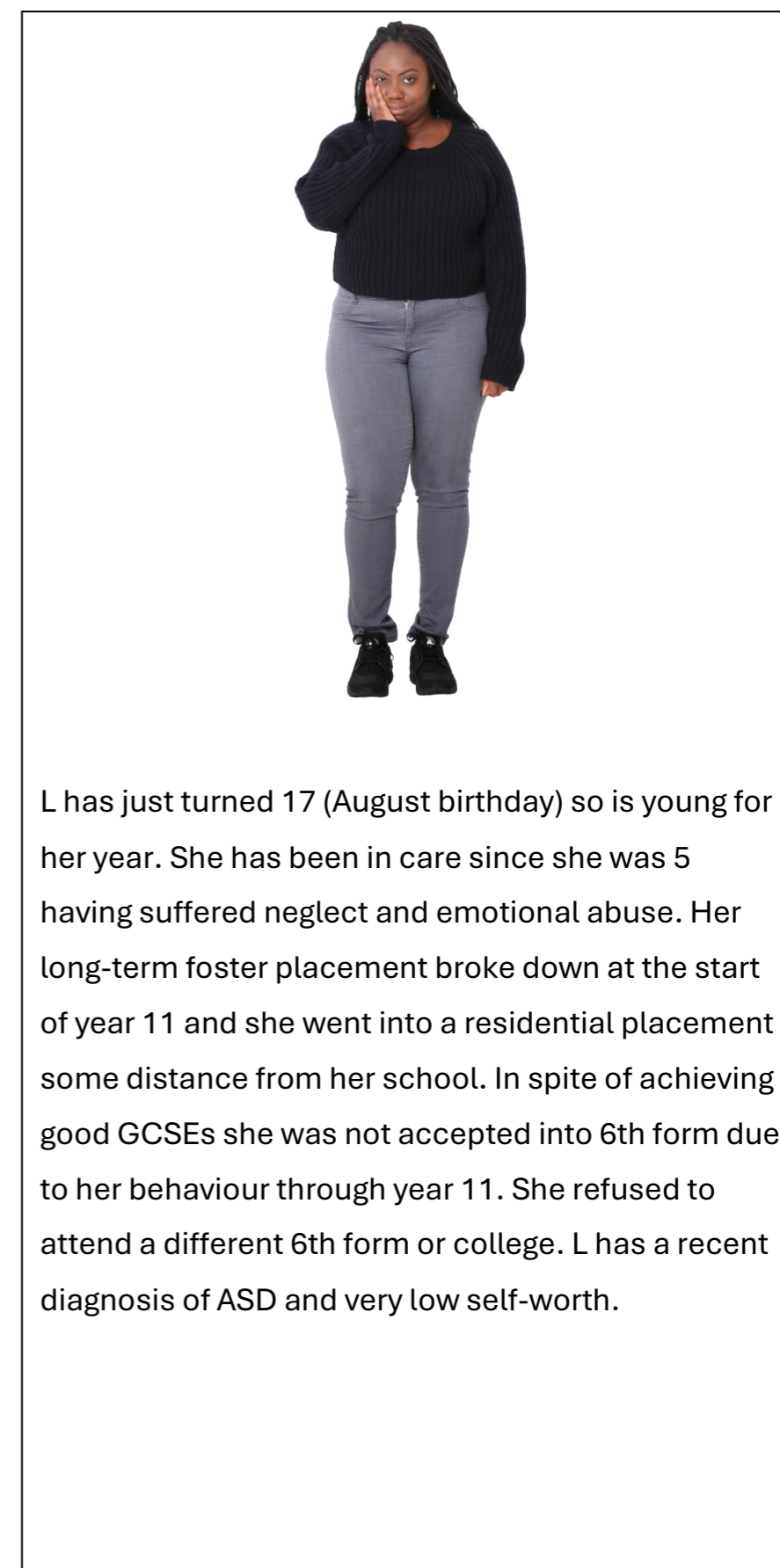
Case Study 8: Risk Review

Individual Risk Review Tool for L

Year/Group: 12

Notes: _____

Risk Category	Risk Factors	Interaction with risks in other categories
Structural Factors <i>e.g. lack of transport routes, lack of course availability locally, cuts to local services.</i>	<p>Limited availability of care placements. Poor experience of foster care for several years but no options to move to a more positive environment. Distance to travel in year 11 meant very early start and late finish.</p> <p>Pressure on school to accept high achievers who will conform.</p>	<p>Lack of care placements compounded personal challenges with self-esteem and social relationships with positive adult role models as no options to move to a more positive environment</p>
Institutional features <i>e.g. school environment and policies etc. Behaviour management approaches, access to support</i>	<p>Due to her late birthday, always very immature for her year and found it hard to connect with peers.</p> <p>Hypervigilance is very hard to manage in a large secondary school.</p> <p>School sanctions meant time in isolation unit..</p>	<p>Rejection by school for Y12 compounded her personal challenge of negative beliefs about self-worth</p> <p>Ability to make friends impaired by early experiences Negative association with isolation. School exclusion reinforcing social exclusion.</p>
Social relationships <i>e.g. bullying experiences, limited friendships, isolation, social skill development, difficult relationships with adults, social confidence</i>	<p>L has had a negative experience of relationships with adults since early years and trusts very few people. She has few friends, although she does have a boyfriend who she sees regularly.</p> <p>L uses abusive language when communicating with the adults in her life and rejects offers of help. L feels a need to control her environment and those around her</p>	<p>Low confidence in her ability to make new friends means that school or college environments feel hostile for her. Work placements are also threatening. L misses positive opportunities that would enhance her outcomes.</p>
Family Circumstances <i>e.g. caring demands, socio-economic situation, family relationships, EAL, CLA, highly mobile, turbulent home life</i>	<p>Mother has serious mental health issues and emotionally abused her children.</p> <p>L is in contact with her family. Her mother potentially had a negative influence on her self-esteem and self-worth as she continues to be critical.</p>	<p>Mother's impact on L's self esteem affects the way she approaches school, work and social contacts.</p>
Personal Challenges <i>e.g. SEND, neurodivergence, anxiety, low confidence, Gender identity challenge, health.</i>	<p>Low self-esteem and self-worth reinforced throughout early years. Expectations of relationships were formed by experience of abuse Undiagnosed ASD has had an impact on her social development. Although she is an able student she has not achieved at the level predicted due to her circumstances.</p>	<p>Difficulties in all relationships have been affected by personal challenges.</p> <p>ASD makes change very difficult and lack of diagnosis meant lack of appropriate support</p>



L has just turned 17 (August birthday) so is young for her year. She has been in care since she was 5 having suffered neglect and emotional abuse. Her long-term foster placement broke down at the start of year 11 and she went into a residential placement some distance from her school. In spite of achieving good GCSEs she was not accepted into 6th form due to her behaviour through year 11. She refused to attend a different 6th form or college. L has a recent diagnosis of ASD and very low self-worth.