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Identifying and responding to the scale of social, emotional and mental health needs in primary school children

EXECUTIVE SUMMARY
Dr Florence Ruby

The Boxall Profile

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INTRODUCTION

Current Context

Focus on the mental health and wellbeing of children and young people, both within government and in the education sector has increased in recent years (eg *Mental Health and Behaviour in Schools* or *Transforming Children and Young People's Mental Health Provision: a Green Paper*; Department for Education, 2018; Department of Health & Department for Education, 2017), as data have made clear the extent and significance of the need. The most recent figures show that in primary school years, one in 10 five to 10 year olds have a diagnosable mental health disorder (Sadler et al, 2018).

Schools, and teachers in particular, have to manage and respond to a wide range of social, emotional, behavioural and/or mental health (SEMH) needs while simultaneously delivering the curriculum and ensuring every child achieves academically. Teachers however feel poorly equipped to answer those needs (Department for Education, 2015; Place2Be & National Association of Head Teachers, 2015). In addition, although more and more educational settings recognise the importance of SEMH and are eager to support their pupils (Weare, 2015), the resources available in schools do not appear to match the levels of need, with head teachers reporting a rise in mental health needs over recent years (Young Minds & National Children's Bureau, 2017) but schools' financial resources remaining limited (National Education Union, 2018). Overall, educational settings need better tools and more practical expertise to support the mental health and wellbeing of pupils.

Importance of identifying and supporting SEMH needs

Previous research has shown that social emotional wellbeing in childhood is a key predictor of mental health later in life (eg Goodman, Joshi, Nasim & Tyler, 2015). In addition, high-quality school-based programmes designed to improve social emotional skills have been shown to impact not only the social emotional wellbeing of pupils, but also their mental health, behavioural issues, academic attainment and substance misuse (as reviewed in Early Intervention Foundation, 2017). Addressing the social and emotional needs of children early on could therefore benefit their SEMH as well as their academic success now and could prevent them

from experiencing more serious mental health and wellbeing issues in adolescence and later in life.

Although many schools understand the relation between SEMH, wellbeing and attainment and want to support the needs of their pupils, they do not necessarily conduct systematic assessments to identify pupils with SEMH needs, thus increasing the risk of overlooking difficulties. A recent government report highlights that more than 80% of schools rely on ad hoc identification to pinpoint mental health difficulties, and only 15% conduct universal screening of all pupils to identify those with particular issues (Marshall, Wishart, Dunatchik & Smith, 2017). Under these circumstances, although pupils exhibiting severe SEMH needs may be identified by staff, children and young people who experience less overt difficulties or have sub-threshold needs may easily remain overlooked for prolonged periods of time. Without early intervention and support, those children are likely to see their SEMH issues escalate into more complex and embedded difficulties, increasing their risk of school exclusion, poor attainment and other negative outcomes (eg Lereya & Deighton, 2019).

It is therefore crucial for schools to be able to identify early all children with SEMH needs, so adapted support can be provided before children reach crisis level. The Boxall Profile is one of the assessment tools that can support schools and educational practitioners in the early identification of difficulties.

The Boxall Profile

The Boxall Profile is a unique psycho-social assessment tool used by teachers and other education professionals in schools to accurately determine children and young people's social and emotional functioning and wellbeing (Bennathan, 2018; Bennathan, Boxall, & Colley, 2011). The tool plays a major role in understanding what lies behind a pupil's behaviour as it provides teaching professionals with an accurate and precise understanding of their SEMH needs, as well as identifying the levels of skills they currently possess to access learning.

According to a recent report from the Department for Education, the Boxall Profile is currently the most popular tool used by schools in the UK to measure the SEMH and wellbeing of children and young people (Marshall et al, 2017). In 2018 the

Department for Education also cited the Boxall Profile as a tool schools could use to assess mental health and behavioural needs of their pupils in its mental health and behaviour advice for schools (Department for Education, 2018).

The Boxall Profile is divided into two sections, each comprising 34 questions:

- **Developmental strands** measure different aspects of the children and young people's cognitive, social and emotional development that influence how well a child is able to learn and function in the classroom.

- **Diagnostic profile** measures children and young people's challenging behaviours that prevent successful social and academic performance. These behaviours are directly or indirectly the result of impaired development in the early years and can be resolved once the social and emotional needs are identified and the necessary skills are developed.

There are currently two versions of the Boxall Profile – the **Boxall Profile 2017**, to assess primary-school aged children; and the **Boxall Profile for Young People**, to assess young people in secondary settings.

On completion of an assessment, the scores of each individual student are compared to a standardised set of scores (the expected scores for children of similar age), so that strengths and difficulties can be identified (see Figure 1-1, Chapter 1 of the main report for an example). Once needs have been identified, teaching professionals are able to target the areas where the child needs extra support and plan a focused intervention based on answering those particular needs.

Schools can use the Boxall Profile Online (**www.boxallprofile.org**) to complete assessments, create learning plans and access a bank of resources and strategies to answer pupils' SEMH needs. Users can also create **Boxall Profile Class overviews**, allowing teaching staff to identify SEMH strengths and difficulties impacting on the learning of the pupils in their class (see Figure 1 for an example).

Figure 1. Example of Boxall Profile Class Overview[1]

Child code	Gender	Year	Date	Developmental Strands (Social emotional skills)										Diagnostic Profile (Behavioural difficulties)										Dev	Diag
				A	B	C	D	E	F	G	H	I	J	Q	R	S	T	U	V	W	X	Y	Z	Dev	Diag
EBP01	F	Year 4	2019.03.12	20	12	12	20	8	12	15	20	8	8	0	0	0	0	0	0	0	0	0	0	0	0
EBP02	M	Year 4	2019.03.12	15	11	12	20	7	12	9	18	7	8	1	2	0	0	0	1	2	5	6	2	2	4
EBP03	F	Year 4	2019.03.12	19	11	12	20	7	12	12	18	6	8	1	2	0	0	0	0	0	2	5	2	1	3
EBP04	M	Year 4	2019.03.12	17	10	10	17	8	12	15	20	8	8	4	1	0	0	0	1	0	0	0	0	1	1
EBP05	M	Year 4	2019.03.12	20	12	12	20	8	12	15	20	8	8	0	3	0	0	1	1	0	1	0	0	0	2
EBP06	F	Year 4	2019.03.12	16	6	6	9	3	5	13	10	3	5	8	6	0	2	2	6	3	2	1	0	9	7
EBP07	F	Year 4	2019.03.12	16	6	11	16	4	12	7	17	7	4	0	0	0	0	1	0	2	4	7	1	6	4
EBP08	F	Year 4	2019.03.12	19	11	11	18	6	10	13	16	7	4	6	8	7	6	6	7	8	9	11	4	4	10
EBP09	M	Year 4	2019.03.12	11	9	11	19	6	9	10	15	6	5	8	7	0	8	2	3	9	10	10	5	7	9
EBP10	M	Year 4	2019.03.12	9	7	9	14	5	6	6	7	4	2	7	7	8	11	5	6	12	11	17	6	9	10
EBP11	M	Year 4	2019.03.12	20	8	9	15	5	11	13	15	7	7	0	2	0	0	1	0	1	0	0	0	4	1
EBP12	F	Year 4	2019.03.12	16	8	7	14	6	10	10	11	5	4	3	4	0	3	2	4	7	7	9	3	10	9
EBP13	M	Year 4	2019.03.12	16	6	10	12	7	6	16	15	4	8	2	1	0	0	0	4	3	0	0	0	6	3
EBP14	F	Year 4	2019.03.15	13	10	6	16	7	9	8	18	7	5	8	0	0	3	4	0	2	3	1	5	5	6
EBP15	M	Year 4	2019.03.15	15	6	7	17	7	5	6	9	5	4	3	4	0	4	3	0	4	5	2	8	8	8
EBP16	M	Year 4	2019.03.15	18	11	12	20	8	11	14	13	5	5	0	2	0	1	2	0	5	8	2	4	3	6
EBP17	F	Year 4	2019.03.15	19	12	10	19	6	9	10	13	6	6	0	0	0	0	0	0	4	4	4	6	5	4
EBP18	F	Year 4	2019.03.15	18	10	11	20	8	12	15	20	8	8	0	0	0	0	0	0	0	0	0	0	0	0
EBP19	F	Year 4	2019.03.15	20	12	12	20	8	12	16	20	8	8	0	0	0	0	0	0	0	0	0	0	0	0
EBP20	F	Year 4	2019.03.15	12	6	8	10	6	7	8	10	4	3	4	12	0	4	2	4	14	11	7	1	10	8
EBP21	M	Year 4	2019.03.15	16	9	10	15	7	9	12	15	6	6	0	3	0	1	0	2	4	1	1	0	7	4
EBP22	M	Year 4	2019.03.15	20	12	12	20	8	12	16	20	8	8	0	0	0	0	0	0	0	0	0	0	0	0
EBP23	F	Year 4	2019.03.15	15	9	10	15	7	10	12	15	6	6	2	4	0	1	1	1	2	1	1	0	7	5
EBP24	M	Year 4	2019.03.15	20	12	11	19	8	12	16	20	8	8	0	1	0	0	0	0	0	0	0	0	0	0
EBP25	F	Year 4	2019.03.15	16	9	10	15	7	9	12	15	6	6	1	1	0	0	0	0	0	0	0	0	7	0
EBP26	M	Year 4	2019.03.15	17	9	10	17	7	11	13	18	8	8	0	0	0	0	2	0	1	0	0	0	2	1
EBP27	M	Year 4	2019.03.20	16	9	10	15	7	10	12	15	6	6	0	7	0	0	4	0	5	1	1	1	7	3
EBP28	F	Year 4	2019.03.20	10	3	7	10	5	7	6	10	2	3	5	12	0	7	4	6	10	9	10	4	10	9
EBP29	F	Year 4	2019.03.20	20	12	12	20	8	12	16	20	8	8	0	0	0	0	0	0	0	0	0	0	0	0
EBP30	F	Year 4	2019.03.20	20	9	12	16	5	11	15	15	8	6	1	9	0	0	1	3	5	2	3	0	4	6
				17	16	6	11	11	15	15	18	8	17	12	13	2	12	17	10	18	15	13	11		

1. Each row represents one child, with his/her individual scores on the 20 Boxall Profile strands. Green cells indicate the child is scoring within the expected range of scores for that strand, orange cells indicate he/she is scoring outside the expected range. A summary of individual children's needs is provided in the columns 'Dev' and 'Diag' eg child EBP06 has difficulties with nine developmental strands and six diagnostic strands. A summary of the class needs is provided in the last row eg 17 children in this class have difficulties giving purposeful attention (Strand A). For more information see Chapter 1 of the main report.

Nurtureuk

The Boxall Profile is provided by nurture**uk**, a national charity supporting the mental health and wellbeing of children and young people in education. The charity develops and facilitates the implementation of nurturing interventions in all school settings to benefit pupils with SEMH issues and those at risk of exclusion (for more information see **nurtureuk.org**).

A range of nurturing interventions are available to support pupils according to the severity of their SEMH needs. In particular:

- **Nurture groups** are a targeted intervention designed to support children and young people with high SEMH difficulties.

- The **National Nurturing Schools Programme** is a whole-school approach helping schools to embed a nurturing ethos throughout their setting, enhancing teaching and learning, and promoting healthy outcomes for all pupils and staff.

In recent years, nurture**uk** has been campaigning for schools across the UK and beyond to monitor the SEMH of all their pupils using the Boxall Profile. The goals are that, by assessing the SEMH of all pupils:

1. All children and young people who have SEMH needs will be identified and recognised by schools.

2. This will increase their chance of accessing early interventions and support for those needs.

3. As a result, their SEMH will improve, thus benefiting their wellbeing and their attainment.

As part of the campaign, in February 2017 the charity launched the **Boxall Childhood Project** (BCP), a 1.5-year project exploring the benefits, impact and challenges experienced by schools who were adopting a whole-school approach to assessing pupils' SEMH.

Overview of the Boxall Childhood Project

The BCP was carried out by nurture**uk** between February 2017 and July 2018. As part of the project, staff from 40 schools and educational institutions (mainly primary schools, but also a small number of special settings and secondary schools) located across the north and south east of England were recruited and trained in the theory and practice of using the Boxall Profile. Those staff became the **key BCP members** with whom nurture**uk** coordinated the project and monitored the progress of individual settings.

The BCP aimed to provide practical tools and guidelines for schools wanting to adopt a whole-school approach to assessing SEMH, but not necessarily knowing how to monitor the mental health and wellbeing of all their pupils. To succeed in adopting a whole-school approach to assessing SEMH, we expected BCP schools to complete the following activities:

- Key BCP members, once trained by nurture**uk**, would go back to their setting and deliver training to all relevant staff (mainly teaching staff).

- Staff would then assess all their pupils once a term, for a duration of four terms.

- Finally, pastoral staff and teaching staff would use the data to identify pupils with SEMH needs, analysing assessments from individual children and Boxall Profile Class Overviews (see Figure 1).

We also hypothesised that assessing all pupils would trigger the following changes and outcomes in schools:

- Teaching staff would have a better understanding of the importance of SEMH and wellbeing for the success of their pupils. As a result they would adapt their teaching approaches to support the SEMH of their class.

- More children with SEMH needs would be identified once all pupils were assessed. As a result, schools would provide more SEMH support to those children, either through targeted SEMH interventions or through classroom activities delivered by teachers.

- This in turn would lead to improvements in children's SEMH and wellbeing.

This chain of activities and outcomes that were expected to take place over the course of the BCP are presented in the theory of change in the main report (Chapter 1, Figure 1-4).

The aims of the BCP were threefold:

1. To **evaluate the feasibility and effectiveness for schools to monitor the SEMH of all their pupils** using the Boxall Profile – *by analysing mixed data gathered during interviews, focus groups and monitoring activities over the course of the project.*

2. To provide clear **guidelines and recommendations** to educational settings and policy-makers wanting to better identify and support the SEMH needs of all children and young people.

3. To gain a **better understanding of the scale of SEMH needs** of children and young people in England – *by analysing Boxall Profile data collected by BCP schools over the course of the project.*

CURRENT EVALUATION

Nature**uk** commissioned an internal evaluation in order to review the implementation of the project, identify the outcomes that occurred as a result of the BCP and evaluate the benefits and impact for schools adopting a whole-school approach to assessing SEMH. The evaluation aimed to answer the following questions:

1. How well was the BCP implemented?

2. What were the benefits and the overall impact for schools adopting a whole-school approach to assessing SEMH?

3. What were the barriers and enablers impacting on schools' success to adopt the approach, and what can we learn from them?

4. Overall, is the approach effective in achieving the expected goal of identifying children with SEMH needs and improving their wellbeing?

The full report can be accessed at: **www.nurtureuk.org/sites/default/files/now_you_see_us_full_report.pdf**

BCP schools

From the 40 educational settings trained over the course of the BCP, the ***current report focuses on the outcomes and challenges experienced by the 30 primary schools that took part in the project***. The preliminary evidence we obtained from secondary settings and special schools will be described in the Appendix 1 of the main report and further studies will explore in more depth how the approach could be effectively implemented in these settings.

The cohort of BCP schools consisted of 30 primary schools located across four main local authorities: Wigan, Halton, Barking and Dagenham. The cohort included both small and large schools (between 120 and 1,200 pupils), urban and rural settings,

with a majority of maintained settings but also academies. A total of 13,060 pupils were on roll in those schools with 48% of girls and 52% of boys.

Compared to England's national average for 2017/18, BCP primary schools had a slightly higher proportion of pupils with SEN statement, EHC plan or SEN support compared to the national average (17.1% of pupils versus 15.3% nationally). They had a higher proportion of children with English as an Additional Language (37.8% versus 21.3%) and they had a higher proportion of pupils eligible for free school meals at any time during the past six years (30.6% versus 24.3%). All results must therefore be interpreted keeping this context in mind.

KEY FINDINGS

Implementing the approach

Overall, 60% of the primary schools taking part in the BCP were able to deliver training to their teaching staff to ensure they understood the purpose of assessing all pupils and how to use the Boxall Profile. An additional 20% of schools also trained some teachers and assessed some classes.

In total, we estimate that more than 530 teaching staff were trained by their colleague (a BCP member) or by a nurture**uk** consultant over the course of the project. More than 6,800 children attending the BCP pilot schools were assessed over the academic year 2017/18 and more than 12,800 assessments were completed (see Chapter 3 of the main report for further detail).

A total of 20 primary schools out of 30 were able to assess all their pupils at least once over the course of the project. However, only seven out of 30 primary schools successfully assessed their pupils four times (once per term). An additional four schools assessed pupils three times, and an additional five schools assessed pupils twice.

KEY NUMBERS FOR 2017/18

20
pilot primary schools trained all their teaching staff and assessed all their pupils using the Boxall Profile

530
More than 530 teaching staff were trained

6,887
pupils assessed

12,815
assessments completed

Findings from the Boxall Profile data

Analysis of the Boxall Profile data gathered by BCP primary schools during the academic year 2017/18 revealed high levels of SEMH needs in schools that assessed the whole school or whole-year groups of children (for more information, see Chapter 4 of the main report).[2]

In the 25 primary schools that carried whole-school/whole year-group assessments, 6,810 children were assessed (48.5% girls and 51.5% boys). The data revealed that **36% of children had SEMH needs as identified by the Boxall Profile: 1 in 10 children (10%) had high levels of SEMH, and an additional 1 in 4 pupils (26%) were experiencing moderate difficulties** (Figure 2, top panel).

We observed that boys were three times more likely to experience high SEMH needs compared to girls (15% of boys versus 5% of girls in the BCP schools had high levels of SEMH; Figure 2, bottom panel).

Across the whole sample of children, we found that the most common difficulties experienced by pupils were as follows:

29% of children did not feel **emotionally secure** (eg trusting adults in school or asking for help when needed).

28% of children were having difficulties **giving purposeful attention** (eg listening with interest or taking part in teacher-centered activities).

27% of children were having difficulties **accommodating to others** (eg sharing classroom equipment with other children or being polite towards others).

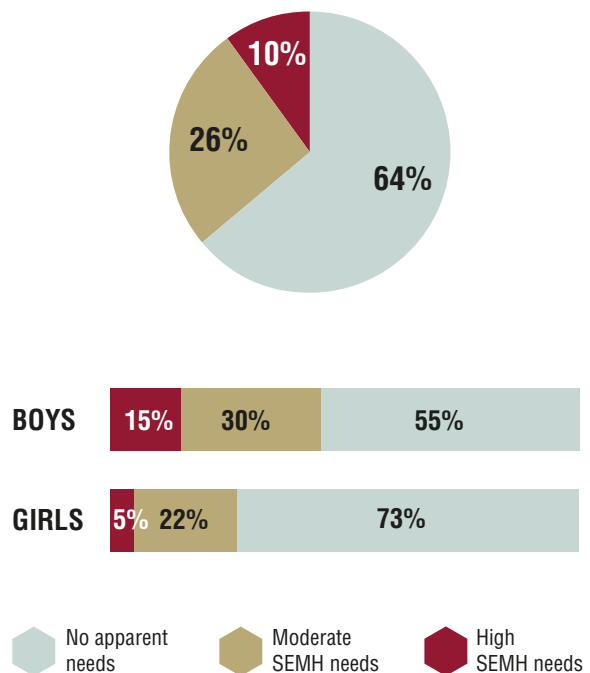**An average class of 30 pupils will have:**

19 children with no apparent needs

8 children with moderate SEMH needs

3 children with high levels of SEMH needs **(commonly one girl and two boys)**

Figure 2. Overall levels of SEMH needs in primary school children (top panel) and levels of needs according to gender (bottom panel).

BOYS: 15% | 30% | 55%
GIRLS: 5% | 22% | 73%

No apparent needs | Moderate SEMH needs | High SEMH needs

Outcomes and impact of the approach

Monitoring and evaluation activities were carried out throughout the project to record BCP members' feedback and monitor the progress schools were making toward implementing the approach and supporting the SEMH needs of their children. Semi-structured interviews were also carried out with 14 BCP members eight months following the end of the project to review the benefits and challenges primary schools experienced while implementing the approach (for more information, see Chapters 1 and 2 of the main report).

The qualitative data gathered over the course of the project revealed that schools experienced a wide range of positive outcomes as a result of adopting a whole-school approach to assessing children's SEMH.

IMPROVED IDENTIFICATION AND UNDERSTANDING OF SEMH NEEDS OF INDIVIDUAL CHILDREN, WHOLE CLASSES AND THE WHOLE SCHOOL

Schools reported that many more children with SEMH needs were identified by carrying out a whole-school approach to assessing SEMH, and in particular that the Boxall Profile allowed staff to reveal 'hidden' and previously overlooked SEMH needs of pupils.

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2. Preliminary findings regarding the Boxall Profile data gathered during the first term of the project (in summer 2017) have been published elsewhere and indicated similar levels of SEMH needs (Ruby, 2018).

'When we [assessed] all the children, I expected it to be a high level of need because of the area that we live in. But I thought because we've used the Boxall Profile for a long time, we were already getting the majority of the children. But actually, when we [assessed] the whole school, there were children that were highlighted that we would have never touched before, we'd never done any work with because they present as quiet and calm and they present as happy within school but actually, they had more of a deep-rooted problem.' **North 10 Primary School**

The information provided by the Boxall Profile allowed school staff to draw a more rounded picture of the children, in particular allowing them to take into account the SEMH of their pupils rather than focusing only on their academic needs. Schools also found the data very helpful to monitor pupils' social and emotional progress in a similar way to how they would monitor their academic progress.

'[The Boxall Profile] is a way of evidencing [children's] emotional progress in the same way their academic progress is managed and assessed.'
South 11 Primary School

The data was also used to evidence the needs of children (for example to external agencies), inform transition between academic years or from primary to secondary school, measure the impact of SEMH interventions and share the information with Ofsted.

Schools also found that the data helped them identify common difficulties experienced by children across the whole school and assisted in understanding class dynamics or comparing SEMH needs across classes or between year groups.

'In Year 2 there was a lot of issues especially working in groups because we had very confident boys mixed with very needy vulnerable children.' **North 18 Primary School**

OUTCOMES EXPERIENCED BY TEACHING STAFF

As expected, time required to complete assessments for all pupils negatively impacted on teaching staff, who were responsible for assessing their whole class. However, teaching staff experienced a wide range of positive outcomes as a result of receiving training on the Boxall Profile and assessing all the pupils in their class.

In addition, although in some schools teaching staff were initially reluctant to complete Boxall Profiles for their whole class, they became more positive once they experienced the benefits of the approach after the first round of assessment, and better understood the purpose of it.

'Teachers complained about timing but now it's complete they are happy that they have the data to support [their class].' **North 3 Primary School**

Teachers had a better understanding of the SEMH needs of the pupils in their class thanks to the Boxall Profile Class Overviews (see an example in Figure 1). They also felt an increased sense of responsibility to support children's needs. SEMH was not seen as the sole responsibility of the pastoral team any more.

'I can think of a couple of children in my current class where I possibly wouldn't have asked questions until I'd seen what came out from that, simply because they are very good at putting a façade on things, and some of those children actually it doesn't take much but you can enrich their life so much more doing that little thing.'
South 3 Primary School

BCP members observed changes in the mindset and attitudes of teaching staff towards SEMH and towards children with difficulties. They also had a better understanding of how SEMH needs impacted on behaviour and learning.

'It contributed to a change of mindset in that people understood more that, to deal with behaviour, we needed to look at the child's needs.'
South 6 Primary School

Teaching staff were also able to adapt their teaching practice to better support children's needs within the class.

'What teachers have done is develop a plan for their class addressing the greatest areas of need. [Teachers] would look at a learning plan for a child and then they would specifically look at a group [of children] and then the whole class would take part in those activities. The teachers are making sure they tailor the learning and look for progress on their whole class overview.'
South 11 Primary School

SEMH AND WELLBEING APPROACHES BECAME MORE ACCESSIBLE TO CHILDREN AND IN PARTICULAR, CHILDREN WITH SEMH NEEDS

Schools that successfully trained all their staff and assessed all their pupils were very keen to respond to pupils' SEMH needs once they had been identified, using the data effectively and making a difference where they could to improve their pupils' mental health and wellbeing.

'No one is getting missed. Everyone's got a chance if they're needy. They're going to get it if they need any other intervention or anything.' **North 6 Primary School**

Most schools already had a range of SEMH interventions and programmes they could choose from to support the needs of individual children (see the full report, Chapter 4 for a list of interventions). A small number of settings also indicated that they started implementing new interventions and programmes as a result of the level of SEMH needs they identified in their school.

'Shortly after we started doing the Boxall Profile, we got emotional check-ins in every classroom. […] We set up a nurture department […]. We've got a nurture room and we have a snack club, and a lunch club for the children who found it difficult in the playground and who obviously need help with social skills. Then, I run various groups. I have between 30 and 40 children per week in various different groups.' **North 1 Primary School**

The Boxall Profiles allowed schools to better match the SEMH interventions accessed by children according to their specific needs.

'We managed to provide different interventions for children. What [the Boxall Profile] does help you do is [map the] whole school out. Then I'll look at the level of need and that helps me put children into the right kind of support within our school and because we offer lots of different nurturing provisions […], now I can make sure that we're getting children the support that they need.' **North 10 Primary School**

Schools were also able to deliver interventions in a more effective way, for example by creating 'Boxall Profile groups' of children with similar needs in different classes or a different year group.

'We have what we call Boxall groups, and that's an intervention that runs across Key Stage Two, three afternoons a week. We target children who've got similar areas of need [identified by] the Boxall Profile.' **North 14 Primary School**

Schools also adapted their curriculum to increase the focus on social emotional wellbeing as a way of supporting a larger number of pupils.
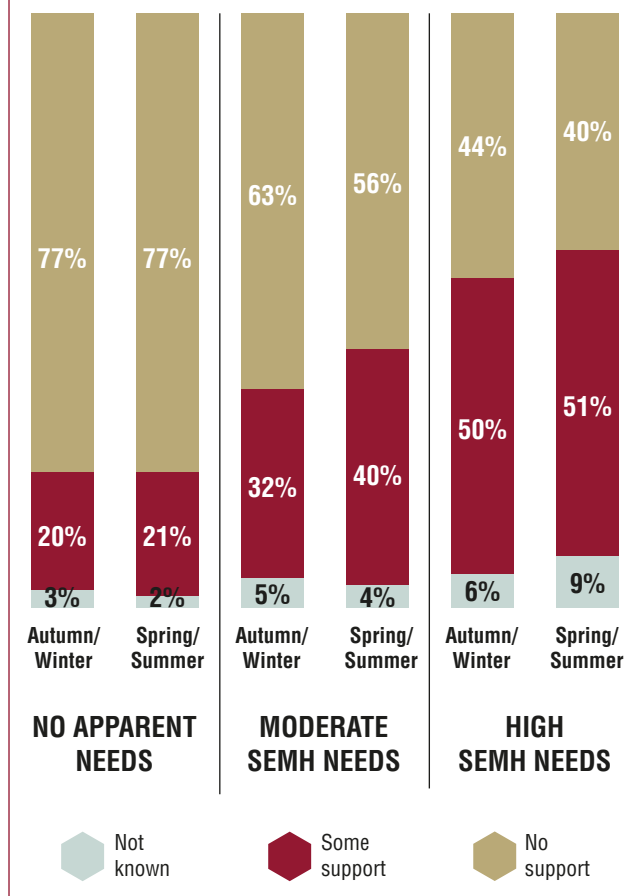
'A lot of our kids come up with Strands A and B [giving purposeful attention and participating constructively] so there's no point over-teaching all the time and doing lots of listening, doing heavy whole-class teaching when actually, half of them struggle to listen with interest and then half of them struggle to participate.' **North 10 Primary School**

We also obtained quantitative data from BCP schools to determine the number of children receiving SEMH support over the course of the project. In the autumn/winter term, only 26% of children were receiving SEMH support at the time of their first Boxall Profile assessment. Only 49% of children with high SEMH needs were accessing support within school or from external agencies. Similar number of children received SEMH support in the spring/summer term (27%), however we observed that 8% of children with moderate need were accessing more support at the time of their second assessment (Figure 3).

Although the qualitative data strongly indicate that schools provided more SEMH to children experiencing difficulties, the quantitative data collected over the course of the project only indicate a small but significant increase in the

Figure 3. Changes in SEMH support accessed by children over the course of the academic year, depending on their levels of SEMH needs.

number of children receiving support. A detailed discussion of the discrepancy is provided in the main report (Chapter 4).
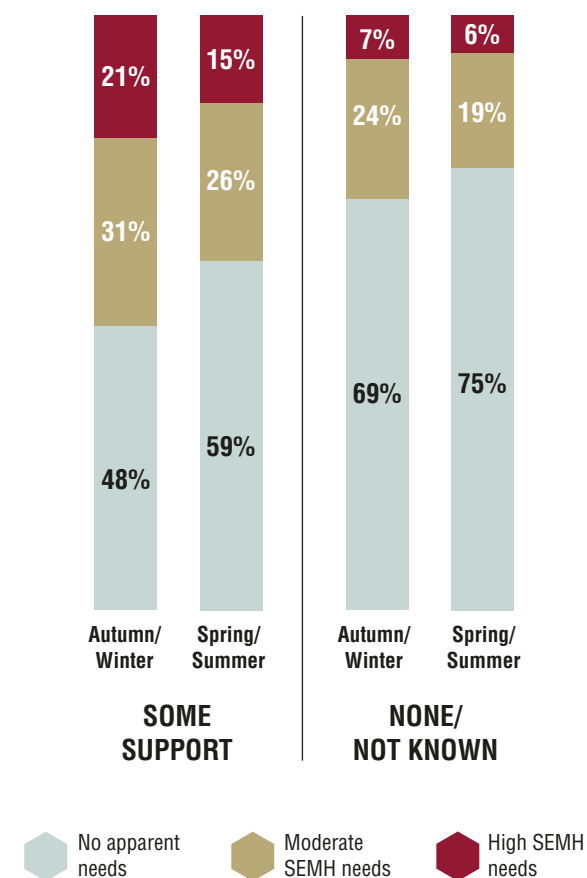
IMPACT ON CHILDREN, WHOLE CLASSES AND THE WHOLE SCHOOL

Schools indicated that the outcomes highlighted above led to a positive impact on individual children, whole classes and across the whole school.

Children benefited from the whole-school approach to assessing SEMH as all children who required support were identified and as a result, were more likely to receive some support. This in turn led to improvements in children's SEMH needs.

The Boxall Profile data revealed a significant decrease in the number of children with SEMH needs between the autumn/winter 2017 to the following spring/summer 2018 (from 37% to 30%). This decrease was larger for children who did access support early during the academic year (11% fewer children were identified as having SEMH needs; Figure 4). The decrease in SEMH needs was observed for both social emotional difficulties and for behavioural difficulties (see main report Chapter 4).

Figure 4. Overall improvements in SEMH levels over the academic year 2017/18, between the autumn/winter term and the spring or summer term, as measured using the Boxall Profile.

	SOME SUPPORT		NONE/NOT KNOWN	
	Autumn/Winter	Spring/Summer	Autumn/Winter	Spring/Summer
High SEMH needs	21%	15%	7%	6%
Moderate SEMH needs	31%	26%	24%	19%
No apparent needs	48%	59%	69%	75%

Key:
- No apparent needs
- Moderate SEMH needs
- High SEMH needs

Qualitative data provided by BCP members corroborated these findings, with schools reporting improvements in children's wellbeing. Settings also indicated increases in children's learning and behaviour, as well as an increase in children taking ownership of their SEMH progress.

'The children's mental health and wellbeing have improved. They're happy to come in to school. We do, obviously, still have a lot of issues, but there's support.'
North 16 Primary School

'Across the school, the children can only benefit from the additional time – circle times, golden times, PSHE, that adult-focused attention [...]. Friday afternoons [with a focus on SEMH], it's a really nice time to be in school, the children love it and relationships are healthy in general. I think they thrive on it really.'
South 11 Primary School

'All the groups that I do now didn't really exist before we started the project [...]. I think the school is a more caring place. I think they see it as a bit of a haven, particularly the children that come to my [nurture] room a lot.
The children that maybe would have got really stressed from the playground aren't as stressed any more.'
North 1 Primary School

However, BCP members also pointed out that although needs were identified and support was available, the needs of certain children were complex and improvements were not necessarily to be expected over a short-term period (see Chapter 4 of the main report).

'We're always going to have difficult children. It's the nature of the beast in our school but we have the strands and we have the strategies and we have the skills and we have the leadership in order to support that.'
North 10 Primary School

Several BCP members reported that the support put in place over the course of the project led to improvements in learning and behaviour, for example with children better able to access the curriculum or a decrease in the number of behaviour incidents reported in school.

'We've had less risk of internal exclusions. There are a few children this year who probably would have had internal exclusions, had it not been for nurture. What we've done is send them to get provision from me [the nurture lead], or deal with it in other ways.'
North 1 Primary School

'By assessing all pupils we were able to identify more children with social and emotional difficulties. Then we were able to put more things in place to support those children so that they are able to integrate back into class and continue with the curriculum work.'
North 11 Primary School, North

'The obvious benefit is children are prepared to learn, feel confident in learning [...]. One key example is a boy in Year 6. He's had less internal exclusions time outs and increased engagement with learning. His learning levels begin to show a positive shift [...]. For the child that has a Boxall Profile, [it means] less difficult moments going into crises, not able to cope in class when it's not their teacher there. Therefore, they feel better and are more able to access learning and the rest of the class are able to access the learning so it's a win-win all round.'
South 8 Primary School

Schools also observed benefits for whole classes and across the whole school, as staff responsiveness and attitudes towards SEMH improved.

'I think it's actually impacted on the whole school [...].There are probably specific children you could name, but I think it's been more of an overall change in the school. The impact on the school and the responsiveness to children's needs, I think that's what's developed over the course of the programme.'
North 18 Primary School

FACTORS IMPACTING ON SCHOOLS' SUCCESS

The feedback provided by schools over the course of the project highlighted key barriers and enablers that impacted on whether schools were able to successfully implement the whole-school approach to assessing SEMH and create positive outcomes in their setting (see Chapter 5 of the main report). In particular:

- The **commitment of the school leadership to SEMH** determined whether the approach became a school priority or not, in particular whether time and resources were allocated to the approach. Leadership commitment had a strong impact on other factors, especially how schools experienced time constraints and staff engagement. Schools that had a pastoral/inclusion staff member on the leadership team seemed to experience more positive outcomes.

- **Time constraints** impacted on schools' capacity to deliver training or complete assessments once a term. The majority of BCP schools reported that time was a major factor impacting on their ability to implement the approach (whether BCP members were overall committed to the approach or not).

- **Staff engagement** was crucial, as teaching staff needed to be committed and needed to understand the purpose of the approach before being willing to complete the assessments for their class. Staff engagement also impacted on whether they took into account the SEMH needs of their pupils when teaching and responded to pupils' needs through whole-class approaches.

- **Staff turnover** was also a barrier experienced by many schools, with trained BCP members or key pastoral staff leaving the school over the course of the project, thus putting a halt to the implementation of the approach or putting SEMH support in place.

We also identified the following factors that mediated the overall benefits and outcomes of the whole-school approach to assessing SEMH:

- The **quality of the Boxall Profile data** impacted on whether the approach was beneficial or not, as it determined whether the pastoral staff could use the data to inform the support provided to pupils, and therefore whether the approach could impact on children's SEMH or not.

- The range of **SEMH support available** in school for children with SEMH was also a key determinant that mediated whether the overall approach was beneficial to pupils. This was related to the leadership commitment to SEMH.

- The **expertise of the pastoral team** was also an important factor that impacted on how well schools identified and responded to children's needs.

OVERALL EVALUATION

The overall evaluation of the project concluded that a whole-school approach to assessing children's SEMH was valuable and effective in primary schools. The evaluation indicated that:

- **A whole-school approach to assessing children's SEMH was feasible** in mainstream primary schools settings. More than 60% of schools were able to train all their teaching staff and assess all their pupils, at least once over the course of the project.

- Although the initial plan was for BCP schools to assess all pupils once per term, the majority of settings struggled to follow this schedule (only 23% of primary schools assessed all their pupils four times). However, **schools found it valuable to assess all children at least twice per academic year**: once during the autumn term and six months later before the Easter break (see full report, Chapter 6 for more detail).

- Data collected eight months following the end of the project also provided preliminary findings that **the approach was sustainable to some extent**, but that perhaps schools needed further external support to carry the approach forward.

- The data gathered over the course of the project provided strong evidence that **the approach was effective and could trigger a large number of positive outcomes for children, teaching staff and across the whole school**, if the school leadership was committed to identifying and supporting the needs of children. Importantly, we observed that the SEMH needs and wellbeing of children significantly improved over the course of the academic year, as a result of schools identifying and responding to the needs.

- The majority of schools found the approach very valuable, with **92% of primary schools that successfully assessed all their pupils saying they would recommend other settings to implement the approach**.

The evaluation also provided guidance regarding the areas of the approach that could be improved. In particular, nurture**uk** should provide additional resources and guidance to ensure pastoral staff and teaching staff are able to answer the SEMH needs of children effectively (eg planning adequate individual and whole-class support adapted to the SEMH needs identified). The charity should also invest in developing the Boxall Profile Online to increase the potential impact of the data.

More information about the different evaluative aspects explored and the areas of improvements identified as a result can be found in the main report (Chapter 6).

GUIDELINES

Below are key guidelines for primary schools aiming to adopt a whole-school approach to assessing the SEMH of all their pupils.

What to consider before implementing the approach?

- Ensure the school leadership is committed to assessing and supporting the SEMH needs of pupils and that **the approach will be a priority** within the school, so that appropriate budget, time and resources can be invested.

- **Consider adopting the approach in steps** (eg piloting it with a small number of classes) to fit it around other school priorities.

- Ensure that **all staff are trained, understand the purpose of the approach and have the resources and support needed to assess the SEMH needs of their class**.

- **Allocate dedicated time for staff** to assess children and identify the strategies they will use in the classroom to support children, so that they are aware this is a school priority.

- Ensure **support and supervision are available** to teaching staff when they complete the Boxall Profiles, analyse the data and plan strategies to implement in their class to answer their pupils' needs.

- Ensure the **school's curriculum provides the opportunity for teaching staff to incorporate social emotional learning** as part of the teachers' daily routines or specific PSHE lessons. The new resource 'Beyond the Boxall Profile, whole-class strategies' can greatly assist with this.

- **Assess pupils at least twice during the academic year** (in autumn and before the Easter break) to identify children's needs early in the year and monitor their progress. Consider assessing children's needs a third time during the academic year to better monitor pupils' needs.

- Foster **positive lines of communication between all staff** (pastoral team, teachers and leadership team) and with parents and carers to work cooperatively towards improving children's SEMH needs.

- Ensure effective, **quality support is available for pupils requiring targeted SEMH support**. Teaching staff should never be solely responsible for managing and responding to the SEMH needs of the pupils, especially when severe difficulties have been identified.

A more detailed list of guidelines and recommendations for primary schools is provided in the full report (Chapter 7). A non-exhaustive list of interventions and programmes schools could consider adopting to support the SEMH of their pupils is provided in Chapter 4 of the main report.

We estimate that it would cost **£1,248 + VAT** in the first year for an average primary school in England to implement the whole-school approach to assessing SEMH, reducing to a cost of £750 per year in subsequent years. This would cover:

- A yearly subscription to the Boxall Profile Online (www.boxallprofile.org), currently costing £150+VAT for 10 staff to assess an unlimited number of pupils in their setting.

- One member of the pastoral/inclusion team and one member of the leadership team attending training (one-day training course on the Boxall Profile and one additional training course on implementing the whole-school approach to assessing SEMH), for a total cost of £498 + VAT.

- One consultancy day delivered by nurture**uk** to train up to 30 teaching staff in school to use the Boxall Profile and understand the purpose and benefits of a whole-school approach to assessing SEMH, for a total cost of £600 + VAT.

Subsequent years would require fewer costs, estimated at **£750 + VAT** to cover the costs of the yearly Boxall Profile subscription and to deliver, if needed, a one-day refresher to train new teaching staff and further develop teaching staff's expertise in assessing and supporting SEMH within the class.

How to use the data to identify and respond to SEMH needs?

- Identify the **SEMH needs of individual children**: ensure all children who have Boxall Profile scores indicating SEMH difficulties have been identified by the pastoral team and individualised support adapted to the level of needs is planned and delivered to support children.

- Explore **SEMH difficulties across whole-classes**: ensure teaching staff, supervised by the pastoral team, review the needs of their whole class using a Boxall Profile Class Overview to identify common difficulties experienced by many children, hindering their learning and their relationships in school.

- Explore whether **common areas of needs can be found across the whole school**; this information could be valuable in particular when reviewing your whole-school approaches to SEMH, eg wellbeing programmes, school curriculum, etc.

- **Regularly monitor the SEMH levels** of the children and whole classes (in particular pupils accessing targeted interventions) to ensure they are making progress and the interventions have a positive impact.

RECOMMENDATIONS

More needs to be done in schools to better identify children with SEMH needs. With an estimated 36% of children in primary schools experiencing SEMH difficulties but a majority of needs remaining invisible, schools need to be better equipped and supported to identify children's difficulties so that in turn they can respond and better support children's SEMH. Based on the findings of the current report, we provide the following recommendations for schools and educational policy-makers wanting to improve the SEMH of children.

Identifying and understanding SEMH needs

- Every primary school should use the Boxall Profile to obtain an accurate understanding of pupils' SEMH needs.

- Ofsted should take into account within inspections the extent to which schools have an accurate understanding of the SEMH needs of the pupils in their school.

- The Department for Education should encourage school leaders to prioritise gaining an accurate understanding of the SEMH needs of their whole-school population, through setting this as a clear priority for schools.

- School leaders should support the efforts staff put into undertaking assessments of their pupils' SEMH needs, setting it as a clear priority, placing it on a comparable level to assessing academic progress, and ensuring staff time is made available.

Responding to and addressing the SEMH needs identified

- Primary schools should use the results of children's SEMH assessments to plan whole-school, whole-class and individual strategies as appropriate to respond to and reduce SEMH needs, eg the National Nurturing Schools Programme and classic nurture groups.

- Ofsted should take into account within inspections the efforts schools make to support pupils with SEMH needs in school.

- Primary schools should engage and foster positive relationships with parents to better understand and support pupils' SEMH.

- The Department for Education should encourage school leaders to prioritise a graduated approach to SEMH (ie 'assess – plan – do – review') to improve their understanding of the SEMH needs of their school population and allow them to put in place appropriate, tailored support in response to the particular needs of the children in their school.

Monitoring SEMH needs and measuring progress

- Schools should use the Boxall Profile to regularly monitor the SEMH needs of children, if possible twice per academic year (once before the autumn term half-term break, and once before the Easter break).

- Schools should also use the Boxall Profile to track the progress children have made following accessing SEMH interventions as well as the impact of whole-class and whole-school approaches in place to support children in school.

ACKNOWLEDGMENTS

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ABOUT NURTUREUK

Nurture**uk** is a registered charity working tirelessly to promote access to education for all. With rising levels of mental health problems and increasing numbers of children and young people affected by social, emotional and behavioural difficulties that inhibit their progress and limit their life chances, nurture**uk** is at the forefront of combatting barriers to learning and development.

Our charity has developed a range of evidence-based interventions and support, delivered in schools and other educational settings, that give disadvantaged and vulnerable children and young people the opportunity to be the best they can be.

Whether it is delivering certified training for professionals, supporting whole-school nurturing approaches, providing accurate assessments of need, or promoting rigorous research-based evidence, nurture**uk** is providing the quality support and resources that make impactful, nurturing, education provisions a reality for children and young people throughout the UK and beyond.

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