CASE STUDY

ELLIOT's STORY

Elliot is 11. The family self-referred to us for help with their child. When we met with Mum, she was able to provide detailed information about the child's brain injury, the cause and how it has affected the child. She also had scan photographs which confirmed the severity of the child's brain injury.

Background

As a result of sustaining bacterial Meningitis as a baby. This had caused a non-traumatic brain injury. Elliot has significant learning difficulties and is in receipt of DLA.

Two privately paid for separate medical reports had confirmed Elliot had sustained severe brain damage following the meningitis. Brain scans showed that part of Elliot's brain had not grown and developed properly. Mum also provided us with copies of all the medical information and other reports that had been completed for her son. Had Mum not paid privately for these brain scans and assessments she would have struggled to get Elliot's hidden disabilities and SEN needs recognised at all.

Behaviour

Mum was concerned about her child's changing behaviour and frequent fighting, and the family were now involved with the councils Early Help Team. Mum was not coping, and the recommended strategies weren't working. Elliot's aggression was escalating.

Elliot has recently moved up to secondary school and problems were emerging with disruptive behaviour in class and fighting. Mum was also concerned that it was not the correct school for the child. Elliot had spent the whole of their primary years in a small specialist unit but was now expected to fit into busy mainstream school and a large secondary school environment. Elliot's behaviour at home was also having a significant negative impact on the family's quality of life and was particularly affecting the other children living in the house.

With Mum, we completed a brain injury screening assessment to determine how the brain injury mapped out against the known deficits of ABI and the impact it was having on Elliot's life. It indicated that the child has significant communication, cognitive and emotional and behavioural issues, with poor memory being a significant issue. In turn these issues affect his self-esteem.

Other problems included increased sensory problems; risk-taking behaviours; sleeping problems; fatigue and concerns about pain. Elliot does not feel pain.

Although Mum was aware of some issues - she was not aware of the levels, significance, and complexity of Elliot's problems and what that meant for him. Our service helped her to understand things from Elliot's perspective.

Health

We understand Elliot was currently under the care of a paediatric consultant in their local hospital. Based on a report we produced that outlined the emerging problems and risks, Elliot was seen sooner than planned by another doctor. Unfortunately, they referred him back to CAMHS, who then immediately discharged him because of his brain injury problems and obvious rehabilitation support needs!

School

We attended a meeting with Mum to discuss Elliot's poor behaviour and to try to find a solution. Elliot was very disruptive in class and had frequent detentions. He was also frequently punished for not being organised and forgetting things. It became very clear that the school were not aware of Elliot's brain injury and the issues that are affecting his behaviour. Nor did they understand it. His primary school records had not been shared with the new school, so even the SENCO was unaware of Elliot's complex support needs.



After we had shared the results of the brain injury screening assessment with the professional's present, they were shocked at the level of learning disability needs Elliot had. It seemed that despite Elliot being in a specialist unit for 6 years; and missing all his expected development milestones, he did not have a SEN statement or an EHC Plan. The last Educational Psychologists report was completed over 6 years previously; indicating significant failures by the specialist unit that were responsible for his primary school education. Mum said she had raised this with them several times but was told a reassessment it was not necessary!

With the information we provided, the SENCO felt that the school could not provide for Elliot's special education needs, but for him to move to a more suitable school, it will take to a year to have his needs assessed! Elliot will therefore need to be uprooted again and taken away from friends and start all over again. This will likely have a significant effect on his behaviour again. It becomes a vicious cycle.

We suggested that Elliot be taught in a smaller group in the Nurture Room. The school agreed to try this. We met with the school again two weeks later. Elliot was in the Nurture Group with one-to-one support and he was doing well. It was agreed this was a more suitable setting for Elliot and better met his identified brain injury needs. However, this was only a temporary measure until a more suitable school could be found. An Education Psychologist Assessment was also requested. However, if that person does not understand the complex effects of acquired brain injury, it is unlikely they will ever be able to effectively identify his complex learning support needs.

Unfortunately, event in the Nurture Room, the staff did not understand Elliot's complex needs and the relationship between school staff and the child continued to deteriorate. Following an incident at the school, and Mum spending an evening in A&E, Mum eventually withdrew Elliot citing his safety and wellbeing as being more important.

Social Care

Despite Elliot being awarded DLA, the family did not have a disability social worker and Elliot was not under the care of the Children with Disabilities Team. His neurological disability and complex impairments remain unrecognised and unacknowledged.

Mum was not aware of her entitlement to a Carers Assessment; nor had one been completed. Mum was did not know if Elliot was on the Council's Register of Disabled Children.

Despite Mum being a single parent, this family do not have access to Carers breaks or any other carer support that she should be entitled to. This would also make a massive difference to both Elliot and the family. We helped to get these things in place.

Outcome:

Elliot now has an EHC Plan that includes the finding of our brain injury assessment has an EHC Plan and has also moved to a different school. He is 11 and this is the first time his complex needs have been properly identified and acknowledged.

Update:

Recently Elliot has been permanently excluded from school. Staff are stating they cannot meet his complex needs! Mum thinks they still do not understand the complex effects of a brain injury!

Our work begins again.....

