

Report Start Date/Time	23/09/20 12:50	User Mnemonic	OHOWARD
Alder Hey Children's NHS Foundation Trust			
Patient Identification Sheet			
PATIENT DETAILS			
			
Forename	AXEL	Unit Number	DPA
Surname	RUDAKUBANA	NHS Number	DPA
Previous Names		Sex	M
Title	MR	Marital Status	S
Birthdate	07/08/2006	Language	
Ethnicity	Not Stated	Religion	Unknown
Address	10 Old School Close Banks SOUTHPORT Lancashire	Telephone Number(s)	
Postcode	PR9 8SB	Home Phone	DPA DAD
		OtherPhone	DPA MUM
PRIMARY CARE PRACTITIONER DETAILS			
Name	ROE LANE SURGERY		
Address	ROE LANE SURGERY 172 ROE LANE MERSEYSIDE PR9 7PN		
Phone	DPA		
NEXT OF KIN DETAILS			
Name	RUDAKUBANA,ALPHONSE	Home Phone	DPA
Address	10 Old School Close Banks SOUTHPORT	Relationship	Father
Postcode	PR9 8SB RUDAKUBANA,ALPHONSE		DPA
	10 Old School Close Banks SOUTHPORT PR9 8SB	Father	

DPA

*Axel
Muganwa*

Please print **CHILD BEHAVIOR CHECKLIST FOR AGES 6-18** **DPA**

CHILD'S First Name MILLIE Last Name WALSH WALSH

FULL NAME AXEL RUDOLPH WALSH

CHILD'S GENDER Boy ☒ Girl ☐

CHILD'S AGE 13

CHILD'S ETHNIC GROUP OR RACE Latino

TODAY'S DATE Mo 12 Day 12 Year 2015

CHILD'S BIRTH DATE Mo 08 Day 07 Year 2002

PARENTS' USUAL TYPE OF WORK, even if not working now.
(Please list specific -- for example, math teacher, high school teacher, homemaker, baker, salesperson, Vice president, army sergeant.)
PARENT 1 (or FATHER) Accountant, but retired now
PARENT 2 (or MOTHER) Retired
TYPE OF WORK Unemployed

THIS FORM FILLED OUT BY: (print your full name)
LACTANIA MURAYRE

Your gender: ☒ Male ☒ Female ☐ Other (specify)

Your relation to the child:
☒ Biological Parent ☐ Step Parent ☐ Grandparent
☐ Adoptive Parent ☐ Foster Parent ☐ Other (specify)

I. Please list the sports your child most likes to take part in. For example: swimming, basketball, skating, skate boarding, bike riding, tennis, etc.

	Less Than Average	Average	More Than Average	Don't Know	Below Average	Average	Above Average	Don't Know
a. <u>None</u>	☐	☐	☐	☐	☐	☐	☐	☐
b. <u>Swimming</u>	☐	☐	☐	☐	☐	☐	☐	☐
c. <u>Skateboarding</u>	☐	☐	☐	☐	☐	☐	☐	☐

II. Please list your child's favorite hobbies, activities, and games, other than sports. For example: video games, dolls, reading, music, crafts, cars, computers, singing, etc. (Do not include listening to radio, TV, or other media.)

	Less Than Average	Average	More Than Average	Don't Know	Below Average	Average	Above Average	Don't Know
a. <u>None</u>	☐	☐	☐	☐	☐	☐	☐	☐
b. <u>Video Games</u>	☐	☐	☐	☐	☐	☐	☐	☐
c. <u>Reading</u>	☐	☐	☐	☐	☐	☐	☐	☐

III. Please list any organizations, clubs, teams, or groups your child belongs to.

	Less Active	Average	More Active	Don't Know	Below Average	Average	Above Average	Don't Know
a. <u>None</u>	☐	☐	☐	☐	☐	☐	☐	☐
b. <u>Swimming</u>	☐	☐	☐	☐	☐	☐	☐	☐
c. <u>Skateboarding</u>	☐	☐	☐	☐	☐	☐	☐	☐

IV. Please list any jobs or chores your child has. For example, doing dishes, babysitting, making bed, working in store, etc. (Include both paid and unpaid jobs and chores.)

	Below Average	Average	Above Average	Don't Know
a. <u>None</u>	☐	☐	☐	☐
b. <u>Swimming</u>	☐	☐	☐	☐
c. <u>Skateboarding</u>	☐	☐	☐	☐

RECEIVED
DEC 2015

Be sure you answered all items. Then see other side.

Please print. Be sure to answer all items.

V. 1. About how many close friends does your child have? (Do not include brothers & sisters)

☒ None ☐ 1 ☐ 2 or 3 ☐ 4 or more

2. About how many times a week does your child do things with any friends outside of regular school hours? (Do not include brothers & sisters)

☒ Less than 1 ☐ 1 or 2 ☐ 3 or more

VI. Compared to others of his/her age, how well does your child:

	Worse	Average	Better
a. Got along with his/her brothers & sisters?	☒	☐	☐
b. Got along with other kids?	☒	☐	☐
c. Behave with his/her parents?	☒	☐	☐
d. Play and work alone?	☐	☒	☐

VII. 1. Performance in academic subjects.

Does not attend school because Performance plate in
current school, I don't continue

Check a box for each subject that child takes

	Failing	Below Average	Average	Above Average
a. Reading, English, or Language Arts	☐	☐	☒	☐
b. History or Social Studies	☐	☐	☒	☐
c. Arithmetic or Math	☐	☐	☒	☐
d. Science	☐	☐	☒	☐
e. Computer Science	☐	☐	☒	☐
f. Design Technology	☐	☒	☐	☐
g. Art	☐	☒	☐	☐

2. Does your child receive special education or remedial services or attend a special class or special school?

☐ No ☒ Yes—kind of services, class, or school: special referred with
Thomas Shad

3. Has your child repeated any grades?

☐ No ☐ Yes—grades and reasons:

4. Has your child had any academic or other problems in school?

☐ No ☒ Yes—please describe: bullying
receptions
expelledWhen did these problems start? since year 7
Have these problems ended? ☐ No ☒ Yes—when? when he got expelledDoes your child have any illness or disability (either physical or mental)? ☐ No ☐ Yes—please describe:

Ask What concerns you most about your child?

- Concentration when not interested in activity
- Indifference and anger management issue, Shout
- Non-math

Please describe the best things about your child.

- organised
- clean
- Good English command
- Artistic

PAGE 2

Be sure you answered all items.

Please print. Be sure to answer all items.

Below is a list of items that describe children and youths. For each item that describes your child now or within the past 6 months, please circle the 1 if the item is very true or often true of your child. Circle the 2 if the item is somewhat or sometimes true of your child. If the item is not true of your child, circle the 0. Please answer all items as well as you can, even if some do not seem to apply to your child.

0 = Not True (as far as you know) 1 = Somewhat or Sometimes True 2 = Very True or Often True

0 1 2	1. Acts too young for his/her age	0 1 2	32. Feels his/her has to be perfect
0 1 2	2. Drinks alcohol without parents' approval (describe)	0 1 2	33. Feels or complains that no one loves him/her
0 1 2	3. Argues a lot	0 1 2	34. Feels others are out to get him/her
0 1 2	4. Fails to finish things he/she starts	0 1 2	35. Feels worthless or inferior
0 1 2	5. There is very little he/she enjoys	0 1 2	36. Gets hurt a lot, accident-prone
0 1 2	6. Becomes nervous outside school	0 1 2	37. Gets in many fights
0 1 2	7. Bragging, boasting	0 1 2	38. Gets teased a lot
0 1 2	8. Can't concentrate, can't pay attention for long	0 1 2	39. Hangs around with others who get in trouble
0 1 2	9. Can't get his/her mind off certain thoughts, obsessions (describe)	0 1 2	40. Hears sounds or voices that aren't there (describe)
0 1 2	10. Can't sit still, restless, or hyperactive	0 1 2	41. Impulsiveness or acts without thinking
0 1 2	11. Clings to adults or too dependent	0 1 2	42. Would rather be alone than with others
0 1 2	12. Complains of loneliness	0 1 2	43. Lying or cheating
0 1 2	13. Confused or seems to be in a fog	0 1 2	44. Bites fingernails
0 1 2	14. Cries a lot	0 1 2	45. Nervous, hypochondria, or tense
0 1 2	15. One to someone	0 1 2	46. Nervous movements or twitching (describe)
0 1 2	16. Cruelty, bullying, or meanness to others	0 1 2	47. Nightmares
0 1 2	17. Daydreams or gets lost in his/her thoughts	0 1 2	48. Not liked by other kids
0 1 2	18. Deliberately harms self or attempts suicide	0 1 2	49. Constipated, doesn't move bowels
0 1 2	19. Demands a lot of attention	0 1 2	50. Too fearful or anxious
0 1 2	20. Destroys his/her own things	0 1 2	51. Feels dizzy or lightheaded
0 1 2	21. Destroys things belonging to his/her family or others	0 1 2	52. Feels too guilty
0 1 2	22. Disobedient at home	0 1 2	53. Overeating
0 1 2	23. Disobedient at school	0 1 2	54. Overlives without good reason
0 1 2	24. Doesn't eat well	0 1 2	55. Overweight
0 1 2	25. Doesn't get along with other kids	0 1 2	56. Physical problems without known medical cause:
0 1 2	26. Doesn't seem to feel guilty after misbehaving	0 1 2	a. Aches or pains (not stomach or headaches)
0 1 2	27. Easily jealous	0 1 2	b. Headaches
0 1 2	28. Breaks rules at home, school, or elsewhere	0 1 2	c. Nausea, feels sick
0 1 2	29. Feels certain moods, situations, or places, other than school (describe)	0 1 2	d. Problems with eyes (not if corrected by glasses) (describe)
0 1 2	30. Feels going to school	0 1 2	e. Rash or other skin problems
0 1 2	31. Feels he/she might think or do something bad	0 1 2	f. Stomachaches
		0 1 2	g. Vomiting, throwing up
		0 1 2	h. Other (describe):

PAGE 3 Be sure you answered all items. Then see other side.

Control Sheet

**The original hard copies of the
following scanned images were:**

Email	☐
Previously Scanned	☐
Photocopy	☐
Poor Quality	☐
Photocopy & Poor Quality	☒
Email & Poor Quality	☐
Fax & Poor Quality	☐
Previously Scanned & Poor Quality	☐

**A control end sheet will be behind
the last relevant document.**

ID: DPA

Name: AXEL RUDAKUBANA

Gender: M

Date Filled: 2019-12-17

Clinician:

Informant: LAETITIA MUZAYIRE

Society: ASEBA Standard

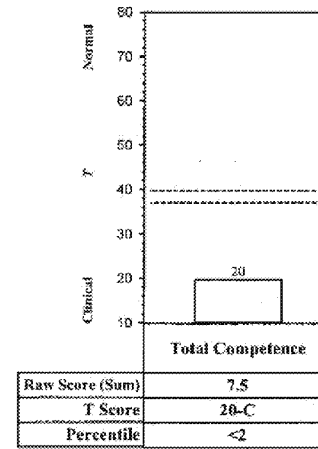
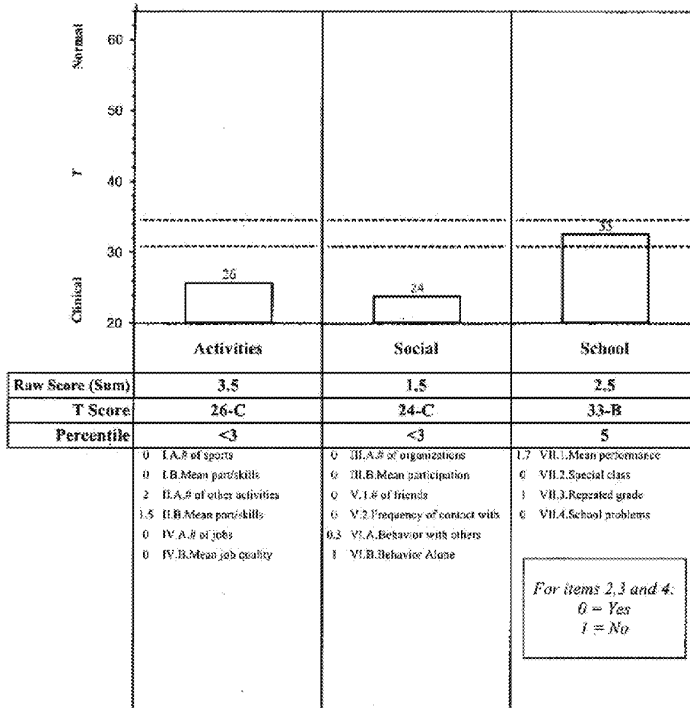
Age: 13

Birth Date: 2006-08-07

Agency:

Relationship: Biological parent

Verified: No



B = Borderline clinical range; C = Clinical range;
 Broken Lines = Borderline clinical range

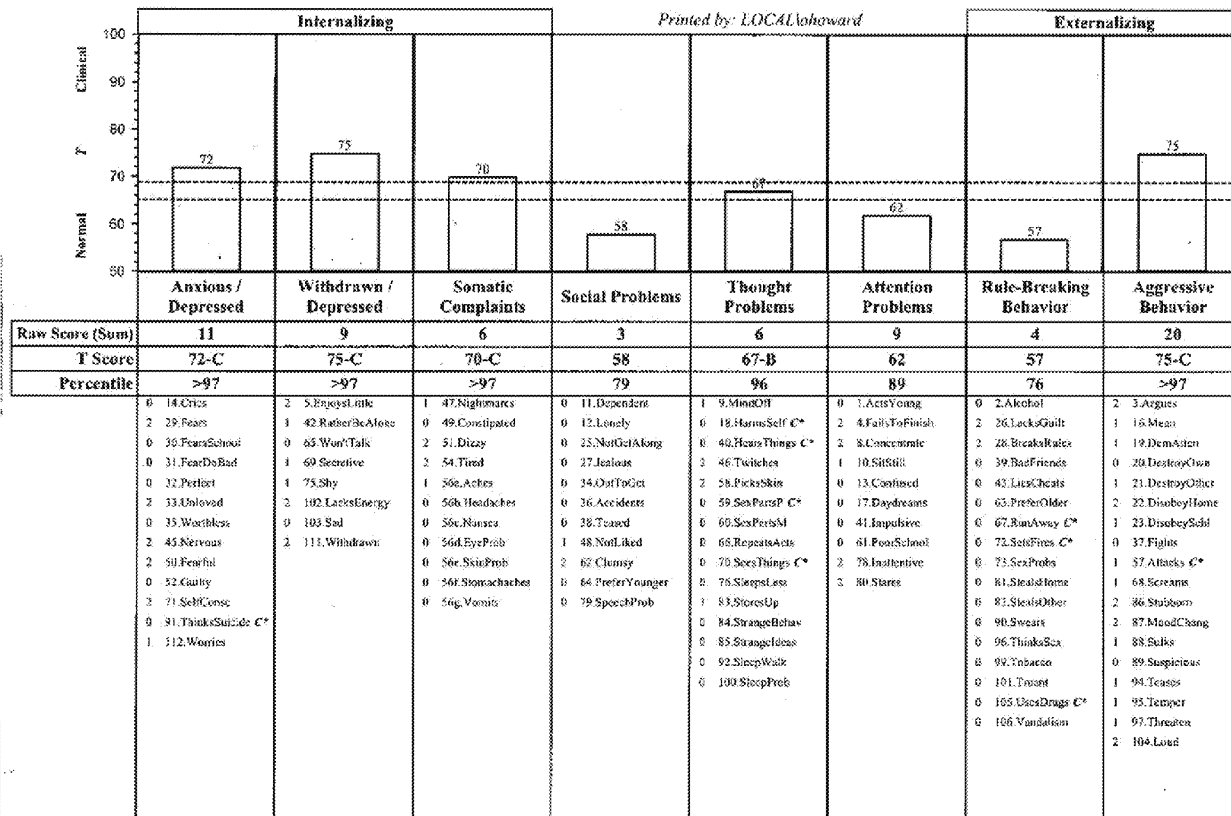
Total Score for each scale is rounded to nearest 0.5.

On Activities and Social Scales, if one item is missing, the mean of the other items is substituted.

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CPD
Module
[DPA]

ID: DPA Gender: M Date Filled: 2019-12-17 Clinician: Informant: LAETITIA MUZAYIRE Society: ASEBA Standard
Name: AXEL RUDAKUBANA Age: 13 Birth Date: 2006-08-07 Agency: Relationship: Biological parent Verified: No



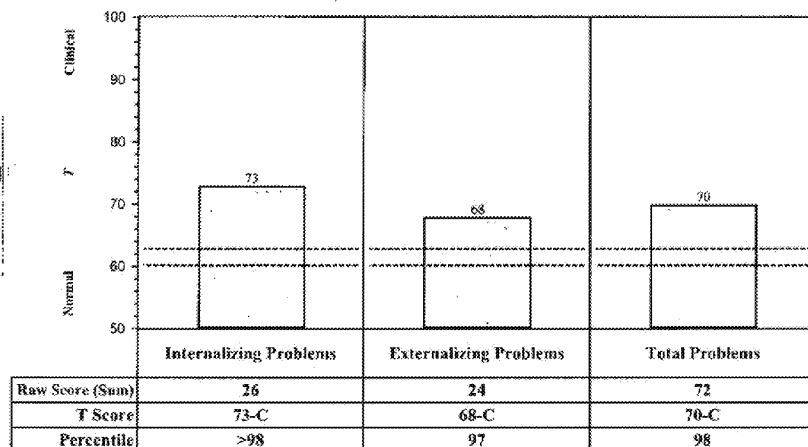
B = Borderline clinical range; C = Clinical range; Broken Lines = Borderline clinical range

Printed by: LOCALohoward

C* = Critical Item

CHOP
Chronological
DPA

ID: **DPA** Gender: M Date Filled: 2019-12-17 Clinician: Informant: LAETITIA MUZAYIRE Society: ASEBA Standard
 Name: AXEL RUDAKUBANA Age: 13 Birth Date: 2006-08-07 Agency: Relationship: Biological parent Verified: No



Other Problems	
0	6.BMChs C*
0	7.Drugs
0	15.CruelAnimal C*
2	24.NotEatWell
0	44.BacNail
0	51.Overeat
0	55.Overweight
0	56h.OtherPhys
0	74.ShowsOff
1	77.SleepsMore
1	93.TalkNtuch
0	98.ThumbSuck
0	107.WetsSelf C*
0	108.WetBed
0	109.Whinng
0	118.WishOppSex
-	119.OtherProb

B = Borderline clinical range; C = Clinical range; Broken Lines = Borderline clinical range

C* = Critical Item

Printed by: LOCALohoward

W. M. M. M.
[DPA]

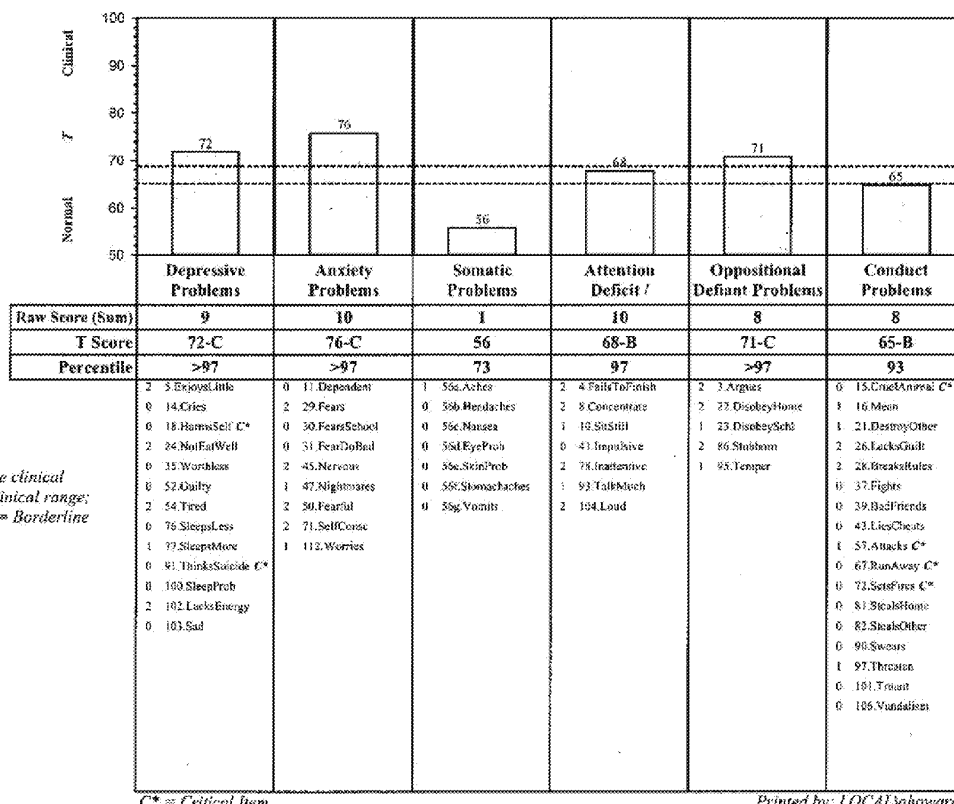
ID: DPA
Name: AXEL RUDAKUBANA

Gender: M Date Filled: 2019-12-17
Age: 13 Birth Date: 2006-08-07

Clinician:
Agency:

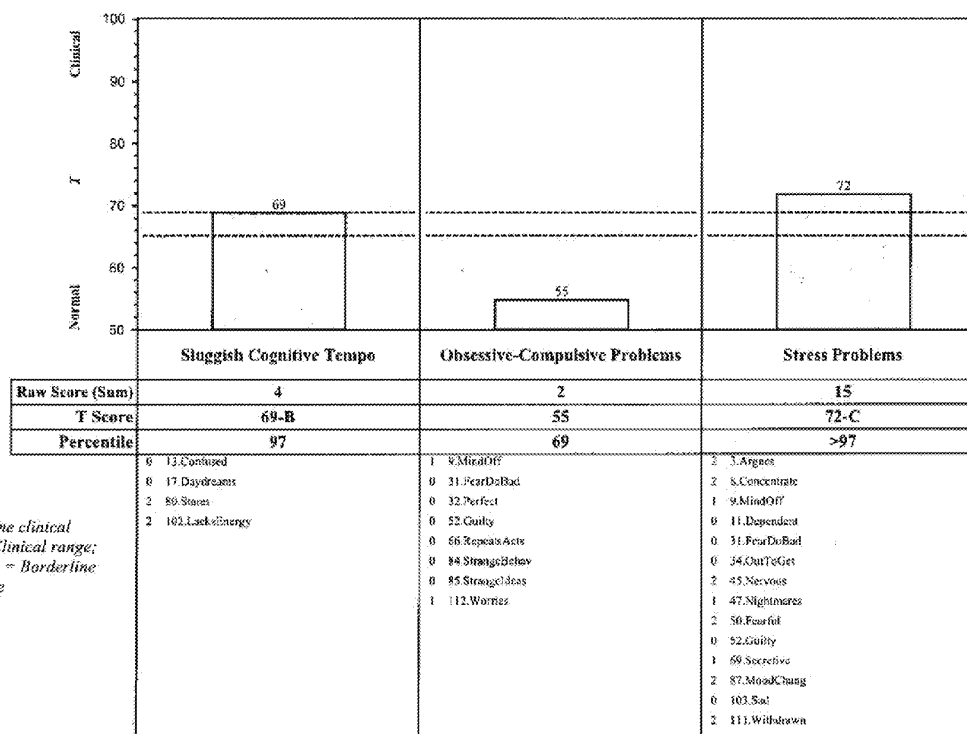
Informant: LAETITIA MUZAYIRE
Relationship: Biological parent

Society: ASEBA Standard
Verified: No



Handwritten signature
[DPA]

ID: DPA Name: AXEL RUDAKUBANA Gender: M Date Filled: 2019-12-17 Clinician: Informant: LAETITIA MUZAYIRE Society: ASEBA Standard Age: 13 Birth Date: 2008-08-07 Agency: Relationship: Biological parent Verified: No



B = Borderline clinical range; C = Clinical range; Broken Lines = Borderline clinical range

Printed by: LOCALohoward

07/08/2006
MUGANWA
[DPA]

CBCL 6-18 - Narrative Report And Critical Items

ID: DPA

Name: AXEL RUDAKUBANA

Gender: M

Age: 13

Birth Date: 2006-08-07

Society ASEBA Standard

Printed by: LOCAL\ohoward

Date Filled: 2019-12-18

Clinician:

Informant: LAETITIA MUZAYIRE

Relationship: Biological parent

Agency:

The Child Behavior Checklist for Ages 6-18 (CBCL 6-18) was completed by LAETITIA MUZAYIRE, AXEL's biological parent to obtain her perception of AXEL's competencies and problems. Ms. LAETITIA MUZAYIRE reported that AXEL participates in no sports and that he has interests in 2 hobbies. He belongs to 0 social organizations, teams, or clubs. Ms. LAETITIA MUZAYIRE reported that AXEL has no jobs or chores. Ms. LAETITIA MUZAYIRE rated AXEL's school performance as Average in Reading, English, or Language Arts, Average in History or Social Studies, Average in Arithmetic or Math, Average in Science. Ms. LAETITIA MUZAYIRE rated AXEL's performance in 3 additional subjects as Average, Below average, Below average.

AXEL's Total Competence score was in the clinical range below the 10th percentile for parents' ratings of boys aged 13. His score on the Activities scale was in the clinical range below the 3rd percentile. His score on the Social scale was in the clinical range below the 3rd percentile. His score on the School scale was in the borderline clinical range (3rd to 7th percentile).

On the CBCL 6-18 problem scales, AXEL's Internalizing Problems, Externalizing Problems and Total Problems scores were all in the clinical range above the 90th percentile for boys aged 13. His scores on the Social Problems, Attention Problems and Rule Breaking Behavior syndromes were in the normal range. His score on the Thought Problems syndrome was in the borderline clinical range (93rd to 97th percentile). His scores on the Anxious / Depressed, Withdrawn / Depressed, Somatic Complaints and Aggressive Behavior syndromes were in the clinical range above the 97th percentile. These results indicate that AXEL's biological parent reported more problems than are typically reported for boys aged 13, particularly problems of Anxious / Depressed, Withdrawn / Depressed, Somatic Complaints, Thought Problems and Aggressive Behavior nature.

On the CBCL/6-18 - DSM-Oriented Scales, AXEL's score on the Somatic Problems scale was in the normal range. AXEL's scores on the Depressive Problems, Anxiety Problems and Oppositional Defiant Problems scales were in the clinical range above the 97th percentile. These results indicate that the DSM should be consulted to determine whether AXEL meets diagnostic criteria for Depressive Problems, Anxiety Problems and Oppositional Defiant Problems. AXEL's scores on the Attention Deficit / Hyperactivity Problems and Conduct Problems scales were in the borderline clinical range (93rd to 97th percentile). AXEL's scores in the borderline clinical range suggest that the DSM should be consulted to determine whether AXEL might meet diagnostic criteria for disorders characterized by problems included on those scales.

On the CBCL/6-18 - 2007 Scale Scores, his score on the Obsessive-Compulsive Problems scale was in the normal range. His score on the Stress Problems scale was in the clinical range above the 97th percentile. These results indicate that the DSM should be consulted to determine whether AXEL meets diagnostic criteria for Stress Problems. His score on the Sluggish Cognitive Tempo scale was in the borderline clinical range (93rd to 97th percentile). His score in the borderline clinical range suggests that the DSM should be consulted to determine whether AXEL might meet diagnostic criteria for disorders characterized by problems included on that scale.

Critical Items

In addition to the scale scores, it is important to consider scores on individual problem items. Because they may raise particular challenges for management, it is especially important to note the problems listed below that were reported with scores of 1 or 2. Look at comments made by the informant on the form in relation to these problems to obtain more information about risks associated with the problems and the contexts in which the problems occur.

Score	Problem Item	Score	Problem Item	Score	Problem Item
0	6.BMOut	0	59.SexPartsP	0	105.UsesDrugs
0	15.CruelAnimal	0	67.RunAway	0	107.WetsSelf
0	18.HarmsSelf	0	70.SeesThings		
0	40.HearsThings	0	72.SetsFires		
1	57.Attacks	0	91.ThinksSuicide		

DPA
axel muganwa

End of Control Sheet

Report Start Date/Time	16/12/20 09:43	User Mnemonic	GLYONS
Alder Hey Children's NHS Foundation Trust			
Patient Identification Sheet			
PATIENT DETAILS			
			
Forename	AXEL	Unit Number	DPA
Surname	RUDAKUBANA	NHS Number	DPA
Previous Names		Sex	M
Title	MR	Marital Status	S
Birthdate	07/08/2006	Language	
Ethnicity	Not Stated	Religion	Unknown
Address	10 Old School Close Banks SOUTHPORT Lancashire	Telephone Number(s)	
Postcode	PR9 8SB	Home Phone	DPA DAD
		OtherPhone	DPA MUM
PRIMARY CARE PRACTITIONER DETAILS			
Name	ROE LANE SURGERY		
Address	ROE LANE SURGERY 172 ROE LANE MERSEYSIDE PR9 7PN		
Phone	DPA		
NEXT OF KIN DETAILS			
Name	RUDAKUBANA,ALPHONSE	Home Phone	DPA
Address	10 Old School Close Banks SOUTHPORT	Relationship	Father
Postcode	PR9 8SB RUDAKUBANA,ALPHONSE		DPA
	10 Old School Close Banks SOUTHPORT PR9 8SB	Father	

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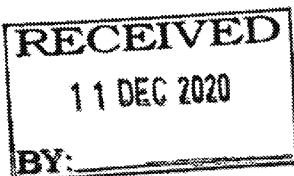


Psychological Advice

Inclusion Service

Educational Psychology Team

CONFIDENTIAL



Children and Families Act 2014.

As requested I submit advice on the following child's special educational needs:

Child/Young Person's Details

First name (s)	Axel	Surname	Rudakubana
Date of Birth	07-Aug-2006	Gender	Male
Year Group	9	Setting	The Acorns School
Home address	10 Old School Close Banks Southport PR9 8SB	SEND Pupil ID:	DPA

Details of Parent(s) or Person Responsible

Name(s)	Mr A Rudakubana	Mrs L Muzayire
Relationship	Parent	Parent
Home Address	As above	As above

Section A: Summary

A. Summary of Identified Strengths and Special Educational Needs.

The limitation of this report is that it was written based on telephone conversations, a virtual meeting and information contained in the Inclusion Service electronic file because of the current working arrangements during the Covid-19 crisis.

Axel is currently on roll at The Acorns School following a permanent exclusion from Range High School, a mainstream school, for taking a knife into school. Axel has not been attending The Acorns School since January 2020 following an assault on a pupil at Range High School which was committed while Axel was attending The Acorns School. For this offence, Axel has received a 10 month Referral Order to the Youth Offending Team (YOT) which will end in January 2021. Axel has also been assessed by the Child and Adolescent Mental Health Service (CAMHS) Forensic Team and Children's Social Care have completed an assessment. Axel and his family are currently supported by the Children and Family Wellbeing Service via the Team Around the Family (TAF) process.

To my knowledge, no difficulties have been identified with Axel's hearing or vision or with his gross or fine motor skills and no sensory difficulties have been identified.

Axel is currently awaiting an assessment to identify if he has difficulties which are within the autistic spectrum. Axel finds it difficult to accept that others can have a different point of view to himself, to be able to negotiate and compromise and to work in a group.

Cognitive (thinking and problem solving) skills are an area of strength for Axel. Axel scored within average range on all the assessments on the Cognitive Abilities Test 4 (CAT4) and within the above average range on the Verbal assessment. Information from Range High School indicates that Axel made progress with his learning but engaged in some low level disruption in the classroom. Axel is currently not completing the work which is set for him to undertake at home.

Axel has experienced difficulties establishing and maintaining friendships with his peers and with establishing working relationships with adults in school. Axel has also had difficulty in adopting socially acceptable and appropriate responses to situations and his responses have placed others and himself at serious risk. Axel's emotional responses indicate that he has difficulties understanding and managing his own emotional responses and understanding the emotional responses of others. Information on file indicates that Axel has been assessed by CAMHS and was found to have no underlying psychosis or mental illness.

When in school, Axel is described as being well dressed. He has demonstrated some of the organisational, planning and practical skills needed in adult life but has not acquired many of the other skills needed to function responsibly in society.

Axel has the ambition of being a marine biologist.

Axel's Special Educational Needs

Axel has relative strengths in terms of:

- Cognitive skills which are within the average to above average ranges with a particular strength in verbal skills;
- Confidence as a learner;
- Being able to teach himself some basic programming;
- Organisation, planning and practical skills needed in daily life;
- An ambition for the future.

Axel has special educational needs in the areas of:

Communicating and Interacting

- Social communication and interaction including the skills of empathy, negotiation, persuasion and being able to compromise.

Cognition and Learning

- Engagement with learning.

Social, Emotional and Mental Health

- Understanding emotions in others and self and the ability to express, monitor and manage emotions.
- Development of the social skills needed to establish and maintain relationships with adults and peers.
- Being able to make positive choices and the ability to recognise and avoid situations which may place the safety of self and/or others at risk.

Self-help and Independence

- The development of the skills needed to function responsibly in society.

Section B: Sources

B. Sources of evidence used in the advice

This report is based on the following:

- Information held on the Inclusion Service file for Axel.
- Telephone discussion with Mr Rudakubana, Axel's father on 13 May 2020.
- Telephone discussion with Axel on 13 May 2020.
- Telephone discussion with Mrs J Hodson, Deputy Head Teacher and Special Educational Needs Coordinator (SENCO) at The Acorns School on 19 May 2020.
- Attendance at a Team Around the Family (TAF) meeting via Skype on 19 May 2020.
- Further telephone discussion with Mr Rudakubana on 20 May 2020.
- Telephone discussion with and written information from Mr Cregeen, Range High School on 20 May 2020.
- Telephone discussion with Ms A Croll, Operations Social Worker, Youth Offending Team (YOT) on 21 May 2020.

Section C: Background

C. Relevant Background

The purpose of this report is to provide updated information regarding Axel's special educational needs.

Axel is currently on roll at The Acorns School having started attending there in October 2019 following a permanent exclusion from Range High School, Formby. Axel was permanently excluded for taking a knife on to the school premises. The available information indicates that Axel had taken the knife to school as he considered he was being bullied by another pupil. Axel had contacted Child Line to report that he was doing this.

Although Axel has been on roll at The Acorns School he has not been attending school since January 2020 following an incident in December 2019 where Axel returned to Range High School to seek out the pupil he considered was bullying him. Information provided indicates that Axel organised a taxi to call at his home address at the same time as the school taxi would take him to The Acorns School in order to travel to Range High School. At the school, Axel attacked another pupil with a hockey stick having been unable to find the pupil he was seeking and was found to have a knife in his bag. Following this incident, Axel was given a 10 month Referral Order to YOT. The Order started in March and will end in January 2021.

Following the incident in October, a referral was made to Children's Social Care and an assessment was undertaken. Currently, the Children and Family Wellbeing Service is involved to support Axel's access to education and issues related to family isolation.

Axel was also referred to Prevent and an assessment was undertaken but no further action was deemed necessary. There was also involvement from the Forensic Child and Mental Health Service (CAMHS). The record of the discussion indicates that Axel had been referred by Range High School for an assessment to identify if he had difficulties which were within the autistic spectrum and was on a waiting list for this.

Currently, Axel is being provided with online learning resources. Axel's return to school is being considered and potentially he could return to school with 1:1 support from a specialist teacher for one hour per day when the school opens following a risk assessment and the current restriction being eased.

Axel lives at home with his parents and older brother who [DPA] [DPA] and who uses a wheelchair.

Section D: Views

a) View of Child/Young Person

Axel made the following points in the discussion in response to questions he was asked:

- The good things about Range High School were easy lessons like drama. This was not because of the lessons but because he was able to talk to his friends.
- Axel described English as 'okay' but he didn't like the teachers. Axel didn't consider that he had any problems with the work he was given. Axel said Maths was 'fine'.
- Axel was asked if he could choose to do just one lesson which lesson would it be and he chose Art because he said he got to talk to his friends.
- When he was asked about the not so good things about Range High School Axel said that he didn't like some of the students/teachers. This was because one of the students was bullying him and the teachers were strict and unfair.
- When Axel was asked if there was one thing which would have made Range High School better for him he said 'removing annoying students and the ones I didn't like'.
- Axel was asked if there was anything or anyone who helped him he said that there was 'nothing that helped' and no one he could talk to.

- Axel said that 'normal school' would be the option he would prefer when we talked about the type of school he would like to attend. Axel said that he wouldn't want someone in class to help him when he was asked about this.
- In the future Axel said his ambition is to be a marine biologist and explained that he likes animals but not science lessons in school.
- Axel said that he has a Play station and computer and has been trying to program but he just done the basics.
- Axel explained that he used to have friends but not really as in friends – people he knew.

Axel will also have outlined his views and aspirations in the 'All About Me' document and this should be referred to.

b) View of Parents/Carers

Mr Rudakubana made the following points in the discussion:

- In primary school, Axel had no difficulties; he was in the middle of the class and coping with school. The problems started for Axel in high school when he moved schools as his brother had to move because of wheelchair access. Mr Rudakubana described this as having 'hit him hard'. Axel did not want to go to school at his new school. There was no one else in his class that he knew and he said that some of the children did not like him.
- Mr Rudakubana is of the opinion that The Acorns School environment does not help and support Axel and it is not the right provision for Axel. It annoys Axel that staff write down everything he does wrong and Mr Rudakubana said that he dreads Friday because school staff ring and tell him all the things Axel has done wrong. Mr Rudakubana considers that when he was attending The Acorns School, Axel was missing out on his education because of other children's behaviour.
- Currently, Axel is not doing the work which is being sent home and which is available electronically and says will only do it when he goes back to school. Mr Rudakubana is of the view that Axel needs a home tutor.
- Mr Rudakubana explained that he believes that Axel has a way of learning that he prefers. This is self-directed learning e.g. taught himself computer programming. He considered that when Axel is in the classroom he feels he is repeating what he already knows, it is boring and he switches off.
- Mr Rudakubana explained that he wants Axel to be assessed for attention deficit with hyperactivity disorder (ADHD) and an autistic spectrum disorder (ASD). There is a paediatrician involved as are the Child and Mental Health Service (CAMHS) but everything is on hold because of COVID-19. The Youth Offending Team (YOT) are involved in assessing Axel's safety.
- Axel had stopped doing everything at home but he is now saying that he wants to go back to playing tennis.

- Mr Rudakubana explained that he has completed a parenting course.
- In the future, Mr Rudakubana would like Axel to go back to a mainstream school with some support during breaks and to encourage him to do work in the classroom.
- The Outcomes Mr Rudakubana would want for Axel are for him to be:
 - Attending school, learning and making progress;
 - Able to understand that people have a different point of view and to respond in a socially appropriate way e.g. being able to disagree;
 - Able to make friends more easily.
 - Able to persist with tasks and;
 - Able to recognise his emotions and to regulate them e.g. being able to be calm.

Other information provided by Mr Rudakubana is included elsewhere in this report.

In addition to this, the family's story so far will have been outlined in the 'All About Me' document. This will also include what is important to the family now and what they would want Axel to achieve in the future.

Section E: Psychological Assessment

Observation and Assessment details

The current working arrangements during the COVID-19 crisis means that no observation or assessments were undertaken.

Section F: Identified Strengths and Special Educational Needs

a) Sensory and Physical

To my knowledge, there are no concerns regarding Axel's hearing or vision. No difficulties have been reported with Axel's gross or fine motor skills and no sensory difficulties have been identified. Mr Rudakubana, Axel's father reports that Axel is fussy about what he eats and he eats the same foods each day.

b) Communication and Interaction

When Axel was attending The Acorns School, Mrs Hodson described him as not making eye contact. Axel would stand with his head down looking at the floor when he came in to school and would not interact with anyone. If another pupil said something he did not agree with, Axel would struggle with this and get really angry and use the phrase, 'This is my opinion' and be unable to accept that others can have a different view or be able to negotiate, compromise or show empathy. Mrs Hodson described Axel's understanding of language as being very literal and his thinking as 'black and white'. She found that Axel was unable to let go of any form of perceived injustice. It was also noted that Axel found it difficult to pick up on social nuances in conversations and to work in a group with other pupils.

Axel is currently waiting to be assessed to identify if he may have difficulties within the autistic spectrum.

The assessment of Axel's cognitive (thinking and problem solving) skills on the Cognitive Abilities Test 4 (CAT4) indicated that verbal skills are an area of strength for Axel and he scored in the above average range on the assessment.

c) Cognition and Learning

When Axel was attending The Acorns School there was no evidence that he had any learning needs. Mrs Hodson explained that Axel completed the work given to him but said it was too easy. She considers that Axel is confident as a learner and if he says he will not complete work it is not because he is unable to understand or complete it, it is because he is choosing not to do the work. Mrs Hodson was of the opinion that Axel places a high value on education and that he should be in a mainstream school and not at The Acorns School.

When Axel was attending Range High School, the information indicates that he made progress with his learning but engaged in some low level disruption in the classroom.

Information provided both from school and by home indicates that Axel is not engaging with the work which has been provided while he has not been in school and while the school has been closed because of the current restrictions. There was a home visit by school staff where Axel indicated that he would complete online learning but he only attempted some of the Maths work. Axel is reported as saying that he will do the work when he is in school and he has been doing some computer programming which he has found himself.

Mr Rudakubana explained that when he had observed Axel completing homework he was restless and he said that he would not describe Axel as liking to learn. When things are too challenging, Axel will stop work and not be engaged. Mr Rudakubana considers that he needs things that interest him e.g. programming and then he will concentrate, focus and persist. Otherwise, Axel cannot be encourage to persist with tasks.

DPA

At home, Mr Rudakubana explained that when Axel was at Range High School he would do his homework straight from school but would not let anyone look at it. Mr Rudakubana later found out that Axel was not doing any work or he would do the easy things and would only write a paragraph when a longer piece of work was required. This resulted in Axel having a number of detentions for not doing homework. Mr Rudakubana also described Axel as engaging in low-level disruption in class such as talking and answering back although Axel would say it was others who were doing this. This only became apparent to Mr Rudakubana at the parents evening. Eventually, Axel did not care about detentions and would not attend.

Axel's scores on the Cognitive Abilities Test 4 (CAT4) resulted in scores which were all within the average range with the exception of the Verbal score which was within the above average range. These scores would indicate that Axel would be able to cope with the demands of the curriculum in a mainstream school and Mrs Hodson had no concerns regarding Axel's ability to cope with the work he was asked to attempt in school.

d) Social, Emotional and Mental Health Development

At The Acorns School, Mrs Hodson found that Axel had little or no interaction with other pupils or relationships with the staff. Other pupils were described as finding Axel as being 'quite unsettling' and Axel made accusations about the behaviour of other pupils towards him saying they were bullying him but school staff were unable to find any evidence of this. Axel had been involved in a verbal exchange with another pupil in the school and this had resulted in some physical contact in the form of pushing. Axel appeared to become fixated on particular members of staff. Mrs Hodson reported that Axel had decided a member of staff who had been unwell was contaminating everything they touched and was trying to turn the other children against her. Axel had also alleged that another member of staff had used an abusive term to describe him.

Mr Rudakubana described Axel as being really shy and nervous in groups of people. He explained that Axel had been on his own at break and lunchtime at school. He had only two friends and Axel would not go to eat if they were not there. He said that children had liked Axel when he was in primary school and he had made them laugh.

Mrs Hodson expressed concern that there were occasions when Axel would say and do things which she described as 'sinister'; for example, he had graphically described the damage a drill bit could do and he looked at school shootings on the web. She also explained that Axel had appeared quite 'cold and calculating' when he was in a meeting to discuss the issues with school staff and he had not appeared concerned about the seriousness of the meeting. Mrs Hodson also explained that when he had been asked about taking a knife into school, he had thought this was an appropriate response to the situation and the information from Range High School indicated that it was considered that Axel showed a lack of emotion and awareness of the impact of his actions. Mr Rudakubana said that he considered that Axel had been 'damaged' by the incident at Range High and felt that justice had not been done.

Both Mrs Hodson and Axel's father describe him as being unable to let go of any real or perceived injustice.

Mr Rudakubana considers that if Axel is respected by others then there will be no difficulties but if something is said to him then he will react. Axel has difficulty managing when things go wrong and he then becomes angry. If he is angry he can hit out. Mr Rudakubana said that he does not think that Axel knows how to control his behaviour and Axel he does not tell anyone what is happening but keeps things to himself. Mr Rudakubana further explained that he considers it Axel is slow to recognise that for Axel to notice that you do not like him and the dislike has to be noticeable. There are times when Axel feels everyone is looking at him. At these times, he would tremble and rub his hands and arms. There have been times in the past when Axel's eyes have watered and he has had a lot of saliva in his mouth and he was very aware of this. Mr Rudakubana explained that he had taken Axel to their GP who considered this was anxiety related. He said that said that Axel does not run around, play football or sport and does not play rough and described him as being 'really modest'.

It is reported in the Educational Advice for the EHCP assessment that Axel has been assessed by CAMHS and was found to have no underlying psychosis or mental illness. Mr Rudakubana reports that Axel has had counselling which he has paid for privately.

e) Self Help and Independence skills/preparation for adulthood

No concerns have been expressed regarding Axel's self-help and independence skills. He is described as being well dressed and clean in school. Axel was able to demonstrate a degree of organisation and the planning and practical skills needed in adult life when he organised a taxi to take him to Range High School. However, given that this was in order to carry out an assault clearly Axel has not acquired many of the other skills needed to function responsibly in society.

Section G: Outcomes and Recommended Approaches

These suggested outcomes are based on the information currently available and are intended to form the basis of further discussion with Axel, parents, staff and the Special Educational Needs Officer (SENDO). It would be expected that Axel would achieve these outcomes by the end of Key Stage 4.

The following suggested methods and approaches are outlined as a means of supporting Axel in achieving these outcomes:

Outcomes	Approaches towards achieving the Outcome
Communication and Interaction • Axel will have developed more sophisticated language and social interaction skills including those of inference, negotiation and persuasion and be able to recognise and accept that others have a different point of view to himself and also understand figurative language, sarcasm and word play for jokes. • Axel will be able to recognise and ask for help from an adult when this is needed and be able to accept this help to resolve difficult situations.	• Resources such as Talkabout for Teenagers by Alex Kelly and Talkabout Theory of Mind by Alex Kelly and Katherine Wareham may be useful. • Direct teaching of figurative language. • Supporting Axel to think about situations where he might need help and support, identifying barriers to asking for help, developing a script for asking for help and identify who he can ask for help
Cognition and learning • Axel will be engaged with learning and completing work set by his teachers	• A programme of work that Axel finds interesting, relevant and motivating. It will be important that Axel can see 'what is in it for him'. Helping Axel to develop some long term aims i.e. what he would aspire to in the future may help to identify what would be relevant and therefore motivating. • The use of full praise statements i.e. include the behaviour that is being praised in the statement rather than simply saying 'well done, Axel'. In addition to being specific the praise should encourage him towards a growth mindset (see Carol Dweck's website for more on this).

Social, Emotional and Mental Health

- | | |
|--|---|
| <ul style="list-style-type: none"> • Axel will recognise and understand a range of emotional response both in himself and others and to be able to express his emotions and monitor and manage his own responses in a socially appropriate way. | <ul style="list-style-type: none"> • Axel will require support to extend his understanding of his own emotional needs and those of others. Axel may benefit from being given feedback i.e. labelling and acknowledging emotions. |
| <ul style="list-style-type: none"> • Axel will have acquired the social skills needed to establish appropriate relationships with his peers and adults including recognising that others may interpret the same event or happening differently and be able to respond in a socially appropriate way when he encounters difficulties in his relationships with others. | <ul style="list-style-type: none"> • Developing Axel's emotional vocabulary through resources such as: <ul style="list-style-type: none"> – Bothered: Helping teenagers talk about their feelings by Margot Sunderland, Speechmark ISBN: 978-0-8638-908-0 – Helping Teenagers with anger and low self-esteem ed. Margot Sunderland, Hinton House ISBN: 978-1906531-30-0 |
| <ul style="list-style-type: none"> • Axel will be able to identify and avoid inappropriate behaviours including those which place self and/or others at risk and which may lead to serious consequences both inside and outside of the educational context. | <ul style="list-style-type: none"> • Skill Streaming pro-social skills training may be an approach that would be beneficial for Axel. • Axel could to be encouraged to think about situations which he finds difficult and to develop scripts to help him to respond in a way that enable him to retain his credibility but at the same time allow him to stay safe and choose a different course of action. Axel would need opportunities to role play these situations. |

Section H: Provision

Recommended Provision

Communication and Interaction

- A structured approach to developing Axel's communication skills and his understanding and use of spoken language. This could include the opportunity to develop key language skills such as; skills of persuasion and negotiation and the ability to switch language styles according to situation as well as conversation skills.
- Interventions to enable Axel to develop his social communication skills should be delivered on a regular basis during the week with opportunities to generalise what has been learnt in the teaching context.

Cognition and Learning

- Axel would benefit from an environment which is positive, supportive and nurturing and also one where he can access lessons which academically challenge him and where he can learn alongside equally able pupils.
- Axel should have access to a broad and balanced curriculum including the National Curriculum.
- Axel should have an Individual Education Plan (IEP) or equivalent which outlines SMART (Specific, Measurable, Achievable, Realistic and Time limited) targets, indicates what strategies are to be used to achieve this and the resources i.e. personnel, opportunities and physical resources needed. Axel's IEP should be a working document for staff and should be reviewed on a regular basis i.e. half-termly. Axel should have the opportunity, along with his parents, to be involved in reviewing his progress and setting new targets.

Social, Emotional and Mental Health

- Axel is going to require the coordinated involvement of a range of agencies to ensure his safety and to promote his social and emotional development as well as reinforcement by specialist support outside the school day to enable him to have guided situational practice so that he can develop and internalise models of positive behaviour.
- An environment where Axel can have:
 - Access to a key adult with whom Axel can discuss worries and concerns and who can support Axel in coping with situations he may find difficult. This could be a counsellor or learning mentor. It will be important to promote the development of Axel's independence and coping skills and avoid unrequired dependence and reliance. In practical terms there will usually need to be at least one well known adult in 'reserve' who can step in if the key person is unavailable.
 - Opportunities to practise exerting reasonable degrees of autonomy via e.g. making choices, taking the lead in appropriate activities, expressing individual preferences, contributing to appropriate levels of decision making etc.

- Opportunities to develop an understanding of how different young people and adults might see and interpret the same event or happening. This can be effectively modelled through e.g. different people displaying different reactions to the same thing.
- Adults who are consistent and supportive and who give individual attention.
- Adults who are able to persist in their encouragement of Axel's talents and interests with the aim of promoting self-confidence.
- Regular, positive feedback about his achievements, being assisted in identifying his strengths and being setting tasks that allow him to experience success and for provide him with opportunities to develop his strengths.
- A structured approach to developing Axel's social skills.
- Structured opportunities to develop Axel's skills in recognising his feelings, understanding himself and his emotional responses and developing his ability to self-regulate. It will be important to assist Axel in identifying socially appropriate strategies which enable him to self regulate. There will need to be opportunities to use these consistently and frequently with the eventual aim of Axel using them independently or with minimal adult prompting.
- A risk assessment to be completed to identify and minimize the risk for Axel and those working with him.
- Close liaison between Axel, his family and all agencies involved in supporting them.
- Opportunities to be provided for Axel to be involved in reviewing his progress, to set future goals, to consider what he will need to do in order to achieve these goals and who will be able to support him in achieving them.

Advice Giver's Details:

Date	27.05.20
Signature	Signature
Name	Dr Janet Ramsay
Role	Educational Psychologist Registered with the Health and Care Professions Council (PYL23327)
Contact Office Phone	DPA
Contact Email	janet.ramsay2@lancashire.gov.uk

Department of Developmental Paediatrics
Sefton ASD Team
Building No 1 Retained Estate
Alder Road
Liverpool
L12 2AP

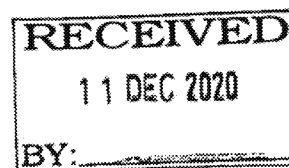
Dear SENCO

Following a referral to the Sefton ASD Team for assessment **AXEL RUDAKUBANA** has been placed on the waiting list. As part of the Autism Spectrum Disorder (ASD) assessment, we require information about how your pupil currently functions in the school setting.

Please return the enclosed form within 2 weeks to: seftonasdqueries@alderhey.nhs.uk. Should you have any questions with regards to this form, please do not hesitate to contact us on **DPA**

Please note **AXEL** is unable to proceed to the ASD assessment until all completed information from school is received.

Many thanks for your co-operation.



Alder Hey Sefton ASD Team

School Information

Childs Name: Axel Rudakubana	DOB: 7 th August 2006
School Address:	Gender: Male
The Acorns School 43 Ruff Lane Ormskirk Lancashire L39 4QX	School contact name: Mrs Joanne Hodson Deputy Head and SENCO
School Telephone Number: DPA	Contact telephone number: DPA

Please provide information with regards to the young person's current functioning for the areas stated below:

Communication Skills: (How does the child use their language in class to communicate needs or ideas? How does the child understand language? (e.g. following instructions, answering questions, literal understanding)

Axel struggles with social communication and interaction. He has very little empathy and is very literal in his thinking. As shown in the chronology of events, he does not understand or accept that people will have different opinions to him and that is acceptable.

With regard to the assault, he has no understanding of the impact on his victim. He has stated that because the boy has received compensation, that's okay. He has no understanding or empathy of any psychological impact.

In his interactions in school with teachers and other pupils Axel found it very difficult to pick up on social nuances in conversation. (See Chronology) A CPOMS entry was made by one of her teachers because of her concerns "Axel and HD were having a conversation with differing opinion. It was a light-hearted conversation with no sign of aggression in either boy's voice. However, when HD would not change his opinion, Axel turned to the front of the class and in a very aggressive tone stated "Well, in my opinion it is". His face was showing extreme anger and he wouldn't look at HD. He used to pretext of doing his work not to look round. It took him several minutes to calm himself down. I don't think he was aware of me witnessing his change in mood."

When Axel was excluded from Range High they stated that "There was significant lack of emotion and awareness with regards to Axel carrying a knife, the implications in using one and the risk posed to himself and the school community"

At his admissions meeting JH asked Axel about incident, he was very emotionless and stated that he took the knife in to use it.

In December Axel made similar responses to the mental health practitioner (Steph Halloran) who interviewed him in custody. "Update from Steph Halloran who interviewed Axel whilst in custody to assess his wellbeing and mental health. She advised that Axel disclosed to her that he'd been assaulted by DPA he said as a result he'd intended to kill him and would have done so if he'd found him. She advised he showed no remorse."

Friendships and Social Interactions: Verbal and nonverbal communication (e.g. eye contact, volume and personal space). Describe the child's play (e.g. interests, activities and who they

play with) Do you feel their interaction is appropriate for their age, if not why?

Please see attached chronology for more information regarding social interactions in school.

Behaviour (e.g. repetitive, restricted or stereotyped behaviours; self-stimulating behaviours, intense interest in certain toys, objects or topics) Does the child show any rigidity around routines? (e.g. upset by changes, repetitive questions) How does the child manage transitional periods?

The main concern about Axel's behaviour is that if he perceives that someone has done something wrong to him, he is unable to let this go and will react with a response that is disproportionate to the offence caused.

Sensory Needs: (e.g. over/under sensitivity to touch, smell, noise, pain, temperature, rocks self, lunges, and/or toe walks).

None observed.

School progress and academic ability: (Can you provide performance levels; any Educational Psychology involvement?)

Axel does not have any learning or cognition needs. He has a CATS of 105, which is within the average 40-60% of the general population.

Axel has missed a lot of school, he has not attended school since December 2019. Axel chose not to access any work supplied to him at home, as he stated that he would only do school work at school.

He has recently started attending 1-1 lessons with a High Support Teacher for an hour a day, in school. We will work with him to identify and address gaps in his education.

So far he has worked hard and responded to being stretched academically.

Whilst at home Axel was teaching himself coding. He has previously assembled an expensive home computer using pre-manufactured components.

Educational Psychologist Assessment - Can you confirm if this child has been seen by Educational Psychologist? Or is on your list to be seen?

Educational Psychologist Report is attached. I did ask for some revisions which have been agreed.

Email dated 12.6.20

"Good morning,

Thank you for the report. I have one matter of inaccuracy. In Section C for Cognition and Learning you state that "Mrs Hodson was of the opinion that Axel places a high value on education and that he should be in a mainstream school and not at The Acorns School."

This is incorrect. I said that Dad places a high value on education and believes that Axel should be in a mainstream school and not at The Acorns".

Axel will stay with us at the Acorns unless he is allocated specialist provision. I certainly do

not believe that Axel should be in a mainstream setting.

Could I please request that this is amended, as it completely changes the meaning of what I was saying."

Email dated 15.6.20

"Hello Joanne,

Thank you for the clarification and I will amend my report and have it re-issued.

Kind regards

Janet

Dr Janet Ramsay

Educational Psychologist"

Signed: ...Joanne Hodson.....

Designation ...Deputy Head and SENCO.....

Dated: ...16.7.20.....

Please return this form, together with any relevant supporting information to:

seftonasdqueries@alderhey.nhs.uk

Chronology of Axel Rudakubana at The Acorns School
October 2019 –

Date		Staff
05/10/19	Axel had recently hit a pupil in an English lesson and also commented 'that's how teachers get murdered' after receiving a detention. Axel isolated and spoken to about hitting the pupil. DC emailed Mr Rudakubana on 05.10.19 to express concerns and provide an update as to the situation with MW.	DC (Range)
07/10/19	Police report from PC McNamee to Range High re report from Childline. Axel has reported taking a knife into school on 10+ occasions, with intent to use it on MW, who has been bullying him.	
08/10/19	Collected by Dad from school and to be kept at home until further notice.	DC (Range)
08/10/19	MASH referral made to Sefton and PC McNamee's email forwarded, too. Sefton MASH replied to say that Axel lives in Lancashire so referral needs to be made to them. DC rang Lancashire Social Care on [DPA] CSC said the Police had made a referral and the matter had been stepped down to Early Support so there was no need to make an additional referral. A MASH team Early Help worker had not yet been identified and the comments regarding the teacher concern would have to be forwarded to the Police. PC McNamee said that he had reported the incident on 07.10.19 as High Risk and, on checking his computer, it remained High Risk. DC to inform PC McNamara of the final decision regarding Axel remaining at Range.	DC (Range)
09/10/19	Axel Permanently Excluded from Range High School. Exclusion states that "There was significant lack of emotion and awareness with regards to Axel carrying a knife, the implications in using one and the risk posed to himself and the school community"	DC (Range)
10/10/19	Referral made to CAMHS at Alder Hey asking for urgent support.	DC (Range)
12/10/19	Letter from Alder Hey refusing the referral and signposting Axel towards Sefton Targeted Youth Services. The letter asks for school and family to work together.	DC (Range)
17/10/19	Placed on roll at the Acorns School. Only information received by school at this point is the EPEN1 form and the letter from CAMHS. Admission meeting held with both parents and Axel. JH asked Axel about incident, very emotionless and stated that he took the knife in to use it. JH explained that he would be wanded and searched every day as he came into school. Dad asked said he was taking Axel to his GP the next day to ask for a referral to CAMHS. JH said that if GP would not refer, school would be able to make a referral.	JH
18/10/19	Did not come into admissions as he had GP appointment	JH
28/10/19	Started in Assessments	JEI
4/11/19	Started in Willow group, initially on 2 hour timetable.	
5/11/19	SE spoke to dad re: timetable. Confirmed that Axel would be in school until 11.30 for the rest of week and that further changes would be confirmed via telephone and in writing.	SE
8/11/19	SE spoke to dad to inform him of Axel's increased timetable from 11.11.19. Letter sent home also.	SE
15/11/19	Rang Dad to inform him of the change of timetable. Axel will be at school for lunch leaving at	SM

	1pm	
15/11/19	During ICT lesson today I found Axel searching school shootings in America. When I told him to stop and get on with his work he tried to engage in a conversation about the subject but was told this was not going to happen.	SH
15/11/19	SE telephoned dad and informed him of incident. SE asked dad to reinforce that this was not an appropriate use of the internet during school. SE asked dad for update regarding CAMHs and was told that he was waiting for school to refer, as this had been agreed at admissions. SE informed JH. Dad returned call a few minutes later, informing SE that Axel said he had only copied behaviour of another student, and that he had clicked on a hyperlink to a news story.	SE
18/11/19	Axel is usually quiet and quite reserved but is becoming more vocal within the classroom he is taking part in discussions about topics within lessons and news articles that the class may be discussing. Axel's timetable has been extended from 12.30 daily to 1pm. He can now have lunch and socialise for a short time before he leaves school. Axel prefers to have lunch in the Tech room as it is much quieter and not as many students have lunch here.	SM
19/11/19	CMcC joined the class today. HD at one point threw a rolled up foil ball at CMcC it missed him and hit Axel, Axel laughed and HD said "Sorry – did it hurt you? It was meant for CMcC" Axel said "No" and laughed – he didn't mention it later.	SM
19/11/19	SE spoke to Dad who raised concerns re: name calling by HD. SE to speak to staff before feeding back to Dad.	SE
20/11/19	SE spoke to dad re: phone call yesterday. Dad asked about the possibility of Axel moving group	SE
20/11/19	Referral to Lancashire CAMHs	JH
20/11/19	Axel spent 2 hours with me today in assessments, I did his SEW assessment again and we compared his answers with the answers he gave me when he started. He was very tired today so this was not completed, I have noted a few things down that were said in conversation. • I don't normally get offended easily but I do get annoyed easily. • HD tells me to do things like put your apron on, then when I have it on he tells me to take it off. • He bosses me around the class quite a bit and tells me to shut up a lot. • He doesn't interrupt me to say it, he waits till I have finished then tells me to shut up and do my work. • 10 minutes into lesson I get bored, I get bored quite often in every lesson. • I don't ever sit down and talk to my mum or dad about personal feelings. • Axel doesn't go out of the house once he has finished school, he has no friends at home. Axel noticed I had a social skills game on my desk and asked could we play it, which we did. After taking turns playing a What Would You Do game and speaking out, he seemed in a better mood afterwards.	JEI
21/11/19	GH got Axel and HD to work together. HD had made burgers in the previous lesson so he could help Axel. "I will show you what to do" said HD. HD was helpful showing Axel what to do and explaining what to do. HD also took photos of Axel preparing and cooking burgers.	SM
21/11/19	Axel working well and completing all written work for DT. AMc suggested going to the Library to look at the shelving. "What is the Library?" said Axel "Duh! What do you think?" said HD "No I mean where is the Library?" replied Axel. We went up to the Library and Axel explained that he hadn't been up there before. DPA began to say that means you are fat. "No it doesn't" said Axel "How does that mean he is fat?" asked AMc.	SM
21/11/19	Told AR we are aware of comments made by student HD. Told AR we will support him and that he is handling it maturely.	AMc
21/11/19	HD and Axel had more communication today than usual. HD began by asking Axel where he	SM

	lived "Do you live in Formby?" asked HD and Axel replied "No". "Where do you live?" HD & Axel began talking about Xmas. There was good communication between them both.	
21/11/19	Advised by Lancashire CAMHS that they could not accept a referral for Axel as he has a Sefton GP	JH
21/11/19	Emailed David Cregeen at Range asking for any supporting information	JH
22/11/19	Received reply from DC at Range with safeguarding information, police report and original referral to CAMHS at Alder Hey (see chronology 05/10-12/10/19)	JH
22/11/19	Spoke to Duty Clinician at Alder Hey re CAMHS referral for Axel, given information about how to refer.	JH
22/11/19	Made new CAMHS referral to Alder Hey	JH
22/11/19	Contacted Claudia at Project 2000 "Good morning Claudia, We have a child on our roll, Axel Rudakubana DOB 07/08/2006. His Dad has named you on the admissions forms as part of the team around the family. Are you seeing Axel on a regular basis? Thank you"	JH
22/11/19	Axel asked about the lessons we have today. Axel made a comment about not liking the IT Teacher "she's annoying" said Axel HD said "That's just because you were looking at something that you shouldn't and she told you to stop, she's just doing her job" Axel also commented on how small the year 10's are.	SM
22/11/19	Axel and HD were having a conversation with differing opinion. It was a light hearted conversation with no sign of aggression in either boy's voice. However, when HD would not change his opinion Axel turned to the front of the class and in a very aggressive tone stated "Well, in my opinion it is". His face was showing extreme anger and he wouldn't look at HD. He used to pretext of doing his work not to look round. It took him several minutes to calm himself down. I don't think he was aware of me witnessing his change in mood.	EW
22/11/19	Axel was looking at the web site about health & safety equipment for his lesson. Axel started looking at Numchuks. He said "look at these Numchuks" SB said "You should be looking at tools - come off that and continue with your work" Axel changed back and continued with his work.	SM
25/11/19	Email received from Alder Hey to confirm that they are looking at the referral	JH
25/11/19	Lucy Parkinson is the allocated Early Help Worker for Axel-JL sent email with details of CAMHS referral	JL
25/11/19	SE attempted to return call to Lucy Parkinson but was only able to leave message.	SE
25/11/19	Reply received from Claudia at Project 2000 "I have been seeing Axel for counselling at Parenting 2000 since May- his father commissioned our services whilst he was on the NHS waiting list with ourselves. Since his exclusion from school, Axel is now able to be part of our Sunshine and Showers project which allows for free, quick access to therapeutic services- he has therefore continued to be seen for therapy by myself. This is usually done on a fortnightly basis. As part of this project we also offer a course for parents (in a group) to help build family resilience and understanding around youth mental health issues, Axel's father has asked if he can be on this group which starts in January 2020 (for 5 weeks). Last week I spoke with Lucy Parkinson from Burscough Family Wellbeing centre and have filled her in also. She is now involving the community safety team which I feel is totally appropriate. Please let me know if I can help further, I don't attend TAF meetings as this makes maintaining confidentiality around sessions too difficult but have been given permission by Axel and his dad to liaise with school and the early help team."	JH
26/11/19	SE spoke to dad on telephone about Axel being in arrears for school dinners and about issues with HD and CMc. SE suggested that Axel go home at 12.30. Dad did not agree; requesting that he stay for lunch as usual.	SE

DPA

27/11/19	Axel went on KS3 trip to Chester Zoo, was happy and was relaxed and laughing with the other learners. On the bus HD was constantly asking Axel why he was at The Acorns, this was handled and stopped by staff. HD parents contacted.	DL
29/11/19	At the start of the lesson Axel refused to sit down and opted for walking up and down near his seat punching his hand hard. He was told to stop as he would hurt himself. He then sat down and started to work with SM very reluctantly. SM was trying to give him ideas how to promote his business and one suggestion was to tell people that his business was new to the area. He insisted that this would not be good because people would think he would kill them as they did not know him. He said that people don't trust others they don't know in case they get murdered. He was regularly out of his seat and then he walked to the highest part of the ceiling, jumped up and punched a laminate hanging from it very hard	SH
03/12/19	In the workshop AR was discussing different YouTubers and YouTube videos. He was discussing with another pupil videos of people hurting themselves. He also made a comment about if a drill bit broke it could fly off and kill someone, he was quite graphic.	AMc
03/12/19	Within Art lesson, working with oil pastels colouring in Call of Duty images (Soldier outlines). AR commented saying "Why can we have these with guns but can't look at guns on the Internet" and then said "can we have a picture of a severed head then", SB replied, this is not appropriate and changed the subject and explained that Art can be drawn with different topics such as still life which looks at the body form. He then tried to mention the topic again and I told him that everything you say is recorded and that the images have been allowed by HC.	SB
03/12/19	JL tried to contact Matt Chipchase for advice from MASH -left message-regarding referring Axel to Sefton Targeted Youth Prevention services on previous recommendation by Alder Hey CAMHS. Good afternoon I have tried to contact Matt Chipchase in regards to a query about the student named below without success. This young person falls between two local authorities and requires a referral to Sefton on targeted youth prevention as his GP is based in Sefton and he is based in Banks West Lancashire. Unfortunately, we are unable to refer without a MASH referral-please can you advise? See link https://www.sefton.gov.uk/schools-learning/targeted-youth-prevention.aspx Kind regards Jan Lewis Lead DSL/Assistant SENCO 4/12/2019-awaiting response from CSC to above email	JL
03/12/19	Emailed CAMHs at Alder Hey to advise them of additional concerns.	JH
03/12/19	Emailed PC McNamee to advise of our concerns.	JH
04/12/19	JL sent further email: Mrs Lewis Tue 03/12/2019 16:22 cypreferrals@lancashire.gov.uk; Mrs Hodson; Mrs Eccleston AR Good afternoon I have tried to contact Matt Chipchase in regards to a query about the student named below without success. This young person falls between two local authorities and requires a referral to Sefton on targeted youth prevention as his GP is based in Sefton and he is based in Banks West Lancashire. Unfortunately we are unable to refer without a MASH referral-please can you advise? See link https://www.sefton.gov.uk/schools-learning/targeted-youth-prevention.aspx Kind regards Jan Lewis Lead DSL/Assistant SENCO	JH

	4/12/2019-awaiting response from CSC to above email Spoke to PC McNamee on the telephone, he is to make a referral to Early Action.	
04/12/19	Jane Eccleston spoke to Dad and asked him to come in for an emergency review.	JE
04/12/19	During PSHE, CMcC used a swear word to comment on an image of Nicola Sturgeon on the worksheet students were completing. There were other Political Party leaders on the sheet and Axel said, 'He looks like a retard,' in regards to these. SE explained that this was inappropriate and considered 'politically incorrect'; SE also asked Axel not to use this word again. He responded by stating that he had heard it used before. SE attempted to explain how the meaning of words changes over time, but Axel was not listening and was talking over SE. At the end of the lesson, SE asked SM to log two instances of inappropriate language by Axel, who challenged this as 'I've not used swear words.' SE explained that the log kept by SM was about inappropriate language not just taboo language, and that using the word 'retard' as an adjective describe someone was wrong and hurtful.	SE
04/12/19	Axel used his laptop to log on to youtube and played inappropriate clips out loud to the class . Laptop removed. Axel said 'Sharon Murphy is a sexist, she made a joke about men at work'. Axel then said 'she is a homophobic as she was drinking out of a 'Mrs' cup and shouted when we asked was she a lesbian'. Axel then said 'she is a racist as well she said Coon earlier. She actually said to me Axel you are a coon'. HD remonstrated with him and said "That's too far, that's not even funny. You can't say things like that."	EF
04/12/19	JL contacted Lucy Parkinson from Early Help to inform of emergency review-Ann Cookson her Senior Practitioner and either Jason Ellwood or Paul Harris from the Community Safety Team to attend also.	JL
5/12/19	Axel very vocal from start of the lesson. Constantly questioning staff re instructions given in a silly manner. Made several comments re Miss Forrester about her being "contaminated" and her "contaminating" his work as she had coughed in the classroom. Despite reassurance this continued. Began to question Miss Holcroft and suggested that Miss Holcroft had not washed her hands. Continued to make comments whilst laughing and encouraged others to engage to target a member of staff (EF), whilst laughing and pacing despite challenges from staff. Mrs Hodson present on seventh warning given by Miss Holcroft and told Axel that this needed to stop. Axel laughed.	GH
5/12/19	Emergency review held; Mr. Rudakubana, Ann Cookson WPEH, JE, JL and later Axel. Outcome: TAF to be arranged (AC) with agencies invited. Prevent referral, follow up Mash referral. Axel attended his emergency review mid-way and was brought in by Mrs Hodson following on from the previous incident. Axel alleged that the staff who had recorded concerns (recorded in this document and discussed) did not record these truthfully; his view is that he did not say or do those things as described. When it was pointed out that the concerns made were from a range of staff and verified by a second adult or more, Axel maintained that they did not happen as recorded. When questioned about the allegations made yesterday directed to a member of staff, initially he denied making them then conceded that he did with regard to the racist allegation. On discussing the incident where he targeted a member of staff, he denied doing such so Mrs Hodson brought Miss Forrester into the room. He denied saying it again. She challenged him directly about this but he refused to tell the truth despite the fact that the two staff versions were identical.	JE
6/12/19	Response from MASH received 6/12/2019: 'j.lewis@westlancspcss.lancs.sch.uk' Sent Friday, December 6, 2019 9:25 AM Subject Axel Rudakubana	JE

	Hello Jan, I'm Jenny and I work with Matt as Education Officer, unfortunately Matt is [DPA] [DPA] which is why he's not responded to your enquiry. I'm not sure who you've sent your email to in MASH for advice? I note that you have spoken to CFW on 3 Dec who advised you to contact the Hub, however the concerns do not present as level 4. The concerns regarding Axel searching on the internet for violent images, can be managed with level 2 support such as Police Community Safety Officer and Emotional Wellbeing Services / CANW. Children with Autism (which Axel may have) often develop obsessions around death, violence and crime. This is due to their neurodevelopment and I wasn't sure whether Axel was being assessed for Autism by the Community Paediatrician? I hope this advice is of help. Kind Regards Jenny Ashton MASH Education Officer Lancashire House Lancashire County Council T: [DPA] JL referred to Prevent JE and JL met with PC Paul [DPA] TAF arranged for 13/12/19 JE had a lengthy telephone conversation with dad. Dad queried aspects of this chronology (see underlined sections re 15/11/19 and 19/11/19) Dad stated that Axel is being blamed and Axel is a good boy. At length and again, JE re-iterated the reasons for having concerns and that these concerns must be looked at in the interests of Axel's and others safeguarding. JE explained why a Prevent referral had been made and informed him of the date of the TAF.	
9/12/19	During DT lesson 2 today Axel tried to access the internet. When he realised he had been blocked he tried to access the setting of the computer and internet setting to override the blocking.	SH
9/12/19	During break Axel refused to eat any toast, as it had been contaminated by EF.	EF
10/12/19	Axel said he thinks it's 'weird' that TDA will be reading to a young girl on Friday, he sniggered at this when challenged by Mr Finnegan. PA and LR took exception to this and said 'TDA will bang you, you're sick in head'	EF
10/12/19	Axel said 'that Indian kid is a drug addict, he is so quiet and shakes all the time'	EF
10/12/19	At the start of the lesson Axel tried to get onto the internet and adjust the pc settings to allow this despite being asked over 4 times to stop and continue work. He then started pacing around the classroom he stated that Sharon was 'derpy' (derpy clarified as akin to stupid) and when I told him to stop being horrible about people he told me he could have said a lot worse and that derpy was not too bad. I asked him to let Emily in the building with the toast, he walked to the door she was at turned round and said 'No' He saw another student NK walking past outside and he went to the window and said 'that's the drug addict, he takes drugs'. When he was challenged he said it was true and he didn't care. Another student in the lesson PA told him to stop saying it and then told us that Axel is also saying that TDA (Beech) touches little girls and Axel seemed to nod as if in agreement.	SH
10/12/19	During Maths, Axel made a comment about hating Miss Heaton. PA told him to "shut up and stop calling Miss Heaton names, cause she's sound". Mrs Whitehead and Mr Baker asked Axel not to refer to staff in such a way. Axel continued repeating his statement. PA again told him to stop it or he would "spark him". Axel laughed and repeated his statement. Mrs Whitehead asked him to stop and tried to steer the conversation away from ICT and Miss Heaton. Axel continued to antagonise PA, so PA squared up to him and Axel backed off. PA	EW/SB

	said "I thought so". Axel then looked at PA and said "What you going to do, I hate Miss Heaton". PA grabbed Axel and started pulling his jumper, Axel retaliated and grabbed at PA and started kicking him. Mr Baker got between them and Mrs Whitehead escorted PA out of class, to calm down. While Mr Baker escorted Axel towards the opposite side of the classroom.	
10/12/19	Axel was in the tech room during lunch talking about racist songs on the internet. Charlotte shouted at JB for singing a racist Youtube song about black people, but JB had changed the lyric "black" to "fat". He was told this wasn't acceptable. Axel then said 'let's put on songs about Asians *doing accent*, or Chinese, or English songs shall we". Charlotte said let's not talk about race and eat your dinners. Axel was also saying "Sharon is fat and evil". He shouted about his dinner saying it was burnt and he threw a juice back at P.Walsh and said "I wanted orange". He was challenged and told not to do this. He walked out of the tech room after previously being told to not walk out to go home as someone has to walk him over to the front. He argued with C.Humphreys saying he has to leave the building at 13:00 and be in the taxi by then and C.Humphreys explained it doesn't take 5 minutes to get into the taxi and we can leave at 12:58 so he has two minutes spare to get in.	CH/PW/JHa
11/12/19	CPOMS log. Safeguarding category. Police involvement.	JE
17/12/19	Multi-agency strategy meeting. See CPOMS	
17/12/19 – 18/12/19	Email exchanges between JH, JE and Pita Oates LCC Good afternoon, We admitted Axel Rudakubana onto our roll on 17.10.19, following his permanent exclusion from Range High School for taking a knife into school on at least 10 occasions, with intention to use it on a boy (MW) he perceived to be bullying him. Since attending the Acorns he has demonstrated some extremely concerning behaviour, targeted at staff and learners (see chronology). On Wednesday 11.12.19 Axel took a taxi (which he had ordered the day before) to Range High School. He was carrying a modified bat and a knife, which he intended to use on MW. His stated intention was to kill him. MW was absent from school that day, so Axel attacked another learner. He was arrested and is likely to be charged with a number of offences. Police have confiscated his computers, laptop, PlayStation and phone, but it is likely to be some months before the investigation is completed. Axel is on police bail with the following conditions Not to be within 400m of Range High School Not to contact the prosecution witnesses Not to attend Acorns School I attended a strategy meeting this morning with Range High School, Social Services, Prevent, Police, CAMHs and MASH. I made it very clear that Axel could not return to us because of his bail conditions and the fact that he presents a real risk to both our staff and students. I was supported in this by CAMHs, the police and Social Services. I agreed to send some work home, as an interim measure.	

MASH have requested that Pupil Access attend the next strategy meeting on 6.1.20, 10am at The Zone in Skelmersdale to discuss future educational provision for Axel.

Kindest regards,

Joanne Hodson

Response from Pita Oates

Hello

What a sad situation.

Please can I ask for copies of all risk assessments for this pupil. Could I also ask if you have sought advice in regards to the risk attached to staff and pupils from the LADO?

I would like to suggest that 121 is commissioned in the interim for AR – are you able to identify a public space where learning can take place? A library or Youth Zone?

Finally, what is the time period for the bail conditions?

Kind regards,

Pita.

Response from JE

Hi Pita,

Thank you for your email; it is a sad and difficult situation.

Risk assessment: the chronology sent to you details exactly what Acorns staff have done and that was to ascertain risk and get agencies/ services involved because we considered that there could be a risk. He is relatively new to us. No information came from the excluding school - we had to dig for it. Therefore, our risk assessment is only that chronology at present.

The LADO has no role here; an allegation or concern has not been made towards staff or adults working with this child. The concern is the risk posed by the child to others. Unsure what you are asking? The multi-agency meeting yesterday and the scheduled one on 6.1.20 should determine further assessments including risk. It is clear through the bail conditions set that there is a significant risk hence stipulations re both schools.

We have no further information about the bail conditions.

1-1 in a public space - I consider this unwise at present in lieu of my comments above and until we know exactly what the situation is.

Hope this helps?

2nd email from Pita Oates

Thanks for this.

I think for me the LADO is useful in terms of a view regarding the allegations AR makes against staff and accusing racism etc. Also, a more general discussion around the presenting

risks and perceived risks for AR. The view from the LADO around this pupil and the presenting behaviours in the chronology will support a plan going forward. There is no risk assessment in place and that will be needed moving forward.

I can see how your view of 121 in a public place may be unwise but work sent home isn't lawful and is a grey exclusion unless Acorns have put an official exclusion in place?

If you could let me know the official current status for AR - I can then notify CMOOE if appropriate and will also attend the meeting on the 6th at 10am.

Kind regards,

Pita.

Response from JE

Pita - I think Jo has answered most of your queries in an email sent a few minutes ago.

I've responded to your comments below in red.

Thanks for this.

I think for me the LADO is useful in terms of a view regarding the allegations AR makes against staff and accusing racism etc. Also, a more general discussion around the presenting risks and perceived risks for AR. The view from the LADO around this pupil and the presenting behaviours in the chronology will support a plan going forward. There is no risk assessment in place and that will be needed moving forward. CSC onto this; no role for LADO. Racist allegation was done in front of adults and children and were challenged by both. He recanted in a meeting with parent (chaired by me) and admitted he did it to cause trouble.

I can see how your view of 121 in a public place may be unwise but work sent home isn't lawful and is a grey exclusion unless Acorns have put an official exclusion in place? I will issue a permanent exclusion to comply with legal framework then.

If you could let me know the official current status for AR - I can then notify CMOOE if appropriate and will also attend the meeting on the 6th at 10am. Currently authorising his absence but will exclude. Probably a good idea you attend.

Kind regards,

Pita

Third email from Pita Oates and JH response

Hello again,

Sorry to send another email!

I can see from the system that it is probable that AR has SEN – possibly ASD/ADD. Had Range begun any assessment around SEND or gathering evidence for a request for statutory assessment?

I can also see CSC notes of no significant risk around AR and his sibling as an outcome from the meeting with MASH. Also, there is a plan for a forensic assessment of risk for AR. Would

	you know if this has progressed and which LA it will sit within as he is cross border with Sefton. Kind regards, Pita. Good afternoon, Range had made a referral for ASD in August. At the strategy meeting yesterday it was agreed that this assessment was now urgent and he is due to be seen early in the new year. Dad asked Range last year to consider whether Axel had any learning needs which might explain his behaviour. Range had consulted with teachers, but had found no evidence to support this, so this did not progress any further. This was reported at the strategy meeting yesterday by the DSL from Range. Our own assessments show that he does not have learning difficulties, he is academically able. CSC are in the process of completing a detailed assessment of the family, this is ongoing and the meeting on 6.1.20 will again consider whether a S47 is required. Prior to this incident parents had failed to engage with early help, refusing to answer phone calls. Ann Cookson from CSC would be able to update you regarding this. CAMHs are to carry out a forensic assessment of Axel, again this will take place over the Christmas holidays. Scott Morgan is the Sefton CAMHs lead who will carry this out, as Axel has a Sefton GP. Prevent are also conducting a Risk Assessment. Kind regards Joanne Hodson	

