

# The Graduated Response within Worcestershire



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# Part 1 - Introduction / Purpose / Overview

## Introduction

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All children and young people are entitled to an education that is appropriate to their needs, promotes high standards and the fulfilment of potential. This should enable them to:

- achieve their best
- become confident individuals living fulfilling lives, and
- make a successful transition into adulthood, whether into employment, further or higher education or training (Code of Practice 6.1)

High quality teaching that is differentiated and personalised will meet the individual needs of the majority of children and young people. Some children and young people need educational provision that is additional to or different from this. This is special educational provision under Section 21 of the Children and Families Act 2014. Schools and colleges must use their best endeavours to ensure that such provision is made for those who need it. Special educational provision is underpinned by high quality teaching and is compromised by anything less. (CoP 1.24)

## Purpose of this document

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This document is intended to be used as a tool for schools and settings and those partner agencies working with them. It is also intended to be an information source for parents, carers and young people to inform and guide in relation to the education of children and young people with Special Educational Needs and Disabilities. There is a parent friendly version of this document available.

The document provides information on:

- The Assess/Plan/Do/Review steps of the Graduated Response – both from whole school/setting perspective and an individual child / young person perspective.
- Guidance to schools and settings about effectively evidencing the operation of the Graduated Response
- A range of Quality First Teaching, targeted and specialist interventions that schools and settings can use to support a child or young person
- Details of and information about partner agencies intended to provide a directory of support available from the Local Area as described in the SEND Local Offer
- Guidance to those partner agencies about their roles and responsibilities within the Graduated Response
- Guidance to support working with Parents, Carers and Young People -Person Centred Planning and the operation of the Child's Voice
- Guidance about financial resources available to support the operation of the Graduated Response
- Guidance about the interaction between the Graduated Response and the Equality Act 2010
- Guidance to support the operation of the Graduated Response for children / young people as they transition through the phases of their education.

The document is necessarily large; however, it is intended as a reference Guide and can be accessed according to each individual area of Special Educational Need or Stage of the Graduated Response via hyperlinks.



The SEN and Disability: 0 – 25 years Code of Practice (2014) is clear. For children and young people with Special Educational Needs and Disabilities, their needs must be picked up at the earliest point with appropriate support put in place quickly, and their parents and carers must know what services they can reasonably expect to be provided.

Children and young people and their parents or carers must be fully involved in decisions about their support and what they want to achieve. Importantly, the aspirations for children and young people will be raised through an increased focus on life outcomes, including employment and greater independence.

Mainstream schools, including academies and free schools, must provide evidence of everything they have done to secure the special educational provision called for by a child's or young person's needs.

## The Graduated Response – An Overview

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Where a child / young person is identified as having Special Educational Needs, educational establishments should take action to remove barriers to learning and put effective special educational provision in place. This is called SEN support and should take the form of a four-part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the child / young person's needs and of what support the child / young person needs to secure good progress and good outcomes. This is known as the Graduated Response. It draws on more detailed approaches, more frequent reviews and increasingly specialist expertise in successive cycles in order to match interventions to the SEN of children and young people. (CoP Para 6.44)

The graduated approach can encompass an array of strategies which are underpinned by a number of central principles:

- All children / young people are entitled to high-quality everyday personalised teaching;
- All children / young people can learn and make progress;
- All teachers are teachers of SEND;
- A differentiated curriculum is not SEND provision - differentiated learning opportunities should be given to all learners;
- Provision for a child / young person with SEND should match the nature of their needs;
- There should be regular recording of a child's / young person's SEND, of the planned outcomes, of the action that the setting is taking, and of impact of those actions and the outcomes achieved.

Schools and settings may use:

**Appendix 1 - Graduated Response - Reflection and Readiness Sheet**

## Part 2a - Assess/Plan/Do/Review - A Whole School Approach

### What the Law says – a definition of Special Educational Needs (SEN)

The Children and Families Act 2014 (Section 3 Para 20)

- (1) A child or young person has special educational needs if he or she has a learning difficulty or disability which calls for special educational provision to be made for him or her.
- (2) A child of compulsory school age or a young person has a learning difficulty or disability if he or she:
  - (a) has a significantly greater difficulty in learning than the majority of others of the same age, or
  - (b) has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.
- (3) A child under compulsory school age has a learning difficulty or disability if he or she is likely to be within subsection (2) when of compulsory school age (or would be likely, if no special educational provision were made).
- (4) A child or young person does not have a learning difficulty or disability solely because the language (or form of language) in which he or she is or will be taught is different from a language (or form of language) which is or has been spoken at home.

### What the Law says – a definition of Special Educational Provision

The Children and Families Act 2014 (Section 3 Para 21 (1) <http://www.legislation.gov.uk/ukpga/2014/6/section/21/enacted>)

SEN Provision is educational or training provision that is additional to or different from that made generally for others of the same age in mainstream schools, nurseries and Post 16 institutions in England

### Further reading

SEN Code of Practice –

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/398815/SEND\\_Code\\_of\\_Practice\\_January\\_2015.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf)

The Local Offer in Worcestershire Schools – The Entitlement of Pupils in mainstream Schools – [https://www.babcockprime.co.uk/babcock\\_prime/img/Ad-hoc-downloads/BabcockPrimeEligibilityCriteria2016\\_17sept16.pdf](https://www.babcockprime.co.uk/babcock_prime/img/Ad-hoc-downloads/BabcockPrimeEligibilityCriteria2016_17sept16.pdf)

Ordinarily Available in Early Years:

<https://www.babcockprime.co.uk/improving-schools-and-settings/early-years/early-years-inclusion/a-z-of-inclusion-resources/f-inclusion-resources>

## A Whole School Approach

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Effective leadership, management, appraisal and pastoral arrangements together with robust policies in schools and settings can help meet children's needs earlier and prevent some impacting significantly upon their progress. The senior leadership team of the setting, with teaching staff can use a provision mapping management system as part of monitoring and evaluation to consider quality first teaching for all learners, the deployment of staff to raise attainment and progress and personalisation of the curriculum alongside knowledge of successful interventions matched to individual needs.

Quality First Teaching (QFT) will help the school or setting to meet the learning needs of all its children. Settings should not automatically assume that a child's/ young person's learning difficulties result solely or even mainly from problems within the child / young person or their environment. The setting's practice can make a difference. The Governing Body, Headteacher and SENCO should be alert to any particular pattern in the emergence of children's special educational needs or parents' expressions of concern, and should reflect on the setting's general practices and policies in the light of any such patterns. Regular and robust monitoring of outcomes for children / young people with SEND will support this reflective process.

### Appendix 2 - SENSupport

### Appendix 3 - NASEN Guide to Graduated Approach

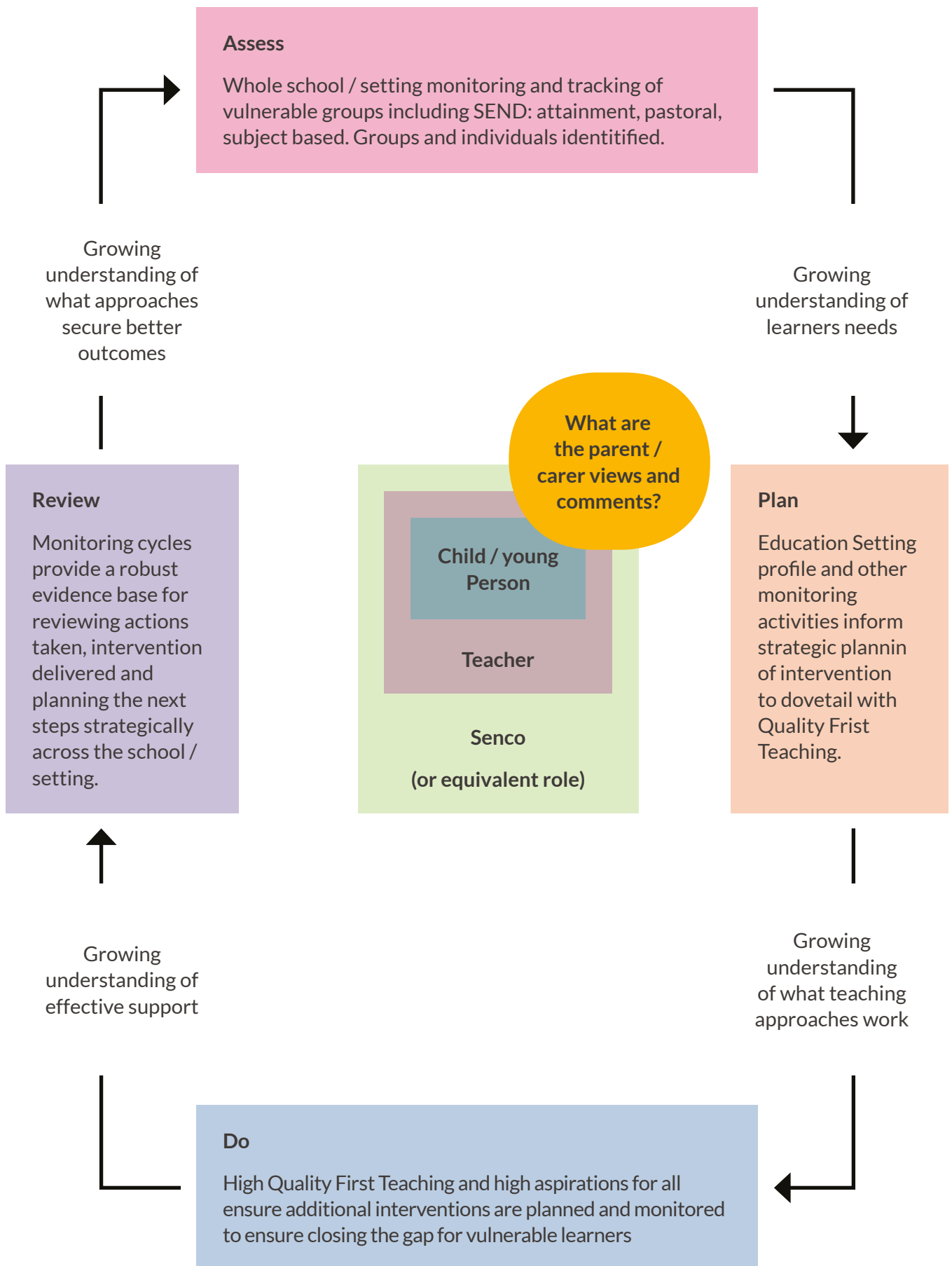
## What should be in place in all settings/schools?

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Provision for learners with SEND is a matter for the setting/school as a whole. All teachers are teachers of learners with SEND. In practice, the way in which this responsibility is exercised by individual staff is a matter for settings/schools, to be decided in the light of the settings/school's circumstances and size, priorities and ethos. Settings/schools should be able to offer a minimum provision entitlement for individual learners and their families. In this document details are given of the process of meeting special educational needs and/or disability and descriptors of the appropriate minimum provision for different forms of special educational need and/or disability. Listed below are several supporting elements essential for effective action with, and on behalf of learners with SEND that should be common to all settings/schools:

- SEN Information Report (for schools);
- Equality of Opportunity / SEND Policy (Early Years settings);
- Special Educational Needs Co-ordinator (School Leader) who is suitably qualified;
- Designated Governor with responsibility for Special Educational Needs and Disability;
- Whole School/Setting Behaviour Policy;
- Attendance Policy;
- Accessibility Plan;
- Published Equality Information and Objectives;
- Knowledge and understanding of the Statutory Duties and expectations placed on schools/ settings by the SEN Code of Practice;
- Knowledge of the services available within the Local Offer
- Evidence of provision management processes to ensure the needs of all vulnerable learners are met;

# Whole School / Setting Approach 'Assess, Plan, Do, Review'



## Using a SEND Audit tool

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School leaders are encouraged to be reflective of the policies, provision and practices within their school/ setting in relation to SEND. For this purpose, a SEND Audit Tool is available to all schools/settings to enable leaders to undertake rigorous self-evaluation to identify strengths and areas for further development. A template for Action Planning is also included to support schools in identifying priorities for improvement and consider actions to address priorities.

\*A range of freely available tools can be downloaded to support school self-evaluation of SEND:

<https://www.babcockprime.co.uk/latest-news/free-SEND-Audit-Tool>

<https://www.sendgateway.org.uk/whole-school-send/find-wss-resources.html>

## A Communication Friendly School (Dyslexia) - what would you expect to see

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Guidance provided by Babcock Prime Learning Support Team

### Learning Environment

- Stimulating environment but not overwhelming – child / young person knows where to locate resources etc.
- Accessible information or display – table top or at eye level, use of colour, photos, images and labels written in lower case in easy to read font
- Visual timetable and timers
- Challenging targets evident and appropriate to ability not Literacy level
- Evidence of alternative methods of learning and use of concrete resources
- Access to age appropriate texts/ resources that have easier reading level
- Evidence of alternative methods of recording and supporting written tasks
- Evidence of support for distant or close reading - reading rulers, coloured backgrounds or paper, use of whiteboard tools
- Use of ICT, ideally with speech support, to aid access to information, written recording and improve skills
- Children / young people feel comfortable and able to risk take when in group and class activities
- Children / young people are grouped by ability and not reading level especially in subjects of their particular interest

### Child / Young person's learning

- Children / young people know and understand their targets but have them recorded in an accessible way
- A variety of opportunities offered for child / young person to demonstrate understanding and knowledge
- Children / young people are being challenged but supported and scaffolded in tasks that involve high demands on Literacy skills
- Learning has pace, but additional time is offered to think things through and process spoken or written information
- Children / young people know how to communicate discreetly if help is required
- A variety of interactions between children / young people / teacher / TA

- Multi-sensory learning is evident and encouraged in every lesson
- Opportunities to ask searching questions and investigate ideas in a kinesthetic approach
- Evidence of a variety of visual stimuli to aid learning, understanding and memory - especially use of ICT to minimise or avoid the necessity for children / young people to copy from the board or a distance
- Children / young people have opportunities and strategies to work independently at their own pace
- Evidence of opportunities where learning has been personalised
- Evidence of extra time for completion of written tasks or adjustment of expectations (dyslexic children / young people can write less or use a different format/ICT).
- Evidence of the use of mind mapping and other forms of visual representation to aid understanding, recall and planning together with the use of a range of recording methods, e.g. bullet points, story board, flow chart, scribed and oral/recorded
- Evidence of praise for effort as well as achievement - dyslexic children / young people may have to work twice as hard to produce half as much as their peers
- Children / young people have an opportunity to express their concerns about and solutions to their learning needs

### **Impact on Learning**

- Regular liaison with the SENCO for information on individual children / young people and how to meet specific needs
- Staff know where on Dyslexia Pathways their children / young people are currently located
- Evidence of progress in appropriate interventions to improve Literacy skills, particularly at KS2
- Children / young people are able to work more independently rather than rely on adult support e.g. ICT
- Children / young people feel more confident in class and are given opportunities to shine in other areas of the curriculum
- Parents/ carers are aware of how best to support at home or with homework
- Children / young people's work/ ability is represented appropriately in displays and school events
- Dyslexics in the G&T range are recognized and given opportunities to partake in appropriate activities
- Parents are aware of and happy with ways schools support and review needs of Dyslexic learners
- Homework set is adjusted according to task either in time taken or outcome
- Homework is logged in an accessible format or location for children / young people, where recording accurately at speed is difficult - e.g. pre-written label, school web
- Children / young people are supported in tests and exams to enable them to demonstrate their true ability and knowledge including rest breaks if appropriate

### **Appendix 4 – Nasen - Supporting pupils with Specific Learning Difficulties Further Guidance**

## A Communication Friendly School (Autism) - what would you expect to see

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Guidance provided by Babcock Prime Complex Communication Needs Team

### Whole School/ every classroom

- A whole school awareness and understanding of autism and complex communication difficulties
- Whole school training, e.g. Autism Education Trust (AET) training programme
- Use of the AET Competency Framework to audit and develop staff PDR
- Use of the AET Autism Standards to audit, monitor and develop provision
- Awareness and understanding for adults working with children with complex communication difficulties and the impact on families
- Flexible teaching arrangements that can accommodate chunking of the curriculum, short breaks, use of special interests
- Clear boundaries and routines and explicit teaching of new rules and routines
- Consistency within the classroom in terms of organisation, structure, routines, space and place
- Visual timetable clearly displayed in every classroom and referred to and used consistently - appropriate for the age of children in the class
- Visual structure and communication used throughout the timetable and curriculum
- Changes of routine explained and discussed with children with time to prepare for them
- A programme and plan to prepare for transitions
- Explicit and consistent modelling of positive social interactions, including turn taking and sharing
- A termly sensory audit of the classroom and whole school and reasonable adjustments
- Easy access to low arousal spaces within the classroom and the wider school environment
- Easy access to equipment to support management of sensory needs i.e. wobble cushions / carpet squares, ear defenders, fiddlers, structured equipment for children / young people to lean against when sitting on the carpet.
- Adaptations made to fire alarm i.e. low sounding alarm
- Low flicker classroom lighting
- Access to a workstation whenever needed
- Tasks differentiated by level/outcome/pitch/pace and grouping to match learning needs, concentration level, interests and motivation
- Task management strategies

### Small Group/individual learner

- Access to external advice from an autism specialist
- Use of the AET Progression Framework to set child / young person targets and measure progress
- Flexible transition times
- Individual visual timetables or Now/Next approach
- Daily 'meet and greet' with trusted adult
- Extra individual explanation and structured pre-warning of upcoming changes in routine/timetable/ personal etc.

- Consistent use of a structured and personalised workstation, along with use of visual work systems such as task management boards
- Access to low arousal spaces outside the classroom during times of distress
- A consistent approach during periods of extreme anxiety- including reduced language/down time/ quiet time/reflection time etc.
- Anxiety management strategies e.g. use of emotions gauge
- Specific teaching of component social skills
- Structured opportunities to develop social interaction skills within everyday learning experiences
- Planned and structured teaching of board/card games to support social awareness, turn-taking, sharing, ability to lose when playing etc.
- Structured teaching of playground games
- Specific work on conversational skills
- Use of social scripts and comic strips to support social understanding
- Strategies to reduce anxiety during unstructured times e.g. access to structured clubs and quiet play areas
- Pre-emptive teaching of topic-related vocabulary, word mats
- Differentiated teaching and chunked learning activities alongside short breaks
- Additional access to I.T. such as iPads, laptops, talking tins
- Use of Augmented and Alternative Communication (AAC) strategies
- Planned teaching targets to develop specific language skills
- Sensory audits of and reasonable adjustments to the physical environment
- Individual sensory audits and use of information to inform sensory diet
- Specific teaching of emotional literacy skills
- Visual schedules to support organisational skills
- Enhanced transition to next class/setting
- Brain, sensory & movement breaks to be built into the day, as & when appropriate
- Specific strategies to promote independence
- Use of special interests to underpin curricular activities



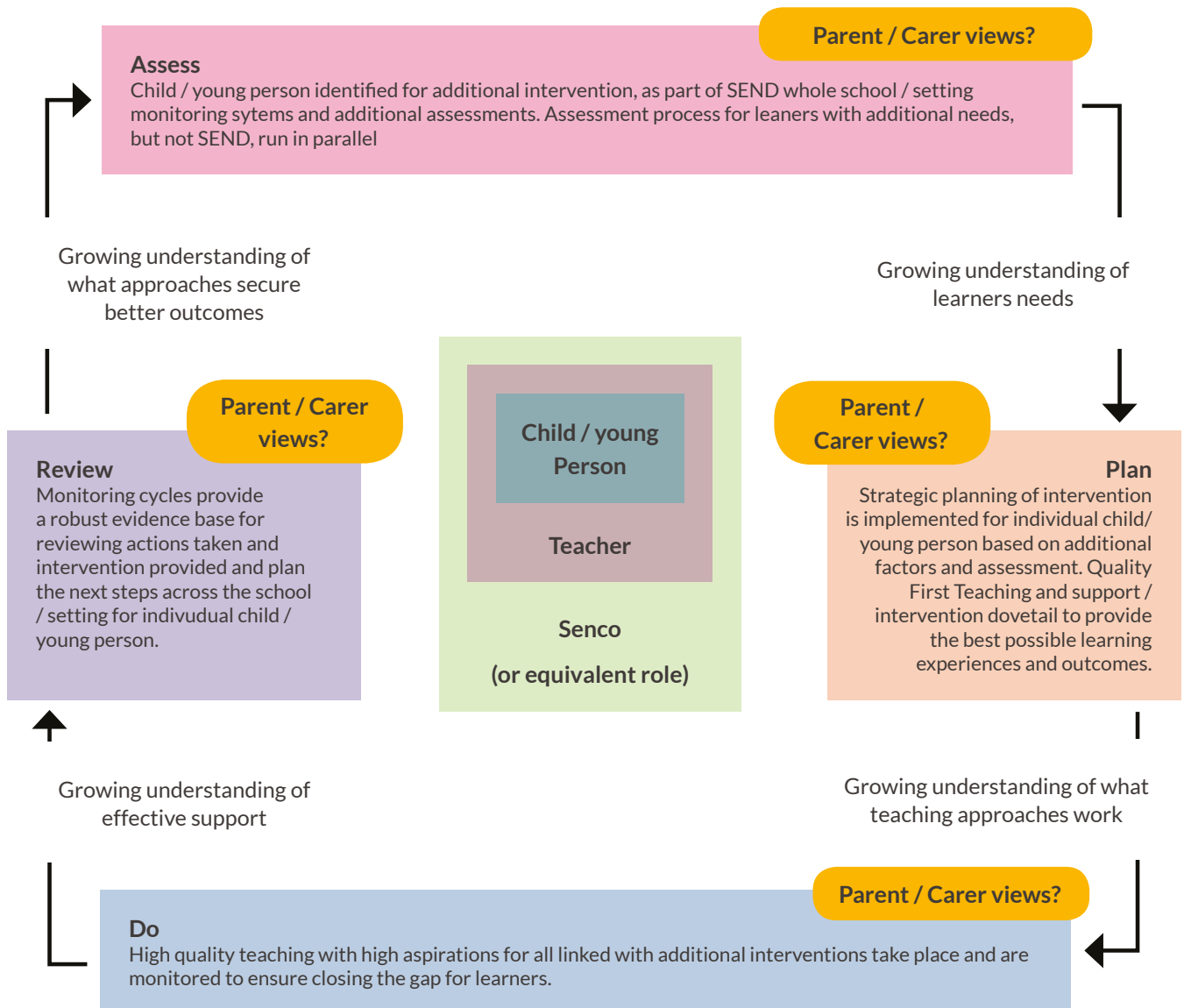
# Part 2b - Assess/Plan/Do/Review – An Individual Child / Young Person Approach

## An Individual Child / Young Person Approach

Where a child / young person is identified as having SEN, schools should take action to remove barriers to learning and put effective special educational provision in place. This SEN support should take the form of a four-part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the child / young person's needs and of what supports the child / young person in making good progress and securing good outcomes. This is known as the graduated approach. It draws on more detailed approaches, more frequent review and more specialist expertise in successive cycles in order to match interventions to the SEN of children and young people. (CoP 6.44)

## APDR Cycles – what should settings do?

### Individual Child / Young Person 'Assess, Plan, Do, Review'



**1. Assess Needs:** In identifying a child/young person as needing SEN support the class or subject teacher, working with the SENCO, should carry out a clear analysis of the child / young person's needs. This should draw on the teacher's assessment and experience of the child / young person, their previous progress and attainment, as well as information from the school's core approach to progress, attainment, and behaviour. It should also draw on other subject teachers' assessments where relevant, the individual's development in comparison to their peers and national data, the views and experience of parents, the child / young person's own views and, if relevant, advice from external support services. Educational establishments should take seriously any concerns raised by a parent/carer. These should be recorded and compared to the establishments' own assessment and information on how the child / young person is developing. (CoP 6.45)

This assessment should be reviewed regularly. This will help ensure that support and intervention are matched to need, barriers to learning are identified and overcome, and that a clear picture of the interventions put in place, and their effect is developed. For some types of SEN, the way in which a child / young person responds to an intervention can be the most reliable method of developing a more accurate picture of need. (CoP 6.46)

In some cases, outside professionals from health or social services may already be involved with the child or young person. These professionals should liaise with the educational establishment to help inform the assessments. Where professionals are not already working with staff, the SENCO (or named person in College with oversight for SEN) should contact them, if the parents agree. (CoP 6.47)

#### **Actions Required:**

- Gather parent/carer views and ideas of what works well, areas of concern for child/ young person in context of family;
- Gather learners views on their strengths, successes, areas of difficulty and ways to help;
- Collate information from other agencies including health and social care;
- Carry out relevant additional diagnostic assessments e.g. dyslexia assessments, BPVS, reading and spelling, non-verbal, Boxall Profile;
- Consider feedback from assessment for learning;
- Use Early Help assessments if social, emotional, family aspects are a factor;
- Build a Support/Learning Plan/ Individual Plan formulated on all of the information gathered;
- Ensure that the Parent/carer/learner receives relevant information as support/intervention commences.

**2. Plan:** Where it is decided to provide a child/young person with SEN support, the parents must be formally notified, although parents should have already been involved in forming the assessment of needs as outlined above. The teacher and the SENCO should agree, in consultation with the parent and the child / young person, the adjustments, interventions and support to be put in place as well as the expected impact on progress, development or behaviour, along with a clear date for review. (CoP 6.48) Where appropriate, plans should seek parental involvement to reinforce or contribute to progress at home.

All teachers and support staff who work with the child / young person should be made aware of their needs, the outcomes sought, the support provided and any teaching strategies or approaches that are required. This should also be recorded on the educational establishment's information system.

The support and intervention provided should be selected to meet the outcomes identified for the child / young person, based on reliable evidence of effectiveness, and should be provided by staff with sufficient skills and knowledge.

### Actions Required:

- Staff meet with parent carers and child / young person;
- Outcomes for intervention are agreed with the child / young person and their parents/carers;
- Teacher's planning is appropriately informed by advice/guidance from specialist support agencies where relevant;
- Supports plan written, reflecting all learner needs and expected outcomes against interventions. The support plan may gather together other plans such as a pastoral support plan, personalisation of learning. Review date set;
- A consistent approach is developed for the child / young person by all teachers and support staff;
- Professional development may be planned for individual staff to update skills and knowledge e.g. how to set up a 'circle of friends';
- SENCO/Inclusion Leader coordinates appropriate provision and supports staff in creating One Page Profiles for groups and individual support;
- Resource costs calculated: including financial costs, time commitment of staff, external services and reviewed in light of the effectiveness of the spend of the SEND Notional budget.

**3. Do:** The class or subject teacher should remain responsible for working with the child/young person on a daily basis. Where the interventions involve group or one-to-one teaching away from the main class or subject teacher, they should still retain responsibility for the child / young person. They should work closely with any teaching assistants or specialist staff involved, to plan and assess the impact of support and interventions and how they can be linked to classroom teaching. The SENCO should support the class or subject teacher in the further assessment of the child's particular strengths and weaknesses, in problem solving and advising on the effective implementation of support. (CoP 6.52)

### Actions Required:

- Quality First Teaching (QFT) is the first response to meeting learner needs; teachers and support staff make suitable adaptations to classroom practice and routinely draw on a range of inclusive strategies and approaches;
- Additional targeted support and individualised intervention dovetails with QFT; short term timeframes are set for targeted support/interventions;
- "In addition to/different from' provision is implemented where personalised support and individualised intervention is required;
- Targeted support/ intervention links to class learning where appropriate to ensure continuity, overlearning and application of skills;
- Support staff understand their role in supporting learning and in completion of tasks;
- Links with other agencies are maintained if appropriate;
- SENCO/Inclusion Leader seeks advice and specialist support from agencies as and when necessary.

**4. Review:** The effectiveness of the support and the impact on the child/young person's progress should be reviewed in line with an agreed date.

The impact and quality of the support and interventions should be evaluated, along with the views of the child / young person and their parents/carers. This should feed back into the analysis of the child / young person's needs. The class or subject teacher, working with the SENCO, should revise the support in light of the child / young person's progress and development, deciding on any changes to the support and outcomes in consultation with the parent and child / young person.

Parents/carers should have clear information about the impact of the support and interventions provided, enabling them to be involved in planning next steps.

(CoP 6.53 – 6.55)

#### **Actions Required:**

- Gather evidence from school/ setting monitoring systems;
- Learner has personalised progress meetings e.g. 2 weekly, 4 weekly, half-termly, termly depending on school/setting policy and practice;
- Review meetings with parents/carers are scheduled on at least a termly basis and incorporate their reflections, aspirations, wishes and ideas;
- Learners reflections, aspirations, wishes and ideas reviewed alongside other information;
- All evidence helps to revisit, refine, refresh and revise what has worked well, what needs to continue and what needs to change.

#### **Involving Specialists:**

Where a child / young person continues to make less than expected progress, despite evidence-based support and interventions that are matched to the child / young person's area of need, the educational establishment should consider involving specialists, including those secured by the establishment itself or from outside agencies.

Educational establishments may involve specialists at any point to advise them on early identification of SEN and effective support and interventions. A setting should always involve a specialist where a child / young person continues to make little or no progress over a sustained period, or where they continue to work at levels substantially below those expected of a similar age, despite evidence-based SEN support delivered by appropriately trained staff. The parents/carers should always be involved in any decision to involve specialists. The involvement of specialists, and what was discussed or agreed, should be recorded and shared with the parents and teaching staff supporting the child in the same way as other SEN support. (CoP 6.58-6.59)

The SENCO and class/subject teacher, together with the specialists, and involving the parents, should consider a range of evidence-based and effective teaching approaches, appropriate equipment, strategies and interventions in order to support the child's progress. They should agree the outcomes to be achieved through the support, including a date by which progress will be reviewed. SEN support should include the transitions between phases of education and preparation for adult life

#### **Expected Progress:**

Class and subject teachers, supported by the senior leadership team, should make regular assessments of progress for all children / young people. These should seek to identify children / young people making less than expected progress given their age and individual circumstances. This can be characterised by progress which:

- is significantly slower than that of their peers starting from the same baseline
- fails to match or better the child's previous rate of progress
- fails to close the attainment gap between the child and their peers
- widens the attainment gap

It can include progress in areas other than attainment – for instance where a child / young person needs to make additional progress with wider development or social needs in order to make a successful transition to adult life. (CoP Para 6.17-6.18)

## Ideas for evidencing the operation of the Graduated Response for children / young people – the use of Individual Provision Maps

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Provision maps are an efficient way of showing all the provision that the school makes which is additional to and different from that which is offered through the school's curriculum. The use of provision maps can help SENCOs to maintain an overview of the programmes and interventions used with different groups of children / young people and provide a basis for monitoring the levels of intervention. (CoP 6.76) Expected outcomes and strategies implemented to enable the learner to progress should be recorded, regularly monitored and evaluated as part of the graduated approach. Effective Individual Provision Maps:

- outline specific, time-limited and measurable targets for achievement
- record provision which is "additional to or different from" the differentiated curriculum, which is in place as part of the provision entitlement for all learners (QFT)
- are discussed between the class teacher, parent and the child, who should be involved in reviewing and setting targets on at least a termly basis
- are a jargon free working document, evident in daily practice
- lead to achievement of specific outcomes for children / young people with SEN.

## The Graduated Response and Education, Health and Care Needs Assessment

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For some children / young people there will be a need to target higher level support or more intense interventions as part of the graduated response. For most a cycle of changing intensity to allow generalisation and reinforcement will achieve progress and increase the child / young persons and teacher confidence. It will enable realistic assessments of what the child / young person can achieve and therefore influence projections about progress, performance and outcomes. Occasionally the level of targeted support during the continuous spiral of APDR (which is the basis of all teaching for all children / young people) will need a longer term and maybe permanent increase. This may lead you to consider that an EHC assessment is needed to:

- Reflect on the arrangements that the setting has made and judge whether or not the setting should or could have developed the graduated response more effectively
- Secure additional support so that the setting can sustain the child / young person within school following a provision programme that stands out as being significantly different to what is available for other children with SEND in school.

An EHC Plan is therefore more of the same, it has its own continuing graduated response approach, is guided by an outcome's framework determined by the LA and provides schools with very clear and prescriptive guidance about how they must deploy their resources and support the child / young person. The annual review will reflect on the extent to which the setting have properly delivered the provision and secured outcomes that have been drawn from professional advice Worcestershire's Criteria and Guidance for settings in making a request for an EHC Needs Assessment can be found in Appendix 5.

## Appendix 5 - Criteria And Guidance In Completing A Request For An Education, Health And Care Needs Assessment

## Part 3a - The Graduated Response – Early Years provision

### Quality First Teaching, targeted and specialist interventions that settings can use to support a child

#### Normal Entitlement Descriptors

Compatible with 'Development Matters in the Early Years Foundation Stage' i.e. that is ordinarily available to all children. Most children will be able to participate in the normal entitlement available in settings and make progress within the Early Learning Goals but some may need some support through effective interventions and support within the early years setting.

All early year's settings have a duty under the Equality Act 2010 to be inclusive. Therefore, all children with an emerging or identified special educational need are entitled to access the EYFS through the provision offered by each setting. There is an expectation that settings will manage the majority of lower level needs themselves – this is described as the 'normal entitlement available to all children' within settings. This will include children who are underachieving and/or are less experienced learners (for many reasons) but who do not have a special educational need and whose needs are met within normal practice.

Children making slower progress may include those for whom English is an additional language (EAL), but it should not be assumed that children have special educational needs just because their progress is slower than others. These children who are making slower progress will need carefully differentiated learning opportunities to support their development, together with regular and frequent monitoring of their progress.

All early year's settings should already have the following in place:

- A Special Educational Needs Coordinator (SENCO), with a recommended minimum NVQ Level 2 qualification and working towards a level 3. This person should have additional training and knowledge in matters of SEN including:
  - » The SEN Code of Practice
  - » The Role of the SENCO
  - » Behaviour Management
  - » Speech and Language
- Where a chain of provision exists, WCC recommends that a SENCO is based in each setting
- Special Educational Needs (SEN) Policy
- WCC recommends that a behaviour policy is also in place
- Well-developed systems for observational assessment. Settings need to evaluate the effectiveness of the learning environment and support strategies being used with the child and make changes to enable them to learn and develop more effectively. This includes the provision of differentiated learning opportunities.

Information on the Early Learning Goal can be found in the following document "Developmental Matters":

#### Appendix 6 Development Matters in the Early Years Foundation Stage (EYFS)

Early years providers are able to signpost families for additional support through the Early Help strategy\*. Early Help is an integrated 0-19 'local offer' designed to support families as early as possible to nip difficulties in the bud and prevent the issues from escalating. Early Help aims to empower families to regain control of their circumstances without further LA support.

**FUNDING: NEF Hourly Rate only (No Inclusion Supplement)****Description of Child**

Play, Cognition and Learning Characteristics	Social, Mental and Emotional Health	Communication, Language and Interaction	Physical Development	
			Physical Development and Medical	Sensory Vision and Hearing
<p>Where a child's skills in one or more areas of learning are between 3 and 6 months below the average for that developmental age group.</p> <p>Concentrates for only a very short period of time.</p> <p>Continuous use of multisensory activities needed to reinforce learning and provide meaningful experiences.</p> <p>Exploration through play – preference and schemas developing which might be of limited variety.</p>	<p>Plays alongside, rather than with other children.</p> <p>Predominantly ego-centric – theory of mind/ability to emphasise with others gradually emerging at later stages.</p> <p>Emotional literacy and awareness of feelings gradually developing through play, stories and use of language.</p> <p>Picks up on feelings/ behaviours of others – e.g. tone of voice, body language etc. which might affect behaviour.</p> <p>Difficulty sharing, taking turns or accepting support from adults.</p> <p>Child follows simple everyday rules and routines that are clearly set out and frequently reinforced by staff.</p>	<p>Difficulty in speaking to adults outside the family</p> <p>Immature speech sounds.</p> <p>Requires repetition, slow pacing of language and use of key words.</p> <p>Following simple instructions.</p>	<p>Less agile than might be expected for children at child's age.</p> <p>Eye-hand coordination slowly developing at a slower rate than would be expected for age.</p> <p>Laterality (left or right preference) not firmly established.</p> <p>Not reliably toilet-trained and has occasional accidents.</p> <p>Difficulty dressing and undressing independently.</p> <p>Chronic (everyday) medical condition that requires regular medication during the day e.g. mild asthma.</p>	<p>History of conductive hearing loss.</p> <p>Temporary mild hearing loss (no hearing aids).</p> <p>Recently prescribed glasses and needs to be encouraged to wear them.</p> <p>Patching/ treatment for squints.</p>

## Interventions, Strategies and External Agencies - Normal Entitlement

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**Stories:** Short, well-illustrated and read with enthusiasm by adult/ use of props/story sacks etc./ story group kept as small as staffing resources allow. Repetitive phrases for children to join in with.

**Instructions:** Repeated and accompanied by clear and concise gestures/ visuals prompts, wait 10 seconds to allow child to process and repeat if necessary, using exactly the same instruction (do not rephrase).

**Adults:** To join in with an activity the children has selected and play alongside to support turn taking, possibly in group games.

Be receptive and give time to children having difficulties speaking or who need time to understand and process.

Give children time and opportunity to build relationships with key person and peers.

**Positive Language:** To use praise and positive reinforcement immediately when warranted.

Say what you want the child to do rather than what you don't want e.g. 'walk' or 'walk nicely' rather than 'don't run'.

**Behaviour Strategies:** Model positive behaviour and recognise positive behaviour in others to illustrate expectations.

**Group work:** For key person groups or planned activities or according to themes identified within learning and development plans.

Plan to support at their emotional age of development.

**Environment:** Acoustically friendly environments/ visually friendly environments/structured and organised to include a quiet space.

**Resources:** Use pictures for labels and picture/visual timetables.

Plan for adults to participate in imaginative play activities to support and extend play



## EARLY YEARS GRADUATED RESPONSE 1 (Included within the NEF hourly rate for 2, 3 & 4 year olds)

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The Revised SEND Code of Practice (2014) is quite clear about how settings should differentiate between children who are underachieving and need to catch up, and children with a more specific special educational need which would justify the setting putting them on to 'Graduated Response.'

For a setting to decide that a child may have a special educational need and needs to be supported at Graduated Response 1, there must be a strong indication that they require support which is "additional to" or "different from" the differentiated educational provision made generally for children of their age – the normal entitlement available to all children, as set out in the EYFS.

Children on GR1 will generally be expected to catch up with the appropriate support and should not automatically move up to Graduated Response 2. Please do not mistake underachieving children for those with a genuine special educational need.

Individual Education Plans or Individual Support Plans are no longer required for children at Graduated Response 1, as long as there is a good quality provision map in place that cross references provision with progress of the children.

No specialist agencies will be involved at this stage.

The £0.14 funding is a contribution towards the SEND provision the child will require.

This is already included within the NEF hourly rate for 2, 3 and 4 year olds.

We would expect to see children receiving at least one individual or group activity per session.

It should be planned and focused on the specific area of delay.

It is common for children on Graduated Response 1 to learn through group activities, where positive role models in their peer group can aid their development.

Some settings who have high numbers of children receiving the Inclusion Supplement will be able to use the funding to contribute towards additional staffing at key times: to support the activities and children.

A referral might have been made to an agency like Speech and Language Therapy, but the children are not receiving individualised targets from them but may be on the waiting list.

They may be attending Walk In Talking Sessions at a Children Centre.

Other interventions are detailed below in the strategies and interventions section.

**Description of Needs – GRADUATED RESPONSE 1**

Play, Cognition and Learning Characteristics	Social, Mental and Emotional Health	Communication, Language and Interaction	Physical Development	
			Physical Development and Medical	Sensory Vision and Hearing
<p>Minor developmental delay on entry: 6 - 12 months delay – see Development Matters section of EYFS. Slow progress with language acquisition, early learning, play and personal independence skills.</p>	<p>Difficult to settle on entry into session over a number of weeks – seeks frequent reassurance of adult contact, tearful, wanders etc. Lack of concentration but generally appropriately behaved and able to sustain relationships with supportive adults. Sits for a much shorter length of time than peers e.g. busy box or other adult led activity used at 'group activity time'. Disrupts play of other children by snatching, wanting to take over, sabotaging play e.g. persistent knocking down/ breaking up of toys etc. Unable to take turns/share. Lacks confidence – holds back, reluctant or refuses to participate. Diverts attention by behaviour. Withdrawn, uncommunicative – tends to play alone and reluctant to engage with adults. (Overly compliant/ controlled.) Limited awareness of others. Reluctant to explore objects or try new activities. Accidents more than once a week and may occasionally soil.</p>	<p>Speech incomprehensible without a supporting context. Difficulty following or understanding instructions and everyday language without a visual reference. Immaturity in socialisation – looks towards adults rather than peers. Difficulties with communication and interaction e.g. selective mute, some social and communication difficulties or possible difficulties relating to attachment. Poor oromotor skills (difficulty in using lips, tongue and jaw) which affect enunciation of sound. Fluency difficulties.</p>	<p>6 -12 months delay in fine and gross motor development. Difficulties with sequencing, vision and/ or auditory perception, coordination. Delay in achieving continence – accidents more than once weekly. Difficulties (more than others at this age) dressing self. Difficulties (more than others at this age) cutting up food/feeding self, drinking from a cup. Physical impairment may require some special equipment but needs little intensive support. Difficulties with spatial awareness or social proximity.</p>	<p>History of conductive hearing loss. Family history of vision loss. Minor vision loss (squints) Minor hearing loss with no aids prescribed. Developing awareness of possible indicators of sensory differences i.e. tactile sensitivity, sensitive to sound or visual stimuli.</p>

## Interventions, Strategies and External Agencies – GR1

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### Interventions and Strategies:

Additional support arrangements which may include:

- Increased use of visual support timetables, or 'now and then' prompts
- Assessment and monitoring by key person, supported by the SENCO (Early Support tracking to be used in area of delay)
- Use the 'next step' to plan learning experiences.
- Advice from SENCO and external agency on strategies to be put in place (e.g. Speech and Language Therapy or SENCO Support Advisor)
- Differentiated curriculum to support targets
- Flexible approaches to whole curriculum planning
- 1 small group activity or individual activity per session, planned and timed appropriately at the level of development of the child
- Minor adaptations and/or equipment e.g. non-slip surfaces for extra help in playground
- Training for staff on general SEN issues
- Children may require additional support to settle in to the setting, with home/setting diaries
- Staff should consistently apply their behaviour management policies, in liaison with parents/carers

A PROVISION MAP or an Individual Provision Map/Support Plan should be used for children on GR1, which demonstrates what the setting is doing in terms of additional interventions for the child or group of children. These should be reviewed twice termly.

### Appendix 7 - Early Years Provision Map

e.g. Children demonstrating inappropriate behaviours could benefit from the following strategies:

- Rewards and praise systems
- Golden rules set with all children
- Consider emotional needs of the child
- Choosing boards

### Resources:

Inclusion Development Programme

<http://webarchive.nationalarchives.gov.uk/20110202093118/http://nationalstrategies.standards.dcsf.gov.uk/search/inclusion/results/nav:46335>

### Speech Language and Communication Pathway (SLCN):

<http://www.hacw.nhs.uk/our-services/speech-language-therapy/childrens>

Strategies would include: reducing language / eye contact / time to understand request and respond / positive language

### External Agencies:

Generalised advice and/or consultation with: SENCO Support Advisors (SSA), Speech and Language Therapy via Walking Talking sessions, Social Workers and/or Family Support Workers and Virtual Schools (formally Integrated Service for Looked After Adopted Children.)

## EARLY YEARS GRADUATED RESPONSE 2 (Included within the NEF hourly rate for 2 year olds)

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If a child continues to make little or no progress over a term and there is evidence the child is falling progressively behind the majority of children of the same age, despite receiving individualised support on Graduated Response 1, then advice should be sought from external support agencies.

Agencies may include: Local Authority or external specialist services, health organisations including Occupational Health, Speech and Language therapists and Learning Support Team (who will not be involved unless referred via Pre-School Forum).

In maintained Local Authority nurseries, although teaching assistants may deliver some of the programmes written or advised by external agencies, it is still the responsibility of the Early Years class teacher to ensure all children, including those at Graduated Response 2, 3 and 4 are making good progress. This is the responsibility of the SENCO and manager in PVI early years settings.

Alternatively, the child may have sensory or physical needs that require additional specialist equipment or regular advice or visits by a specialist agency.

It may be appropriate for children at Graduated Response 2 to be referred to the pre-school forum. Please see page 7 for a full explanation of the forum and its procedures.

**FUNDING: NEF hourly rate + £0.74 per hour Inclusion Supplement (max: £11.10 p/week). This is already included within the £5.20 hourly rate for 2 year olds.**

The funding is a **contribution** towards the SEND provision the child will require.

We would expect to see children receiving at least two individual or group activities (if appropriate) that are planned and focused on the specific area of delay of the individual child, per session.

Some settings who have high numbers of children receiving the Inclusion Supplement will be able to use the funding to contribute towards additional staffing at key times to support the activities and children.

External agencies will be involved and should liaise with the setting to provide strategies and interventions for the setting to work on with the individual child.

Other interventions are detailed below in the strategies and interventions section.

Description of Needs – GRADUATED RESPONSE 2				
Play, Cognition and Learning Characteristics	Social, Mental and Emotional Health	Communication, Language and Interaction	Physical Development	
			Physical Development and Medical	Sensory Vision and Hearing
<p>Developmental delay on entry: 12-18 months delay – see Development Matters in EYFS' and/or assessments by relevant professionals.</p> <p>Expressive and receptive language delayed by more than 12 months - see Development Matters in EYFS and/or assessments by relevant professionals.</p> <p>Reinforcing and modelling by adult does not result in child engaged with learning activities e.g. completing an inset puzzle, putting teddy to bed, rolling a car along the floor etc.</p> <p>Does not retain concepts over time e.g. size, colour etc.</p> <p>Ability to learn concepts, but difficulty with the understanding</p>	<p>Separation difficulties e.g. attachment which persists throughout the session (crying, distressed, clingy) and persist for more than half a term and is severe compared to peers. Child who is unable to regulate emotions, needing adult intervention.</p> <p>Social immaturity for their age affecting appropriate independence or interpersonal skills.</p> <p>Significant reluctance to engage with routine and activities by withdrawal or exhibiting challenging behaviour.</p> <p>Inappropriate behaviours that require:</p> <ul style="list-style-type: none"> <li>■ calming strategies</li> <li>■ specific behaviour programmes</li> </ul> <p>Needs adult support to sustain concentration and build relationships with peers.</p> <p>Anxiety expressed through behaviour that creates a barrier to learning.</p> <p>Unusual habitual behaviours e.g. rocking, mouthing, hiding, inappropriate preoccupation with bodily fluids.</p> <p>Attachment to key carers not securely established.</p> <p>Difficulty in coping with changes to routine or unfamiliar transitions.</p>	<p>Little or no speech.</p> <p>Disordered expressive language e.g. word order including severe phonological difficulties/delay i.e. production of sound as identified by a speech and language therapist.</p> <p>Significant difficulty with understanding spoken language as identified by a speech and language therapist.</p> <p>Actively withdraws from engagement and does not seek out others – e.g. averts eyes, does not respond to name, solitary play, often seeks out own space.</p> <p>Significant difficulties in processing information, specifically verbal information.</p>	<p>Not achieving continence – accidents almost daily. Needs frequent, individually timed reminders.</p> <p>Delay with physical coordination as identified by relevant professionals e.g. occupational therapist, physiotherapist, mobility officer etc.</p> <p>Physical impairment required some special equipment e.g. needs some adult support to follow up/supervise.</p> <p>Adults may need training in specialist areas.</p> <p>Ambulant (unstable or slow movements) requiring support and interventions.</p> <p>Occasional wheelchair user.</p> <p>Dressing/feeding difficulties.</p> <p>Child wears splints needing occasional intensive support e.g. PE</p>	<p>Associated speech and language difficulties.</p> <p>Mild to moderate hearing impairment e.g. hearing aids fitted.</p> <p>Hearing in one ear.</p> <p>Mild to moderate vision loss.</p> <p>Significant difficulty with sensory processing.</p>

## Interventions, Strategies and External Agencies – GR2

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IPM/IEP targets set informed by external advice and reviewed every 6-8 weeks.

Additional support arrangements which may include:

- Integral use of visual timetables incorporating objects of reference, picture exchange systems etc.
- Increased differentiation of activities/material to support specific targets.
- Staff training on specific SEN issues.
- Direct teaching sessions.
- Regular supervision and individualised and consistent behaviour management approaches, including behaviour management plan.
- IEP or IPM should be in place, including specific targets for the child received from specialist agencies.
- Risk Assessments and Healthcare plans may be in place, including an audit of the environment to ensure safe passage around the setting.
- Specialist equipment may be required to support children with Physical Disabilities.
- Behaviour management plan or an Individual Support Plan, in agreement and liaison with parents/carers, should be in place for children with individual challenging behaviours.
- Thought should be given to group sizes and more individualised work is expected at this level.
- Work on emotions and support to gain positive relationships with peers.
- At circle time the child may need adult support to maintain concentration, and this should be built up slowly over time and incorporate reward system.
- All activities should be supported with visual prompts and the size of the group at circle time should be carefully considered.

### Resources:

Individual visual timetables and behaviour support materials / specific environmental adaptations for sensory needs / specialist ICT equipment to ensure curriculum access (maintained nursery provision) / radio hearing aid systems for children with hearing impairment/ access to quiet working spaces/ clear signage aid/ additional supervision to ensure health and safety of all children and adults is maintained / EYFS Early Help supporting information.

### External Agencies:

Team Around the Child (TAC) meetings would be appropriate to encourage a consistent approach.

Support and advice from some of the agencies below may be involved to inform on-going, more intensive specific child programmes:

Speech and Language Therapy / Specialist Nursery Language Provision / Nursery Plus / Special School Nursery Provision / Physiotherapy and Occupational Health / Hearing Impaired and Vision Impaired Team / Physical Disabilities Outreach Team / Complex Communication Difficulties Team / Portage Team / Specialist Teaching Service - Integrated Specialist Support Service / Virtual Schools (formally Integrated Services for Looked After and Adopted Children) / Mobility Officer/ Educational Audiologist

## EARLY YEARS GRADUATED RESPONSE 3

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The child's level of need will be progressively more delayed and significant than at GR2.

Alternatively, the child may have sensory or physical needs that require additional specialist equipment or regular advice or visits by a specialist agency.

It will be appropriate for children at Graduated Response 3 to be referred to the pre-school forum.

### **FUNDING: NEF Hourly Rate + £1.44 p/hour Inclusion Supplement (max: £21.60 p/week)**

The funding is a **contribution** towards the SEND provision the child will require.

If appropriate we would expect to see some additional staffing put in place to support the child at key times throughout the session. The support should be intensive during the play session when the appropriate opportunity arises (e.g. intensive interaction etc.) The children may need more support and following basic routines and interactions with peers.

Children at this level may not be able to cope with individualised activities, so careful planning is required to support their development and needs, which will be required for approximately half of the session.

External agencies will be involved and should liaise with the setting to provide strategies and interventions for the setting to work on with the individual child. TAC meetings should occur regularly to ensure a consistent approach and strategies should be reviewed for effectiveness.

The funding may be used for non-contact SENCO/Key Worker time e.g. attendance at meetings, planning, producing resources, if there is adequate progress in the child. There is a high level of paperwork required at this level (for supporting **Pre School Forum** etc.) and also meetings with parents/carers should be more regular.

Other interventions are detailed below in the strategies and interventions section.

### Description of Needs – GRADUATED RESPONSE 3

Play, Cognition and Learning Characteristics	Social, Mental and Emotional Health	Communication, Language and Interaction	Physical Development	
			Physical Development and Medical	Sensory Vision and Hearing
<p>Child is functioning at more than 18 - 26 months below their chronological age in essential milestones - see 'Development Matters of the EYFS' and/or assessments by relevant professionals.</p>	<p>On-going presentation of behaviours as exemplified below, despite planned intervention (over at least a 6-9 month period) as set out in EYA+ IEP/ IMP's.</p> <p>Frequent inappropriate behaviours requiring positive physical interventions (Team Teach training required.)</p> <p>Some danger to self, others and/or property (which may be attributed to visual loss).</p> <p>Little regard for consequences to health, wellbeing and education of self and others at all times, including social times.</p>	<p>Severe language delay of more than 18 months - 2 years below their chronological age as determined by SaLT despite planned intervention at EYA+ (over a period of at least 6 months) or a Teacher of the Deaf/Hearing Impaired.</p> <p>Significant language impairment as determined by SaLT despite planned intervention at EYA+ (over a period of at least 6 months) e.g. dyspraxia of speech or a Teacher of the Deaf/Hearing Impaired.</p> <p>Effective communication involving non-verbal communication (i.e. body language).</p> <p>Delayed language development due to vision impairment.</p> <p>Communication difficulties, limited functional language and echolalia (uncontrollable repetition of words.)</p>	<p>Child may need position changing regularly and may need adult support during an activity.</p> <p>Ambulant (unstable or slow movements) accidents requiring attention. Possibly non-ambulant.</p> <p>May have medical condition that is preventing on-going access to the curriculum e.g. moderate to severe epilepsy or some physical impairment to a degree where Health Service involvement would need to be specified and where setting staff need to provide high levels of intervention (Health Care Plan to be in place.)</p>	<p>Severe/ profound hearing impairment requiring hearing aids and possible Radio Aid system.</p> <p>Moderate to severe vision loss.</p> <p>Dual sensory loss.</p> <p>Support needed in acquiring mobility and independence skills.</p> <p>Significant stress experienced in busy environments.</p>



		<p>Autistic Spectrum Condition 'working to diagnosis' (over at least a 6 month period), characteristics including:</p> <ul style="list-style-type: none"> <li>■ social communication difficulties</li> <li>■ processing delay</li> <li>■ inflexibility</li> <li>■ sensory issues</li> </ul> <p>Needs enhanced communication system e.g. signing. Possible attachment difficulties - a history of early trauma.</p>	<p>Medical toileting problems (e.g. 3 accidents per session) requiring close adult supervision and training and requires continual monitoring and intervention e.g. external agencies provide specific advice for toileting support.</p>	
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### Interventions, Strategies and External Agencies – GR3

**Pre-school Forum** reviews the child regularly and IEP/IPM reviewed every 6-8 weeks by practitioners.

Pre-school Forum reviews the child regularly and IEP/IPM reviewed every 6-8 weeks by practitioners.

Strategies:

- Additional support available to increase ratios for intensive support and interventions.
- Opportunities for intensive support/teaching, including from outside agencies (e.g. Hearing-Impaired team)
- Intensive support is required for Personal, Social and Emotional development (e.g. self-esteem and positive relationships.)
- Intensive support is required to manage basic hygiene and personal needs.
- Significant attention to the provision and maintenance of a range of personal equipment.
- Manual handling and hoist training for staff where applicable.
- Team Teach training (i.e. Positive Physical Intervention) may be appropriate at this stage.
- All staff should be aware of the child's issues to ensure consistent application of strategies across the session.
- Health Care Plan and Risk Assessment should be in place for children with medical needs.

**Resources:**

All previous resources and a Teacher of the Multi-Sensory Impaired.

**External Agencies:**

Learning Support Team, SEN Improvement Advisor, Child Development Centre, Umbrella, Children and Mental Health Services (CAMHS) Communication Skills Advisor.

## EARLY YEARS GRADUATED RESPONSE 4

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The child's level of need will be progressively more delayed and significant than at GR3.

Children at GR4 will be very complex and may be known to multiple agencies and the majority will be offered specialist provision either at a specialist nursery or language unit.

It will be appropriate for children at Graduated Response 4 to be referred to the pre-school forum. Please see section 7 for a full explanation of the forum and its procedures.

### **FUNDING: NEF Hourly Rate + £2.70p/hour Inclusion Supplement (max: £40.50 p/week)**

The funding is a **contribution** towards the SEND provision the child will require.

If appropriate we would expect to see additional staffing put in place to support the child throughout the majority of the session. The support should be intensive during the majority of the play session. The children may need more support in following basic routines and interactions with peers.

Children at this level may not be able to cope with individualised activities, so careful planning is required to support their development and needs.

External agencies will be involved and should liaise with the setting to provide strategies and interventions for the setting to work on with the individual child. TAC meetings should occur regularly to ensure consistent approach and reviewing strategies for effectiveness.

The funding may be used for non-contact SENCO/Key Worker time e.g. attendance at meetings, planning, producing resources if there is adequate progress. There is a high level of paperwork required at this level (for supporting Pre School Forum etc.) and also meetings with parents/carers should be more regular.

Other interventions are detailed below in the strategies and interventions section.

Other interventions are detailed below in the strategies and interventions section.

Description of Needs – GRADUATED RESPONSE 3

Play, Cognition and Learning Characteristics	Social, Mental and Emotional Health	Communication, Language and Interaction	Physical Development	
			Physical Development and Medical	Sensory Vision and Hearing
As before.	<p>Episodes where extreme aggression is a danger to self and others.</p> <p>Very aggressive to staff and/or peers.</p> <p>Positive physical Interventions required (Team Teach training in place.)</p> <p>No response to calming strategies.</p> <p>Totally withdrawn and uncommunicative.</p> <p>Diagnosed severe attachment disorder.</p>	<p>Speech and language disorders severely affecting:</p> <ul style="list-style-type: none"> <li>■ vocabulary</li> <li>■ phonology</li> <li>■ social interaction/communication</li> <li>■ understanding</li> </ul> <p>Working towards diagnosis of autism.</p> <p>Extremely severe communication difficulty.</p> <p>Regular episodes of challenging behaviour endangering self and others.</p> <p>No spoken language.</p>	<p>Non-ambulant, unstable, unpredictable or restricted movements with potential secondary problems e.g. muscle spasms, soreness to joints.</p> <p>Entirely dependent for all self-care needs.</p> <p>Moving and handling needs.</p>	<p>Dual sensory loss/complex need.</p> <p>Potential requirement for BSL trained support worker.</p> <p>Vision or hearing loss resulting in severe impact on:</p> <ul style="list-style-type: none"> <li>■ social communication skills</li> <li>■ difficulties in accessing cognitively appropriate learning and development activities</li> <li>■ difficulties in emotional development.</li> </ul> <p>Adapting the learning environment to take account of problems with glare, visual clutter, contrast, poor acoustics and the need for tactile cues.</p> <p>Significant difficulties relating to sensory perception, impacting on social and emotional well-being (e.g. won't eat in setting, significant sleep difficulties).</p>

## Interventions, Strategies and External Agencies – GR4

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IEP/IPM's reviewed every 6-8 weeks.

Statement/Education Health Care Plan reviewed every 6 months if in place.

### Adult:

Significant support is required for child throughout 15 hours NEF to support all aspects of development. Access to specialist staff from health or education. Alternative augmented communication. Interactive sessions. Manual Handling issues and training for staff specific to child. Strategies will be very individual to the child, due to their complexity.

### External Agencies:

In addition to ones previously mentioned, frequent input from Health Services including assessment at Child Development Centre/Specialist Nursery Assessment Unit.

## Exceptional Early Years Funding

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In order to intervene at the earliest stage of a child's life to support their development, an Exceptional Early Years Funding category has been created to support the most complex children in the county. Children must meet the eligibility criteria below. The level of need will be confirmed by the Early Years Inclusion Funding Panel and settings must adjust the level of need on the Provider Portal once this has been agreed.

If parents/carers are considering whether to delay or defer entry into school for matters of SEND then we would recommend that they discuss this with an Area SENCO or other professional working with their child, so that all implications of the decision are considered. The link to the WCC policy for delayed entry has been provided below. A flowchart has also been created for professionals and parents/carers to support this decision-making process, this is included within the policy document as an appendix:

WCC Policy on Delayed and Accelerated Transfer including Flowchart on Delayed/Deferred Entry into School can be downloaded from following link:

[www.babcockprime.co.uk/improving-schools-and-settings/early-years/early-years-inclusion/a-z-of-inclusion-resources/f-inclusion-resources](http://www.babcockprime.co.uk/improving-schools-and-settings/early-years/early-years-inclusion/a-z-of-inclusion-resources/f-inclusion-resources)

## Funding: NEF Hourly Rate + £6.30 p/hour Inclusion Supplement (max: £94.50 p/week)

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We would expect to see:

- One to one staffing support or intervention in place with the individual child.
- Regular discussions with parents and carers and sharing of successful strategies for consistent approach in all environments.
- Specialist agencies should be involved and be providing strategies and interventions for setting to follow.
- Regular TAC meetings with all relevant professional and parents/carers.
- Appropriate paperwork and tracking information completed to support the Statutory Assessment process.
- Regular feedback to professionals and parents to aid discussions at Pre-School Forum.
- Significant activities to support the child's transition into school using the Transition Toolkit.

The decision of whether a child meets the criteria for the Exceptional Early Years Funding will be made by the Early Years Inclusion Funding Panel and must be supported by the chair of the Pre-School Forum.			
General criteria ALL TO BE PRESENT	Specific Criteria AT LEAST ONE TO BE PRESENT	Use of additional funding	Process
Child must be attending an Ofsted Registered Provider or have an EHC Plan that supports education in the home.	Child is in pre-school year and has delayed entry into Reception (with the support of Pre-School Forum) for one calendar year and demonstrates an exceptional level of need over and above that which is available via the EYSFF Inclusion Supplement Graduated Response 4.	Funding is provided in the main to increase staff ratios so that the named child receives intensive interventions for the NEF hours claimed. This will always be up to a maximum of 15 hours per week, term time only (30 hours if child is eligible for extended entitlement). Settings are encouraged to use the funding creatively to support the child's progress and to follow recommendations from Specialist Services.	Early Years Settings must complete the 'Exceptional Early Years Funding' application form for consideration at the Early Years Funding Panels. The application MUST be supported by the chair of the Pre-School Panel.
	The child is in pre-school year has deferred entry into Reception (with the support of <b>Pre School Forum</b> ) for a term or terms and demonstrates an exceptional level of need over and above that which is available via the EYSFF Inclusion Supplement Graduated Response 4.		The Early Years Inclusion Team will liaise with the Early Years Settings to inform them of the outcome of Exceptional Early Years Funding application.
Child must be known to the Pre-School Forum and the application must be supported by the chair.	The child is in their pre-school year and would benefit from accessing specialist nursery assessment provision (not including Language Units) as recommended by the Pre-School Forum, whose parents have opted to access mainstream provision or a place is not available due to capacity of the provision.	The interventions should be as advised by specialist agencies and should be recorded by the setting via an Individual Education Plan or Individual Provision Map.	Settings will adjust the level of need on the Provider Portal to reflect the agreed level of need.

The decision of whether a child meets the criteria for the Exceptional Early Years Funding will be made by the Early Years Inclusion Funding Panel and must be supported by the chair of the Pre-School Forum.			
General criteria ALL TO BE PRESENT	Specific Criteria AT LEAST ONE TO BE PRESENT	Use of additional funding	Process
	The child is in their pre-school year and would benefit from accessing specialist nursery assessment provision (not including Language Units) as recommended by the Pre-School Forum, whose parents have opted to access mainstream provision or a place is not available due to capacity of the provision.	Funding should also contribute towards the time spent on planning for the child with special needs and disabilities and appropriate specialist resources (not inclusive of equipment provided by the PD Outreach teams).	Payments will be made either as an adjustment in next terms budget or within the Actual Payment run, depending on the date of the decision.
Child must be eligible for and be in receipt of the Graduated Response 4 Inclusion Supplement.	Highest level of supervision recommended within Early Years setting by Babcock VI team to support children with little or no vision.		The Early Years Inclusion Team will monitor the use and impact of the funding provided, following the monitoring process set out on page 5 of the Local Inclusion Fund Guidance.
	British Sign Language is the child's first language and a BSL trained support worker has been recommended by the Babcock HI team.		
	Specialist equipment has been recommended by Early Years Provision or has been recommended by Specialist Teams (VI/ HI/MSI/PD Outreach Team). Equipment ONLY to be provided – child will not be eligible for exceptional unless EHCP is in place or other criteria met.		

## Part 3b – The Graduated Response – School provision

### Quality First Teaching, targeted and specialist interventions that schools can use to support a child or young person

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#### Using the Descriptor Pages

The descriptors are set out in the tables that follow. They indicate provision that the LA expects schools to make for children / young people with regard to:

#### Communication and Interaction:

- Autism Spectrum Disorder (ASD)
- Speech, Language and Communication Needs (SLCN)

#### Cognition and Learning:

- Moderate Learning Disability (MLD)
- Specific Learning Difficulty (SpLD)
- Social, Emotional and Mental Health (SEMH)

#### Sensory and / or physical needs:

- Hearing Impairment (HI)
- Vision Impairment (VI)
- Physical Impairment
- Medical Needs

For each type of special educational need or disability detailed information is given about the LA's expectations, in terms of:

- Level and description of difficulty
- Assessment, planning and review
- Teaching environment and grouping
- Curriculum and teaching methods
- Partners and resources

The descriptors are intended to be indicative, they are not an exhaustive list. A child / young person need not be experiencing all the needs described above, for consideration to be given as to whether they have needs at SEN Support level.

Some of the needs described may not individually warrant intervention but they may be significant in conjunction with other needs. Schools may find a child / young person has needs across a number of the headings or a cluster of needs under one heading.

## Communication and Interaction

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### The Autism Spectrum

Autism is a term used to describe a neurological difference in brain development that has a marked effect on how a person develops. There are four areas of difference that are particularly important for staff in schools and educational settings to understand and pay attention to because most students with autism will have individual educational needs to be met in these areas.

Students on the autism spectrum will have different levels of support needs in relation to:

- Understanding the social interactive style and emotional expression of staff and peers – just as it is difficult for staff and peers to understand the social interactive style and emotional expression of students on the autism spectrum.
- Understanding and using communication and language - both verbal and non-verbal (e.g. gesture, facial expression, tone of voice).
- Differences in how information is processed can lead to a strict adherence to routines and rules and/or difficulties in planning and personal memory.
- Students on the autism spectrum have difficulties in predicting what will happen when a familiar timetable or activity is changed. Conversely, such styles of processing can lead to strengths and abilities in a number of areas (often related to factual memory or areas of interest and motivation).
- Differences in the way sensory information is processed, often leading to over sensitivities (often to external stimuli such as lighting, smells, or sounds), and under-sensitivities (often not noticing internal feelings such as pain, body awareness and hunger, until they become overwhelming). It should be noted that sensory sensitivities can lead to extreme levels of stress and anxiety in unfamiliar or over-stimulating environments' (taken from the AET National Autism Standards, 2012).

Some of the characteristic difficulties' students may experience include:

- Difficulties in understanding social situations and responding to normal environmental cues.
- Difficulty in intuitively sensing other people's feeling and intentions.
- Inappropriate or limited social initiative and problems with establishing and maintaining reciprocal relationships.
- Rigidity of thinking and a tendency to follow personal agendas which are not easily amenable to adult direction with an absence of awareness of the thoughts, needs or emotions of others.
- Difficulty with open-ended or unstructured situations and with change.
- High susceptibility to anxiety and stress.
- Limitations in expressive or creative activities extending to obsessive interests or repetitive activities.
- Impaired use of language, either expressive or receptive, which may include odd intonation, literal interpretations and idiosyncratic phrases and may extend to more bizarre expressive forms and limited expression, reducing the potential for effective two-way communication. Good vocabulary may lead others to overestimate the true level of understanding.

For all students on the autism spectrum, the expectations associated with change that may require contact with more people in a wider range of social settings, may compound their existing difficulties and make their special needs more complex.

### Normal school entitlement - ASD

Many students on the autism spectrum will be able to participate in most aspects of an ordinary classroom and make progress within the curriculum but may need some support through effective QFT and waves of intervention.



Description of student	Intervention and Support	Learning Environment	Partnership with parents, carers and other agencies	Monitoring, Assessment and Review
<p>Working within the same key stage as peers.</p> <p>Able to work on same tasks as peers with some additional support.</p> <p>Able to learn in the whole class group.</p> <p>Expressive and receptive language skills expected levels or with mild difficulties.</p> <p>Some difficulties with social use of language.</p> <p>May require some additional explanation of concepts.</p> <p>Poor conversation skills.</p> <p>Some mild social difficulties.</p> <p>May be aware of difficulties.</p> <p>Interested in peers, wants to have friends but needs help with this.</p> <p>Occasional mild anxiety. Can be “talked through” problems.</p> <p>Able to use “within class” calming strategies.</p> <p>Behaviour does not affect learning.</p> <p>Is not aggressive, disruptive or passive.</p>	<p>All teachers are teachers of children with special educational needs (COP 5:2)</p> <p>Whole school awareness and understanding of autism and its implications for the social and academic curriculum.</p> <p>Students on the autism spectrum will access strategies and resources typically available in the ordinary classroom e.g. time taken by teacher to explain change in routine, Circle of Friends, Buddy System.</p> <p>Tasks may need to be differentiated by level/ outcome/pitch/pace and grouping. Aspects of structured teaching may be helpful.</p> <p>Staff are skilled at selecting appropriate methods and materials into their lesson plans to ensure access across the curriculum for students.</p> <p>Staff are skilled in adjusting the pace and order of activities to maintain interest and attention.</p> <p>Does not require regular additional adult support.</p> <p>May benefit from focused/small group teaching support at some points during the week.</p>	<p>Simple changes to the classroom environment (including an awareness of sensory issues) to support individuals.</p> <p>School implements/ reviews its accessibility plan regularly to update the details relating to building access, communication and training needs and information.</p> <p>Staff consider appropriate student groupings, seating arrangements and surroundings.</p>	<p>Parent/carer involved in line with school’s policy and arrangements for students with additional needs.</p> <p>General whole school training, advice and support from external professionals.</p> <p>Referral to SENDIASS (as required).</p>	<p>Students have regular opportunities to evaluate their performance in learning activities.</p> <p>Students’ self-assessment routinely used to set individual learning targets.</p> <p>Full inclusion in all school assessments and tasks.</p>

## Criteria for Placing a Student at SEN Support – Cycle 1

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A student on the autism spectrum who requires SEN support will exhibit one or more of the following characteristics:

- Mainly working within the same level as peers. Occasional difficulty in learning in whole class teaching group. Needs regular support to work on same tasks as peers.
- Apparently good expressive language but often misinterprets instructions.
- Interested in peers. Attempts to interact but frequently “gets it wrong”. Peers usually make allowances.
- Some distress when routines change, avoided if properly prepared. May exhibit other routines/rituals that may need managing/advice. Behaviour does not usually disrupt learning of self and/or others.
- Interventions which are additional to/different from the normal differentiated curriculum.
- Autism has a mild impact on the student’s ability to function independently in the school environment and in their everyday life.

### General Indicator (which must be present)

- The student displays characteristics of the triad of impairments affecting his/her social relationships, social communication and imaginative thought, impede his/her effective learning and results in his/her general level of functioning being significantly below that of his/her peers.

### Specific Indicators (which must be present)

- Differentiated provision for the student’s education over time has not resulted in progress towards achieving learning and/or behavioural or social targets set.
- Assessments over time indicate that a more individualised and differentiated educational or social programme is necessary.

### And at least one of the following:

- Evidence of the student’s difficulties in following instructions, classroom routines and maintaining attention on task.
- Evidence of the student’s reluctance to engage in classroom activities as directed because of his/her inflexibility of thinking and behaviour.
- Evidence of the students’ reliance on teacher support and careful structuring of activities in order to engage successfully in group work and/or social interaction.
- Evidence of a tendency to display rigidity of thinking and behaviour, likely to result in the disruption of classroom activities or the student’s functioning and/or access to the curriculum.
- Evidence of variable progress across the curriculum, limited in some areas by difficulties in particular aspects of learning such as writing, language or practical activities.
- Evidence of significant problems in social interaction and relationships.

### Additional Indicators (which may be present)

- Evidence of difficult-to-manage behaviour linked to difficulties with learning, development, social interaction or inflexible patterns of thinking and behaviour.
- Evidence of impaired communication skills (expressive and/or receptive).
- The student’s level of anxiety is such that access to one or more subjects is affected.
- Evidence of substantial levels of anxiety in other settings (e.g. home).
- Transfer of information about the student from previous provision.

## SEN Support Cycle 1 - The Autism Spectrum

### Level and description of difficulty

The student has difficulty with communication, interaction and imagination which impede his or her access to learning and the curriculum. These difficulties persist despite differentiated learning opportunities by the school. The incidence of autism spectrum seems to be increasing and schools can expect to have one or more student on the autism spectrum at some time.

The difficulties may include inability to interpret social cues, poor social timing, lack of social empathy, rejection of normal body contact or unawareness of other people's personal space, inappropriate eye contact, lack of social conversation skills, literal use and interpretation of speech, rigidity and inflexibility of thought processes, resistance to change, solitary play and unusually focussed special interests.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Student's strengths and weaknesses in social communication/ interaction and flexible thinking are observed and recorded in a variety of contexts throughout the school day.</p> <p>Assessment will be informed by teacher observation, information/advice from other agencies and the views of the young person/parents.</p> <p>Assessment may sit within provision map planning.</p> <p>Individual SMART targets set, will consider social communication, interaction, flexible thinking and independence (some may be shared with other students where there are similar presenting problems in the same class). Specific targets are additional to whole class curriculum planning.</p>	<p>Individual or small group support (either in class or as part of a withdrawal) available for at least 5 hours per week.</p> <p>Grouping arrangements or additional support in the classroom are used flexibly to promote social interaction, language use/ understanding and use of imagination.</p> <p>There should be consistency within the classroom in terms of organisation, structure, routines, space and place, with identified areas and pathways.</p> <p>Visual supports for tasks and/or personal organisation will be needed. This support may also be used to manage change e.g. visual timetables.</p> <p>Peer support systems may be established and developed (in particular to support unstructured times).</p>	<p>The structured promotion of social interaction/ communication, flexible thinking and independence should be integral within the content and delivery of the curriculum.</p> <p>An approach that incorporates routines, structured tasks, immediate reward systems.</p> <p>Provision map targets will be addressed through small group and class work across the curriculum. Support would consider:</p> <ul style="list-style-type: none"> <li>■ Use/ understanding of language</li> <li>■ Acquisition of core skills for literacy/ numeracy</li> <li>■ Use of (low level) alternative means of communication</li> <li>■ Social use of language support personal organisation, timetabling and developing independence</li> </ul>	<p>Provision for up to 20 hours per week.</p> <p>School to consider The AET National Autism Standards for Schools and Educational Settings.</p> <p>The SENCO/ Head of Year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the student.</p> <p>The SENCO will support and advise teachers.</p> <p>Whole school information/ training as appropriate (e.g. IDP). Staff should feel confident in their ability to prepare resources and implement a range of autism friendly approaches e.g. access to a quiet area and calming activities, social skills programmes and a range of visual approaches etc.</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Targets can be included on the school's provision map and class/subject teachers will implement targets in lessons.</p> <p>Targets will be reviewed termly.</p> <p>The provision map will specify; teaching arrangements; resources; strategies that reflect the student's preferred learning style and success criteria.</p> <p>Parents and students will be involved in target setting and review.</p> <p>Students should have an understanding of the targets they are working to achieve.</p> <p>Systematic monitoring of progress to consider the impact of interventions used and will focus both on progress and the setting of new targets.</p> <p>The SENCo, Head of Year or class teacher will facilitate assessment, planning, implementation and monitoring.</p>	<p>Students may need access to a range of individualised approaches. This might include; a workstation; equipment for augmentative and alternative communication (AAC). Consideration would need to be given to levels of support required to introduce/embed these approaches.</p> <p>Environmental audit completed using IDP materials and Access Strategy/Survey and shared with staff</p> <p>Reasonable adaptations agreed and made as necessary. This might include controlled lighting, good listening conditions, seating arrangements etc.</p>	<p>Teacher explanation should be explicit and consistent. Schools should consider the function of a student's behaviour (e.g. non-compliance as a difficulty with inflexible thinking).</p> <p>Vocabulary, inference, active listening and active response to general instruction may need to be specifically taught.</p> <p>Staff monitor and support students during unstructured times of the day.</p> <p>Life skills may be taught in Key Stage 4.</p>	<p>A wide range of written or drawn visual supports for tasks and/or personal organisation. Such supports may also be used to manage change.</p> <p>A wide range of objects, visual supports and vocabulary lists to support and maximise student's potential for learning.</p> <p>Withdrawal facilities should be provided for times of stress.</p> <p>Use of a home-school diary to aid communication.</p> <p>Staff are able to monitor and assess for access to special exam arrangements.</p>

## Criteria for Placing a Student at SEN Support – Further cycles of APDR

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The Student will demonstrate some of the following:

- Will typically have an autism spectrum diagnosis.
- Difficulties with social interaction and social communication and social understanding affect behaviour in all contexts. At home and at school, student may be socially vulnerable or withdrawn or prone to aggressive outbursts.
- Student can exhibit highly atypical behaviour such as obsessive, challenging and/or withdrawn behaviours, an inappropriate use of language, abnormal responses to sensory experiences and signs of distress requiring significant adjustments.
- May have issues relating to health and personal care issues.
- Multi-agency advice required.
- Significant communication difficulties inhibit regular participation, understanding and contribution to activities in classroom/setting.
- Evidence of rigid thought, making the student inflexible and unlikely to cope with change, resulting in significant signs of stresses and anxiety.

### General Indicator (which must be present)

- The student's impaired social development, rigidity of behaviour and thought and communication significantly impede his/her learning and leading to a level of function markedly below that of his/her peers.

### Specific Indicators (which must be present)

- Differentiated classroom provision for the student's education has not resulted in the expected progress towards achieving learning and/or behavioural or social targets set.
- Assessments over time provide evidence that the student's social, emotional and/or mental health difficulties are becoming a more significant obstacle to his/her effective learning.
- Assessments over time together with discussion during reviews, indicate that external advice and/or support is necessary to develop a more highly individualised and differentiated educational programme.

And at least one of the following:

- Evidence of the student's continuing difficulties in developing expressive and receptive communication skills. Evidence of the student's continuing difficulties in his/her understanding of specific social situations and social rules and very substantial difficulties establishing and sustaining social relationships.
- Evidence of the student's continuing lack of effective systems and strategies to enable his/her anticipation of future events, facilitate his/her transitions between activities and manage his/her anxiety levels.
- Evidence of the student's consistently challenging behaviour persisting, despite the implementation of an individual behaviour management programme.

### Additional Indicators (which may be present)

- Evidence that the student experiences high levels of stress or anxiety.

### Professional Judgement

A consensus of those who teach the student, in partnership with his/her parents and the student in question, that the gap in levels of social understanding and functioning is widening between the student and his/her peers.

## SEN Support APDR Cycle 2\*\* and beyond The Autism Spectrum

### Level and description of difficulty

Despite carefully planned and executed interventions at SEN Support, the student continues to have difficulties with communication, interaction and imagination which impede his or her access to the curriculum. The difficulties relating to autism are evident and severe: impaired language development, rigidity and inflexibility of thought and behaviour, difficulties with social interaction and communication, sensory issues.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Detailed analysis of the student's strengths and weaknesses in social communication/ interaction, flexible thinking/behaviour, environmental intolerance and basic skills levels.</p> <p>IEPs to be set following consultation with external professionals, such as the Autism Team, Educational Psychologists, Health Professionals.</p> <p>IEPs will include: positively phrased SMART targets, which reflect the student's priority needs and will specify teaching arrangements and resources required with clearly defined success criteria. They will include strategies that reflect the student's preferred learning styles.</p> <p>Student progress will be subject to systematic monitoring and specifically their response to interventions outlined in the IEP.</p>	<p>Grouping arrangement or additional support in the classroom used flexibly to promote social interaction, language use and understanding.</p> <p>Consistency within the classroom in terms of organisation, structure, routines, space and place with identified areas and routes.</p> <p>Classroom supports may include: the use of visual timetable, prompt and/or instruction sheets, visually identified expectations and teaching outcomes, frequent visual supports for teaching. Teachers will be expected to use several or all of these strategies.</p> <p>Considerable opportunities for individual or small group work within the classroom or on a withdrawal basis to address specific needs identified in the student's IEP.</p>	<p>Daily meet and greet with known member of staff.</p> <p>An appropriate level of differentiation across the curriculum to reflect individual needs. The student may require some individualised curriculum content, within the context of an inclusive curriculum to address some specific needs.</p> <p>Additional access to ICT may be necessary to support access to curriculum.</p> <p>Modelling and support for tasks.</p> <p>Pre and post teaching (as required).</p> <p>Visual timetable available and consistently implemented to support curriculum access/ engagement.</p> <p>Approaches such as TEACCH may inform the curriculum and teaching methods. There will be the use of rule based learning, immediate feedback and structured reward systems.</p>	<p>Up to 20 hours TA or teacher support provided under the guidance of the SENCO, Head of Year or class teacher.</p> <p>An individual in school trained/ experienced in supporting students on the autistic spectrum. This individual will be in a position to advise class/subject teachers and meet with parents/ carers. School would consider The AET Professional Competency Framework.</p> <p>Staff trained and able to implement strategies and support students with Autism (e.g. IDP materials). Key staff/TAs may access additional training.</p> <p>Regular advice and input from external agencies such as the Autism Team, Educational Psychologists and Support Guidance and Skills.</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Specific targets relevant to particular curriculum areas will be set and these are agreed with the appropriate staff members.</p> <p>IEPs will be reviewed termly.</p> <p>Parents and students will be involved in target setting and review and students should have an understanding of the targets they are working to achieve.</p> <p>There should be an on-going cycle of identification, assessment, planning, implementation, monitoring and review.</p> <p>Assessments will focus on the reasons for any slow progress, how the student is learning, more in-depth analysis of strengths/weaknesses, progress in relation to time, peers starting from similar level and to age expectations.</p> <p>Regular home-school liaison.</p> <p>Clear systems to ensure effective communication between Pastoral Staff and Learning Support staff.</p>	<p>Environmental audit completed using IDP materials and Access Strategy/ Survey shared with staff and reasonable adaptations agreed and made as necessary.</p> <p>Access to individual work station/ ICT resources.</p> <p>Peer support structures to provide opportunities for the development of social interaction and communication skills e.g. Circles of Friends, Peer Mentoring or buddying approaches.</p> <p>School awareness that students on the autism spectrum remain vulnerable to bullying and provide support/monitoring in place.</p> <p>Access to LSU (or similar facility) for considerable parts of the day (as required).</p> <p>Specially equipped areas available to enable individual and small group teaching and/ therapeutic programmes.</p>	<p>Stress producing factors to be addressed (e.g. sensory or social overload). This might include lesson breaks.</p> <p>Strategies/support and targeted intervention to:</p> <ul style="list-style-type: none"> <li>■ Peer awareness and sensitivity for students with ASD. This would input from external professionals.</li> <li>■ Support movement around school e.g. from one school/teacher to another. This may include: passports, a familiarisation book of photos of the new environment, a file of coping strategies/ equipment and social stories etc.</li> <li>■ promote social thinking, social success/appropriate behaviour (e.g. Social Stories, Circles of Friends, Intensive Interaction). This might link with the teaching of life skills and preparation for employment in Key Stage 4.</li> <li>■ address speech and communication needs. This would include social use and understanding of language and support from AAC (as/ if required).</li> </ul>	<p>Classroom supports may include the use of visual timetable, prompt and/ or instruction sheets visually identified expectations and teaching outcomes, frequent visual supports for teaching and also signalling and signing. Teachers will be expected to use several or all of these strategies.</p> <p>Staff skilled and able to manage and implement changes and adaptations to the learning environment.</p> <p>Withdrawal facilities should available for times of stress. Students may require individual support/ debrief following incidents.</p> <p>On-going multi-agency support and intervention may be required due to the overlap of educational/ care and health needs.</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Other factors in the child’s family or environment may also need to be considered as part of the assessment process.</p> <p>Risk assessments as required.</p>		<ul style="list-style-type: none"> <li>■ teach vocabulary and inference, active listening within the curriculum, and for social situations. Curricular language will benefit from “scaffolding” approaches.</li> </ul> <p>Peer support may be used both in and out of the classroom.</p> <p>Considerable preparation for students in readiness for changes in routine.</p> <p>Mentoring from a skilled adult.</p> <p>Opportunities for enhanced pastoral and break/ lunchtime support to social interaction.</p> <p>Home school diary with visual prompts.</p>	



## Speech, Language and Communication Needs (SLCN)

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Children and young people with speech, language and communication needs (SLCN) have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives (CoP 6.28)

Speech, language and communication skills underpin all learning development and children and young people with SLCN may present with social, emotional and mental health needs. They will need substantial support to ensure that they are provided with appropriate access to the curriculum and participation in school life.

### Speech refers to:

- sounds used accurately to build up words
- processing speech sounds
- speaking fluently (without too many hesitations or repetitions of words or sounds)

### Language refers to:

- speaking (expressive language), using words to convey meaning
- understanding (receptive language), processing and making sense of what people say

### Communication refers to:

- the way in which people use language to interact – speaking and listening
- using language for different purposes and situations, for example to question, to clarify, to describe, to debate
- non-verbal communication, for example eye contact, turn-taking, gestures and body language

The range of needs will encompass children and young people with speech and language delay, impairments or disorders. They may also apply to some children and young people with learning difficulties. The range will include those for whom language and communication difficulties are the result of a sensory or physical impairment. English as an Additional Language (EAL) is not considered to be a special educational need. However, some children with EAL may have additional needs which will require additional support or intervention.

For more information, refer to the Worcestershire SLCN Pathway [www.hacw.nhs.uk/slcn-pathway](http://www.hacw.nhs.uk/slcn-pathway)

### Normal school entitlement - SLCN

Many students with speech language and communication needs will be able to participate in most aspects of an ordinary classroom and make progress within the curriculum but will benefit from support through effective QFT/ waves of intervention (with reference to the Worcestershire SLCN Pathway and the section titled Universal Provision specifically).

Description of student	Intervention and Support	Learning Environment	Partnership with parents, carers and other agencies	Monitoring, Assessment and Review
<p>An awareness of a speech and language difficulty i.e. the student seems to have some difficulty speaking or with communication.</p> <p>Speech is understood by others but with some immaturities, which at times interferes with the acquisition of literacy and/or creates mild social difficulties.</p> <p>The teacher has evidence that the student's language is delayed and/ or vocabulary and comprehension are poor.</p> <p>Differentiation and/or a management strategy are likely to help access the curriculum.</p> <p>Needs some encouragement to take responsibility for own learning and to collaborate with peers in curriculum activities.</p> <p>Needs some support to listen and respond to longer explanations, stories, sequences of information in a whole class situation.</p> <p>Comments and questions often indicate an initial difficulty in understanding the main points of discussions, explanations, information given, in a whole class situation.</p> <p>Sometimes develops and explains own ideas clearly, but may need support to contribute successfully to discussion about imaginary / factual activities and/ or to use vocabulary precisely and effectively.</p>	<p>All teachers are teachers of children with special educational needs (COP 5:2)</p> <p>Students with SLCN will access strategies and resources typically available in the classroom.</p> <p>Some differentiation of speaking, understanding, listening tasks to allow access to the curriculum.</p> <p>Literacy tasks may require some modification.</p> <p>Staff are skilled at selecting appropriate methods and materials into their lesson plans to ensure access across the curriculum for students.</p> <p>Staff skilled in adjusting pace and order of activities in order to maintain interest and attention.</p> <p>Does not require regular additional adult support.</p> <p>May benefit from focused/small group teaching support at some points during the week.</p>	<p>Simple changes in the ordinary classroom setting to support individual differentiation.</p> <p>The school implements and reviews its Accessibility Plan regularly to update the details relating to building access, communication and training needs information.</p> <p>Staff consider appropriate student grouping, seating arrangements and surroundings.</p>	<p>Parent/carer involved in line with school's policy and arrangements for students with additional needs</p> <p>General whole school training, advice and support from external professionals (e.g. educational psychologists, specialist learning support teacher (Learning), speech and language therapist).</p> <p>Referral to SENDIASS Services (as required).</p>	<p>Students have regular opportunities to evaluate their performance in learning activities.</p> <p>Student self-assessment routinely used to set individual learning targets.</p> <p>Full inclusion in all school assessments and tasks.</p>

## Criteria for Placing a SEN Support Cycle 1

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### General Indicator (which must be present)

- Impaired utterance of speech sounds, and at a level where most of the student's speech is intelligible when the context is known.
- Expressive language ability restricted in grammar, word order and/or vocabulary as to reduce the student's ability to communicate thoughts or information effectively at a level expected of his/her age.
- Comprehension of spoken language so restricted that the child / young person frequently fails to understand requests, instructions and explanations easily understood by the great majority of his/her peer group.
- Difficulties in using language for learning and/or social interaction, although other areas of expressive language appear to be age-appropriate. The student's responses to verbal and non-verbal communication are often inappropriate.

### Specific Indicators (which must be present)

- Differentiated classroom provision for the student's education over time has not resulted in progress towards achieving learning targets set to improve his/her speech language and/or communication skills.
- Evidence that the student's speech, language and/or communication needs are not solely attributable to a sensory (including hearing) impairment.
- Assessments over time indicate that a more individualised and differentiated programme is necessary.

### Additional indicators which may be present:

- Evidence of the student's underachievement in a number of curriculum areas and not in line with general ability.
- Evidence of a student's difficulty to manage behaviour in a variety of learning and/or social settings within the school.
- Evidence that the student's speech, language and/or communication needs have given rise to significant associated social, emotional, or mental health difficulties.
- Transfer of information about the student from previous provision.

## Speech, Language and Communication Cycle 1

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### Level and description of difficulty

For a range of tools to assist schools in recognising and identifying SLCN, refer to the Worcestershire SLCN Pathway (Identification of SLCN section) [www.hacw.nhs.uk/slcw-pathway/](http://www.hacw.nhs.uk/slcw-pathway/)

Demonstrate some delay/difficulties in verbal comprehension and/or spoken language and/or social use and understanding of language.

May have specific difficulties with language, which limit access to learning and the curriculum.

May have poorly developed receptive and expressive language skills that do not follow a typical pattern of development or may have speech, language and communication needs that are in line with the rest of their development.

Social interaction may be limited and there may be some difficulty in making and maintaining friendships.

May have motor/coordination difficulties.

May display signs of lack of engagement in class.

Needs regular encouragement to take responsibility for own learning and to collaborate with peers in curriculum activities.

Needs regular support to listen and respond to longer explanations, stories, sequences of information in whole class situation.

Needs regular additional explanation in a group to help understanding of whole class instructions and information across the curriculum.

Needs regular support to include sufficient relevant detail to make a successful contribution to discussion.

Speech is usually understood by others but may have some immaturities and occasional difficulties with multisyllabic words that may interfere with acquisition of literacy and/or create moderate learning difficulties.

Needs regular support to use vocabulary precisely and effectively may take cues from the actions of others.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Student's strengths and weaknesses in expressive and receptive language are observed and recorded. This may include reference to the student's understanding and use of vocabulary, grammatical structure, conversational skills and speed of language processing.</p> <p>Assessment informed by teacher observation, information/advice from other agencies and the views of the young person/parents/carers. A SLT may be involved. Assessment may sit within Provision Map planning.</p>	<p>Complete Communication Friendly Environment Audit using the SLCN Pathway and make adaptations as required.</p> <p>Individual or small group support available for up to 5 hours per week either in class or as part of withdrawal activity.</p> <p>Grouping arrangements should provide opportunities for peer support; the development of social understanding and inference and structured opportunities for conversation and sharing of ideas.</p> <p>Consideration to seating arrangements to ensure role models for speaking/listening, minimise distractions; ensure uninterrupted view of the teacher</p>	<p>Teaching methods may include the use of visual aids, signalling and signing to support understanding in lessons.</p> <p>Strategies taken from the Worcestershire SLCN Pathway/ SLCN IDP.</p> <p>Class teacher plans/ delivers differentiated classroom activities based on speaking and listening.</p> <p>Provision map/ targets addressed through small group and class work within the curriculum framework. This might include specific teaching on:</p> <ul style="list-style-type: none"> <li>■ vocabulary;</li> <li>■ comprehension and inference;</li> <li>■ use of language, sentence structures;</li> <li>■ the speech sound system;</li> <li>■ sequencing;</li> <li>■ active listening skills.</li> </ul>	

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Individual SMART targets set, will consider SLC needs (some may be shared with other students where there are similar presenting problems in the same class). Specific targets are additional to whole class curriculum planning.</p> <p>Targets can be included on the school's provision map and class/ subject teachers will implement targets in lessons.</p> <p>Targets are reviewed termly.</p> <p>The provision map will specify teaching arrangements; resources; strategies that reflect the student's preferred learning style and success criteria.</p> <p>Parents and students will be involved in target setting and review. Students should have an understanding of the targets they are working to achieve.</p> <p>Systematic monitoring of progress to consider the impact of interventions will be used and will focus both on progress and the setting of new targets.</p>	<p>Verbal instructions, explanations will require simplification and visual or concrete support.</p>	<p>Teacher explanation should be consistent, use repetition and be delivered with a mild tone and manner. Use of prompt and "scaffold" for tasks to promote independent working may be required.</p> <p>Opportunities to facilitate peer awareness and support (this might be as part of Circle Time).</p> <p>A Speech and Language.</p> <p>Therapist referral considered (if not already made).</p>	<p>Provision for up 5 hours per week.</p> <p>Access to a keyworker to act as a stable reference point.</p> <p>The SENCO/ Head of Year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the student.</p> <p>The SENCO will support and advise teachers.</p> <p>Staff skilled/ experienced in supporting students with SLCN. This would include training on the Worcestershire SLCN Pathway/ IDP materials.</p> <p>A wide range of concrete objects of reference and visual supports maximise student's potential for learning.</p> <p>Use of a home-school diary to support communication.</p> <p>Staff are able to monitor and assess for access to special exam arrangements.</p> <p>Referral to SENDIASS Service (as required).</p>

## Criteria for Placing a SEN Support - Further cycles of APDR

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### General Indicator (at least one of which must be present)

- Impaired utterance of speech sounds and at such a level that most of the student's speech is unintelligible even when the context is known.
- Expressive language ability so restricted in grammar, word order and/or vocabulary as to significantly reduce the student's ability to communicate thoughts or information effectively at a level expected for his/ her age.
- Comprehension of spoken language so restricted that the student consistently fails to understand requests, instructions and explanations easily understood by the majority of other students of his/ her age.
- Difficulties impact on access to curriculum without school-based support.
- Major difficulties in using language for learning and/or social interaction, although other areas of expressive language appear to be age appropriate. The student's responses to verbal and no- verbal communication are habitually inappropriate.
- There is a significant speech, language and/or communication difficulty that prevents access to a large part of the National Curriculum. Provision maps for both education and speech and language development are being used and programmes of work by outside agencies are being followed.

### Specific Indicators (which must be present)

- Differentiated classroom provision for the student's education has not resulted in the expected progress towards achieving learning and/or behavioural targets set.
- Assessments over time, together with discussion during reviews, indicate that external advice and/or support is necessary to devise a more highly individualised and differentiated educational programme.

### Additional Indicators (which may be present)

- Evidence that the student's speech and language difficulties have contributed to associated social, emotional and mental health difficulties.

## SEN Support APDR Cycle 2\*\* and beyond

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Continuing difficulties with receptive and expressive language skills, despite carefully planned and executed interventions and at a level which impairs access to the curriculum.

Demonstrates a marked difference between their understanding and use of language and cognitive, social and adaptive skills. Difficulties may interfere (specifically) with the acquisition of literacy.

May clearly demonstrate frustration or stress, possibly have motor difficulties.

May have a diagnosis of Specific Language Impairment (SLI).

Needs consistent encouragement to take responsibility for own learning.

Often needs individual/small group support to listen to instructions and to listen and respond to longer explanations, stories and sequences of information. Occasionally able to talk about ideas beyond direct experience using familiar vocabulary, when prompted. Speech can usually be understood by familiar people but causes difficulty to unfamiliar people. May have difficulties with social interaction.

There may be signs of lack of engagement in class.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Detailed analysis of the student's strengths and weaknesses in receptive and expressive language. A SLT will be the key professional involved in this.</p> <p>IEPs will be set in consultation with external agencies including a SLT, Educational Psychologist, Learning Support Teacher (as appropriate).</p> <p>IEPs will include positively phrased SMART targets which reflect the student's priority needs and will specify teaching arrangements and resources required with clearly defined success criteria. They will include strategies that reflect the student's preferred learning styles.</p> <p>Student progress will be subject to systematic monitoring and specifically their response to interventions outlined in the IEP.</p> <p>Specific targets are relevant to particular curriculum areas and these are agreed with the appropriate staff members.</p> <p>IEPs will be reviewed termly.</p>	<p>Mainstream class or set with access to individual and small group teaching within the classroom and/or periods of withdrawal.</p> <p>Grouping arrangements or additional support in the classroom used flexibly to promote language use and understanding.</p> <p>Specific environmental adaptations i.e. well defined and labelled using writing and drawings etc.</p> <p>A range of classroom supports that may include:</p> <ul style="list-style-type: none"> <li>the use of visual timetable, rompt and/or instruction sheets;</li> <li>visually identified expectations and teaching outcomes;</li> <li>frequent visual supports for teaching including signalling and signing.</li> </ul> <p>Teachers will be expected to use several or all of these strategies.</p> <p>Peer support both in class and in break times to facilitate social interaction. These will change according to the activity to provide a variety of social and learning experiences.</p>	<p>Opportunities for targeted individual or small group intervention either within the class or withdrawal. The advice of the SLT will be followed and will inform teaching and learning tasks. This may include direct involvement from a SLT.</p> <p>Differentiation to reflect individual needs in relation to the curriculum, speaking and listening and social and emotional development.</p> <p>Access to the curriculum supported by specific approaches which may have been suggested by outside agencies.</p> <p>Classroom support and teaching methods include a variety of visual materials to aid comprehension, support speaking and the use of language and facilitate personal/ task organisation.</p>	<p>Provision of additional adult support up to 20 hours per week.</p> <p>TAs skilled/experienced in supporting students with SLCN who may be department or child / young person focussed both in class and as part of individual/ small group withdrawal.</p> <p>Staff trained and able to implement strategies and support students with SLCN (e.g. Worcestershire SLCN Pathway, IDP materials). Key staff/TAs may access additional training.</p> <p>Input/involvement from SLT, Educational Psychologist and/ or specialist teacher (Learning) to inform intervention programmes and/or provide specific advice about environmental adaptations.</p> <p>Consideration should be given to the use of additional ICT, audio-visual support.</p> <p>Referral to SENDIASS Service (as required).</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Parents and students will be involved in target setting and review and students should have an understanding of the targets they are working to achieve.</p> <p>There should be an on-going cycle of identification, assessment, planning, implementation, monitoring and review.</p> <p>Regular home-school liaison.</p> <p>Other factors in a child's family or environment may also need to be considered as part of the assessment process.</p> <p>Risk assessments as required.</p>	<p>School awareness that students with SLCN remain vulnerable to bullying and provide an appropriate level of support/monitoring.</p> <p>Access to LSU (or similar facility) to support learning and deliver interventions (as required) and to provide social support during unstructured times.</p>	<p>Targeted interventions may address:</p> <ul style="list-style-type: none"> <li>■ specific SLCN (e.g. vocabulary comprehension and inference, use of language, sentence structures, the speech sound system, sequencing and active listening skills) and in line with advice from SLT and/or a learning support teacher</li> <li>■ social communication skills</li> <li>■ motor co-ordination difficulties</li> <li>■ organisational strategies</li> <li>■ curricular skills</li> </ul> <p>Programme generalisation supported within the classroom. This may include opportunities for pre and post teaching.</p> <p>Teacher explanation should be consistent and use repetition. Students will benefit from pre-teaching so that decoding of language does not get in the way of learning.</p> <p>Planned use of equipment to support learning (e.g. ICT, audio-visual equipment as required).</p> <p>Opportunities to facilitate peer awareness and support.</p>	



## Cognition and Learning

Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation. Learning difficulties cover a wide range of needs, including moderate learning difficulties (MLD), severe learning difficulties (SLD), where children are likely to need support in all areas of the curriculum and associated difficulties with mobility and communication, through to profound and multiple learning difficulties (PMLD), where children are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment. Specific learning difficulties (SpLD), affect one or more specific aspects of learning. This encompasses a range of conditions such as dyslexia, dyscalculia and dyspraxia.

### Moderate Learning Difficulties (MLD)

The majority of students with learning difficulties will be identified early in their school careers. In most cases, they will have difficulty acquiring basic numeracy and literacy skills and may have commensurate speech and language difficulties. They may well find it hard to deal with abstract ideas and to generalise from experience. Some may also have poor social skills and may show signs of social, emotional and mental health difficulties.

Students subject to curriculum enhancement through targeted initiatives such as Early Literacy Support, Additional Literacy Support or Catch-Up should not be categorised as having general learning difficulties, unless there is evidence of indicators as outlined below in their profiles of attainment.

- Resources needing to be deployed which are additional to or different from those normally available to students in the school, through a differentiated curriculum.
- Consistently evident problems with memory and reasoning skills.
- Consistently evident problems with processing, organising and co-ordinating spoken and written language to aid cognition
- Consistently evident problems with sequencing and organising the steps needed to complete tasks
- Consistently evident problems with problem solving and developing concepts
- Consistently evident problems with fine and gross motor co-ordination, which significantly limit access to the curriculum
- Consistently evident problems with abstract thinking, understanding ideas, concepts and experiences (when information cannot be gained through first hand sensory or physical experiences).

### Specific Learning Difficulty (SpLD)

Specific Learning Difficulty is the overall term used to describe a developmental condition that causes problems when using words (dyslexia) and problems using symbols (dyscalculia) and some other developmental problems (e.g. dyspraxia).

Dyslexia is the most common type of specific learning difficulty that students are likely to experience with about 10% of the population having some form of dyslexia. "Dyslexia is present when fluent and accurate word identification (reading) and/or spelling do not develop or do so very incompletely or with great difficulty. This focuses on literacy learning at the 'word level' and implies that the problem is severe and persistent despite appropriate learning opportunities. It provides the basis of a staged assessment through teaching." (British Psychological Society, 2000: Dyslexia, Literacy and Psychological Assessment.)

Short-term memory, mathematics, concentration, personal organisation and speaking may be affected. Dyslexia is biological in origin and tends to run in families, but environmental factors may also contribute to it. Its cause has not been fully confirmed but the effect is to create neurological anomalies in the brain.

The effects of dyslexia can largely be compensated for specialist support and the use of compensatory

strategies.

Students with dyslexia have to work hard to overcome their difficulties and consequently tire more quickly than other students. This needs to be taken into account in the pace of lessons and in differentiating tasks.

Students with specific learning difficulties fail to acquire levels of skills in some subjects commensurate with their performance in others, despite good attendance and health, satisfactory attitudes to learning and sound teaching. They may find difficulties particularly frustrating. Low self-esteem, poor concentration and behavioural difficulties can arise as a consequence.

Other aspects of the development of these students may be in line with the majority of children their age. It is however, possible for dyslexia to be present alongside other learning disorders creating different and inter-related complexities of special need.

### **Normal school entitlement – Moderate Learning Difficulties (MLD)**

Many students with general learning difficulties will be able to participate in most aspects of an ordinary classroom and make progress within the curriculum but may need some support through effective QFT and waves of intervention.

Description of student	Intervention and Support	Learning Environment	Partnership with parents, carers and other agencies	Monitoring, Assessment and Review
<p>Levels of attainment that are generally lower than those of their age equivalent peers.</p> <p>Some difficulty in acquiring skills, notably in language, literacy, numeracy skills (or early developmental skills).</p> <p>May be slower to use, retain and apply everyday concepts than age equivalent peers.</p> <p>May have mild levels of sensory impairment or fine motor skills.</p> <p>May need time allowed for mobility issues.</p> <p>May have difficulties related to behaviour, social or emotional issues and need some help with these.</p>	<p>All teachers are teachers of children with special educational needs (COP 5:2).</p> <p>Differentiation to ensure the development of literacy, numeracy, expressive language, communication skills, minimise behaviour and emotional difficulties and promote appropriate interpersonal skills with other students.</p> <p>Staff are skilled at selecting appropriate methods and materials into their lessons plans to ensure access across the curriculum for students with individual needs.</p> <p>Staff are skilled at adjusting the pace and order of activities to maintain interest and attention.</p> <p>Staff are aware of implications of mild sensory impairment, fine motor skill development and medical issues.</p> <p>Does not require regular additional adult support.</p> <p>May benefit from focused/ small group teaching support at some points during the week.</p> <p>Includes Wave 1 provision or QFT (National primary Strategy).</p>	<p>Simple changes to the classroom environment to support individual differentiation.</p> <p>School reviews its Accessibility Plan regularly to update the details relating to building access, communication and training needs and information.</p> <p>Staff consider appropriate student groupings, seating arrangements and surroundings.</p>	<p>Parent/carer involved in line with school's policy and arrangements for students with additional needs.</p> <p>General whole school training, advice and support from external professionals.</p> <p>Referral to SENDIASS Services (as required).</p>	<p>Students have regular opportunities to evaluate their performance in learning activities.</p> <p>Student self-assessment routinely used to set individual learning targets.</p> <p>Full inclusion in all school assessments.</p>

**Normal school entitlement – Specific Learning Difficulties (SpLD)**

Many students with specific learning difficulties will be able to participate in most aspects of an ordinary classroom and make progress within the curriculum but may need some support through effective QFT and waves of intervention (with reference to the Worcestershire Dyslexia Pathway).

Description of student	Intervention and Support	Learning Environment	Partnership with parents, carers and other agencies	Monitoring, Assessment and Review
<p>Average or above levels of reasoning/ability with some discrepancies between attainments in different core subjects or within one core subject of the NC.</p> <p>Some early difficulties with reading and spelling.</p> <p>Handwriting skills may be poorly developed and finds recording difficult.</p> <p>May have mild levels of sensory impairment (e.g. vision and or perceptual needs) / or fine motor skills,</p> <p>May have difficulties related to behaviour, social or emotional issues and require some help with these.</p>	<p>All teachers are teachers of children with special educational needs (COP 5:2)</p> <p>Differentiation to ensure the development of literacy, numeracy skills.</p> <p>Staff select appropriate methods and materials to ensure access across the curriculum for students with individual needs.</p> <p>Staff are skilled at adjusting the pace and order of activities to maintain interest and attention.</p> <p>Student does not require regular additional adult support.</p> <p>Student may benefit from focused/small group teaching support at some points during the week.</p> <p>Includes Wave provision or QFT (National Primary Strategy).</p>	<p>Simple changes to the ordinary classroom setting to support individual differentiation.</p> <p>The school reviews its Accessibility Plan regularly to update the details relating to building access, communication and training needs and information.</p> <p>Staff consider appropriate student groupings, seating arrangements and surroundings.</p>	<p>Parent/carer involved in line with school's policy and arrangements for students with additional needs.</p> <p>General whole school training, advice and support from external professionals.</p> <p>Referral to SENDIASS Services (as required).</p>	<p>Students have regular opportunities to evaluate their performance in learning activities.</p> <p>Students' self-assessment routinely used to set individual learning targets.</p> <p>Full inclusion in all school assessments and tasks.</p>

## Criteria for Placing a Student at SEN Support – Cycle 1

The success of any additional arrangements for a student with special educational needs will be measured through normal school monitoring and assessment arrangements, IEP/ IPM reviews. These outcomes may include some or all of the following:

- Student's needs and learning style addressed.
- Student is making some academic progress or may have progressed at nationally expected levels linked to prior attainment.
- Student is beginning to or maintaining their understanding of their specific difficulties and how to improve or manage them.
- Student is working towards more independence and access to the curriculum.
- Student is confident/has good self-esteem.
- Student has friends and is involved in extra school activities.
- Student is encouraged to contribute in class.
- Accessible school environment for all users including after-hours activities and school trips.
- Peer group is supportive and have an understanding of needs.
- Parents are confident that their son/daughter is being included successfully and responding to planned strategies.

A student with MLD whose learning difficulties continue to cause concern and where a differentiated curriculum and Wave 1 and 2 interventions have not resulted in reasonable progress may require SEN support. The student will have one or more of the following characteristics:

- Student is making very slow progress/ is developmentally delayed and to the extent that the gap between the student and peers continues to widen across the core subjects of the national Curriculum.
- Student is presenting with difficulties in problem solving and understanding.
- Student is presenting with difficulties in retaining complex instructions/directions.

### General Indicator (which must be present)

- The student's general educational attainment is significantly below that of his/her peers.

### Specific Indicators (which must be present)

- Differentiated provision over time has not resulted in progress towards achieving learning targets set.
- Assessments over time indicate that a more individualised and differentiated educational programme is necessary.
- Evidence that the student's attainments in essential cognitive skills (notably speech and language, reasoning and self-organisation) are beginning to interfere with his/her ability to make expected progress.

### Additional Indicators (which may be present)

Measures of the student’s abilities (where available) show his/her performance to be amongst that of the lowest 10-15% of his/her age group (equivalent to a standardised test score in the low 80s). Student shows limited progress in language and comprehension. The younger student has particular difficulty in acquiring:

- Pre-reading/early reading skills
- Numeracy – pre-number/early number skills/difficulty in manipulating numbers
- Writing – non-writer/poor emergent writer/poor sentence construction
- Spelling – non/poor development of spelling strategies

Students are unlikely to meet the criteria for learning difficulties at SEN support if National Curriculum attainment falls within what would be a reasonable spread for the year group.

## SEN Support Cycle 1 Moderate Learning Difficulties (MLD) and Specific Learning Difficulties (SpLD)

### Level and description of difficulty

There may be an overlap of presenting needs/ difficulties for students with MLD and/ SpLD

May have low attainment reflected in a number of areas across the curriculum

May also be socially and emotionally immature and have limited interpersonal skills

May have difficulties with written and oral communication

May have poorly developed learning habits and concentration difficulties; be poorly motivated and resistant to learning

Emerging evidence of difficulties in tasks involving specific abilities such as sequencing, organisation or phonological or short-term memory abilities

Low level difficulties in the acquisition or use of language

Specific difficulties e.g. dyslexia affecting literacy skills, dyspraxia affecting fine and/or gross motor skills and dyscalculia affecting the development of numeracy skills. There may be more general difficulties with spatial and perceptual development.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
Identification of needs thorough end of Key Stage levels, cognitive ability tests (CATs), standardised tests, teacher observation, views of young person and parents.	Grouping arrangements or additional support in the classroom used flexibly to promote progress.  Opportunities for small group teaching to address provision map targets.	Staff are aware of / understand and able to provide for the needs of individual students.  Staff are aware of the implications of a range of learning difficulties (including dyslexia, dyspraxia and dyscalculia).	Provision for up 5 hours per week.  A key worker to act as a stable reference point.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Schools use a range of diagnostic tests, observational checklists, dynamic forms of assessment which may involve:</p> <ul style="list-style-type: none"> <li>■ observing and recording responses in different environments</li> <li>■ identifying strengths and weaknesses</li> <li>■ identifying learning rates and learning styles</li> </ul> <p>Assessment may sit within provision map planning.</p> <p>SMART learning targets are set (some may be shared with other students where there are similar presenting problems in the same class).</p> <p>Systematic monitoring of progress to consider the impact of interventions used and will focus both on progress and the setting of new targets.</p> <p>Parents and students are involved in target setting and review. Students understand the targets they are working to achieve.</p>	<p>Flexible grouping to provide opportunities to work with peers of similar ability able to provide good role models for language, behaviour and application to task.</p> <p>Access to peer supported learning (e.g. cross/ same age peer teaching, use of buddy schemes etc.)</p> <p>Arrangements to support the use and delivery of approaches/ materials for students with SpLD. (to include use of multi-sensory teaching strategies, a focus on phonological awareness, motor skills programme).</p> <p>A range of (visual) classroom supports that may include;</p> <ul style="list-style-type: none"> <li>■ use of visual timetable;</li> <li>■ prompt and/or instruction sheets;</li> <li>■ visually identified expectations and teaching outcomes;</li> <li>■ frequent visual supports for teaching including signalling and signing</li> </ul>	<p>Curriculum differentiation to reflect individual needs.</p> <p>Teachers adapt curriculum planning and delivery to accommodate preferred learning styles.</p> <p>Provision map targets addressed through individual/ small group and whole class work within the curriculum framework.</p> <p>Access to specialist teaching and learning programmes for dyslexia, which are multi-sensory, well-structured with opportunities for repetition and consolidation (over learning) of skills.</p>	<p>Provision for up to 5 hours per week.</p> <p>A key worker to act as a stable reference point.</p> <p>SENCO/ Head of Year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the student.</p> <p>Staff trained and able to support students with MLD and/or SpLD. This would include training in the Worcestershire Dyslexia Pathway/ IDP materials. This might include support from external professionals (specialist teacher (Learning), Educational Psychologist).</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
		<p>Strategies and targeted interventions (as required) to:</p> <ul style="list-style-type: none"> <li>■ develop personal organisation (timetabling and personal equipment)</li> <li>■ develop curricular skills</li> <li>■ extend concentration and attention to task.</li> <li>■ support weak spatial and perceptual skills</li> <li>■ support problem solving</li> <li>■ assist with developing fluent handwriting and/ or opportunities to develop word processing skills</li> <li>■ pre-teach topic specific vocabulary</li> <li>■ develop social skills</li> </ul> <p>Use of alternative forms of recording where appropriate.</p> <p>An emphasis on concrete/ practical-based learning activities.</p> <p>Support for study skills.</p>	<p>Access to LSU (as available) or similar facility and appropriate/ specialised programmes and materials to support learning.</p> <p>Access to Homework Club.</p> <p>ICT equipment/ software to develop and support basic skills and alternative approaches to recording (this might include word processing packages and voice activated software).</p>



## Criteria for Placing a Student at SEN Support – Further cycles of APDR

The second cycle, involving relevant external agencies to advise and support will be required where:

- A student with MLD or SpLD continues to have significant learning difficulties that have not responded fully to support given within the school including Wave 1, 2 and 3 interventions.
- Progress remains unsatisfactory and there is evidence that the student is falling progressively behind the majority of students the same age in academic attainment despite appropriate support being implemented at SEN Support
- The school requests involvement from external professionals to help the student make progress, assess problems and review the type and level of support given.

### General Indicator (which must be present)

- The student continues to experience significant difficulties in reading, writing, spelling or number, which have a marked effect on his/her performance in other areas of the curriculum.

### Specific Indicators (which must be present)

- Differentiated classroom provision for the student has not resulted in expected progress towards achieving learning targets set.
- Assessments over time provide evidence of the student's continuing slow progress in acquiring reading and writing skills and weaknesses in phonological awareness, despite being provided with appropriate learning opportunities.
- Assessments over time, together with discussion at reviews, indicate that external advice and/or support is necessary to devise a more highly individualised and differentiated programme.

### Additional Indicators (which may be present)

- Evidence that the student's performance continues to be towards the lower end of his/her expected range in some subject areas, compared to his/her performance in others.
- Evidence of the student not progressing in weaker curriculum areas despite appropriate teaching strategies.
- Evidence of the student's continuing difficulties with sequencing, vision and/or auditory perception, co-ordination, concentration or short-term working memory.
- Evidence of student's low self-esteem and/or difficult behaviour linked to avoidance of or frustration with tasks requiring his/her use of weaker skills.
- Measures of the student's abilities (where available) show his/her performance to be at the 5th centile or below (equivalent to a standardised test score of 75).

## SEN Support APDR Cycle 2\*\* and beyond Moderate and Specific Learning Difficulties

### Level and description of difficulty

Will have persistent difficulties (moderate and/ or significant) in the acquisition and/or use of language, literacy and numeracy skills which affect progress in other areas of the curriculum.

May also have difficulties with other areas e.g. motor skills, organisation skills, behaviour, social or emotional issues and multi-agency advice may be required.

May also have significant difficulties with concentration and retention requiring adult intervention and curriculum modification; little evidence of skill and knowledge transfer and significant difficulties in making and maintaining friendships and relationships.

May (in addition) have significant difficulties relating to behaviour, social or emotional issues and health and personal care issues that require on-going support.

Demonstrates evidence of long term lack of progress or regression despite appropriate intervention.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Detailed analysis of strengths and weaknesses.</p> <p>Assessments completed by external professionals including Specialist Teacher (Learning), Educational Psychologist, Speech and Language Therapist and other Health professionals (where appropriate).</p> <p>IEPs to be set following involvement and consultation with external professionals.</p> <p>IEPs include: positively phrased SMART targets, which reflect the student's priority needs and will specify teaching arrangements and resources required with clearly defined success criteria. They will include strategies that reflect the student's preferred learning styles.</p>	<p>Mainstream class or set with access to individual and small group teaching within the classroom. This might include periods of withdrawal with regular access to LSU (or similar).</p> <p>Grouping arrangements or additional support in the classroom used flexibly to support full inclusion and access to the curriculum.</p> <p>Specific environmental adaptations e.g. well defined and labelled using writing and drawings etc.</p>	<p>Class/ Subject teachers/ Departments plan to implement aspects of the IEP in their curriculum planning.</p> <p>Small group and/ or individual teaching using structured cumulative materials to develop basic skills with opportunities for over learning and revision.</p> <p>Differentiation to reflect individual needs and ensure effective inclusion and access to the curriculum.</p> <p>Additional adult to provide weekly support for some of the following:</p> <ul style="list-style-type: none"> <li>■ Work linked to IEP targets</li> <li>■ Opportunities for pre and post teaching</li> <li>■ Develop language and communication skills</li> <li>■ Develop attention and listening skills</li> </ul>	<p>Provision for up 20 hours per week</p> <p>A Key Worker to act as a stable reference point.</p> <p>Access to advice and training from external agencies. This might include Specialist Teachers (Learning), Educational Psychologists.</p> <p>TAs skilled and experienced in supporting students with general and specific learning difficulties who may be department or child / young person focussed both in class and as part of individual/ small group withdrawal.</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Student progress will be subject to systematic monitoring and specifically, their response to interventions outlined in the IEP.</p> <p>IEPs will be reviewed termly</p> <p>Parents and students are involved in target setting and review and students should have an understanding of the targets they are working to achieve.</p> <p>There should be an on-going cycle of identification, assessment, planning, implementation, monitoring and review.</p> <p>Assessments focus on the reasons for any slow progress; how the student is learning; more in-depth analysis of strengths/weaknesses; progress in relation to time, peers starting from similar level, and to age expectations.</p> <p>Other factors in the child's family or environment may also need to be considered as part of the assessment process.</p> <p>Risk assessments as required.</p>	<p>In-class support in targeted subject areas.</p> <p>At KS4:</p> <p>Flexible teaching arrangements which include:</p> <ul style="list-style-type: none"> <li>■ Alternative/ vocational courses</li> <li>■ Timetabling that allows for reduced options to facilitate supported study options in other subjects.</li> <li>■ Links with FE colleges</li> <li>■ Access to alternative settings in order to deliver full curriculum entitlement.</li> </ul> <p>Support arrangements which include appropriate on/off site arrangements for Awards and Alternative/ Vocational Courses.</p>	<ul style="list-style-type: none"> <li>■ Support practical work with concrete/ visual materials to establish concepts and skills</li> <li>■ To support over learning and revision</li> <li>■ To support students who have difficulty with recording</li> <li>■ To develop personal organisation in response to timetabling/ managing equipment/ independent</li> <li>■ Deliver a range of curriculum-based interventions (including specialist programmes for dyslexia)</li> </ul> <p>Strategies and support materials to help compensate for weak memory skills.</p> <p>Materials which reduce or support note-taking, copying of diagrams and charts and/or alternative approaches to recording (to include a range of software).</p> <p>Opportunities to follow oral based MFL courses.</p> <p>Simplified language reinforced by visual materials and modelling to compensate for language delay.</p> <p>Support for homework (recording task requirements and completing etc.)</p>	<p>Access to LSU during unstructured times of the day.</p> <p>Access to homework club and revision guides.</p> <p>ICT equipment and appropriately structured software to develop and support basic skills and alternative approaches to recording.</p> <p>Staff able to monitor and assess for access to special exam arrangements.</p> <p>Staff skilled and able to develop peer awareness of learning difficulties and support students in their understanding of their diagnosis/ needs.</p> <p>Regular home-school liaison.</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
		<p>A system of negotiated rewards or strategies to improve motivation embedded in to day to day learning experience.</p> <p>A suitable mix of challenge and success across the curriculum to develop confidence and self- esteem.</p> <p>At KS4:</p> <p>Specialist guidance to inform key Stage 4 planning/grouping.</p> <p>Teaching arrangements for alternative curriculum through entry level course, alternative accreditation, work related learning and college opportunities.</p> <p>Programmes to deliver life skills.</p> <p>Access to work experience.</p> <p>Support for organising and completing extended coursework and revision.</p> <p>Alternative accreditation schemes.</p>	

## Social Emotional and Mental Health (SEMH)

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Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder (CoP 6.32)

A number of children / young people will be subject to social, emotional, and mental health difficulties at some point during their school career which interfere with their own ability to learn effectively. In some instances, the difficulties they experience may cause disruption to the learning of other children / young people.

Social difficulties, in this context, occur when children / young people have problems managing interaction with others in school effectively and appropriately. They may have difficulty making the necessary adjustments to conform to the expectations of others in a variety of settings. The process is known as socialisation. Either difficulty may impact substantially on a child / young person's ability to learn.

In some cases, these difficulties may be closely associated with the wider disadvantages experienced by child / young person from socially deprived home backgrounds. They may be compounded by the child / young person's previous inability to form a satisfactory attachment to a primary care-giver in their early years. In others they may be a reflection of a child / young person's exposure to rapid, unassimilated change or trauma, for example, children from refugee or asylum-seeking families.

Use of the phrase is therefore meant to have a specific connotation to help determine the extent and nature of the child / young person's special educational needs. It should not be applied as a blanket term to include in the SEN framework all those:

- Whose behaviour may more loosely be described as anti-social or disaffected
- Who are in the care of the LA

Children / young people presenting with social, emotional, and mental health difficulties may act unpredictably, usually in an extreme fashion in a variety of social, personal or physical settings. Severely withdrawn or passive behaviour may be as significant an indicator as aggressive or very strange or age inappropriate behaviour.

It is important to realise that even the most difficult to understand behaviour serves legitimate functions for children / young people. These functions may include any or all of the following:

- The initiation of social interaction
- Gaining things or events
- Avoiding things or events
- Expressing emotion.

Schools and settings should have clear processes to support children and young people, including how they will manage the effect of any disruptive behaviour, so it does not adversely affect other children / young people. Many schools and settings offer pastoral support, which may include access to counselling sessions to help their children / young people with social, emotional, or mental health difficulties. This should be described in their published SEN Information Report and provide a clear rationale for any interventions offered. Staff may need training and support to understand the nature and extent of problems that require more specialist intervention. Where more specialist provision is required, schools, colleges and early years providers should have clear arrangements for making appropriate referrals to Child and Adolescent Mental Health Services (CAMHS). Schools should refer to the Schools and Colleges

Emotional Wellbeing and Mental Health toolkit: [www.worcestershire.gov.uk/emotionalwellbeingtoolkit](http://www.worcestershire.gov.uk/emotionalwellbeingtoolkit)  
The toolkit provides a guide for schools to know what they should be providing or commissioning to meet the emotional wellbeing of its pupils and also how to access further support when required. CAMHS CAST (Consultation, advice, support and training) offer support to all professionals including schools.

CAMHS offer a 'triage' service to identify and provide for children and young people who need specialist provision. Where needs are less severe, the pathway within the toolkit can guide schools to refer to Reach 4 Wellbeing or other services that may meet the needs of the young person.

Understanding the purpose or function of the child / young person's behaviour is the first step in helping them find less self-defeating and more productive ways of coping with their world. This understanding in turn makes it less likely that such children will be stigmatised for what are often normal ways of reacting to abnormal circumstances.

Those children / young people experiencing such difficulties well outside the normal range for their age or gender may be described by health professionals as having mental health problems or disorders. Arrangements to meet their needs are likely to be determined as the outcome of multi-agency assessment and planning, of which the staged SEN processes outlined below will be one important aspect.

For a variety of children / young people, inappropriate placement in teaching groups not matching their abilities can inadvertently cause behaviour difficulties arising from frustration and loss of self-esteem.

The SEN Code of Practice says that school's pastoral care arrangements should ensure that children / young people are able to discuss any health related and other problems with a relevant health professional, educational psychologist, education welfare officer, counsellor or other professional.

Every child with a medical condition requires an Individual HealthCare Plan (IHP). An IHP is an agreement between parents/carers, the schools and healthcare professionals about what care a child needs and how it will be carried out. Worcestershire is also recommending an IHP to be completed if there are concerns that a child is not accessing their 'optimum education' due to suspected health related issues. In support of this, Worcestershire is in the process of producing a template and guide which will be available soon. In the meantime, the following site provides further information and an example template;

<http://medicalconditionsatschool.org.uk>

Persistent disruptive or withdrawn behaviours do not necessarily mean that a child or young person has SEN. Where there are concerns, there should be an assessment to determine whether there are any causal factors such as undiagnosed learning difficulties, difficulties with communication or mental health issues. If it is thought housing, family or other domestic circumstances may be contributing to the presenting behaviour a multi-agency approach, supported by the use of approaches such as the Early Help Assessment, may be appropriate. In all cases, early identification and intervention can significantly reduce the use of more costly intervention at a later stage (CoP 6.21)

## Normal school entitlement

Many children / young people with behaviour emotional and social difficulties will be able to participate in most aspects of an ordinary classroom and make progress within the curriculum but may need some support through effective QFT and waves of intervention.

Description of child / young person	Intervention and Support	Learning Environment	Partnership with parents, carers and other agencies	Monitoring, Assessment and Review
<p>Low level disruptive behaviour (possibly due to unidentified learning difficulties/ prolonged failure).</p> <p>Occasionally withdrawn and isolated and on the fringes of activities.</p> <p>Unpredictable and involved in low level distractions, which hinder own/ others' concentration.</p> <p>May have some difficulties with interpersonal skills.</p> <p>May show some signs of frustration.</p>	<p>All teachers are teachers of children with special educational needs (COP 5:2).</p> <p>Schools will have a clear Behaviour Policy which is underpinned by clear ethos and values. It should be relevant to the school's specific context, practical to implement and subject to regular review.</p> <p>An awareness of some difficulties noted and monitored by the class/ subject teacher.</p> <p>Clear boundaries and school wide system of meaningful rules, incentives and sanctions with consistent and fair application.</p> <p>Tasks may need to be differentiated by level/outcome/pitch/ pace and grouping to match learning needs, concentration level, interest and motivation.</p> <p>Dissemination and development of nurturing principles for all key stages.</p>	<p>Simple changes to the classroom environment to support individual differentiation.</p> <p>School reviews its accessibility plan regularly to update details relating to building access, communication and training needs and information.</p> <p>Staff considers appropriate groupings, seating arrangements and surroundings</p> <p>School will provide more focused opportunities to build self-esteem, develop friendships and social skills.</p>	<p>Parent/carer involved in line with school's policy and arrangements for children / young people with additional needs.</p> <p>General whole school training, advice and support from external professionals.</p> <p>Referral to SENDIASS Services (as required).</p>	<p>Self-evaluation encouraged and developed</p> <p>Children / Young people have regular opportunities to evaluate their performance in learning activities.</p> <p>Children / Young Persons' self-assessment routinely used to set individual learning targets.</p> <p>Full inclusion in all school assessments and tasks.</p>

## Criteria for placing a child / young person at SEN Support – APDR Cycle 1

General Indicator (which must be present)

The child / young person's behaviour and/or emotional difficulties and/or social relationships are impeding his/her effective learning.

Specific Indicators (which must be present)

Differentiated classroom provision for the child / young person's education over time has not resulted in progress towards achieving learning and/or behavioural targets set.

The child / young person displays a range of behaviours, including some of the following:

- **At a personal level:** Destroying own work, lack of self-control; defiance; low tolerance of frustration; pre-empting failure in tasks; a tendency towards distractibility; attention seeking; some difficulty establishing relationships with peers or adults in a range of different educational settings; some anxiety about attending schools.
- **At a verbal level:** Reluctance to speak; making threats; frequent interruption; inappropriate calling out in class; being argumentative or abusive.
- **At a non-verbal level:** Reluctance to attend school; difficulty in observing rules; being destructive or aggressive; bullying, as a victim or perpetrator; inappropriate response to perceived provocation; over-dependence on adult proximity.
- **At a work skills level:** Difficulty working without direct supervision or in engaging with peers in learning; difficulty in completing tasks or following instructions; short concentration span; poor personal organisation skills; impeding other children / young people's learning.

Assessments by the class/subject teacher and/or the SENCO indicate that a more individualised and differentiated educational programme is necessary.

Additional indicators which may be present:

- Evidence of the child / young person's underachievement in a number of curriculum areas, not predicted by reference to his/her general ability.
- Recorded examples of the child / young person's difficult to manage behaviour in a variety of learning and/or social settings within the school.
- Evidence of the child / young person's unwillingness to acknowledge or accept responsibility for his/her own actions.
- Transfer of information about the child / young person from previous provision.



## SEN Support APDR Cycle 1

### Level and description of difficulty

Presents with social, emotional or mental health difficulties that have not improved following differentiated learning opportunities or behaviour management techniques usually employed by the school.

Presents with poor concentration despite structured and time limited tasks.

May be withdrawn and isolated, generally seeking too little adult attention OR may be unpredictable/ disruptive, attention seeking, frequently ignoring instructions and following few routines.

Has difficulties with interpersonal problems, reluctant to share, reluctant to participate in social groups, distracts other children / young people, careless with learning materials.

May have failed to make progress anticipated across many areas of the curriculum accompanied by signs of frustration, disillusionment, mood swings, non co-operation and non-attendance.

Has emerging problems with peer group relationships that affect classroom dynamics and require teacher intervention.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Child / young person's strengths and weaknesses in emotional and behavioural development considered using behavioural checklists.</p> <p>Assessment sits within provision map planning.</p> <p>On-going recording of difficult behaviours to provide baseline(s). Recording should enable clear analysis of antecedents, behaviours, consequences (ABCs).</p>	<p>Grouping arrangements or additional support in the classroom are used flexibly to promote behavioural progress.</p> <p>Opportunities for small group teaching to address appropriate behavioural expectations and/ or social and emotional skills.</p> <p>Opportunities for individual discussion and support should be available daily.</p> <p>An enhanced level of pastoral support may complement established pastoral arrangements. This should be available daily from the class teacher, Head of Year, SENCO or Tutor.</p>	<p>Provision map targets addressed through small group and class work within the curriculum framework and may address behavioural and social/ emotional skills. These will be additional to/different from the behaviour management techniques used throughout the school.</p> <p>Appropriate behaviour and expectations taught alongside the academic curriculum.</p> <p>Clearly identified outcomes agreed with all parties for both appropriate and inappropriate behaviours.</p>	<p>Provision of TA support. Children/young people requiring support at a higher level above that which is typically provided for children and young people with SEN. This will typically be informed by bespoke advice from professionals.</p> <p>Identified keyworker to act as a stable point of reference.</p> <p>The SENCO/Head of Year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the child / young person.</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>SMART behavioural targets will be set (some may be shared with other children / young people where there are similar presenting problems in the same class).</p> <p>Systematic monitoring of progress to consider the impact of interventions used.</p> <p>Consideration given to an identification, assessment, planning monitoring and review cycle for children / young people with emotionally-based difficulties.</p> <p>Parents and child / young person involved in target setting and review. Child / young person should have an understanding of the targets they are working to achieve. Reviews will focus on behavioural progress and the setting of new targets.</p> <p>Risk assessments completed as required.</p>	<p>Peer resources might be used. This might include: Circle of Friends, Peer Mentoring/ Mediation.</p> <p>Occasional access to in school support facility (LSU, Behaviour Centre) for specific aspects of curriculum delivery.</p> <p>Environmental audit completed and appropriate adjustments made.</p> <p>Occasional access to in school support facility (LSU, Behaviour Centre) for specific aspects of curriculum delivery.</p> <p>Environmental audit completed and appropriate adjustments made.</p>	<p>Curriculum differentiation to reflect individual behavioural needs.</p> <p>Child / young person and parent involvement in the behavioural programmes is clearly defined.</p> <p>Staff use a range of teaching and learning strategies/ delivery styles to ensure maximum engagement.</p> <p>Child / young person are encouraged to identify appropriate role models within schools.</p> <p>SEAL (or similar curriculum) delivered and in conjunction other class wide approaches that consider social/ emotional needs (e.g. Circle Time)</p> <p>Staff monitor and support child / young person during break times and lunchtimes.</p>	<p>The SENCO will support and advise teachers.</p> <p>Class or subject teachers oversee delivery of individualised or group behavioural programmes.</p> <p>External professionals including e.g. Educational Psychologists, Behaviour Support staff may provide whole school staff training.</p> <p>Parent/carer to be consulted on levels of concern and actively involved in programmes/ interventions.</p> <p>Use of ICT, audio/visual support, self-directed time out (as required) to support child / young person's access to the curriculum.</p> <p>Staff trained and able to support child / young person with SEMH and its impact on curriculum access.</p>

### Criteria for placing a child / young person at SEN Support – further cycles of APDR

Modification of the differentiated classroom provision for the student's education has not resulted in the expected progress towards achieving learning and/or behavioural targets set.

Individually administered assessments over time by the class/subject teacher and/or SENCO provide evidence that the students' behavioural and social difficulties are becoming a more significant obstacle to his/her effective learning.

The student's social, emotional, and mental health difficulties are clearly apparent in the school's environment but do not arise solely in response to specific aspects of that environment.

The student's difficulties are general – in that his/her social, emotional and mental health difficulties cause management problems in a wide range of situations – and are usually common to the majority of staff in regular contact with him/her.

Assessments over time by the class/subject teacher/ SENCO, together with discussion during reviews, indicate that external advice and/or support is necessary to devise a more highly individualised and differentiated educational programme.

## SEN Support APDR Cycle 2\*\* and beyond Social Emotional and Mental Health

### Level and description of difficulty

May be withdrawn and isolated with limited or selective communication, may not communicate feelings or fail to engage in play or group activity. Aspects of behaviours present significant barriers to learning.

Identification of co-morbidity factors.

Shows lack of trust in some adults.

Presents with emotional difficulties.

Takes physical risks in respect of self and others.

Reasonable force may be necessary on occasions to safeguard self and other children.

Difficult or demanding behaviour, which might include physical aggression towards adults, peers and property. Teaching and learning is frequently disrupted despite the delivery of an appropriate curriculum.

Has difficulty working both in a group and with individual support.

May deliberately destroy own or other's work.

Persistent SEMH may inhibit participation, understanding and contribution to activities and learning in the classroom and result in extremely limited progress in all areas and may not have progressed at nationally expected levels linked to prior attainment. Frequent and extreme responses, resulting in extended periods of uncooperative behaviour and/or emotional withdrawal.

Significant difficulties in making and sustaining social relationships, resulting in social isolation and vulnerability with some disengagement. May be bullied. Disruption to social and emotional wellbeing, resulting in unhappiness/stress. Possible long periods of absence/disengagement.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Analysis of the student's strengths and weaknesses in social/ emotional and behavioural development.</p> <p>Clear assessment processes that enable the student's behaviour and responses to intervention to be measured within a given time span. Specific measures of progress to be used should be identified.</p>	<p>Mainstream class with flexible groupings.</p> <p>Consideration to changes to seating and groupings in class.</p> <p>Behavioural/ learning environments audited frequently by teachers and changes made to support positive behaviour and learning.</p> <p>Small group and within class support to teach/ reinforce understanding of rules, rewards and sanctions.</p>	<p>Increasing adult/ student ratios in class.</p> <p>Use of supported group work within the classroom.</p> <p>Additional targeted teaching in small groups or individually, for significant parts of the day to address IEP targets.</p> <p>Interventions include more specialist strategies (skills based programmes, therapeutic input/ mentoring), more focused rewards/ sanctions.</p>	<p>Provision of support for up to 20 hours per week.</p> <p>Identified Key Worker to act as a stable reference point.</p> <p>SENCO to lead on assessment, planning and evaluation in conjunction with pastoral staff (where appropriate).</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>On-going recording of difficult behaviours to provide baseline(s). Recording should enable clear analysis of antecedents, behaviours, consequences (ABCs).</p> <p>IEPs and/or PSPs set following involvement from external professionals such as Educational Psychologists, staff from specialist settings, Behaviour Support, CAMHS.</p> <p>IEPs and/ or PSPs include positively phrased SMART targets, which reflect the student's priority needs.</p> <p>Systematic monitoring and review of student progress and specifically response to interventions outlined in the IEP and/ or PSP reviews to involve professionals, parents/ carers and students.</p>	<p>Opportunities for periods of respite using withdrawal to smaller groups. This might include self-directed/ individual time-out.</p> <p>The opportunity to attend in-school behaviour centres (or similar facility) as appropriate.</p> <p>Use of peer support strategies. This may include: Circle of Friends, Discussion Groups, Social Support Groups, Buddying systems.</p> <p>Systems to ensure effective communication between Pastoral Staff and Learning Support staff.</p> <p>Access to a Nurture Group.</p>	<p>Individual counselling and/ or therapeutic support from external agencies/ appropriately qualified professionals (as appropriate).</p> <p>A structured behaviour management programme developed in conjunction with relevant external.</p> <p>Student and parent/ carer involvement in the behaviour programme defined.</p> <p>Differentiation across the curriculum to reflect individual needs.</p> <p>A flexible timetable (as appropriate) within the context of an inclusive curriculum.</p> <p>Access to the SEAL programme (or similar).</p> <p>Reference to/use of IDP materials.</p> <p>Use of equipment to motivate and sustain learning e.g. ICT and audio-visual equipment.</p>	<p>External professionals including e.g. Educational Psychologists, Behaviour Support assess and provide advice and strategies to support.</p> <p>Staff trained and able to implement strategies to support positive behaviour (e.g. IDP)</p> <p>Staff trained and able to deliver interventions that address SEMH.</p> <p>This might include:</p> <ul style="list-style-type: none"> <li>■ functional analysis of behaviour</li> <li>■ use of assessment tools that consider developmental issues (e.g. Boxall Profile)</li> <li>■ use of restorative approaches to conflict resolution.</li> </ul>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
		<p>Opportunities to develop peer awareness/ sensitivity and support both in and out of the classroom.</p> <p>Regular home-school liaison.</p> <p>At KS4</p> <p>(In addition) Alternative programmes of study at KS4 should be provided where appropriate.</p>	<ul style="list-style-type: none"> <li>■ use of Team Teach/ PPI (or similar approach).</li> <li>■ Other additional/ specialist training for key staff (Behaviour Management, Attendance, targeted SEMH interventions etc.)</li> </ul> <p>Parent/carer involvement in programme development for both school and home.</p> <p>Guidelines for Health and Safety available.</p>

## Sensory, Physical and Medical Needs

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### Medical Needs

A medical diagnosis or a disability does not necessarily imply a special educational need SEN although it can present as a significant barrier to learning, achievement and participation. It may not be necessary for the student with any particular diagnosis or medical condition to need any form of additional educational provision at any phase of education. It is the impact of a student's medical needs rather than a diagnostic label a medical diagnosis gives that must be considered when determining provision. All students should continue to have access to as much education as their medical condition permits, to maintain the momentum of their education.

Some students may not require school-based SEN provision, but they have medical conditions that, if not properly managed could hinder their access to education.

The Children and Families Act 2014 places a duty on maintained schools and academies to make arrangements to support children / young people with medical conditions. Individual healthcare plans will normally specify the type and level of support required to meet the medical needs of such children / young people. Where children and young people also have SEN, their provision should be planned and delivered in a co-ordinated way with the healthcare plan. Schools are required to have regard to statutory guidance 'Supporting pupils at school with medical conditions':

[www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions](http://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions)

Further Guidance is contained within this document in the Equality Act Section

Children with medical conditions will include those with Asthma, Diabetes, Arthritis, Epilepsy, severe allergies, Incontinence, Eczema, Cystic Fibrosis, Tracheotomy, Colostomy, Ileostomy and Chronic Fatigue Syndrome/ ME.

Available guidance should be considered by all school staff.

### Normal School entitlement – Medical Condition

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Many students with a medical condition will be able to participate in most aspects of an ordinary classroom and make progress within the curriculum but may need some support through effective QFT and waves of intervention.

DfE Guidance - Supporting pupils with medical conditions also should be referenced and a Health Care Plan put into place if required (see above).

Description of student	Intervention and Support	Learning Environment	Partnership with parents, carers and other agencies	Monitoring, Assessment and Review
<p>May mean occasional absence from school.</p> <p>Progress within the curriculum may be unaffected or mildly affected.</p> <p>Able to participate in most/all classroom activities.</p> <p>The condition is usually effectively controlled by medication.</p> <p>The condition may influence tiredness and concentration levels.</p> <p>Students may need access to specific items of small equipment if medical conditions have resulted in minor motor impairments.</p> <p>School age mothers.</p>	<p>All teachers are teachers of children with special educational needs</p> <p>Students with medical needs will access strategies and resources typically available in the classroom.</p> <p>Differentiation may be required to take account of slower pace in performing some tasks – may tire easily.</p> <p>Where student’s progress is not adequate, it will always be important to review the arrangements being used.</p> <p>Staff are skilled at selecting appropriate methods and materials into their lesson plans to ensure access across the curriculum for students.</p> <p>Staff skilled in adjusting pace and order of activities in order to maintain interest and attention.</p> <p>Does not require regular additional adult support but may require some supervision/ support for medication/dietary needs.</p> <p>May benefit from focused/small group teaching support at some points during the week.</p> <p>Effective systems/ links to support students off-site and attending alternative provision.</p>	<p>School curriculum promotes personal care and safety.</p> <p>The school implements/ reviews its accessibility plan regularly to update details relating to building access, communication and training needs and information.</p> <p>Staff consider appropriate student groupings, seating arrangements and surroundings.</p> <p>Class/subject teachers may need to give careful consideration to student’s position in the classroom.</p>	<p>Parent/carer involved in line with school’s policy and arrangements for students with additional needs.</p> <p>General whole school training, advice and support from external professionals.</p> <p>Referral to SENDIASS Services (as required).</p> <p>Possible involvement from a specialist teacher/ MET (at this stage, this might include students whose medical needs are temporary in nature e.g. a fracture).</p>	<p>Whole school policy in relation to the provision of individual health care needs in school with specific reference to the following policy/ good practice guidance.</p> <p><b>Ensuring a good education for children who cannot attend school because of health needs</b></p> <p><b>Supporting pupils at school with medical conditions</b></p> <p><b>Governance Handbook 2019</b></p> <p>The Education of Pregnant Young Women and Mothers.</p> <p>Improving Behaviour and Attendance: Guidance on Exclusion from Schools and Pupil Referral Units.</p> <p>Regular review and monitoring by the school is essential.</p> <p>Full inclusion in all school assessments and tasks.</p> <p>Where student’s progress is not adequate, it will be necessary to review the strategies being used.</p> <p>Students have regular opportunities to evaluate their performance in learning activities.</p> <p>Student self-assessment routinely used to set individual learning targets.</p>

## Criteria for Placing a SEN Support Cycle 1

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A student with medical needs that requires support at SEN Support will share one or more of the following characteristics:

- Mainly working within the same level as peers. Occasional difficulty in learning in whole class teaching group. Needs regular support to work on same tasks as peers.
- Medical needs continue to cause concern to the class/subject teacher.

### General Indicator (which must be present)

- The student's medical needs impact on attendance or result in unusual patterns of attendance.
- The student's medical condition impairs his/her access to the curriculum, ability to take part in specific activities or participation in school life.

### Specific Indicators (which must be present)

- The student needs occasional adult support in some lessons.

### The student benefits from occasional adult support to:

- Manage medical conditions.
- Maintain necessary aids and equipment.
- Assist with collating work from lessons missed through absence from school.
- Individually administered assessments over time by the class/subject teacher and/or the school's SENCo indicate that a more individualised and differentiated educational programme is necessary.

### Additional Indicators (which may be present)

- Parental concern in relation to observed changes in a child's emotional health and well-being linked to day to day experience of school.
- The student's progress is sometimes at lower levels than might be expected from their performance of tasks where their medical condition has less direct impact.
- Evidence that the student shows some signs of fatigue during the school day.
- The student exhibits social, emotional and/or mental health difficulties, clearly linked to his/her physical/ medical condition.
- Transfer of information across from previous provision.
- A School review indicates that the student's progress now makes his/her placement within SEN Support appropriate.

### Professional Judgement

A consensus of those who teach the student, in partnership with his/her parents and the student in question, that his/her medical condition is impairing learning.

## Medical Needs Cycle 1

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### Level and description of difficulty

Will have known medical needs.

Medical condition will be generally stable and under control but may need monitoring in school and close liaison maintained with home.



Medical condition may necessitate supervision or support for medication needs at specific times e.g. medication, diet, toileting.

Progress within the curriculum may be affected by condition or medication.

May participate in most/all activities but at a slower pace than peers or show signs of increasing fatigue during the school day.

May need more supervision in potentially hazardous situations e.g. science lab, swimming, using PE apparatus.

Assessment, Planning and Review	Teaching Environment and Groupings	Curriculum and Teaching Methods	Partners and Resources
<p>A range of professionals may be involved depending on the nature of the student's needs that may be diverse.</p> <p>Comprehensive health care planning in advance of admission/ entry/ transition to and from school.</p> <p>Fire Evacuation Plans to be developed and personalised to provide for students with physical needs.</p> <p>Assessment may sit within a Provision Map. This will include SMART/ positively phrased targets, teaching arrangements, resources, strategies that reflect the student's preferred learning style and success criteria.</p>	<p>Mainstream class with flexible groupings (small group/individual).</p> <p>Some adjustments to classroom organisation, routines and environment.</p> <p>Some adjustments to reflect medication/ dietary/ toileting and other health needs.</p> <p>Staff arrange and take responsibility for any regular medical intervention.</p> <p>School to facilitate full access to areas of the curriculum for student with limited mobility needs (e.g. students using wheelchairs, crutches etc.).</p>	<p>Differentiation to provide for individual needs and (in particular) to take account of slower pace.</p> <p>Support in place by class/subject teacher to allow students to catch up following periods of absence.</p> <p>Suitable arrangements for administration of medication.</p> <p>Supervision of health/ hygiene/personal care procedures.</p> <p>Monitoring/ support for social situations (such as breaks) may be required.</p> <p>Curriculum promotes personal care and safety.</p> <p>Access to alternative methods of recording across the curriculum where appropriate.</p> <p>Specific information sharing on the causes and implications of the medical condition circulated to relevant members of staff where appropriate.</p>	<p>Provision for up to 20 hours per week.</p> <p>Identified key worker to act as a stable reference point.</p> <p>Specialist transport arrangements may be required.</p> <p>Class/subject teachers remain responsible for working with the student on a daily basis, overseeing the delivering of any programmes.</p> <p>The SENCO/Head of Year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the student.</p> <p>The SENCO will support and advise teachers.</p> <p>Staff trained and able to provide for health and related needs in school and/or other emergency measures. This might include emotional/ psychological needs.</p> <p>Training in Manual Handling may be necessary.</p>

Assessment, Planning and Review	Teaching Environment and Groupings	Curriculum and Teaching Methods	Partners and Resources
<p>Specific consideration may also be given to the following:</p> <ul style="list-style-type: none"> <li>■ Monitoring/support (for safety) during practical/PE lessons</li> <li>■ Supervision of medication outside the classroom</li> <li>■ Pastoral support</li> <li>■ Liaison with home/hospital service for absence from school during periods of hospitalisation. This might include involvement of a range of specialist teachers.</li> <li>■ Supervision of unstructured times</li> <li>■ Teaching strategies that take into account medical condition, age, ability and learning style to ensure full curriculum access.</li> </ul> <p>Review should focus on student progress, effectiveness of strategies, new information and the setting of new targets. Parents and students will be involved in target setting and review. Students should have an understanding of the targets they are working to achieve.</p>		<p>It may be appropriate to incorporate manual handling as part of health care planning.</p> <p>Strategic use of peer support (e.g. buddy systems, peer mentors, circle of friends).</p> <p>Opportunities to develop peer awareness and sensitivity. This would typically involve support from specialist teachers and/ health professionals.</p>	<p>Parents/carers to be consulted on levels of concern and asked for further advice.</p> <p>Family may need to be informed of the Care to Learn Code of Practice (school age mothers).</p> <p>Referral to SENDIASS Services (as required).</p>

Assessment, Planning and Review	Teaching Environment and Groupings	Curriculum and Teaching Methods	Partners and Resources
<p>Systematic monitoring of progress to consider the impact of interventions used and will focus both on progress and the setting of new targets.</p> <p>A proactive response to student absence alongside early intervention and support. This would include an analysis of patterns of attendance.</p> <p>Risk assessments as required.</p>			

## Criteria for Placing a SEN Support - Further cycles of APDR

### General Indicator (which must be present)

- The condition has a significant impact on the student's education and requires intervention and structured support

### Specific Indicators (which must be present)

- Assessments over time by the class/subject teacher and/or SENCO, indicate that external advice and/or support is necessary to devise a more highly individualised and differentiated educational programme.
- The school does not have the resources or expertise alone to provide the additional input needed to address the impact of the medical need.

### Additional Indicators (which may be present)

- Student may be known to the hospital/Medical Education Team who provide periods of home tuition following regular periods of hospitalisation leading to extended absence from school.
- Medical condition sometimes requires regular treatment/therapy. There may be some intermittent limitation of normal activities caused by general fluctuation in health levels. Close monitoring of conditions likely to be degenerative or have peaks and troughs.
- Evidence that the student shows signs of increasing fatigue towards the end of the school day.
- Evidence that the child / young person increasingly experiences frustration and/or difficulty in forming relationships with his/her peers and shows a tendency towards being socially isolated in less structured parts of the school day and that his/her future placement within the arrangements for SEN Supportplus will be appropriate.

### Professional Judgement

- A consensus of those who teach the student, in partnership with his/her
- parents and the student that additional external input is necessary.

## SEN Support APDR Cycle 2\*\* and beyond Medical Needs

### Level and description of difficulty

Medical condition may result in regular absence from school

Medical condition may require regular supervision/support for medication/diet needs

May have some incontinence including Ileostomy and colostomy

Medical condition may impact on ability to access the curriculum (this may be permanent)

May work at a slower pace than peers or show signs of increasing fatigues during the school day

Condition may influence tiredness and concentration levels

Will have complex difficulties which may include cognitive and sensory as well as medical may have regular frequent or long-term periods of absence from school (as a result of a degenerative condition)

Sudden onset of complex psychological needs that impacts on a student's ability to attend school

Medical condition requires supervision/support with appropriate training provided to TA

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Teaching staff and Health/ Education professionals assess student's strengths and weaknesses and changing needs. A detailed analysis will include the views of the young person/ parents.</p> <p>IEPs will include: positively phrased SMART targets, which reflect the student's priority needs and will specify teaching arrangements and resources required with clearly defined success criteria. They will include strategies that reflect the student's preferred learning styles.</p> <p>Student progress will be subject to systematic monitoring and specifically their response to interventions outlined in the IEP.</p>	<p>Mainstream class or set with flexible groupings access to include individual and small group teaching within the classroom and/or periods of withdrawal.</p> <p>Considerable opportunities for individual or small group work within the classroom or on a withdrawal basis to address specific needs identified in the student's IEP.</p> <p>Adjustments to the classroom organisation, routines and environment may be required.</p> <p>Extra help may be required at times in the school day, e.g. dressing, undressing, steps, stairs, PE, unstructured times, meal times, self-care and other practical activities.</p>	<p>Opportunities for targeted individual or small group intervention/support either within the class or as part of a withdrawal arrangement. The advice of the external professionals may inform interventions delivered.</p> <p>A flexible approach to timetabling may be appropriate.</p> <p>Differentiated curriculum to provide for individual learning needs (specifically literacy, handwriting) required to support access to some curricular areas, e.g. PE, handwriting tasks, unstructured times.</p>	<p>Provision of support for up to 20 hours per week.</p> <p>Identified key worker to act as a stable reference point.</p> <p>Appropriate involvement from a specialist teacher/ MET for advice and support.</p> <p>Access to LSU or similar facility for time out/ manage fatigue.</p> <p>SENCO to lead in co-ordinating provision.</p> <p>Specialist transport arrangements may be required.</p> <p>Regular liaison between external professionals and school staff in relation to specific programmes and targets.</p> <p>Parents/carers to be consulted on levels of concern and to be asked for further advice.</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>IEPs will be subject to termly review.</p> <p>Specific targets relevant to particular curriculum areas and these are agreed with the appropriate staff members. Regular home-school liaison.</p> <p>Assessments will focus on reasons for any slow progress: how the student is learning, more in-depth analysis of strengths/weaknesses, progress in relation to time, peers starting from similar level, and to age expectations.</p> <p>A PSP may be developed to ensure regular (fortnightly) review.</p> <p>Other factors in the child's family or environment may also need to be considered as part of the assessment process.</p> <p>Risk assessments as required.</p>	<p>Some limited items of special equipment may be required to support learning/ access to curriculum (this might include access to specialist ICT equipment/word processors).</p> <p>Some building adaptations may be necessary.</p> <p>Temporary /flexible access to school may be appropriate. This would require work to be provided for students at home.</p> <p>Consider 'time out' opportunities to help students manage symptoms of fatigue.</p>	<p>Specific consideration given to the need to 'catch up' following periods of absence.</p> <p>Monitoring/supervision/ support for subjects/ task with additional, practical or physical demands (e.g. D and T, PE etc.).</p> <p>Monitoring and support for social situations (such as breaks) may be required.</p> <p>Plan for provision of medication.</p> <p>Curriculum designed to teach students to self-management of the majority of their health and personal care needs.</p> <p>Students included in all school assessments and tasks with permitted adaptations.</p> <p>Consideration of concessions for examinations etc.</p>	<p>Class or subject teachers remain responsible for working with the student on a daily basis, delivering any individual programmes.</p> <p>Close liaison/pastoral support is essential to maintain contact between school/parent/ carers, home tutor and hospital.</p> <p>Specific training in managing care needs for class/subject teachers and TAs (as appropriate).</p> <p>Staff able to monitor and assess for access to special exam arrangements.</p> <p>Access to specialist advice on ICT (equipment and use) may be required.</p> <p>Multi agency support may be required due to overlap of educational, social or health needs.</p> <p>Parent/carer to be involved in the monitoring of progress through the IEP and/or Review Procedure.</p> <p>Regular home school liaison.</p> <p>Guidelines for Health and Safety and Risk Assessments available.</p> <p>Referral to SENDIASS Services (as required).</p>

## Physical Difficulties

Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning or habilitation support. Children and young people with an MSI have a combination of vision and hearing difficulties. Information on how to provide services for deafblind children and young people is available through the Social Care for Deafblind Children and Adults guidance published by the Department of Health. (CoP 6.34)

Some children and young people with a physical disability (PD) require additional ongoing support and equipment to access all the opportunities available to their peers.

The Children and Families Act 2014 places a duty on maintained schools and academies to make arrangements to support children / young people with medical conditions. Individual healthcare plans will normally specify the type and level of support required to meet the medical needs of such children / young people. Where children and young people also have SEN, their provision should be planned and delivered in a co-ordinated way with the healthcare plan. Schools are required to have regard to statutory guidance 'Supporting pupils at school with medical conditions' (CoP 6.11).

For some students with physical disabilities the only resource that will be required will be minor to moderate adaptations to allow access. This should always be considered in the first instance, before resorting to other types of support.

Physical impairments may arise from physical, neurological or metabolic causes that only require appropriate access to educational facilities and equipment; others may lead to more complex learning and social needs. For some students with the most complex physical needs, the LA will consider a multi-disciplinary assessment to be necessary. However, for many children with a lesser level of physical need, intervention at SEN Support will be appropriate.

Students with severe physical difficulties are normally identified at the pre-school stage. Exceptions to this would include students experiencing the results of serious illness or accident leading to a long-term disability (which may or may not be permanent) or a degenerative condition.

Occasionally unforeseen or unexpected situations can arise. A student may have an accident, undergo emergency surgery or perhaps break a limb. If this occurs there is no pre-arranged programme in place and a plan should be put together and implemented to organise the student's return to school. The school may need to put adult support in place for a short period.

If appropriate arrangements are not made, some medical conditions may have a significant impact on the student's access to educational opportunities or on his/her levels of attainment, and/or give rise to social, emotional and mental health difficulties. The medical condition may, in itself, significantly impair the student's ability to participate fully in the curriculum and the wider range of activities in school. Some prolonged conditions will affect the student's progress and performance intermittently, others on a continuous basis throughout the student's school career.

Drug therapies may compound the problem of the condition and have implications for the student's education. Medication may similarly impair concentration and lead to difficulties for the student in the classroom. In some cases, students with potentially life-limiting conditions may have periods of hospitalisation or frequent attendance as out-patients, social, emotional and mental health difficulties related to their condition and associated restrictions on everyday life because of the nature of their treatment.

Nevertheless, the existence of a medical diagnosis or a disability in itself does not imply that a student has special educational needs. Indeed, a student with a particular diagnosis or medical condition may not

require any form of additional educational provision in any phase of his/her education. In the context of these criteria, it is the student's special educational needs rather than a particular medical diagnosis that must be considered.

### Normal school entitlement – Physical Needs

Many students with a physical disability will be able to participate in most aspects of an ordinary classroom and make progress within the curriculum but may need some support through effective QFT and waves of intervention.

Description of student	Intervention and Support	Learning Environment	Partnership with parents, carers and other agencies	Monitoring, Assessment and Review
<p>Progress within the curriculum may be unaffected or mildly affected.</p> <p>Able to participate in most or all classroom activities.</p> <p>Has physical needs but the student can be independent with some minor adaptations to the environment.</p> <p>The teacher has concerns based on observation of some minor physical difficulties e.g. motor control problems, hand eye co-ordination, problems causing difficulties in throwing, catching in PE.</p>	<p>All teachers are teachers of children with special educational needs (COP 5:2)</p> <p>Students with physical needs will access strategies and resources typically available in the classroom.</p> <p>Differentiation may be required to take account of slower pace in performing some tasks – may tire easily.</p> <p>Staff are skilled at selecting appropriate methods and materials into their lesson plans to ensure access across the curriculum for students.</p> <p>Staff skilled in adjusting pace and order of activities in order to maintain interest and attention.</p> <p>Does not require regular additional adult support but may require some supervision/support for medication/dietary needs.</p> <p>May benefit from focused/ small group teaching support at some points during the week.</p> <p>Where a student's progress is not adequate, it will remain important to review arrangements.</p> <p>Structured curriculum plan in PE.</p>	<p>Staff consider appropriate student groupings, seating arrangements and surroundings</p> <p>School curriculum promotes personal care and safety.</p> <p>The school implements/ reviews its accessibility plan regularly to update details relating to building access, communication and training needs and information.</p> <p>School will provide easily made changes in the learning environment, and provide some differentiation within the classroom.</p> <p>Careful consideration given to the position of the student in the classroom to allow for maximum independence of movement/ access to resources and equipment.</p>	<p>Parent/carer involved in line with school's policy and arrangements for students with additional needs.</p> <p>General whole school training, advice and support from external professionals.</p> <p>Referral to SENDIASS Services (as required).</p>	<p>Students have regular opportunities to evaluate their performance in learning activities.</p> <p>Student self-assessment routinely used to set individual targets.</p> <p>Full inclusion in all assessments and tasks.</p>

## Criteria for Placing a SEN Support Cycle 1

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A student with physical difficulties who requires SEN Support will share one or more of the following characteristics:

- Mainly working within the same level as peers. Occasional difficulty in learning in whole class teaching group. Needs regular support to work on same tasks as peers.
- Physical difficulties continue to cause concern to the class/subject teacher.

### General Indicator (which must be present)

- The student's physical difficulties and/or medical condition limit his/her access to the curriculum and ability to take part in specific activities or participation in school life.

### Specific Indicators (which must be present)

- The student needs occasional adult support in some practical lessons, physical education, manipulating basic equipment and moving around school.
- The child / young person is dependent upon occasional adult support to:
  - » deal with minor matters involving self-help skills and/or medical treatments.
  - » maintain necessary aids and equipment.
  - » assist with collating work from lessons missed through absence from school.
- Assessments over time indicate that a more individualised and differentiated educational programme is necessary.

### Additional Indicators (which may be present)

- The student's progress is sometimes at lower levels than might be expected from their performance of tasks where their physical difficulty has less direct impact.
- Evidence that the student shows some signs of fatigue during the school day.
- The student exhibits social, emotional, and/or mental health difficulties, clearly linked to his/her physical difficulties and /or medical condition.
- Transfer of information across from previous provision.
- A review decision that the student's progress now makes his/her placement within the arrangements for SEN Support appropriate.

### Professional Judgement

- A consensus of those who teach the student, in partnership with his/her parents and the student in question, that his/her physical difficulties are impairing learning.

## Physical Difficulties Cycle 1

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### Level and description of difficulty

Will have a defined physical or medical condition that may be subject to regular medical/intervention

Will have needs that may impact on their self-esteem and social relationships

Will have moderate difficulties in aspects of curriculum access (e.g. wheelchair user)

Will have some gross and fine motor difficulties. Minor difficulties with spatial orientation



Will make progress within the curriculum, but at lower levels than may be expected from performance on tasks where physical difficulty has less impact.

Will be Independent in most activities

Will be working at slower pace than peers or signs of increasing fatigue during the school day

Use specialist aids relating to their disability e.g. wrist splint

Use limited, low tech specialist equipment to enhance their curriculum access,

Require limited adult assistance with practical aspects of the curriculum or self-help skills or personal care

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Assessment will draw on assessments already made as part of standard educational practice i.e. early years records, baseline assessments or QCA assessments.</p> <p>Student's strengths and weaknesses will be identified through a range of activities – observation, checklists, dialogue with staff, curriculum-related assessment, criterion-referenced assessment, non- standardised tests and/or diagnostic tests and may be supplemented by standardised tests.</p> <p>Assessment may sit within a Provision Map will have SMART targets.</p> <p>Monitoring of student progress in terms of effectiveness of the interventions arising from the Provision Map.</p>	<p>Mainstream class with flexible grouping/ seating arrangements and consideration to classroom organisation and the use of additional support to promote independent learning.</p> <p>Individual support and/ or groupings should be considered for up to 5 hours per week. This could be in the form of peer or teaching assistant support.</p> <p>Some adaptations to the school environment may be necessary.</p> <p>Classroom organisation should take account of social relationships.</p> <p>School will provide some changes in the learning environment. Some limited items of special equipment may be required to support learning/access to curriculum (desk, chair etc.)</p>	<p>Provision should aim of help the student in becoming a fully integrated member of the school community.</p> <p>Targeted small group/ individual intervention to address specific target (learning, independence and self-help skills, touch typing etc.) Withdrawal from class should be kept to a minimum.</p> <p>Curriculum differentiation and a degree of support to reflect individual needs (in particular in PE and other practical activities).</p> <p>Occasional flexible support in school to include dressing/ undressing and toileting.</p> <p>Support may be required with physical aids.</p> <p>Alternative approaches to recording used across the curriculum.</p> <p>Monitoring/ supervision may be required during unstructured periods of the day.</p>	<p>Individual support and groupings should be considered for up to 20 hours per week.</p> <p>Key worker identified to act as a point of reference.</p> <p>The SENCO/Head of Year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the student.</p> <p>The SENCO will support and advise teachers.</p> <p>Class or subject teachers remain responsible for working with the student on a daily basis, delivering any individual programmes.</p> <p>Some additional support may be required at periods throughout the day. Social situations such as breaks may need particular attention.</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Regular review meetings should be held involving both parents/carers and students. The focus of these meetings should focus on progress made and the effectiveness of strategies employed. Setting new targets will be a key component of these meetings.</p> <p>School may also have to initiate a separate individual health care plan to address the student's needs (however, such a plan is not part of the SEN process).</p>		<p>Meet and greet by a consistent adult at the beginning and end of the day.</p> <p>Curriculum actively promotes positive attitudes to disability.</p>	<p>Parents/carers to be consulted on levels of concern and to be asked for further advice along with consent to gain advice from other agencies.</p> <p>Referral to SENDIASS (as required).</p>

## Criteria for Placing a SEN Support - Further cycles of APDR

Students with a physical disability requiring support at SEN Support will share one or more of the following:

- Advice needed from the occupational therapist or physiotherapist.
- Require adaptations to ICT equipment.
- Require minor adaptations of buildings (e.g. widening a doorway).
- Require help provided with (for e.g.) toileting, mobility, dressing, feeding, practical activities and PE.
- School based programmes devised by therapists.
- Advice and support from a trained mentor/ counsellor.
- Planning to support primary care needs.
- Assessment of mobility needs by external agency.

### General Indicator (which must be present)

- The student's physical difficulties increasingly limit his/her access to the curriculum and ability to take part in specific activities or participation in school life

### Specific Indicators (which must be present)

- Assessments over time, together with discussion at review meetings, indicate that external advice and/or support is necessary to devise a more highly individualised and differentiated educational programme.

And at least one of the following:

- Minor adaptations to the environment are necessary to ensure the student's physical access to school.
- Access to a specific item of equipment is needed to ensure the student's full curriculum entitlement.
- The student is often dependent upon adult support to deal with matters involving self-help skills and/or medical treatments, to maintain necessary aids or equipment or to assist with collating work from lessons missed due to absence.
- Often needs support in practical lessons, manipulating basic equipment and moving around school
- The student requires the regular implementation of a programme designed in consultation with external professionals.

#### **Additional Indicators (which may be present)**

- Evidence that the student shows signs of increasing fatigue during the school day.
- The student's progress is sometimes at significantly lower levels than might be expected from his/her performance of tasks when his/her difficulty has less direct impact and/or from measures of general ability.
- Evidence of the student finding it increasingly difficult to undertake tasks.

#### **Professional Judgement**

- A consensus of those who teach the student, in partnership with his/her parents and the student that his/her physical difficulties are increasingly impairing learning and impeding curricular access.

### **SEN Support APDR Cycle 2\*\* and beyond Physical Difficulties**

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#### **Level and description of difficulty**

Will have moderate to severe physical difficulties

Has moderate/severe difficulties with the ability to function independently in the school environment and in everyday life manages to navigate an appropriately adapted school building/campus and can access the curriculum with some reasonable adjustments such as adult supervision and support.

May use manual/electric wheelchair or walking aids for movement between buildings and needs assistance.

May have physical difficulty and additional difficulty such as delayed learning.

Will need a clear plan which includes focused activities to develop physical skills.

Will need differentiation of opportunity and extra time allowed to access the curriculum may need help to record work/may need AAC.

Will need adaptations specifically for the PE curriculum.

May/may not have progressed at nationally expected levels linked to prior attainment.

May require exercises, activities and materials to support fine and gross motor skill development will require close supervision to ensure safety and physical well being.

Requires regular therapy.

Has physical dependence on others for the majority of the school day.

Has physical difficulties impacting on attainment levels in most curricular areas i.e. linked with condition, progress may be depressed by irregular attendance.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Resources
<p>Detailed analysis of the student's physical/wider needs. A range of Health professionals, Educational Psychology and Specialist teachers will contribute.</p> <p>IEPs will be set in consultation with external agencies.</p> <p>IEPs will include: positively phrased SMART targets, which reflect the student's priority needs and will specify teaching arrangements and resources required with clearly defined success criteria. They will include strategies that reflect the student's preferred learning styles.</p> <p>Student progress will be subject to systematic monitoring and specifically their response to interventions outlined in the IEP.</p> <p>Specific targets relevant to particular curriculum areas and these are agreed with the appropriate staff members.</p> <p>IEPs will be reviewed termly.</p> <p>Parents and students will be involved in target setting and review and students should have an understanding of the targets they are working to achieve.</p>	<p>Audit of environment to consider access issues with adaptations to environment (as required).</p> <p>Mainstream class with modification of classroom organisation, routine and environment.</p> <p>Access to considerable individual/small group in class support.</p> <p>Access to a base for therapy or developmental programmes and/or special arrangement for personal and hygiene needs.</p> <p>Consideration to timetabling and location of rooms.</p> <p>A lift/stair climber to access upper floors.</p> <p>Changing bed and shower as appropriate.</p> <p>Appropriate software and technology to support access to the curriculum.</p> <p>Appropriate peer groupings should be considered.</p> <p>Educational visits and extracurricular activities are planned to fully include the student with physical disability.</p>	<p>Opportunities and comprehensive resources for motor skill development offered within the school curriculum.</p> <p>A focus on the educational implications of the physical difficulty (though therapy may support these areas of need).</p> <p>Pace of teaching takes account of possible fatigues and frustration experienced by the students.</p> <p>Specific activities to overcome physical difficulties e.g. reducing written work.</p> <p>Planned small group and individual work as necessary linked to tiredness or varying health/condition. This might also include timetabled learning breaks as required.</p> <p>Alternative methods of recording as advised.</p> <p>Additional access to ICT, specialist aids and adaptations to facilitate access to the curriculum.</p>	<p>Individual support and groupings should be considered for up to 20 hours per week.</p> <p>An identified key worker.</p> <p>Differentiation techniques widely used to promote full access to practical activities.</p> <p>SENCO takes lead for co-ordinating provision.</p> <p>Specialist transport arrangements may be required.</p> <p>Access to LSU or similar facility for time out/ manage fatigue.</p> <p>Regular liaison between external professionals and school staff in relation to specific programmes and targets.</p> <p>Class or subject teachers remain responsible for working with the student on a daily basis, delivering any individual programmes.</p> <p>Parents/carers to be consulted on levels of concern and to be asked for further advice.</p> <p>Specific training in managing health needs for class/subject teachers and TAs</p> <p>Training in Manual Handling.</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Resources
<p>There should be an on-going cycle of identification, assessment, planning, implementation, monitoring and review.</p> <p>Regular home-school liaison.</p> <p>Other factors in a child's family or environment may also need to be considered as part of the assessment process.</p> <p>Risk assessments as required.</p>		<p>Individual/small group support with:</p> <ul style="list-style-type: none"> <li>■ practical lessons</li> <li>■ personal care</li> <li>■ physiotherapy programmes</li> <li>■ learning programmes</li> <li>■ physical aids</li> <li>■ movements around school</li> </ul> <p>Materials available and used to develop peer awareness of physical difficulty.</p> <p>Reasonable adjustments/ arrangements made for formal assessment tasks such as additional time, amanuensis, rest breaks, use of ICT and enlarged papers.</p>	<p>Staff able to monitor and assess for access to special exam arrangements.</p> <p>Access to specialist advice on ICT (equipment and use) may be required.</p> <p>Referral to SENDIASS (as required).</p> <p>Regular home school liaison.</p> <p>Guidelines for Health and Safety and Risk Assessments available</p> <p>Staff trained and able to deliver individualised therapy programmes; learning programmes.</p> <p>Access to a range of equipment including a range of furniture/ storage and equipment to support the student.</p> <p>Access to specialist equipment to support communication.</p> <p>Access to specialist equipment to support mobility.</p>

## Hearing Impairment

Hearing impairment can have a significant impact on a child's educational development in some cases resulting in learning delay and reduced curricular access. This will require careful monitoring by schools and external professionals.

HI spans a range from mild to profound. It can be temporary or permanent. Most children with HI will have been diagnosed at the pre-school stage and will have accessed some level of support from the education support services and Health colleagues.

It is possible for some children to acquire hearing loss later in life through accident or illness, a genetic condition or unknown.

A significant proportion of children / young people have some degree of hearing difficulty at some time. Temporary hearing loss in the early years is usually caused by the condition known as "glue ear". Such

hearing losses fluctuate and may be mild to moderate in degree. They can compound other learning difficulties. A long-term conductive loss in both ears can have an impact on education. Permanent hearing losses are usually bilateral and sensori-neural in origin. They will usually be moderate, severe or profound and may give rise to severe and complex communication difficulties. A permanent loss in one ear and a temporary loss in the other may also cause significant hearing impairment.

Listening to language through hearing aids and cochlear implants and the visual concentration required to follow lip reading and sign language is very tiring. Cochlear implants and hearing aids do not replicate normal hearing and have limitations such as reduced or no function over distance and in background noise. Studies have shown that deaf children are also at higher risk of developing social and emotional difficulties compared to hearing peers.

Many of the children with HI may require some of the following:

- Flexible teaching arrangements.
- Appropriate seating, acoustic conditioning and lighting.
- Adaptations to the physical environment of the school.
- Adaptations to school policies and procedures.
- Access to alternative or augmented forms of communication.
- Access to different amplification systems.
- Access in all areas of the curriculum through specialist aids, equipment or furniture.
- Regular and frequent access to specialist support.
- Additional support from a ToD at periods of transition.
- Normal school entitlement – Hearing Impairment.

The majority of students with HI will be able to participate in all aspects of an ordinary classroom and make progress within the curriculum but may need some support through effective QFT and waves of intervention.

Description of student	Intervention and Support	Learning Environment	Partnership with parents, carers and other agencies	Monitoring, Assessment and Review
Frequent colds and/or ear infections that may cause hearing loss which may result in school absence.  Apparent fluctuations in responses to sound, spoken language and attention skills. There may be some associated behavioural needs.	All teachers are teachers of children with special educational needs (COP 5:2).  The student's hearing will be assessed by an appropriately qualified professional, who will refer on to other agencies if required.	Minor adjustments to classroom practice, materials and the learning environment may be required.  The teacher will provide some differentiation and opportunities to practice/reinforce listening and other skills as necessary.	Parent/carer involved in line with school's policy and arrangements for students with additional needs.  General whole school training, advice and support from external professionals.  Referral to SENDIASS Services (as required).	Students have regular opportunities to evaluate their performance in learning activities.  Student self-assessment routinely used to set individual targets.  Full inclusion in all assessments and tasks.

Description of student	Intervention and Support	Learning Environment	Partnership with parents, carers and other agencies	Monitoring, Assessment and Review
	<p>The class or subject teacher is able to take basic steps using resources and strategies typically available in the classroom.</p> <p>Tasks may need to be differentiated by level/ outcome/ pace and grouping.</p> <p>Staff are skilled at selecting appropriate methods and materials into their lesson plans to ensure access across the curriculum for students.</p> <p>Staff skilled in adjusting pace and order of activities in order to maintain interest and attention.</p> <p>Student does not require regular additional adult support.</p> <p>Student may benefit from focused/small group teaching support at some points during the week.</p>	<p>A favourable seating position will be provided where the student can see the teacher and hear the contribution of others.</p> <p>General whole school training, advice and support from external professionals.</p> <p>Schools care and for best practice, should, purchase additional training.</p>		<p>Clinical diagnosis of mild unilateral or fluctuating hearing impairment may have been made and is monitored at local Audiology clinic.</p> <p>School concerns re hearing should be checked with parents and discussed with the school nurse. This discussion should be noted in school records.</p> <p>Where student's progress is not adequate, support arrangements should be reviewed.</p> <p>Reference to general guidance from the National Deaf Children's Society.</p>

## Criteria for Placing a SEN Support Cycle 1

A student with hearing impairment who requires support at SEN Support will share one or more of the following characteristics:

- A student with a history of fluctuating hearing loss where hearing is now within normal limits who may still have listening and learning needs
- A student with a measured hearing loss on one side only (unilateral hearing loss) who does not have a hearing aid.
- A student with a confirmed mild hearing impairment either permanent sensori- neural or long-term conductive hearing loss who choose not to wear hearing aids.
- A student who has a hearing aid for use at those times when hearing is poor.

## Hearing Impairment Cycle 1

### Level and description of difficulty

Mild fluctuating loss: The student has a loss which can fluctuate, is usually seasonal and related to having catarrh linked to a cold. This is very common amongst Key Stage One children in particular and usually clears up by the time they move to Key Stage Two. Fluctuating hearing loss is less common with children in High School. Some children will have continued problems and perhaps ‘glue ear’ that is always of greater concern.

Unilateral hearing loss: The student has a hearing loss in one ear and good hearing on the other side. The loss can be of varying degrees, from mild to profound. The student may have a hearing aid but this is not always the case and depends on level of hearing in “good” ear. A child / young person with unilateral hearing loss is likely to have difficulties with sound location and listening in background noise.

Will require regular audiological reviews and monitoring undertaken by the PCT.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Student’s progress, strengths and weaknesses will have been monitored using a range of activities – baseline assessments, teacher observations, checklists, discussion with staff and external agencies, non-standardised tests and/or diagnostic tests and standardised tests.</p> <p>Class and subject teachers will plan to implement aspects of the targets in their lessons.</p>	<p>Staff should be aware of the student’s hearing loss and its implications in school (e.g. poor language and vocabulary acquisition, poor attention and concentration skills).</p> <p>Students should remain part of the mainstream class for activities except in exceptional circumstances (such as small group or individual intervention) and with flexible grouping arrangements.</p>	<p>Class teacher to plan/deliver differentiated classroom activities to reflect student’s individual needs and ensure full access to all activities.</p> <p>Provision map/targets addressed through small group individual and class work within the curriculum framework. This may address (for e.g.) SLCN, social skills, curricular skills and behaviour.</p>	<p>Individual support of up to 20 hours may be required.</p> <p>Access to a keyworker to act as a stable reference point.</p> <p>Advice and guidance may be sought from a specialist Teacher of the Deaf (HI).</p> <p>Strategic use of peer support.</p> <p>Medical intervention and monitoring undertaken by the Audiology clinic.</p>



Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Assessment may sit within provision map planning.</p> <p>Individual SMART targets set, will consider a range of needs (some may be shared with other students where there are similar presenting problems in the same class). Specific targets are additional to whole class curriculum planning.</p> <p>Targets can be included on the school's provision map and class/ subject teachers will implement targets in lessons.</p> <p>Targets will be reviewed termly.</p> <p>The provision map will specify; teaching arrangements; resources; strategies that reflect the student's preferred learning style and success criteria.</p> <p>Parents and students will be involved in target setting and review. Students should have an understanding of the targets they are working to achieve.</p> <p>Systematic monitoring of progress to consider the impact of interventions used and will focus both on progress and the setting of new targets.</p>	<p>Adults to remain aware of child's 'better' ear and understand that for a small number of children HI may impact on the development of language and social interaction.</p> <p>Students wearing a hearing aid should be encouraged to wear it as instructed by the audiologist or ENT consultant. Any concerns and/ or observations about the use of the prescribed aid should be followed up with the parent and advice from the appropriate support services sought if difficulties cannot be resolved.</p> <p>Ensure the lighting in the classroom is good and that the student can see clearly at all times.</p> <p>Reduce background noise, consider listening conditions and develop an acoustic friendly classroom environment.</p> <p>Discuss with the student where they find it easiest to hear and when it is difficult for them, make changes accordingly.</p> <p>Students should be seated in good listening positions.</p> <p>Provide students with visual representations to support understanding of what is spoken. The might include use of pictures, key vocabulary lists, diagrams.</p>	<p>Plan use of audio-visual materials carefully.</p> <p>Teach active listening skills.</p> <p>The speaker should identify themselves in some way so that the student can locate them before they begin to talk. This is of particularly importance in group discussion.</p> <p>The speaker should speak clearly (but without exaggerating lip movements or shouting).</p> <p>Check that students have heard/ understood all instructions. Students should (in particular) be made aware of safety measures in technology rooms, science labs etc.</p> <p>Cue in the student when someone else is speaking in a group discussion and where possible repeat what the other student has said.</p> <p>Encourage variety in use of teaching approaches/ senses to support learning (movement, vision, touch etc.).</p> <p>Provide students with pre-teaching opportunities to ensure familiarity with new vocabulary/ topics. (should not needed at this level please delete)</p> <p>Effective transition planning (school to school)</p>	<p>Access to an Educational Audiologist (as required)</p> <p>Parents involved in planning and carrying out interventions. This would include active support in a student's use of amplification.</p> <p>The SENCo/Head of Year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the student.</p> <p>The SENCo will support and advise teachers.</p> <p>Staff with skills/ experience in supporting students with HI.</p> <p>Visual supports to maximise student's potential for learning.</p> <p>Consideration of classroom listening resources such as classroom soundfield systems (CSFS) – these are available on loan to schools where required. (The Teacher of the Deaf (ToD) assesses this and advises whether it is appropriate).</p> <p>Guidelines for Health &amp; Safety and Risk Assessments are available.</p>

## Criteria for SEN Support cycles of APDR

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- A hearing impairment significant enough to impact on learning (as identified by specialist Teacher of the Deaf assessments)
- Little or no progress made despite the additional teaching and management strategies
- Hearing impairment confirmed as either permanent sensori-neural or long-term fluctuating conductive or a mixed hearing loss
- Requirement for hearing aids and FM system when appropriate
- Despite receiving individualised help the student has sensory needs which require additional specialist equipment and/or regular advice, visits and possibly direct teaching by specialists.

### General Indicator (which must be present)

- An appropriate professional has advised the school that the student's hearing loss may be impeding his/her learning and is educationally significant.

### Specific Indicators (which must be present)

- Assessments over time by the class/subject teacher and/or SENCo and/or the specialist teacher (HI), together with discussion at reviews, indicate that external advice and/or support is necessary to devise an appropriately differentiated curriculum.

The school does not have the resources or expertise alone to provide the additional input needed to address:

- Hearing aid management
- Language/literacy development for hearing impaired students
- Parental support on issues related to hearing loss
- Advising teachers on educational issues and classroom management concerning students with hearing loss
- Undertaking regular monitoring and evaluation of hearing equipment and speech discrimination skills.

### Additional Indicators (which may be present)

- Evidence that the student shows signs of increasing fatigue e.g. towards the end of the school day.
- Evidence that the student is slower or finds it difficult to process and understand verbal instructions.
- Evidence of the student finding it increasingly difficult to undertake tasks or participate in activities dependent upon listening and hearing, leading in turn to problems of working at the same pace as his/her peers.
- Recorded examples of increasing frequency and extent of difficult-to-manage behaviour linked to the student's difficulties with listening and hearing and/or making himself/herself understood.
- Evidence that the child / young person increasingly experiences frustration and/or difficulty in forming relationships with his/her peers and shows a tendency towards being socially isolated in less structured parts of the school day.

### Professional Judgement

- A consensus of those who teach the student, in partnership with his/her parents and the student that additional input from a specialist teacher (HI) is necessary.

## SEN Support APDR Cycle 2\*\* and beyond Hearing Impairment

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### Level and description of difficulty

Mild/ Mild High Frequency Permanent Hearing Loss:

The student has a hearing loss that is permanent. This may be conductive (middle ear) or could have sensori-neural (inner ear) element or both (a mixed hearing loss). The student sometimes has a hearing aid which could be worn all the time but sometimes only when needed most, or at identified times. Students with mild loss should function well in a school environment providing all staff are aware of their needs. However all students are individuals and the effects of a mild loss on one student may be greater than another.

### Moderate or Severe Loss:

CYP with a severe hearing loss that are not eligible for a cochlear implant, in practice have MORE difficulties that those CYP with a profound loss that do get an implant. Those with severe loss should NOT be categorised with those with a moderate loss. These category groupings do not match those of the eligibility criteria for commissioned services which could cause some confusion.

[www.babcockprime.co.uk//babcock\\_prime/Article-Downloads/About-us/BabcockPrimeEligibilityCriteria2016\\_17Nov16.pdf](http://www.babcockprime.co.uk//babcock_prime/Article-Downloads/About-us/BabcockPrimeEligibilityCriteria2016_17Nov16.pdf)

Will have a moderate or severe /Auditory Neuropathy Spectrum Disorder and use personal hearing aids, radio aids and possibly a sound field system.

The loss is permanent or long term and can be conductive but is likely to also have a sensori-neural element or mixed. The student should wear hearing aids all the time.

Students with a moderate hearing loss may vary in the effects this has upon their communication and language development. Most students will be able to participate in all aspects of school life with minimal additional support and with advice from a specialist teacher (HI) to school staff.

Where the effects of the loss are more marked and where their functioning in school is at a lower level than would be expected, there may be a greater need for supported provision, with higher levels of in-class support and greater involvement of a specialist teacher (HI).

The hearing loss may affect the student's social interaction; he/she may have difficulty with new vocabulary and concepts and specific listening activities may give problems e.g. video/audio tape work, spelling tests.

### Profound Loss

Will have a profound hearing loss/Auditory Neuropathy Spectrum Disorder and use personal hearing aids, and/or cochlear implants, radio aids and possibly a sound field system (available on loan to schools).

Will usually require the language demands of the curriculum to be targeted and differentiated with advice and support from external professionals.

Approaches that can be supported by a TA (e.g. auditory verbal approaches, signed support, BSL) will be used. May/may not have progressed at nationally expected levels linked to prior attainment and the curriculum may require significant differentiation and or modification.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Detailed analysis of the student's strengths and weaknesses in relation to the student's HI, curricular skills, SLCN and social/ emotional development.</p> <p>IEPs to be set following consultation with external professionals, such as Educational Psychologists, Specialist Teachers (HI), Health Professionals (e.g. SLT).</p> <p>IEPs will include; positively phrased SMART targets, which reflect the student's priority needs and will specify teaching arrangements and resources required with clearly defined success criteria. IEPs will include strategies that reflect the student's preferred learning styles.</p> <p>Student progress will be subject to systematic monitoring and specifically their response to interventions outlined in the IEP.</p> <p>IEPs will be reviewed termly and success will be celebrated.</p>	<p>Mainstream class or set with access to individual and small group teaching within the classroom and/or periods of withdrawal.</p> <p>Grouping arrangements or additional support in the classroom used flexibly to support access to curriculum.</p> <p>Peer support both in class and in break times to facilitate social interaction where required.</p> <p>Environmental audit undertaken with appropriate adjustments.</p> <p>Classroom environment should provide good acoustics (including use of soundfield systems (available on loan to schools) and good lighting.</p> <p>Acoustic friendly classroom environment and quiet listening conditions/space for 1:1 work. This might include access to LSU or similar facility.</p>	<p>Opportunities for targeted individual or small group intervention either within the class or withdrawal. The advice of external professionals will inform teaching and learning tasks. This may include direct/ indirect involvement from a specialist teacher (HI).</p> <p>Differentiation to reflect individual needs both in relation to the curriculum and speaking and listening.</p> <p>Targeted interventions/ support may address (for e.g.):</p> <ul style="list-style-type: none"> <li>■ specific HI needs (including use/ care/ security of equipment)</li> <li>■ SLCN (e.g.) vocabulary comprehension and inference, use of language, sentence structures, the speech sound system, and active listening skills</li> <li>■ social language skills</li> <li>■ motor co-ordination difficulties</li> <li>■ organisational strategies</li> <li>■ curricular skills (and may include more extensive teaching to specific gaps)</li> </ul> <p>Teachers should try to stay in one place when talking to allow the student to have a good view of the face at all times.</p>	<p>Teacher of the Deaf (ToD) involvement to include advice, assessment, training and support.</p> <p>Provision of TA support. Children/young people requiring support at a high level above that which is typically provided for children and young people with SEN. This will typically be informed by bespoke advice from professionals.</p> <p>Key worker, teacher or TA to act as a stable reference point.</p> <p>Access to Communication Skills Advisor/ appropriate Deaf role model (as required).</p> <p>Staff trained and able to support and include students with HI in all areas of the curriculum. This would include the preparation of appropriate resources / materials and the ability to implement more specialist strategies/ interventions.</p> <p>Staff with knowledge and understanding of how hearing aids perform in a mainstream environment.</p> <p>Staff with knowledge and understanding of how to use radio aids and in which situations it is most beneficial to the student. This will include advice, assessment and support from specialist teachers and Educational Audiologist (HI)</p> <p>Staff skilled and able to monitor students with mild, moderate, severe, profound sensori-neural hearing losses plus high frequency and long term conductive losses and liaise with schools / parent/carer as appropriate.</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Parents and students will be involved in target setting and review. Students should have an understanding of the targets they are working to achieve.</p> <p>There should be an on-going cycle of identification, assessment, planning, implementation, monitoring and review.</p> <p>Regular home-school liaison.</p> <p>Other factors in the child's family or environment may also need to be considered as part of the assessment process.</p> <p>Consider whether a Common</p> <p>Risk assessments as required.</p>	<p>Quiet/ private space for hearing aid test box checks and for management of personal hearing and radio aids.</p> <p>Seating arrangements for student understood and implemented.</p> <p>Use of classroom display, pictures, word banks, visual dictionaries and specific software (e.g. Clicker, SimWriter) to introduce and reinforce new language and verbal concepts.</p> <p>In class support to reinforce and support access to classroom discussions e.g. through note-taking.</p> <p>May be appropriate to encourage a signing ethos around school.</p>	<p>Timetabled learning breaks as advised by external professionals.</p> <p>Pre-tutoring of subject specific vocabulary and/ or concepts.</p> <p>Teacher/ TA to check student's understanding of concepts throughout lessons.</p> <p>Opportunities for the student to be signposted to agencies that offer learning of sign language. ToD would make judgement as to whether child would benefit from this if the child requested such support as would have an impact on curriculum time so ToD needs to be sure this would enhance understanding and learning.</p> <p>Staff to check student's understanding of task requirements. This would include homework.</p> <p>Access arrangements for assessments/ exams to be implemented as appropriate.</p> <p>Visual cues and reinforcement always available.</p> <p>Use of home/ school diary.</p> <p>Video/TV/film etc, subtitles to be used (advised by ToD).</p>	<p>Staff are trained and able to complete daily functional tests of radio aids, personal hearing aids and sound field systems.</p> <p>Staff skilled and able to implement and manage changes and adaptations to the learning environment.</p> <p>Staff skilled and able to develop peer awareness of hearing impairment.</p> <p>Staff trained and able to support a programme to develop student's audiological independence skills. This might be provided by a specialist teacher (HI).</p> <p>Appropriate software and technology to support access to the curriculum.</p> <p>Staff able to monitor and assess for access to special exam arrangements.</p> <p>Strategic use of peer support</p> <p>Medical intervention and monitoring undertaken by the Audiology clinic.</p> <p>Parents involved in planning and carrying out interventions. This would include active support in a student's use of amplification.</p> <p>The SENCo/Head of Year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the student.</p> <p>The SENCo will support and advise teachers.</p> <p>Staff with skills/experience in supporting students with HI.</p> <p>Visual supports to maximise student's potential for learning.</p> <p>Guidelines for Health &amp; Safety and Risk Assessments are available.</p>

## Vision Impairment

Vision impairment can have a significant impact on a child's psychological, social/ emotional development and mobility in some cases resulting in learning delay and reduced curricular access. This will require careful monitoring by schools and external professionals, parent and carers.

VI spans a range from mild partial sight to total blindness. It is usually permanent. Most children with VI will have been diagnosed at the pre-school stage and will have accessed some level of support from education support services and Health colleagues.

It is possible for some children to acquire visual loss later in life through accident, illness or degenerative conditions.

The Code of Practice is clear that schools can consult outside agencies for advice in preventing the development of more significant needs.

Visual difficulties take many forms, with widely differing implications for a student's education. They range from relatively minor and remediable conditions to total blindness. Some students are born blind: others lose their sight, partially or completely, as a result of accident or illness. In some cases VI is one aspect of a multiple disability.

Whatever the nature and cause of the student's VI, the major issue in identifying and assessing his/her special needs will relate to the degree and nature of the functional vision and the student's ability to adapt socially and psychologically, as well as to progress in an educational context.

A defect of a student's colour vision alone may not necessarily result in any special educational needs.

### Definitions for Children and Young People with Vision Impairment

**Cerebral Vision Impairment:** A condition where some of the special "vision" parts of the brain and its connections are damaged and the child or young person with this are unable to make sense of what they see. However, it can improve as they get older.

**Perceptual Difficulties:** Inability to perceive, integrate and recall visual stimuli.

**Mild Sensory Loss:** Visual acuity better than 0.5 logmar (6/19) with or without a visual field loss.

**Moderate:** Visual acuity between 0.5 logmar (6/19) and 0.8 logmar (6/38)

**Severe:** Visual acuity between 0.8 logmar (6/38) and 1.0 logmar (6/60)

**Profound:** Visual acuity 1.0 logmar (6/60 or less)

NB The above acuities are with or without correction (glasses). The Specialist Teacher uses assessment from ophthalmology combined with their own functional vision assessments to determine level of VI.

For some conditions, central vision remains good, but loss of peripheral and/or night vision has a significant impact on the student's ability to access education. Similarly, there are conditions affecting central, but not peripheral vision, which would also require specialist input. The visiting Specialist Teacher will advise.

A child with a profound vision impairment is likely to be a tactile (Braille) learner and will require significant modifications to be made to the curriculum to support this literacy medium. The Specialist Teacher – VI will provide all Braille tuition and support with resources and will assess suitability for Braille, considering a range of factors including but not exclusive to, tactile readiness, academic ability or potential, and dual media learning assessment.

**Normal school entitlement – Vision Impairment**

Many students with VI will be able to access most aspects of an ordinary classroom and make progress within the curriculum but may need some support through effective QFT and waves of intervention.

Description of student	Intervention and Support	Learning Environment	Partnership with parents, carers and other agencies	Monitoring, Assessment and Review
<p>Some deterioration in certain areas of academic performance e.g. deteriorating handwriting, slowness in copying from the board, increasingly asking for written instructions to be given verbally.</p> <p>A recognisable ophthalmic condition (i.e. a mild sensory loss) which has the potential to affect the learning process.</p>	<p>All teachers are teachers of children with special educational needs (COP 5:2)</p> <p>The class or subject teacher is able to take basic steps using resources and strategies typically available in the classroom.</p> <p>Tasks may need to be differentiated by level/ outcome/ pace and grouping and a reduction in recording.</p> <p>Staff are skilled at selecting appropriate methods and materials into their lesson plans to ensure access across the curriculum for students.</p> <p>Staff skilled in adjusting pace and order of activities in order to maintain interest and attention.</p> <p>Student does not require regular additional adult support.</p> <p>Student may benefit from focused/small group teaching support at some points during the week.</p>	<p>School to undertake an SEN Adaptation Audit by qualified Mobility Officer to take in to account student's needs regarding lighting, steps, stairs and blinds.</p> <p>Minor adjustments to classroom practice, materials and the learning environment may be required.</p> <p>Normal class grouping with student's physical space in classroom to take account of visual difficulties</p>	<p>Parent/carer involved in line with school's policy and arrangements for students with additional needs.</p> <p>General whole school training, advice and support from external professionals. This would (for e.g.) a Qualified Teacher of the Visually Impaired (QTVI).</p> <p>Consideration to a degree of peer support.</p> <p>Referral to SENDIASS Services (as required).</p>	<p>Students have regular opportunities to evaluate their performance in learning activities.</p> <p>Student self-assessment routinely used to set individual targets.</p> <p>Full inclusion in all assessments and tasks and consideration to statutory additional time allocation and special arrangements (as appropriate).</p> <p>School concerns re vision should be checked with parents. This discussion should be noted in school records.</p>

## Criteria for Placing a SEN Support Cycle 1

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- Vision impairment significant enough to impact on learning
- Make little or no progress despite flexible teaching arrangements.
- Vision impairment is confirmed as either permanent or long term degenerative.
- May require spectacles or LVAs but whose vision may not be fully corrected.
- The school has reason to believe that the student is experiencing visual difficulties which are impeding his/her learning.

### Specific Indicators (which may be present)

Physical indicators of a visual difficulty may include:

- Restricted mobility patterns
- Unusual or rapid eye movements
- Covering one eye in an attempt to see
- Squints/obvious discomfort in bright light
- Shading eyes against the reflection of bright light
- An unusual angle of view being adopted by the student
- Reporting sore eyes, visual fatigue or frequent headaches

Behavioural indicators of a visual difficulty may include:

- The student consistently choosing to sit near the front of the group/class
- Apprehension on steps, slopes or when jumping off apparatus
- Unsure when sudden light changes occur – light to dark/dark to light
- Undue sensitivity to light
- Frequent nodding movements
- Peering closely – nose almost touching objects
- Failure to respond to non-verbal gestures or when spoken to without being named
- Difficulty in describing the details of illustrations, diagrams and graphs
- Inability to read small print
- Difficulty copying from the interactive whiteboards, ICT equipment, handwritten notes

## Vision Impairment Cycle 1

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### Level and description of difficulty

The student has a level of Vision impairment which requires some modifications to be made to facilitate access to the curriculum, the school or classroom environment or the classroom management of the student e.g. positioning in class, use of equipment etc. Impaired functional vision in the educational setting is the key criterion.

While it is difficult to categorise these children / young people they may also include those with: poor visual acuities (e.g. 0.3 to 0.5); ocular motor difficulties; visual field loss; difficulties where patching is significantly reducing vision; progressive conditions where the present impairment is very slight.



Where a student exhibits more than one of these difficulties it is more likely that they will be at SEN Support plus. If the student has visual perception difficulties this will compound the problems associated with all of the above.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Student's strengths and weaknesses including functional vision in the educational setting are considered.</p> <p>Assessment will be informed by teacher observations, information/ advice from other agencies including specialist teacher (VI) and the views of the young person/parents.</p> <p>Assessment may sit within provision map planning.</p> <p>Individual SMART targets set, will consider VI needs. Specific targets are additional to whole class curriculum planning.</p> <p>Targets can be included on the school's provision map and class/ subject teachers will implement targets in lessons</p> <p>Targets will be reviewed termly</p> <p>The provision map will specify; teaching arrangements; resources; strategies that reflect the student's preferred learning style and success criteria – use of specialist aides, equipment and mobility needs.</p>	<p>Staff should be aware of the student's VI and its implications in school.</p> <p>Students should remain part of the mainstream class for activities except in exceptional circumstances (such as small group or individual intervention) and with flexible grouping arrangements</p> <p>Grouping arrangements should reflect cognitive ability (rather than level of VI)</p> <p>The student's position in class will need to ensure access to visual stimuli (including IWB and ICT etc.)</p> <p>Environmental audit undertaken with appropriate adjustments. This might include consideration to:</p> <p>Clear signage</p>	<p>Class teacher to plan/ deliver differentiated classroom activities to reflect student's individual needs and ensure full access to all activities</p> <p>Provision map/targets addressed through small group individual and class work within the curriculum framework. This may address e.g. VI needs, social/ emotional skills, mobility curricular access, specialist technology needs and behaviour.</p> <p>Specific consideration should be given to the manner in which staff present the curriculum including e.g.:</p> <ul style="list-style-type: none"> <li>■ Use of IWB, ICT etc.</li> <li>■ Accessibility of printed materials</li> <li>■ Use of auditory/ tactile stimuli to support visual stimuli</li> <li>■ Speed of work</li> <li>■ Physical position of student</li> </ul> <p>Social interaction with other students may need to be encouraged through a range of peer support approaches (e.g. buddying).</p>	<p>Individual support and groupings should be considered for up to 20 hours per week.</p> <p>Access to a keyworker to act as a stable reference point.</p> <p>The SENCO/Head of Year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the student.</p> <p>The SENCO will support and advise teachers.</p> <p>Students may benefit from using some specialist equipment/ visual aids e.g.</p> <p>Sloping reading/writing boards</p> <p>Low power magnifiers</p> <p>Dark pens/pencils</p> <p>Dark lined books/paper</p> <p>Large print materials (e.g. reference books)</p> <p>Bright PE equipment</p> <p>ICT access</p> <p>Staff trained and able to support students with VI. This would address Visual Awareness of VI and its impact on learning as advised by a QTVI</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Parents and students will be involved in target setting and review. Students should have an understanding of the targets they are working to achieve.</p> <p>Systematic monitoring of progress to consider the impact of interventions used and will focus both on progress and the setting of new targets.</p> <p>The involvement/advice of external professionals (e.g. QTVI) should be considered if concerns are raised in respect of a student's VI.</p>	<p>High contrast colour schemes</p> <p>Visually highlighting equipment</p> <p>Controlled lighting (including blinds)</p> <p>Overall classroom layout</p> <p>Additional lighting needs</p> <p>SEN Adaptation/ Mobility Health and Safety Review - as required.</p>	<p>Some difficulties in making and maintaining friendships and relationships may require some additional adult support. This may lead to some mentoring support (or similar), advocacy to address specific VI needs.</p> <p>Appropriate access arrangements for assessments/ exams to be implemented as appropriate.</p>	<p>Strategic use of peer support. This may involve some awareness raising activity with students.</p> <p>Parents/carers and students involved in planning and delivering interventions.</p>

## Criteria for Placing a SEN Support - Further cycles of APDR

- A vision impairment significant enough (i.e. moderate and severe) to impact on social/emotional development, mobility and learning.
- Little or no progress made at SEN Support despite the additional teaching and management strategies.
- May require specialist interventions to access the curriculum (e.g. LVAs, ICT adaptations, touch typing, mobility)
- Despite receiving individualised help under SEN Support have VI needs which require intervention from a specialist teacher to provide regular advice to minimise the impact of VI on learning. This will require on-going assessment and direct teaching by QTVI.

### General Indicator (which must be present)

- Clear evidence that the student has a moderate to severe VI which is seriously affecting his/her educational progress.

### Specific Indicators (which must be present)

- Assessments over time by the class/subject teacher and/or SENCO and/or the QTVI together with discussion at SEN Support reviews, indicate that external advice and/or support is still required to devise a more highly individualised and differentiated educational programme.
- Differentiated classroom provision for the student's education has not resulted in the expected progress towards achieving learning targets set.

### Additional Indicators (which may be present)

- Evidence that the student shows signs of increasing fatigue towards the end of the school day.

- Evidence of the student finding it increasingly difficult to undertake tasks or participate in activities dependent upon vision, leading in turn to problems of working at the same pace as his/her peers.
- Evidence that the student increasingly experiences frustration and/or difficulty in forming relationships with his/her peers and shows a tendency towards being socially isolated in less structured parts of the school day. This might also present as challenging behaviour.

### Professional Judgement

- A consensus of those who teach the student in partnership with his/her parents and the student with additional input from the Qualified Teacher of Children and Young People with Vision Impairment (QTVI).

## SEN Support APDR Cycle 2\*\* and beyond Vision Impairment

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### Level and description of difficulty

Moderate: Has a moderate level of vision impairment (0.5 to 0.8) which requires modifications to be made to the presentation of the curriculum, school or classroom environment and the classroom management of the student e.g. positioning in class, use of equipment etc.

May require some printed materials to be modified or alternative access methods e.g. speech to texts etc.

Will likely require the provision of some specialist equipment. Significantly impaired functional vision in the educational setting is the key criterion.

Severe: The student will usually have poor vision impairment (0.8 to 1.0). This may be compounded by other problems such as visual fields loss, monocular vision, ocular motor impairment, visual perception difficulties or the presence of degenerative conditions and a severe near vision loss.

Will have a significant level of vision impairment which may include a cerebral vision impairment and/or perceptual or processing difficulties.

Will use LVAs such as magnifiers, binoculars, monoculars and specialist access technology such as CCTV, ZoomText, Windows magnifier, Sound Plant and interactive whiteboard access.

Vision impairment will have a moderate impact on the student's ability to function independently in the school environment and in their everyday life.

Will be able to access the curriculum but with consistent use of modified materials and presentation differentiation, reinforcement of language and concepts of mobility through exploratory daily discussion, supervision in unstructured times and PE and on-going support to facilitate social learning.

Mobility and Independence advice and programmes to be delivered regularly.

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Detailed analysis of the student's strengths and weaknesses in relation to the student's VI, curricular skills, social/ emotional development and mobility.</p> <p>IEPs to be set following consultation with external professionals such as Educational Psychologists, QTVI, teachers (VI), Health Professionals.</p> <p>IEPs will include: positively phrased SMART targets, which reflect the student's priority needs and will specify teaching arrangements and resources required with clearly defined success criteria. IEPs will include strategies that reflect the student's preferred learning styles.</p> <p>Student progress will be subject to systematic monitoring and specifically their response to interventions outlined in the IEP.</p>	<p>Mainstream class or set with access to individual and small group teaching within the classroom and/or periods of withdrawal.</p> <p>Grouping arrangements or additional support in the classroom used flexibly to support access to curriculum.</p> <p>Access to LSU or similar facility for small group/ individual work and with good lighting.</p> <p>Peer support both in class and in break times to facilitate social interaction where required.</p> <p>Classroom environment should have good lighting.</p> <p>The student may need additional task lighting.</p> <p>Seating arrangements for student understood and implemented and to consider access to visual stimuli.</p> <p>Highlighted environmental features.</p> <p>Good listening conditions.</p> <p>Independence and mobility training</p>	<p>Opportunities for targeted individual or small group intervention either within the class or as part of a withdrawal arrangement. The advice of external professionals will inform teaching and learning tasks specific to curriculum need. This may include direct/ indirect involvement from a QTVI.</p> <p>Differentiation to reflect individual needs</p> <p>On-going/ specific consideration for staff to the following e.g.:</p> <ul style="list-style-type: none"> <li>■ Use of IWB and ICT</li> <li>■ Accessibility of printed materials, and how they should be adapted</li> <li>■ Modification of teaching methods</li> <li>■ Speed of work</li> <li>■ Physical position of student</li> </ul> <p>Targeted interventions/ support may be necessary to:</p> <ul style="list-style-type: none"> <li>■ Prepare student for a class activity/learning experience (pre and post teaching)</li> <li>■ Reinforce work</li> <li>■ Provide additional hands-on experience of materials or presentations</li> <li>■ Provide additional experiences of the environment to compensate limitations resulting from VI</li> <li>■ Develop specific skills to improve curriculum access (e.g. touch typing, use of magnifiers, distance aids and other specialist equipment)</li> <li>■ Increase social interaction with peers</li> </ul>	<p>Provision of support for up to 20 hours per week.</p> <p>Key worker to act as stable point of reference.</p> <p>Staff trained and able to support and include students with VI in all areas of the curriculum. This would include the preparation of appropriate resources / materials and the ability to implement more specialist strategies/ interventions as advised by QTVI.</p> <p>Staff aware, skilled and able to implement and manage changes and adaptations to the learning environment.</p> <p>Students may benefit from using a range of specialist equipment e.g.:</p> <ul style="list-style-type: none"> <li>■ Sloping reading/ writing boards.</li> <li>■ Magnifiers</li> <li>■ Large print materials</li> <li>■ Accessibility software for ICT</li> <li>■ Larger computer monitor Separate TV monitor</li> <li>■ Dark pens/ pencils</li> </ul>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>IEPs will be reviewed termly and success will be celebrated.</p> <p>Parents and students will be involved in target setting and review. Students should have an understanding of the targets they are working to achieve.</p> <p>There should be an on-going cycle of identification, assessment, planning, implementation, monitoring and review.</p> <p>Other factors in the child's family or environment may also need to be considered as part of the assessment process.</p> <p>SEN Adaptation/ Mobility Health and Safety Review - as required.</p>		<ul style="list-style-type: none"> <li>■ Teach independence, organisational and mobility skills. This would include independent living skills.</li> <li>■ Support small group games and activities as an alternative to fast, large team games in PE and at break times.</li> </ul> <p>Regular opportunities to practice use of specialist equipment.</p> <p>Timetabled learning breaks as advised by external professionals.</p> <p>Staff to check student's understanding of task requirements. This would include homework.</p> <p>Materials to support and develop peer awareness of VI.</p> <p>Opportunities for the student to understand the implications of their VI.</p> <p>Student supported routinely in the classroom by a TA as indicated by specific need (e.g. transcribing).</p> <p>Appropriate access arrangements for assessments/ exams to be implemented as appropriate as advised by the QTVI.</p> <p>Use of home/school diary.</p>	<p>Dark lined books/ paper.</p> <p>Bright PE equipment.</p> <p>Lap- top.</p> <p>Digital voice recorder .</p> <p>Some printed materials or other learning materials/ equipment may need to be modified.</p> <p>Appropriate steps to be taken to ensure his/her physical access to the curriculum and/ or existing school facilities e.g. some adaptations to the school environment might be necessary e.g. vertical blinds, highlighting of hazards etc.</p> <p>Staff trained to complete appropriate management of specialist equipment.</p> <p>Staff skilled and able to develop peer awareness of VI.</p> <p>Staff are able to monitor and assess for access to special exam arrangements.</p>

## PART 4 - Working with Partner agencies

### Introduction

The Code of Practice is very clear that as part of the Graduated Response to meeting need, where a child or young person is not making expected progress following implementation of the ADPR Cycle, support should be sought from external agencies and professionals:

In deciding whether to make special educational provision, the teacher and SENCO should consider all of the information gathered from within the school about the child / young person's progress, alongside national data and expectations of progress. This should include high quality and accurate formative assessment, using effective tools and early assessment materials. **For higher levels of need, schools should have arrangements in place to draw on more specialised assessments from external agencies and professionals. (CoP 6.38).**

Schools should work closely with the local authority and other providers to agree the range of local services and clear arrangements for making appropriate requests. This might include schools commissioning specialist services directly. Such specialist services include, but are not limited to:

- Educational Psychologists
- Child and Adolescent Mental Health Services (CAMHS)
- Specialist Teachers or support services, including specialist teachers with a mandatory qualification for children with hearing and vision impairment, including multi-sensory impairment, and for those with a physical disability. (Those teaching classes of children with sensory impairment must hold an appropriate qualification approved by the Secretary of State. Teachers working in an advisory role to support such children / young people must also hold the appropriate qualification.)
- Therapists (including speech and language therapists, occupational therapists and physiotherapists) (CoP 6.61)

This section contains details of Agencies which schools and settings can call upon to assist in the operation of the Graduated Response

Health

Early Help

Social Care

Education Support Services

Looked After Children

Wider Support/Resources for specific areas of need

\* In some cases referral criteria will need to be met. For health referrals, the information below is for children registered with a Worcestershire GP.

## Health Services

Health services for children and young people with SEN or disabilities provide early identification, assessment and diagnosis, intervention and review for children and young people with long-term conditions and disabilities.

Services are delivered by health professionals including paediatricians, psychiatrists, nurses and allied health professionals such as occupational therapists, speech and language therapists, habilitation trainers, physiotherapists and psychologists. In addition, public health services for children ensure a whole population approach to health and wellbeing including preventative services such as immunisation for the whole population and targeted immunisation for the most vulnerable. (CoP 3.59)

The multi-disciplinary child health team, including paediatricians, therapists, clinical psychologists, dieticians and specialist nurses such as health visitors, school nurses and community children's nursing teams, provide intervention and review for children and young people with SEN and disabilities and should contribute to supporting key transition points, including to adulthood. They aim to provide optimum health care for the children, addressing the impact of their conditions, managing consequences for the families and preventing further complications (cOp 3.61)

Therapists have important and specific roles in supporting children and young people with SEN or disabilities, working

directly with children and young people, advising and training education staff and setting programmes for implementation at home and in school. (CoP 3.63)

Area of Need	Health Service's available	Referral/contact details
0-5	Health Visiting  Child Development Centres	<a href="http://www.hacw.nhs.uk/starting-well/health-visitors">www.hacw.nhs.uk/starting-well/health-visitors</a>  <a href="http://www.hacw.nhs.uk/our-services/childrens-community-health-services/child-development-services">www.hacw.nhs.uk/our-services/childrens-community-health-services/child-development-services</a>
5-19 School Health Nursing	A variety of support for Children and Young People with additional multiple needs. We provide support and guidance to schools regarding public health issues, brief interventions, health promotion and special school nursing	<a href="http://www.hacw.nhs.uk/starting-well/school-health-nursing">www.hacw.nhs.uk/starting-well/school-health-nursing</a>
Community Paediatricians	Specialist health assessment and therapeutic input for children with complex health needs.	<a href="http://www.hacw.nhs.uk/ourservices/childrens-services/community-paediatrics">www.hacw.nhs.uk/ourservices/childrens-services/community-paediatrics</a>
Speech, Language and Communication	Speech and Language Therapy Service  <b>Appendix 8 - The Local Offer for Speech, Language and Communication Needs in Worcestershire</b>  Worcestershire's Speech, Language and Communication Needs Pathway  Umbrella Pathway (multi-agency assessment for Autism)	<a href="http://www.hacw.nhs.uk/our-services/speech-language-therapy/childrens">www.hacw.nhs.uk/our-services/speech-language-therapy/childrens</a>  <a href="http://www.hacw.nhs.uk/slc-pathway">www.hacw.nhs.uk/slc-pathway</a>  <a href="http://www.hacw.nhs.uk/our-services/childrens-community-health-services/umbrella-pathway/">www.hacw.nhs.uk/our-services/childrens-community-health-services/umbrella-pathway/</a>

Area of Need	Health Service's available	Referral/contact details
Sensory and Physical Difficulties	Physiotherapy  Occupational Therapy	<a href="http://www.hacw.nhs.uk/ourservices/childrens-services/paediatric-physiotherapy">www.hacw.nhs.uk/ourservices/childrens-services/paediatric-physiotherapy</a>  <a href="http://www.hacw.nhs.uk/ourservices/childrens-services/paediatric-occupational-therapy">www.hacw.nhs.uk/ourservices/childrens-services/paediatric-occupational-therapy</a>
Hearing Impairment	Audiology	<a href="http://www.hacw.nhs.uk/ourservices/childrens-services/audiology">www.hacw.nhs.uk/ourservices/childrens-services/audiology</a>
Clinical Needs	The Community Children's Nursing Team (Orchard Service) are experienced children's trained nurses who visit sick children in their own home and can provide advice and training to schools and settings	<a href="http://www.hacw.nhs.uk/ourservices/childrens-services/orchard-service">www.hacw.nhs.uk/ourservices/childrens-services/orchard-service</a>
SEMH Needs          CAMHS	Reach 4 Wellbeing - promoting and supporting emotional wellbeing for children and young people aged 5-19 years old. Offer short-term group support programmes for those experiencing emotional difficulties, specifically anxiety, low mood and self-harm.	<a href="http://www.hacw.nhs.uk/starting-well/reach4wellbeing">www.hacw.nhs.uk/starting-well/reach4wellbeing</a>  <a href="http://www.kooth.com">www.kooth.com</a>    CAMHS Single Point of Access (SPA): Tel: 01905 768 300 (Monday – Friday 9am – 5pm professionals only) Email: <a href="mailto:WHCNHS.CAMHS-SPA@nhs.net">WHCNHS.CAMHS-SPA@nhs.net</a>  <b>Babcock Guidance</b>  <a href="http://www.babcockprime.co.uk/ehwb">www.babcockprime.co.uk/ehwb</a>



## Early Help

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### What is Early Help?

Early Help means providing support as soon as a problem appears to stop it from getting worse. This could be at any point in a child's life, from birth to the teenage years.

Early Help is provided by a range of services for example, schools, Social Care, Health Visitors, School Nurses, GP's, Targeted Family Support workers, housing providers etc. as well as voluntary agencies such as Home Start, Two Pennies, Citizens Advice Bureau etc. It is a way of working in a multi-disciplinary approach to provide the best support for families, children or young people. Schools and other agencies can provide effective support by using and regularly reviewing their own Early Help Offer and following the Early Help Pathway.

### Appendix 9 - Multi-Agency Levels of Need

## Early Intervention Family Support (EIFS)

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EIFS provides additional support and expertise for agencies in addition to their own Early Help offer. Following the completion of an Early Help Assessment, if there is an additional identified need (Level 2) for Early Help Family Support that hasn't been met by the professional or any other service, a request for support may be submitted, with the consent of parents and young person.

When is it appropriate to consider asking for additional support from the Early Intervention Family Support (EIFS):

- There are Level 2 welfare/wellbeing issues which cannot be addressed by the agency by using their own Early Help Offer
- Parents or professionals have expressed concerns about a child's unmet needs which cannot be met by the partners and agencies contributing to the Early Help Assessment and plan
- There are concerns about home/ school relationship
- There are issues with poor school attendance which remains low despite school interventions and the completion of an Early Help Assessment
- To Improve home-school links and strengthen relationships between families and schools
- To Improve attendance where it is impacted by issues at home
- To Improve attendance where there are issues around low-level emotional well-being and mental health
- As part of a graduated approach providing early intervention working with families and schools to promote inclusion for children and avoid risk of exclusion.

Requests for additional support from EIFS can be made via the portal. The Early Help Assessment is a tool to assist any professional who is working with children, young people and families. It gives a framework to consider whilst working with a child or family to identify current needs and what needs to change.

[www.worcestershire.gov.uk/eha](http://www.worcestershire.gov.uk/eha)

### Appendix 10 - Worcestershire Early Help Assessment and Plan

### Appendix 11 - Early Help Assessment and Family Plan Guidance for Professionals

## Further Links

Area Guides [www.worcestershire.gov.uk/downloads/download/1146/early\\_help\\_in\\_worcestershire](http://www.worcestershire.gov.uk/downloads/download/1146/early_help_in_worcestershire)

Advice, care, health and support for children, young people and their families

[www.worcestershire.gov.uk/info/20324/advice\\_care\\_health\\_and\\_support](http://www.worcestershire.gov.uk/info/20324/advice_care_health_and_support)

## Targeted Family Support / Family Support

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Targeted Family Support teams work in partnership with families who are experiencing complex issues that require a multi-agency approach and plan of intervention. These can be identified through the [Worcestershire LSCB levels of need guidance](#).

Targeted Family Support Workers will with the consent of the family complete an [Early Help Assessment and plan](#) in partnership with children young people and their families.

Further details can be found on the Targeted Family Support [web page](#).

## Social Care

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For children who are at immediate risk from harm the Police should be contacted. If Schools/settings wish to refer a child or young person to Children's Social Care in an emergency they should contact the Family Front Door 01905 822666

## The Worcestershire Virtual school for Looked After and Adopted Children

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The Virtual School is a specialist service that aims to help looked after and adopted children to achieve by supporting their education and through improving provision in the schools our Looked After Children attend.

### Appendix 12 - The Virtual School for Looked After and Adopted Children

<https://www.babcockprime.co.uk/improving-schools-and-settings/virtual-school>

Gwen Fennell - Virtual School Headteacher (strategic overview) – [gfennell@worcestershire.gov.uk](mailto:gfennell@worcestershire.gov.uk)

General contact: [Primevirtualschoolteam@babcockinternational.com](mailto:Primevirtualschoolteam@babcockinternational.com)

<https://www.worcestershirevirtualschool.org.uk/>

## SUPPORT FOR PARENTS: SENDIASS (Special Educational Needs and Disability Information Advice Services)

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The SENDIASS Service provides free impartial information, advice and support for parents/carers of children or young people with special educational needs and/or disabilities (SEND) between the ages of 0-25 as well as the young people themselves. The service is confidential and at arms-length from the local authority and can offer support on all matters concerning SEND including education, health and social care.

Examples of how they can help–

- Concerns about a child / young person's progress at nursery, school or college.
- Information and guidance on education, health and care plans (EHCP'S). including education law and personal budgets.

- Help to prepare to participate in meetings with professionals.
- Understand SEND policies and procedures.
- Understand reports/letters.
- Learn about SEND services available nearby.
- Information on how to resolve disagreements including complaints and mediation.

Parents can contact SENDIASS on 01905 768153 or e-mail [SENDIASS@worcestershire.gov.uk](mailto:SENDIASS@worcestershire.gov.uk) or visit [www.SENDworcestershire.co.uk](http://www.SENDworcestershire.co.uk).

## Education Support Services

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### General information and referral forms

A range of providers are available, individual schools are responsible for making arrangements to provide support.

<p>Babcock Prime – Early Years</p>	<p><a href="https://www.babcockprime.co.uk/improving-schools-and-settings/early-years/early-years-inclusion/a-z-of-inclusion-resources/f-inclusion-resources">https://www.babcockprime.co.uk/improving-schools-and-settings/early-years/early-years-inclusion/a-z-of-inclusion-resources/f-inclusion-resources</a></p> <p><b>Appendix 13 - Flowchart of support</b></p> <p>The Inclusion Team has introduced entry criteria for accessing their support free at the point of contact. For access information please download the flowchart</p> <p><a href="https://www.babcockprime.co.uk/improving-schools-and-settings/early-years/early-years-inclusion">https://www.babcockprime.co.uk/improving-schools-and-settings/early-years/early-years-inclusion</a></p>
<p>Babcock Prime – Schools</p>	<p><b>Appendix 14 - Special Educational Needs &amp; Disabilities (SEND): The Local Offer Eligibility Criteria &amp; Support Allocation Matrices for Babcock SEN, Disabilities and Inclusion Teams</b></p> <p><b>Appendix 15 - Specialist Teacher for SEND Support Referral Form</b></p>
<p>Chadsgrove</p>	<p><a href="http://www.chadsgroveschool.org.uk/web/support_for_schools_academies/192777">www.chadsgroveschool.org.uk/web/support_for_schools_academies/192777</a></p> <p>Telephone: 01527 871511</p> <p>Email: <a href="mailto:tsa@chadsgrove.worcs.sch.uk">tsa@chadsgrove.worcs.sch.uk</a></p>

## Support linked to specific areas of need

Area of Need	Service's available	Referral/contact details
SEMH	Emotional Wellbeing and Mental Health Guidance for Professionals WCC	<a href="http://www.worcestershire.gov.uk/info/20366/professionals/1389/emotional_wellbeing_and_mental_health">www.worcestershire.gov.uk/info/20366/professionals/1389/emotional_wellbeing_and_mental_health</a>
	DfE Guidance in supporting pupils with mental health difficulties	<b>Appendix 16 - Emotional Wellbeing, Mental Health and Eating Disorder Pathway for Professionals</b>
	Educational Psychology Services –	<b>Appendix 17 - Emotional wellbeing and mental health: a toolkit for Worcestershire maintained and independent schools, academies, short stay schools, sixth form, FE colleges and skills providers</b>
	Educational Psychology service can be purchased by schools & settings and may include work with children and young people, support to staff and/or parents, strategic whole-school work and delivery of bespoke training and continuing professional development activities	<b>Appendix 18 - Mental health and behaviour in schools DfE guidance</b>
Behaviour Support	Behaviour Outreach Service support for children / young people at risk of permanent exclusion in mainstream school	<a href="http://www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/educational-psychology">www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/educational-psychology</a> Tel: 01905 678139 E-mail: <a href="mailto:PrimeEPSAdminsouth@babcockinternational.com">PrimeEPSAdminsouth@babcockinternational.com</a>
	The Perryfields Outreach Team provides preventative behaviour support to the primary, first and middle schools in South Worcestershire. They deliver tailored programmes of support to mainstream schools to promote positive behaviour management strategies and champion inclusive practice	<a href="http://www.perryfieldsprimarypru.com/outreach-practitioners/">www.perryfieldsprimarypru.com/outreach-practitioners/</a> SOUTH Perryfields Primary PRU <a href="http://www.perryfieldsprimarypru.com/">www.perryfieldsprimarypru.com/</a> Newbridge Secondary PRU <a href="http://www.newbridgeschool.org/index.html">www.newbridgeschool.org/index.html</a>
Cognition and Learning	Pupil Referral Units	NORTH The Beacon Primary <a href="http://www.thebeaconpru.org.uk/">www.thebeaconpru.org.uk/</a> The Forge (secondary) <a href="http://www.theforge.worcs.sch.uk/">www.theforge.worcs.sch.uk/</a>
	Educational Psychology Services as above	Babcock <a href="http://www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/learning-support-team">www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/learning-support-team</a> Tel: 01905 678187 Email: <a href="mailto:Helen.Davies2@babcockinternational.com">Helen.Davies2@babcockinternational.com</a>
	Specialist Learning Support Teachers – services to schools and settings to enhance their capacity to meet the needs of children and young people with a range of learning needs through specialist advice, interventions, assessment and training	CHADSGROVE <a href="http://www.chadsgroveschool.org.uk/web/support_for_schools_academies/192777">www.chadsgroveschool.org.uk/web/support_for_schools_academies/192777</a> Telephone: 01527 871511 Email: <a href="mailto:tsa@chadsgrove.worcs.sch.uk">tsa@chadsgrove.worcs.sch.uk</a>

Communication and Interaction	<p>Autism/Complex Communication Needs (CCN)</p> <p>Qualified specialist teachers and specialist practitioners with vast experience of addressing the needs of children and young people on the autism spectrum from early years to higher education.</p>	<p>Babcock: support for teachers and education professionals to meet the individual teaching, learning and wellbeing needs of students with autism in their educational setting. We also provide high quality autism training and deliver the Autism Education Trust (AET) training programmes and resources.</p> <p>As part of the statutory education service commissioned by the Local Authority, we provide assessment, monitoring and review of children and young people with a diagnosis of Autism Spectrum Disorder (ASD) in line with eligibility criteria.</p> <p>Schools and settings can purchase additional support where the needs of the child/ young person do not meet the threshold for support commissioned by the Local Authority for Worcestershire.</p> <p><a href="https://www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/autism-complex-communication-needs-ccn">https://www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/autism-complex-communication-needs-ccn</a></p> <p>Tel: 01905 678172</p> <p>E-mail: Karen.Broderick@babcockinternational.com</p> <p>Chadsgrove</p> <p><a href="http://www.chadsgroveschool.org.uk/web/support_for_schools_academies/192777">www.chadsgroveschool.org.uk/web/support_for_schools_academies/192777</a></p> <p>Telephone: 01527 871511</p> <p>Email: tsa@chadsgrove.worcs.sch.uk</p>
Hearing Impairment	<p>The WCC Team offer support from the point of diagnosis throughout the early years and at pre-school level, through to further and higher education</p> <p>Please refer to SEND Eligibility Criteria document above</p>	<p><a href="http://www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/hearing-impairment">www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/hearing-impairment</a></p> <p>Tel: 01905 678189</p> <p>E-mail: Melissa.Boxall@babcockinternational.com</p>
Vision Impairment/ MSI		<p><a href="https://www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/multi-sensory">https://www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/multi-sensory</a></p> <p>Contacts as for Hi above</p>

Physical Disabilities	The Physical Disability (PD) Outreach Support Team support children with a physical disability (E.g. cerebral palsy, dystrophy, acquired brain injuries, tumours, arthritis, hyper mobility and developmental coordination difficulties). This specialist teaching team is a freely available service to support mainstream schools and early years settings (transfer support onto further and higher education settings is also available)	<p>North Worcestershire</p> <p>Chadsgrove PD Outreach Team</p> <p>Tel: 01527 877262</p> <p>Email: outreach@chadsgrove.worcs.sch.uk</p> <p><a href="http://www.chadsgroveschool.org.uk/web/about_outreach/212808">www.chadsgroveschool.org.uk/web/about_outreach/212808</a></p> <p>South Worcestershire</p> <p>Regency PD Outreach Team</p> <p>Tel: 01905 456602</p> <p>Email: pdoutreach@regency.worcs.sch.uk</p> <p><a href="http://www.regency.worcs.sch.uk/page/10/outreach-htm">www.regency.worcs.sch.uk/page/10/outreach-htm</a></p>
Medical Needs	<p>The Medical Education Team discharges the duty of the Local Authority in ensuring that arrangements are in place for children / young people who are unable to attend school because of their medical needs, to have appropriate and ongoing access to education.</p> <p>The Team consists of qualified teachers and teaching assistants who are skilled in teaching children / young people of statutory school age with a wide range of physical, emotional and psychological health needs</p>	<p>Ann O'Sullivan</p> <p>Principal Teacher – Medical Education Team</p> <p>Tel: 01905 678200</p> <p>Email: <a href="mailto:Katherine.Breakwell@babcockinternational.com">Katherine.Breakwell@babcockinternational.com</a></p>
DfE Mental Health and behaviour in schools		<p><a href="http://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2">www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2</a></p> <p><a href="https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/488034/Behaviour_and_Discipline_in_Schools_-_A_guide_for_headteachers_and_School_Staff.pdf">https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/488034/Behaviour_and_Discipline_in_Schools_-_A_guide_for_headteachers_and_School_Staff.pdf</a></p>

## Wider Support / Resources for Specific Areas of Need

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A range of organisations offer support and training to schools on overall identification and teaching approaches for children / young people with SEN as well as on specific conditions.

Schools, colleges and early years providers who need to improve the knowledge and skills of staff in relation to specific conditions can access information, advice and training materials that have been developed through the Department for Education's voluntary and community sector grants programme. NASEN provides a SEND Gateway that enables access to a broad range of materials and support services across the range of SEND ([www.sendgateway.org.uk](http://www.sendgateway.org.uk)).

The Excellence gateway provides access to resources to support professional development in the FE and Skills sector ([www.excellencegateway.org.uk](http://www.excellencegateway.org.uk)).

NASEN (National Association of Special Educational Needs) – access to resources - <http://www.nasen.org.uk/>

Early Support provides a range of information materials to families and professionals [www.ncb.org.uk/earlysupport](http://www.ncb.org.uk/earlysupport).

The following organisations provide advice, information and training on specific impairments:

- The Autism Education Trust for children and young people on the Autism Spectrum ([www.autismeducationtrust.org.uk](http://www.autismeducationtrust.org.uk))
- The Communications Trust for speech, language and communication difficulties ([www.thecommunicationtrust.org.uk](http://www.thecommunicationtrust.org.uk))

The Dyslexia SpLD Trust on dyslexia and literacy difficulties ([www.thedyslexia-spldtrust.org.uk](http://www.thedyslexia-spldtrust.org.uk))

The British Dyslexia Association (<https://www.bdadyslexia.org.uk/>)

The National Sensory Impairment Partnership for vision impairment, hearing impairment and multi-sensory impairment ([www.natsip.org.uk](http://www.natsip.org.uk))

MindEd ([www.minded.org.uk](http://www.minded.org.uk)) is an e-learning portal aimed at supporting all adults working with children and young people. It provides simple, clear guidance on children and young people's mental health, wellbeing and development.

## Part 5 – The roles and responsibilities of partner agencies

As part of the graduated approach, schools and settings can access support from a range of Education, Health and Care services for children and young people with SEND.

Involvement of relevant external professionals is integral in the operation of the Graduated Response where a child or young person is not making expected progress as part of APDR.

The SEN Code of Practice provides that in considering whether an EHC needs assessment is necessary, the local authority should consider whether there is evidence that despite the early year's provider, school or post-16 institution having taken relevant and purposeful action to identify, assess and meet the special educational needs of the child or young person, the child or young person has not made expected progress. To inform their decision the local authority will need to take into account a wide range of evidence, and should pay particular attention to (CoP 9.14)

These considerations should form the basis of external agency advice that is provided to schools and settings:

- evidence of the child or young person's academic attainment (or developmental milestones in younger children) and rate of progress
- information about the nature, extent and context of the child or young person's SEN
- evidence of the action already being taken by the early years provider, school or post-16 institution to meet the child or young person's SEN
- evidence that where progress has been made, it has only been as the result of much additional intervention and support over and above that which is usually provided
- evidence of the child or young person's physical, emotional and social development and health needs, drawing on relevant evidence from clinicians and other health professionals and what has been done to meet these by other agencies, and
- where a young person is aged over 18, the local authority must consider whether the young person requires additional time, in comparison to the majority of others of the same age who do not have special educational needs, to complete their education or training. Remaining in formal education or training should help young people to achieve education and training outcomes, building on what they have learned before and preparing them for adult life.

In addition, the school or setting will require specific advice to support the next APDR cycle including suggested Outcomes together with strategies and provision to meet these outcomes.



## Part 6 - Involving students and their parents and carers

### Introduction

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Children have a right to receive and impart information, to express an opinion and to have that opinion taken into account in any matters affecting them from the early years. Their views should be given due weight according to their age, maturity and capability (Articles 12 and 13 of the United Nations Convention on the Rights of the Child).

Local authorities, early years providers and schools should enable parents to share their knowledge about their child and give them confidence that their views and contributions are valued and will be acted upon. At times, parents, teachers and others may have differing expectations of how a child's needs are best met. Sometimes these discussions can be challenging but it is in the child's best interests for a positive dialogue between parents, teachers and others to be maintained, to work through points of difference and establish what action is to be taken. (CoP 1.7)

For some children, SEN can be identified at an early age. However, for other children and young people difficulties become evident only as they develop. All those who work with children and young people should be alert to emerging difficulties and respond early. In particular, parents know their children best and it is important that all professionals listen and understand when parents express concerns about their child's development. They should also listen to and address any concerns raised by children and young people themselves.

High quality teaching, differentiated for individual children / young people, is the first step in responding to children / young people's needs who have or may have SEN.

Schools should regularly and carefully review the quality of teaching for all children / young people, including those at risk of underachievement.

This information gathering should include an early discussion with the child / young person and their parents. These early discussions with parents should be structured in such a way that they develop a good understanding of the child / young person's areas of strength and difficulty, the parents' concerns, the agreed outcomes sought for the child and the next steps. A short note of these early discussions should be added to the child / young person's record on the school information system and given to the parents. Schools should also tell children, parents and young people about the local authority's Information, Advice and Support Service. (CoP 6.37-6.39)

Worcestershire's Advice Service can be contacted in the following ways:

Tel: 01905 768153

E-mail: [sendiass@worcestershire.gov.uk](mailto:sendiass@worcestershire.gov.uk)

### Involving parents /carers, children / young people on a whole school basis

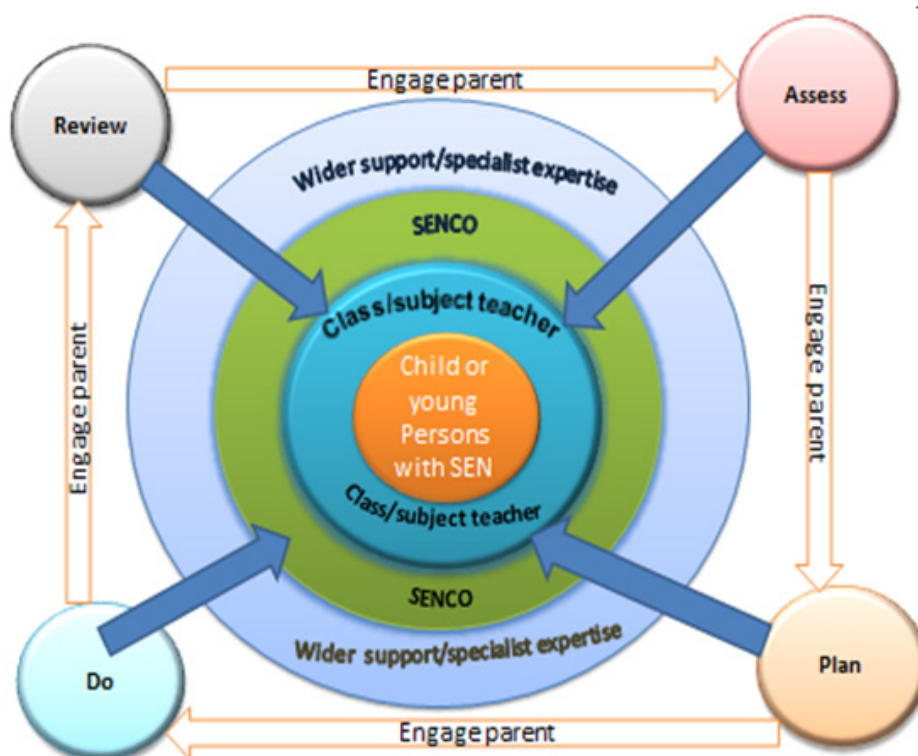
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It is good practice to involve Parents, Carers, Children and Young people in the development of whole school practice and policy relating to special educational needs.

- School's SEND policies and practices should be produced on a collaborative basis with parents and young people.
- Governors should actively engage with parents and carers to ensure that their voice is heard

Schools can get free advice and support about parental engagement from Michele Davies, WCC Parent Engagement Advisor. Contact Michele on [mdavies3@worcestershire.gov.uk](mailto:mdavies3@worcestershire.gov.uk) to arrange a meeting to discuss how she can help.

## Involving parents / carers, children / young people in planning and reviewing progress on an individual basis



The SEN Code of Practice states:

6.64 Schools must provide an annual report for parents on their child's progress. Most schools will want to go beyond this and provide regular reports for parents on how their child is progressing.

6.65 Where a pupil is receiving SEN support, schools should talk to parents regularly to set clear outcomes and review progress towards them, discuss the activities and support that will help achieve them, and identify the responsibilities of the parent, the pupil and the school. Schools should meet parents at least three times each year.

6.66 These discussions can build confidence in the actions being taken by the school, but they can also strengthen the impact of SEN support by increasing parental engagement in the approaches and teaching strategies that are being used. Finally, they can provide essential information on the impact of SEN support outside school and any changes in the pupil's needs.

6.67 These discussions should be led by a teacher with good knowledge and understanding of the pupil who is aware of their needs and attainment. This will usually be the class teacher or form tutor, supported by the SENCO. It should provide an opportunity for the parent to share their concerns and, together with the teacher, agree their aspirations for the pupil.

6.70 The views of the pupil should be included in these discussions. This could be through involving the pupil in all or part of the discussion itself, or gathering their views as part of the preparation.

## How to involve parents / carers, children / young people in the Graduated Response process

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There are a number of different things that schools and settings may want to consider, which can encourage the participation of children, young people and their parent carers

1. practitioners are open and transparent about their concerns and what they would like to do to help
2. time is given to actively seek the views of families, they are listened to and their knowledge and experience is recognised
3. consent to share and seek information from other agencies is sought in a clear, informed and transparent manner
4. alternative ways are offered and used to gather and / or record views of children and young people
5. Team Around the Child / Team Around the Family meetings are made as welcoming and inclusive as possible. Practitioners should avoid using jargon and acronyms and be prepared to listen as well as contribute. Parents should be contacted before and told what to expect and who will be attending be flexible about where and when a meeting is held.

## One Page Profile

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Parents/Carers should be involved in co-producing, along with their child, a **One Page Profile** or Student Passport. This gives the teacher/ SENCO a good opportunity to sit down with the parent, listen to their and their child's views and build up a visual plan.

## Person-Centred Planning and Reviews

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Planning and Reviewing is an essential part of a graduated response and allows for children and families to focus on what is happening to make a positive difference and ways of sustaining improvement.

Reviews can also highlight where progress is not being made and provide opportunity for practitioners and families to refocus and understand the barriers to improvement and the next steps that need to be taken.

Maintaining a person-centred approach is crucial to enabling participation from children and families. Some ways of doing this include:

- the young person could send out the invitations to their own progress review;
- families could help to decide who needs to come – perhaps inviting a supportive friend or adult advocate for the young person;
- families are given time to discuss their views before the review

Practitioners need to think about how they create a warm and welcoming environment and consider how they prepare children and young people for their reviews and include parents in this. Thought should be given to using The Local Offer to help families find out about what services and resources are available, so they can be fully informed when making future plans, particularly at times of transition.

## Part 7 - Financial resources available to support the Graduated Response

### Part 7a - Funding in Early Years Provision

#### Introduction

WCC provides free early education for some eligible two year olds and all three and four year old children within Worcestershire. Childcare settings that offer the Nursery Education Funding (NEF) are entitled to receive an Inclusion Supplement up to the maximum 15 hours and the funding will be split between all settings the child attends. However please note that specialist provision will automatically receive the 15 hours 'Inclusion Supplement' if the child attends for 15 hours. No further funding will be available to other settings in these instances unless the family qualify for the extended NEF entitlement. Where children are accessing 30 hours of extended entitlement, the Inclusion Supplement will be available for the number of NEF hours claimed – up to the maximum 30 hours.

#### The Early Years Inclusion Supplement

The Inclusion Supplement is based on the level of provision required to meet the children's needs and is categorised in the descriptors of SEND. The Inclusion Supplement should contribute towards:

- Additional staffing required to support children in the setting with additional needs
- Staff applying the strategies and interventions
- Time spent on planning for children with special needs and disabilities
- Appropriate training, specialist resources and private specialist consultancy services.

The descriptors are set out in Section 3a of this document and are used to determine the levels of Inclusion Supplement that is payable.

The following table illustrates the amount of funding awarded to each level of need per hour of Nursery Education Funding. These levels of funding are referred to as Graduated Response 1, 2, 3, 4:

Code of Practice level	EYSFF Inclusion supplement Per hour/per child (max 15 hours)	2 Year Old Funding
Normal Entitlement	NEF hourly rate: £4.14	Please note that an automatic supplement for GR1 and GR2 has been included within the 2 year old hourly rate of £5.20
Graduated Response 1	Included within NEF hourly rate from April 2017: £4.14	
Graduated Response 2	NEF £4.14 + £0.74	
Graduated Response 3	NEF £4.14 + £1.44	NEF hourly rate + £1.44
Graduated Response 4	NEF £4.14 + £2.70	NEF hourly rate + £2.70
Exceptional Early Years Funding	NEF £4.14 + £6.30	NEF hourly rate + £6.30
DISABILITY ACCESS FUND (DAF)	£615 annual payment For 3 and 4 year olds in receipt of Disability Living Allowance	Not available to 2 year olds

## Predicting a settings Inclusion Supplement for the Term

It is important for settings to predict the level of inclusion supplement they will receive prior to the start of a term; in order to employ any additional staffing required to support all the children with special needs within their setting. In order to predict the funding settings will receive for a term practitioners will need to have the following information:

- Identified children and their level of need/provision (including 2 year olds) accessing Graduated response 3&4.
- The number of NEF hours (up to a maximum of 15 or 30 hours if eligible) they will be eligible for in that term

The grid below can be used to predict the inclusion supplement for the following term.

Level of Provision/Need	No. of children in each category	(A) Total No. of NEF hours for these children in the term	(B) Inclusion Supplement to be paid per hour	(C) TOTAL AMOUNT
Graduated Response 1			£0.14 Included within hourly rate	
Graduated Response 2			£0.74 (not including 2 year old NEF)	
Graduated Response 3			£1.44	
Graduated Response 4			£2.70	
Exceptional Early Years Funding			£6.30	
Disability Access Fund		Annual payment only	£615	
TOTAL INCLUSION SUPPLEMENT:				

Multiply the figure in column (A) by the hourly rate in column (B) which will indicate the amount to be received for each category of provision/need.

Total all amounts in column (C) to calculate total predicted amount of Inclusion Supplement.

## Inclusion Supplement Calculator

An excel spread sheet/calculator is also available for settings to calculate their inclusion supplement – this contains an overview sheet that can also record the spend throughout the term.

This is available at:

<https://www.babcockprime.co.uk/improving-schools-and-settings/early-years/early-years-inclusion/a-z-of-inclusion-resources/f-inclusion-resources>

## Receiving the Inclusion Supplement for a Term

The inclusion supplement predictions will be based on the children in the setting that the setting is already aware of. However many children's needs will not emerge until part way through the term. When a setting completes their NEF Actuals on the Provider Portal, they will be required to indicate the level of provision and need of all children with additional needs within the setting, from Graduated Response 1 upwards. As

the Portal opening is mid-way through the term, this allows the setting to add any children whose needs have emerged over the first part of the term. If a setting identifies a level of need past this point, a 'Change Request' form can be completed and funding will be adjusted in the following term's budget.

### Appendix 19 – Babcock's Change Request for EYSFF

Further to the basic information requested on all children, the setting will be required to add the following information from the drop-down choices:

- Level of need and the level of provision the children require (Graduated Response 1,2,3,4, Exceptional)

When the setting receives their statement the amount that they will receive per named child will be displayed. The predicted inclusion supplement should match the actual amount if all the children and their level of need/provision are the same. Whilst settings can decide how the funding is spent (e.g. staffing, resources, SENCO non-contact time) they will be closely monitored on the impact of their support to the child or children. If no appropriate impact is evidenced, WCC will request evidence of appropriate spend.

### Early Years Pupil Premium

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The Early Years Pupil Premium is linked to the Nursery Education Funding, children who meet the criteria for Free School Meals will receive an additional contribution to support the vulnerable learners within the Early Years Sector. For each eligible 3 and 4 year old settings will receive 53p for every NEF hour claimed. The use and impact of the funding (£302.01 per year) will be monitored by Ofsted, and they will ask settings to demonstrate how the funds have been spent. For more information see the embedded Frequently Asked Questions

### Appendix 20 - DfE Early Years Pupil Premium FAQ

### Disability Access Fund

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From April 2017 3 & 4 year olds who access Disability Living Allowance (DLA) will be eligible for the Disability Access Fund (DAF) and an annual payment of £615. This funding will be paid to the childcare provider to support the adaption of provision and inclusive practice capacity building. Parent/carers can nominate the Early Years setting to receive this payment via the Parent Declaration Form. Further information on DAF and DLA can be downloaded from the following website:

<https://www.babcockprime.co.uk/improving-schools-and-settings/early-years/early-years-inclusion/a-z-of-inclusion-resources/f-inclusion-resources>

# Part 7b - Funding in mainstream Schools and Academies

## Introduction (CoP 6.95 – 6.99)

- All mainstream schools are provided with resources to support those with additional needs, including children / young people with SEN and disabilities. Most of these resources are determined by a local funding formula, discussed with the local schools forum, which is also applied to local academies. School and academy sixth forms receive an allocation based on a national funding formula.
- Schools have an amount identified within their overall budget, called the notional SEN budget. This is not a ring-fenced amount, and it is for the school to provide high quality appropriate support from the whole of its budget.
- It is for schools, as part of their normal budget planning, to determine their approach to using their resources to support the progress of children/young people with SEN. The SENCO, headteacher and governing body or proprietor should establish a clear picture of the resources that are available to the school. They should consider their strategic approach to meeting SEN in the context of the total resources available, including any resources targeted at particular groups, such as the pupil premium.
- This will enable schools to provide a clear description of the types of special educational provision they normally provide and will help parents and others to understand what they can normally expect the school to provide for children / young people with SEN.
- Schools are not expected to meet the full costs of more expensive special educational provision from their core funding. They are expected to provide additional support which costs up to a nationally prescribed threshold per pupil per year. The responsible local authority, usually the authority where the child or young person lives, should provide additional top-up funding where the cost of the special educational provision required to meet the needs of an individual child / young person exceeds the nationally prescribed threshold. (In Worcestershire this is done via an EHC Needs assessment and Plan)

## The National Funding Model

SEN funding is governed by a national framework introduced in April 2013.

<b>Element 1</b>	<ul style="list-style-type: none"> <li>■ CORE EDUCATION FUNDING</li> <li>■ Mainstream per-pupil funding (AWPU) (Notionally £4,000 per pupil)</li> </ul>
<b>Element 2</b>	<ul style="list-style-type: none"> <li>■ ADDITIONAL SUPPORT FUNDING</li> <li>■ Contribution of up to £6,000 to additional support required by a pupil with High needs from the Notional SEN Budget</li> </ul>
<b>Element 3</b>	<ul style="list-style-type: none"> <li>■ TOP UP FUNDING</li> <li>■ Top Up funding from the Local Authority to meet the needs of each pupil placed in the setting</li> </ul>

## ELEMENT 1 FUNDING (Age Weighted Pupil Unit – AWPU)

Element 1 Funding is provided on a per pupil basis (according to the data submitted in the individual School's census) to provide a standard offer of teaching and learning for all pupils. Some of this money is to make general SEN provision. This might, for example, include the cost of providing the Special Educational Needs Coordinator (SENCO) and some other resources.

Whilst Government Guidance indicates that this is notionally £4,000 the actual amount in Worcestershire Schools depends upon the age/phase of the pupil called the Age Weighted Pupil Unit (AWPU) and is determined by a local funding formula. The current AWPU rates in 2018-19 are Primary £2,746.99, KS3 £3,862.65 and KS4 £4,385.81 which are those used by the DfE in their National Funding Formula (NFF) model.

## ELEMENT 2 FUNDING – Notional SEN Budget

Element 2 funding is more commonly known as the School's Notional SEN Budget. Element 2 funding is to provide SEN support that is additional to or different from the support that most other children get.

The amount is based on a local formula agreed between schools and the Local Authority and is based upon a share of some of the local formula factors. In 2018-19 this is as follows: -

Formula Factor		% of Schools
		Funding
AWPU		5
Deprivation		
	FSM & FSM 6	50
	IDACI Bands A to F	100
Low Prior Attainment		100
Lump Sum		10

Schools must use this delegated funding to pay for up to £6k of the additional support costs to meet a child / young person's SEN. This does not mean that the school will spend £6,000 on every child with SEN. Sometimes schools use funds to help groups of children. Some children will need less help – and some children may need more.

Academies are funded through the Education and Skills Funding Agency (ESFA) rather than the Local Authority but they receive the same level of funding as Local Authority schools in the same area so Notional SEN is worked out in the same way. The Council for Disabled Children expects that most children / young person with SEN will need special educational provision that comes to less than £6,000. Ordinarily Available sets out the provision mainstream schools, including Academies are expected to make from their delegated budget. The LA is able to retain a budget to support exceptional SEN where the notional SEN is not deemed enough compared the number of children / young people designated as SEND. This does not relate to individual children / young person and has to be allocated on a formulaic basis approved by the ESFA. Elements of the qualifying criteria includes:

- The % of children / young people with EHCPs is higher than the average of all schools in the same phase.
- Exceptional number of high needs pupils relative to the size of the school.
- Schools whose notional SEN budget is lower than £6,000 multiplied by the number of identified high need pupils.



## ELEMENT 3 FUNDING

Funding requirements above £10,000 (e.g. AWPU plus Notional) will normally be accessed through the statutory assessment process, where evidence of intervention and progress demonstrates a higher level of pupil need, and additional resources can be provided by the Local Authority in the form of a top-up from the High Needs Block. The LA uses the following local band rates:

BAND	BAND CODE	ANNUAL TOP UP £
Ordinarily Available	0	0
Unpredicted	U	1,200
Exceptional 1	E1	3,400
Exceptional 2	E2	5,600
Exceptional 3	E3	10,300
Exceptional 4	E4	21,400
Boarding	B	23,602

Where appropriate this may include a Personal Budget. The school will continue to provide the first £6,000 of provision for any child / young person with an EHC Plan.

There are complex regulations governing the responsibilities of Local Authority's where a child / young person accesses provision in another Local Authority School. In general, Element 3 Funding will be proved by the Local Authority in which the child / young person lives (or if they are Looked After and living out of county, Element 3 funding will remain the responsibility of the "home" authority – e.g. the Authority to whom they are Looked After and not the Authority where they actually live.

### Looked After children / young people

For children with SEN, but without EHCPs, it is the school in the main that will make provision for the child's special educational needs. This will be funded by Elements 1 and 2 of their budget.

### Children with Education, Health and Care Plans

Whilst the Authority where the child is living/placed is responsible for the assessment of needs and maintenance of the Plan, in general it is the Authority where the child is looked after to who is responsible for funding any additional provision that is identified within the Plan (i.e. Element 3 Top Up Funding).

This means that while the placing authority no longer maintains the Plan, in the case of looked after children, they will still have financial responsibility for the special educational provision set out in the Plan because the child continues to 'belong' to them as determined by regulation 7 of The Education (Areas to which Pupils and Students Belong) Regulations 1996 (the 'Belonging Regulations').

The educational setting will be responsible for recoupment of Element 3 funding from the Authority that the child is LAC to.

### Further reading

**Appendix 21 - Guide to the Belonging Regulations. Guide to financial responsibility for making special educational provision for children who are looked after**

**Appendix 22 - Promoting the education of looked-after children and previously looked-after children**

**Appendix 23 - Funding for Special Educational Needs in mainstream schools**

## Part 8 – Children and Young People with a Disability – interaction with the Equality Act 2010

### Introduction

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Many children and young people who have SEN may have a disability under the Equality Act 2010 – that is ‘...a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities’. This definition provides a relatively low threshold and includes more children than many realise: ‘long-term’ is defined as ‘a year or more’ and ‘substantial’ is defined as ‘more than minor or trivial’. This definition includes sensory impairments such as those affecting sight or hearing, and long-term health conditions such as asthma, diabetes, epilepsy, and cancer.

Children and young people with such conditions do not necessarily have SEN, but there is a significant overlap between disabled children and young people and those with SEN. Where a disabled child or young person requires special educational provision they will also be covered by the SEN definition. (CoP xviii)

Where a child or young person is covered by SEN and disability legislation, reasonable adjustments and access arrangements should be considered as part of SEN planning and review. (CoP xxii)

### The Equality Act 2010

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The Equality Act 2010 sets out the legal obligations that schools, early years providers, post-16 institutions, local authorities and others have towards disabled children and young people:

- They must not directly or indirectly discriminate against, harass or victimise disabled children and young people
- They must not discriminate for a reason arising in consequence of a child or young person’s disability
- They must make reasonable adjustments, including the provision of auxiliary aids and services, to ensure that disabled children and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory – it requires thought to be given in advance to what disabled children and young people might require and what adjustments might need to be made to prevent that disadvantage
- Public bodies, including further education institutions, local authorities, maintained schools, maintained nursery schools, academies and free schools are covered by the public sector equality duty and, when carrying out their functions, must have regard to the need to eliminate discrimination, promote equality of opportunity and foster good relations between disabled and non-disabled children and young people.

The duties cover discrimination in the provision of services and the provision of education, including admissions and exclusions. All providers must make reasonable adjustments to procedures, criteria and practices and by the provision of auxiliary aids and services must publish accessibility plans (and local authorities, accessibility strategies) setting out how they plan to increase access for disabled pupils to the curriculum, the physical environment and to information.

All schools have duties under the Equality Act 2010 towards individual disabled children and young people. They must make reasonable adjustments, including the provision of auxiliary aids and services for disabled children, to prevent them being put at a substantial disadvantage. These duties are anticipatory – they require thought to be given in advance to what disabled children and young people might require and what adjustments might need to be made to prevent that disadvantage. Schools also have wider duties to prevent discrimination, to promote equality of opportunity and to foster good relations. (CoP 6.9)

Worcestershire County Council's Accessibility Strategy outlines Worcestershire's vision for all children and young people with Special Educational Needs and Disabilities (SEND) to have access to inclusive learning across all of its educational settings thereby providing opportunities for realising aspirations, achieving potential and participating fully in education and wider society

**See appendix 24 (to follow) - Working together to improve outcomes for children and young people with special education needs and disabilities: Worcestershire County Council Accessibility Strategy 2018 - 2021**

## REASONABLE ADJUSTMENTS AND WHEN THEY HAVE TO BE MADE

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Many disabled children / young people may receive support in school through the SEN framework. In some cases, the substantial disadvantage that they experience may be overcome by support received under the SEN framework.

### Introduction

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The duty to make reasonable adjustments applies only to disabled people. For schools the duty is summarised as follows:

- Where something a school does places a disabled child / young person at a disadvantage compared to other children / young people then the school must take reasonable steps to try and avoid that disadvantage.
- Schools will be expected to provide an auxiliary aid or service for a disabled child / young person when it would be reasonable to do so and if such an aid would alleviate any substantial disadvantage that the child / young person faces in comparison to non-disabled children / young people.

Schools are not subject to the requirement of reasonable adjustment duty concerned with make alterations to physical features because this is already considered as part of their planning duties.

### Reasonable steps to avoid disadvantage

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The purpose of taking the steps is to ensure that disabled children / young people are not placed at a substantial disadvantage compared to non-disabled children / young people. This is a two stage process:

Schools and settings have an anticipatory duty to maximize inclusion for all children and young people. This is a continuing duty regardless of whether the setting currently has any disabled students. An example would be ensuring that the physical school environment is physically accessible to students who have mobility impairments.

A setting should not wait until an individual disabled student approaches them to request support before considering how to meet the duty. Instead, settings should plan ahead and anticipate the requirements of disabled students and the adjustments that might need to be made for them. For example, A School recognises that making an adjustment to provide handouts in advance in electronic format is a common anticipatory need for disabled students, for example students who lip-read, students with dyslexia and students with visual impairments. The school makes this adjustment and agrees timescales to ensure all staff have teaching notes available in this way. This is an example of an anticipatory adjustment.

(Example provided by Skill: National Bureau for Students with Disabilities.)

- Secondly, there is a duty to consider what is a reasonable adjustment to make for an individual student within the context of the setting that they attend. Support needs may only become apparent when the student is in a particular situation. An example might be the sensory overload experienced by a student with an Autistic Spectrum Condition where the Acoustics, lighting or other features cause anxiety or difficulty in concentrating.

## Auxiliary aids and services

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- Many disabled children will have a SEN and may need auxiliary aids and services which are necessary as part of their SEN provision; in some circumstances as part of a formal Education, Health and Care Plan. These aids may be provided in the school under the SEN route, in which case there will be no need for the school to provide those aids as part of their reasonable adjustment duty.
- Schools will have to consider whether to provide auxiliary aids as a reasonable adjustment for disabled children. This will particularly be the case where a disabled child does not have an EHCP as part of the Graduated Response.
- Many of the reasonable adjustments that schools are already making for disabled children / young people undoubtedly include the use of some auxiliary aids, such as coloured overlays for dyslexic children / young people, pen grips, adapted PE equipment, adapted keyboards and computer software.
- A school's duty to make reasonable adjustments is an anticipatory one owed to disabled children / young people generally, and therefore schools need to think in advance about what disabled children / young people might require and what adjustments might need to be made for them.

**Example - Providing a pupil who is a wheelchair user with a support assistant to push him or her around school would be an auxiliary service. Providing a step so that a pupil with restricted growth syndrome can reach the desks in the science lab would be an example of providing an auxiliary aid**

## Factors to be taken into account when considering reasonableness

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Without intending to be exhaustive, the following are some of the factors that are likely to be taken into account when considering what adjustments it is reasonable for a school to have to make:

- The extent to which special educational provision will be provided to the disabled pupil under Part 3 of the Children and Families Act 2014
- The resources of the school and the availability of financial or other assistance
- The financial and other costs of making the adjustment
- The extent to which taking any particular step would be effective in overcoming the substantial disadvantage suffered by a disabled pupil
- The practicability of the adjustment
- The effect of the disability on the individual
- Health and safety requirements
- The need to maintain academic, musical, sporting and other standards
- The interests of other pupils and prospective pupils

Some examples of things a school may need to provide

## Further Reading

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[Appendix 25 The Equality Act 2010 and schools – DfE](#)

[Appendix 26 - Technical Guidance from the Equalities and Human Rights Commission](#)

[Appendix 27 - Disabled children and the Equality Act Guidance for Schools from the Council for Disabled Children](#)

## Part 9 – Supporting children and young people in their transition between phases of education

### Introduction

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SEND support should include planning and preparation for the transitions between phases of education and preparation for adult life. To support transition, the current setting should share information with the school, college or other setting the child or young person is moving to. Settings should agree with parents and child / young person the information to be shared as part of this planning process. Where a child / young person is remaining at the school for post-16 provision, this planning and preparation should include consideration of how to provide a high quality study programme (CoP 6.57)

All settings should ensure that:

- all children have successful transitions, which will enhance their well-being and performance as learners.
- children, parents and practitioners are equal partners in the development and implementation of the transition plan.
- all children have positive opportunities to contribute to their transition.
- every child's transition is personalised and tailored to meet their individual needs.
- consistent support and advice is given to all staff in settings regarding transition planning.

Transition should be viewed as a process; not an event.

### Transition from Early Years to school

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Every child's transition should be personalised and tailored to meet their individual needs and the 'Early Years Transition Toolkit – Making the Unfamiliar Familiar' should be used as a best practice guide for all children. The toolkit also provides guidance on the targeted activities for children with additional needs, those that are above and beyond that which is normally available for all children. We have also included the 'Normal Entitlement – Good Practice Guidelines' for settings to understand what should be available for all children within your provision.

**Appendix 28 - Early Years Transition Toolkit**

**Appendix 29 Normal Entitlement - Good Practice Guidelines**

Parents/carers should also be actively involved in their child's transition package, and any specialist service attached to the child will be able to provide advice and guidance on supporting the child's transition.

Further guidance can be downloaded from the Babcock Inclusion Team Pages:

<https://www.babcockprime.co.uk/improving-schools-and-settings/early-years/early-years-inclusion/a-z-of-inclusion-resources/t-inclusion-resources>

When children start school at statutory school age different levels of provision and intervention will be employed by the school. The Graduated Response Guidance for schools provides information on the type of support each child should receive, and funding to support these interventions are automatically included in a schools notional budget. 'Top up funding' is available to support more complex children and an Education Health Care Plan will be in place for children who have complex needs which require complex arrangements and require a level of support above that which is Ordinarily Available to educational settings in the area.

To support teachers in understanding the type of support previously provided to support a child’s education and care, we the chart below shows the corresponding support across the two age ranges of Early Years to reception. This is guidance only, as funding in the Early Years does not guarantee the same level of funding/provision in school.

Early Years Code of Practice Category	School Category
Graduated Response 1	SEN SUPPORT using Notional Budget
Graduated Response 2	SEN SUPPORT using Notional Budget
Graduated Response 3	SEN SUPPORT using Notional Budget
Graduated Response 4	Access to Top up ‘enhanced’ funding
Exceptional Early Years Funding	Top up funding or Education Health Care Plan

The Local Authority will inform receiving schools about the Early Years Graduated Funding levels received by their cohort in the summer term prior to school entry. This will give them an indication of the level of needs of their children.

However, schools should be aware that the funding received in schools for Element 3 ‘top up’ funding does not equate in any way to the Early Years funding. E.G. GR3 does not equate to E3 school funding.

### Transition between school phases – 5-16 years

Transition toolkit provided by Babcock Prime

#### Appendix 30 - Transition Plan - School to School- Key strategies/resources for Transition

## Part 10 - Roles and Responsibilities of School Governors

### Introduction

The SEN Code of Practice – paragraph 6.3 states that there should be a member of the governing body or a sub-committee with specific oversight of the school’s arrangements for SEN and disability. School leaders should regularly review how expertise and resources used to address SEN can be used to build the quality of whole-school provision as part of their approach to school improvement.

The school’s Governing Body together with the Executive Leader should decide the school’s policy and approach to meeting children and young people’s SEND requirements, including those with and without Education, Health and Care (EHC) plans. The board is responsible for securing effective outcomes for learners with SEND. Whilst the board’s strategic level responsibilities may frequently be delegated to an individual board member or committee, it is important that as a consequence, the board does not lose sight of their corporate responsibility for SEND. Specific Governing Body Duties in relation to SEND (Section 6.4.11, Para 55, DfE Governance Handbook 2019).

All boards have legal duties under the Children and Families Act 2014 and must have regard to the statutory guidance, ‘the SEND Code of Practice: 0 to 25 years’. Academies must also meet these requirements by virtue of their funding agreement. They must (SEND Code of Practice references provided):

- co-operate with the LA in reviewing the provision that is available locally and developing the local offer;
- use their best endeavours to make sure that a child with SEND gets the support they need – this means doing everything they can to meet children and young people’s SEND (para 6.2);
- ensure that children and young people with SEND engage in the activities of the school alongside children / young people who do not have SEND (para 6.2);
- inform parents when they are making special educational provision for a child (para 6.2);
- ensure that arrangements are in place in schools to support children / young people at school with medical conditions (para 6.11);
- provide access to a broad and balanced curriculum (para 6.12);
- ensure that children / young people from Year 8 until Year 13 are provided with independent careers advice (para 6.13);
- have a clear approach to identifying and responding to SEND (paras 6.14 – 6.71);
- provide an annual report for parents on their child’s progress (paras 6.64 – 6.51);
- record accurately and keep up to date the provision made for children / young people with SEND (paras 6.72 - 6.78);
- publish information on their websites about the implementation of the board’s policy for children / young people with SEND, the School SEN Information Report; (paras 6.79 - 6.83);
- publish information about the arrangements for the admission of disabled children, the steps taken to prevent disabled children being treated less favourably than others, the facilities provided to assist access of disabled children, and their accessibility plans;
- ensure that there is a qualified teacher designated as special educational needs co-ordinator (SENCO) for the school. (paras 6.84 – 6.94);
- determine their approach to using their resources to support the progress of children / young people with SEND (paras 6.95 – 6.99).

PARA 56: In addition:

- When considering an appeal from a parent or young person, the First-tier Tribunal (Special Educational Needs and Disability) must have regard to the SEND Code of Practice 2015. The Tribunal will expect LAs, early education settings, schools and colleges to be able to explain any departure from the Code, where it is relevant to the case it is considering.

## Checklist for Governors designated to oversee the school's arrangements for SEND

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### Has the governing body:

- ✓ Reviewed the school's SEND Policy and Accessibility Plan with the Headteacher/SENCO
- ✓ Ensured the SEN Information Report is in place, updated annually and published on the school's website
- ✓ Fulfilled its legal duties in ensuring there is a qualified teacher designated as SENCO and where appropriate, the SENCO has achieved a National Award in Special Educational Needs Co-ordination within three years of appointment.
- ✓ Considered how the SENCO actively contributes to strategic management of the school
- ✓ Effectively evaluated the impact of allocated funds to ensure it is spent well and demonstrates value for money in relation to child / young person outcomes

### Ensured the Headteacher has:

- ✓ implemented suitable arrangements for consulting parents/carers and children / young people and is actively engaging with them in decision making
- ✓ provided sufficient training and professional development to enable staff to deliver high quality provision
- ✓ reviewed how the school supports young people with their transition to post-16 education and preparing for adult life
- ✓ arrangements in place to support children / young people with medical conditions  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/349435/Statutory\\_guidance\\_on\\_supporting\\_pupils\\_at\\_school\\_with\\_medical\\_conditions.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/349435/Statutory_guidance_on_supporting_pupils_at_school_with_medical_conditions.pdf)

### Strategic questions for Governors:

- What are the key features of the school's SEND Policy & SEN Information Report and how frequently are these reviewed?
- How does the school identify children with SEND?
- What happens once a child is identified as having SEND?
- What external agencies/support does the school involve?
- Is funding for SEND effectively allocated to enable progress? Does the spend reflect value for money?
- How do you know how well children / young people with SEND are achieving? How does this compare to the achievement of all children / young people in the school and national standards?
- Are there any differences in the performance of children with SEND in different years, classes, etc.?
- How is the school narrowing any gaps between key groups?
- Are children with SEND disproportionately represented in absence and exclusion data?



- Are any children / young people not accessing their entitlement to full-time provision? What is the school doing to address this?
- How do you gather stakeholder views, especially those of parents and children, and what do you learn from them?
- What are the school's plans to improve/develop SEND provision?
- How will the implementation and impact of these plans be effectively monitored and evaluated?

#### Further Reading

DfE Governance Handbook March 2019

**Appendix 31 - Governance handbook**

SEND Governance Review Guide <https://sendgov.co.uk/>

**Appendix 32 - SEND Governance Review Guide**

Driver Youth Trust (video) - What is the responsibility of the Governing Body for SEND learners?

<https://www.youtube.com/watch?v=3581sPLe4Zw>

## Part 11 - Glossary of terms

AET	Autism Education Trust  <a href="https://www.autismeducationtrust.org.uk/">https://www.autismeducationtrust.org.uk/</a>
ADPR	Assess/Plan/Do/Review. A model of action and intervention in early education settings, schools and colleges to help children and young people who have special educational needs. The approach recognises that there is a continuum of special educational needs and that, where necessary, increasing specialist expertise should be brought to bear on the difficulties that a child or young person may be experiencing.
ASD	Autism Spectrum Disorder - Autism is a term used to describe a neurological difference in brain development that has a marked effect on how a person develops
Care Plan	A record of the health and/or social care services that are being provided to a child or young person to help them manage a disability or health condition. The Plan will be agreed with the child's parent or the young person and may be contained within a patient's medical record or maintained as a separate document. Care Plans are also maintained by local authorities for looked after children – in this instance the Care Plan will contain a Personal Education Plan in addition to the health and social care elements.
CCN	Complex Communication Needs/Autism (specialist teaching services)
CAMHS - Child and Adolescent Mental Health Services	These services assess and treat children and young people with social, emotional, or mental health difficulties. They range from basic pastoral care, such as identifying mental health problems, to specialist 'Tier 4' CAMHS, which provide in-patient care for those who are severely mentally ill.
Code of Practice (CoP)	Department for Education Special Educational needs and disability code of practice 0-25 years (2015)  Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities
Compulsory school age	A child is of compulsory school age from the beginning of the term following their 5th birthday until the last Friday of June in the year in which they become 16, provided that their 16th birthday falls before the start of the next school year
Dyslexia	Dyslexia is the most common type of specific learning difficulty that students are likely to experience with about 10% of the population having some form of dyslexia.  "Dyslexia is present when fluent and accurate word identification (reading) and/or spelling do not develop or do so very incompletely or with great difficulty. This focuses on literacy learning at the 'word level' and implies that the problem is severe and persistent despite appropriate learning opportunities. It provides the basis of a staged assessment through teaching." (British Psychological Society, 2000: Dyslexia, Literacy and Psychological Assessment.)

Early Help Assessment	An assessment of a child and his or her family, designed to identify needs at an early stage and enable suitable interventions to be put in place to support the family
Early Years Foundation Stage (EYFS)	The foundation stage begins when children reach the age of three. Many children attend an early education setting soon after their third birthday. The foundation stage continues until the end of the reception year and is consistent with the National Curriculum. It prepares children for learning in Year 1, when programmes of study for Key Stage 1 are taught
Early years provider	A provider of early education places for children under five years of age. This can include state-funded and private nurseries as well as child minders.
Education, Health and Care plan (EHC plan)	An EHC plan details the education, health and social care support that is to be provided to a child or young person who has SEN or a disability. It is drawn up by the local authority after an EHC needs assessment of the child or young person has determined that an EHC plan is necessary, and after consultation with relevant partner agencies
External Professional	Specialist professionals, including those secured by the school itself or from outside agencies (CoP 6.58)
IEP	Individual Education Plan. These plans are designed for children with disabilities or special needs. The purpose of individual education plan is to provide individualized education in public run school systems. There are numerous educational institutions in the US that cater to the individual needs and requirements of the disabled children. Understanding the processes and procedures associated with the individual education plan assists parents with adding value to the lives of their children.
IPM	An Individual Provision Map is a management tool providing an 'at a glance' way of documenting and showing the range of provision, staffing levels and support that a school makes available to an individual pupil.  Provision maps enable schools to look strategically at the needs of all their pupils, including those in vulnerable groups, to clearly identify pupils' strengths and needs. Provision can then be planned to meet those needs and track pupil progress so as to improve learning outcomes.
Graduated approach	A model of action and intervention in early education settings, schools and colleges to help children and young people who have special educational needs. The approach recognises that there is a continuum of special educational needs and that, where necessary, increasing specialist expertise should be brought to bear on the difficulties that a child or young person may be experiencing. Often described as "Assess/Plan/Do/Review"
Information, Advice and Support Services	Information, Advice and Support Services provide advice and information to children with SEN or disabilities, their parents, and young people with SEN or disabilities. They provide neutral and factual support on the special educational needs system to help the children, their parents and young people to play an active and informed role in their education and care. Although funded by local authorities, Information, Advice and Support Services are run either at arm's length from the local authority or by a voluntary organisation to ensure children, their parents and young people have confidence in them.
LST	Learning Support Team (specialist teaching services)

Local Offer	Local authorities in England are required to set out in their Local Offer information about provision they expect to be available across education, health and social care for children and young people in their area who have SEN or are disabled, including those who do not have Education, Health and Care (EHC) plans. Local authorities must consult locally on what provision the Local Offer should contain
MLD	Moderate Learning Difficulty - The general level of academic attainment of these learners will be significantly lower than that of their peers. Their cognitive ability and/or attainment levels will be at or below the second percentile. Generally they will have difficulty acquiring literacy and numeracy skills. Other difficulties may include associated speech and language delay, low self-esteem, low levels of concentration and underdeveloped social skills.
Parent	Under section 576 of the Education Act 1996, the term 'parent' includes any person who is not a parent of the child, but has parental responsibility (see below) or who cares for him or her
Parental responsibility	<p>Parental responsibility is defined under Section 3 (1) of the Children Act 1989 as meaning all the duties, rights, powers, responsibilities and authority which parents have with respect to their children and their children's property. Under Section 2 of the Children Act 1989, parental responsibility falls upon:</p> <ul style="list-style-type: none"> <li>■ all mothers and fathers who were married to each other at the time of the child's birth (including those who have since separated or divorced)</li> <li>■ mothers who were not married to the father at the time of the child's birth, and</li> <li>■ fathers who were not married to the mother at the time of the child's birth, but who have obtained parental responsibility either by agreement with the child's mother or through a court order</li> </ul> <p>Under Section 12 of the Children Act 1989, where a court makes a residence order in favour of any person who is not the parent or guardian of the child, that person has parental responsibility for the child while the residence order remains in force.</p> <p>Under section 33 (3) of the Children Act 1989, while a care order is in force with respect to a child, the social services department designated by the order will have parental responsibility for that child, and will have the power (subject to certain provisions) to determine the extent to which a parent or guardian of the child may meet his or her parental responsibility for the child. The social services department cannot have parental responsibility for a child unless that child is the subject of a care order, except for very limited purposes where an emergency protection order is in force under Section 44 of the Children Act 1989.</p>
Personal Education Plan	An element of a Care Plan maintained by a local authority in respect of a looked after child, which sets out the education needs of the child. If a looked after child has an EHC plan, the regular reviews of the EHC plan should, where possible, coincide with reviews of the Personal Education Plan.
SaLT	A Speech and Language Therapist (SLT) evaluates the child or young person to find out if they have speech (pronunciation or stammering), language (understanding, sentence formation and grammar), communication (social interaction) or eating and drinking difficulties
SEMH	Social, Emotional and Mental Health

SLCN	Speech, Language and Communication Needs
SPLD	Specific Learning Difficulty is the overall term used to describe a developmental condition that causes problems when using words (dyslexia) and problems using symbols (dyscalculia) and some other developmental problems (e.g. dyspraxia).
Special Educational Needs (SEN)	A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her. A child of compulsory school age or a young person has a learning difficulty or disability if he or she has a significantly greater difficulty in learning than the majority of others of the same age, or has a disability which prevents or hinders him or her from making use of educational facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.
Special Educational Needs Co-ordinator (SENCO)	A qualified teacher in a school or maintained nursery school who has responsibility for co-ordinating SEN provision. In a small school, the headteacher or deputy may take on this role. In larger schools there may be a team of SENCOs. Other early years settings in group provision arrangements are expected to identify an individual to perform the role of SENCO and childminders are encouraged to do so, possibly sharing the role between them where they are registered with an agency
Special educational provision	Special educational provision is provision that is different from or additional to that normally available to children / young people of the same age, which is designed to help children and young people with SEN or disabilities to access the National Curriculum at school or to study at college
TAC	A Team Around the Child (TAC) is a group of practitioners working with a particular child or young person and their family
TFS	Targeted Family Support teams work in partnership with families who are experiencing complex issues that require a multi-agency approach and plan of intervention
QTVI	A Teacher of Students with Visual Impairments (also called a Teacher of the Visually Impaired, a vision specialist, VI teacher, vision itinerant teacher, etc.) is typically a licensed special education teacher who has received certification and specialized training, in meeting the educational needs of students who are blind or have visual impairments ages birth through to 21 years
Young person	A person over compulsory school age (the end of the academic year in which they turn 16). From this point the right to make decisions about matters covered by the Children and Families Act 2014 applies to the young person directly, rather than to their parents

\* Cycle 2 When an early years setting, school or post 16 provider makes a request for statutory assessment the Local Authority will ask for evidence from the school that a graduated response of any strategies, support or alternatives put in place for the child/young person has been continued for a reasonable period of time (and in Worcestershire this is normally\*\* regarded as at least two terms) without success.

\*\* Each case will be looked at on merit, for example, there may be children with very significant needs for whom this is not the case.

