



The Entitlement of Pupils in Mainstream Schools

'Ordinarily Available Provision'

For pupils with Special Educational Needs

In

Jersey Schools

(1st Edition – amended November 2015)

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Foreword

This document sets out the entitlement of pupils with Special Educational Needs (SEN) in mainstream schools. It outlines the definition of SEN within Jersey Law and specifies who is responsible for pupils with SEN at all levels of need.

A Definition of Special Educational Needs (SEN)

Identification of pupils who might have SEN relies on primary legislation contained in the Education (Jersey) Law 1999 as revised in January 2007. Part 1, Article 4 defines SEN.

Education Law (Jersey) Part 1, Article 4

- “(1) For the purposes of this Law, a child has “special educational needs” if the child has a learning difficulty which calls for special educational provision to be made for the child.
- (2) For the purposes of this Law, subject to paragraph (3), a child has a “learning difficulty” if –
- (a) the child has a significantly greater difficulty in learning than the majority of children of the child’s age;
 - (b) the child has a disability which either prevents or hinders the child from making use of educational facilities of a kind generally provided for children of the child’s age in provided schools;
 - (c) the child is below compulsory school age and is, or would be if special educational provision were not made for the child, likely to fall within sub-paragraph (a) or (b) when the child is of compulsory school age.
- (3) A child is not to be taken as having a learning difficulty solely because the language (or form of the language) in which the child is, or will be, taught is different from a language (or form of a language) which has at any time been spoken in the child’s home.”

Who is Responsible for Pupils with SEN?

Provision for pupils who might have SEN relies on primary legislation contained in the Education (Jersey) Law 1999 as revised in January 2007. This is mainly within Part 5, Articles 29 to 32 which sets out a framework of responsibilities for the States, schools and parents.

Education Law (Jersey) Part 5, Article 29

“Duty of Minister in relation to child with special educational needs

- (1) The Minister shall ensure that the identity of every child who has special educational needs is determined, and the special educational provision required by the child assessed from time to time.
- (2) The Minister shall ensure that there is available to every child who has special educational needs the special educational provision required by the child.

(3) The Minister shall ensure that, if the conditions described in paragraph (4) are satisfied, a child who has special educational needs shall be educated in a school which is not a special school, unless it is incompatible with the wish of the child's parent or, in the case of a child who has attained the age of 16 years, the child's own wish.

(4) The conditions are that educating the child in a school which is not a special school is compatible with –

a) the child's receiving the special educational provision which the child's learning difficulty calls for;

b) the provision of efficient education for the children with whom the child will be educated; and

c) the efficient use of resources.”

In achieving the above, reference is made within the Education Law (Jersey) Part 5 Article 32 to *discharged responsibilities from the Minister*;

Education Law (Jersey) Part 5, Article 32

“Power to make orders relating to children with special educational needs

The Minister may by Order make provision facilitating the discharge of any duties and the exercise of any rights under this Part, including, but not by way of limitation, provision for –

- a) the procedures applicable to the determination of the special educational needs of a child and the assessment of the special educational provision required by the child;
- b) the persons who are to determine the special educational needs of a child, and assess the special educational provision required by the child;
- c) the persons to be consulted prior to the making of an assessment or determination;
- d) the circumstances in which a statement of special educational needs is required to be maintained in respect of a child;
- e) the preparation, content, distribution and retention of a statement of special educational needs;
- f) special educational provision otherwise than in a provided school, or otherwise than in Jersey;
- g) enabling a child with special educational needs to be exempted from all or any part of the Jersey Curriculum;
- h) monitoring of and preparation of a report on a child with special educational needs by the school at which the child is a pupil;
- i) the frequency of and procedure in relation to further assessments in respect of a child;
- j) the procedure applicable to any appeal under this Part; and
- k) funding and the payment of costs where special educational provision is made outside Jersey.”

What is Ordinarily Available Provision and what is Special Educational Provision?

Ordinarily Available Provision

The delegation of SEN funding means that arrangements for the great majority of pupils who have SEN should be met effectively within mainstream settings through high quality teaching and arrangements at School Action and School Action Plus. The OA document outlines the indicative arrangements that should be ordinarily available for pupils with SEN, from within schools' delegated budget shares.

OA provision aims to ensure that:

- All pupils with SEN attending Jersey mainstream schools will have a minimum entitlement to ordinarily available provision regardless of which school is attended;
- The Department for Education, Sport and Culture (DfESC), schools and the Education Support Team (EST) are working to a shared understanding of SEN and SEN arrangements. This will support their dialogue about individual pupils and ensure that parents are not drawn into discussions about resourcing;
- The DfESC fulfils its statutory duty to determine special educational provision, and to monitor and evaluate effectiveness of SEN arrangements at both pupil and school level;
- Schools are able to focus to a greater extent on approaches to teaching, learning and intervention rather than levels of teaching assistant/keyworker support.

Special Educational Provision

Special educational provision is defined in Education Law (Jersey) Part 1, Article 4

Education Law (Jersey) Part 1, Article 4

“In this Law – “special educational provision” means –

- a) in relation to a child who has attained the age of 2 years, educational provision which is additional to, or otherwise different from, the educational provision made generally for children of the child's age in provided schools (other than special schools)”

Special educational provision represents those arrangements for pupils with SEN that are over and above what is ordinarily available in mainstream schools. The DfESC expects that the very significant majority of pupils with SEN in mainstream schools will be supported through delegated SEN funds.

Where a school believes there is evidence that a pupil requires a level of support and breadth of intervention that is not ordinarily available, the DfESC may decide that an assessment at Exceptional Action is necessary. This would occur in a very small number of cases and the decision to initiate such an assessment would be based on the quality of evidence provided by a school.

The Exceptional Action process itself will not necessarily lead to a Record of Need. The information gathered during an assessment may indicate ways in which the school, guided as appropriate by expert help or advice, can meet the pupil's needs without the need for a Record of Need. In this case a Note in Lieu may be issued.

The descriptors within the OA document will support schools in making a professional judgement about if/when to initiate Exceptional Action. Schools will need to demonstrate that the pupils they are putting forward for Exceptional Action have needs that require SEN arrangements significantly outside and beyond the descriptors for ordinarily available provision. This means that Records of Need will not be issued for pupils who need provision that is ordinarily available within mainstream schools' delegated budget share.

Accountability

The DfESC delegates funds to schools to ensure they provide arrangements to meet the needs of pupils with SEN. There is an expectation that this funding is used exclusively to address SEN needs and that schools are able to evidence this.

As a result, there is an expectation that schools plan provision for pupils with SEN and can demonstrate the extent to which it is making a difference. An organised, reflective and strategic approach is required and schools can adopt a range of approaches to achieve this. These might include the use of Individual Learning Plans (ILPs), Individual Provision Maps (IPMs) or wider Provision Mapping (PM). The approach used must be part of an on-going cycle. ILPs are no longer required for pupils at School Action, as long as there is a good Provision Map in place.

In 2011, the DfESC carried out a small scale project, where a group of schools came together to share good practice in Provision Mapping. It concluded that whilst successful schools mapped provision in different ways, there is no universal model. There were, however, a number of common aspects essential to successful Provision Mapping.

- Knowing how well pupils are doing compared with their peers and against national standards
- Knowing what works to prevent underachievement at whole class, group and individual level
- Identifying the potential barriers to learning for each pupil
- Knowing what else to do both now and in the future to meet the needs of all pupils and prevent underachievement
- Continuously reviewing all provision and its impact

As an overarching statement, however, the DfESC concluded:

“Provision Mapping takes into account the full scope of provision, including high quality whole class teaching, guided and group work and individual interventions in order to identify and overcome potential barriers to learning and meet the needs of all pupils within and beyond the school setting.”

(DfESC, November 2011)

How Should Success be measured?

The Special Educational Needs Code of Practice refers to pupils making appropriate progress and measuring progress. Identifying progress is how individual pupils, families, schools and the department can measure and evidence the effectiveness of the provision.

Pupils and their needs are individual. What represents appropriate progress is therefore also individual and has to be defined by success in meeting appropriately challenging, SMART targets over time. Pupils who do not have a SEN progress at different rates and the same is true for pupils with an identified SEN. Some pupils will successfully meet highly appropriate challenging targets but the nature of their SEN may mean that the gap between their attainments and those of their peers will widen over time.

High Quality Teaching, Ordinarily Available Provision and Special Provision summarised through the Graduated Response

The Graduated Response referred to in the Jersey Code of practice 2001 provides the framework for the school's organisation of support for pupils with SEN and for their joint work with EST and other agencies. The process is cumulative. Successive levels are initiated where closer planning, intervention, monitoring and evaluation is required to meet needs. When changing needs can be appropriately met with lesser response, arrangements can revert to earlier cycle/levels.

High Quality Teaching

The principle behind the Graduated Response is that optimising the effectiveness of high quality teaching, including differentiation, means that fewer pupils require arrangements at School Action.

School Action

School Action is initiated where high quality teaching is not achieving appropriate progress. Where a period of School Action arrangements planned and monitored through Provision Mapping has resolved the identified need, high quality teaching will be sufficient.

Where School Action interventions are needed to maintain progress, these can continue for extended periods.

Where School Action interventions do not maintain progress in meeting the identified need, a move to School Action Plus should be discussed with the appropriate external agency.

School Action Plus

Where EST/specialist support/outreach services/other agencies are consulted, records of the school assessment, planning, intervention and review at School Action will form the basis of initial discussion.

Where a period of School Action Plus arrangements resolves the identified need, the pupil can move back to School Action or high quality teaching may be sufficient.

Interventions at School Action Plus, however, may also continue to be needed to maintain progress.

Exceptional Action (Multi-agency Assessment)

This will normally arise out of extended interventions to implement EST (and other appropriate agencies) advice at School Action Plus. It is initiated where the Department (rather than the school) needs to identify a pupil's special educational needs and arrangements to address these. The outcome will be to issue either a 'Record of Need' or a 'Note in Lieu' of a Record of Need.

Record of Need

This is put in place where Exceptional Action assessment indicates that the Department (rather than the school) needs to specify a child's special educational needs and arrangements to address these. A Record of Need is subject to Annual Review.

Behavioural, Emotional and Social Difficulties (BESD)

This area of need includes pupils who demonstrate:

Social and Behavioural Difficulty

Pupils may be disruptive and disturbing, hyperactive and lack concentration, have immature social skills or present challenging behaviours arising from other complex needs.

Pupils who should be included in this category are likely to have conduct disorders, for example, oppositional defiant disorder (ODD); hyperkinetic disorders including attention deficit disorder or attention deficit hyperactivity disorder (ADD/ADHD) and syndromes, such as Tourette's.

Social and Emotional Difficulty

Pupils may be withdrawn or isolated, quiet, and find it difficult to communicate. Other pupils may display signs of low esteem, underachievement and inappropriate social interaction, but without outwardly challenging behavioural outbursts.

Pupils who should be included in this category are likely to have mental health difficulties or emotional disorders, such as depression and eating disorders.

A small but significant minority of pupils will be subject to BESD at some point during their school career. Some will have emotional needs and/or behavioural and social problems which interfere with their own ability to learn effectively. In some instances, the difficulties they experience may cause disruption to the learning of other pupils. Pupils with BESD cover the full range of ability and continuum of severity. Their behaviours present a barrier to learning and persist despite the implementation of an effective school behaviour policy and personal/social curriculum.

Social difficulties, in this context, occur when pupils 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 pupil's ability to learn.

In some cases, these difficulties may be closely associated with the wider disadvantages experienced by pupils from socially deprived home backgrounds. They may be compounded by the pupil'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 pupil's exposure to rapid, unassimilated change or trauma. Use of the phrase is therefore meant to have a specific connotation to help determine the extent and nature of the pupil'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.

Pupils presenting with BESD 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 pupils.

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

Understanding the purpose or function of the pupil'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 pupils 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 pupils, inappropriate placement in teaching groups not matching their abilities can inadvertently cause behaviour difficulties arising from frustration and loss of self-esteem.

School's pastoral care arrangements should ensure that pupils are able to discuss any health related and other problems with a relevant health professional, educational psychologist, education welfare officer, counsellor or other professional.

**School Action
Behavioural, Emotional and Social Difficulties (BESD)**

<p>Level and description of difficulty</p>	<p>Presents with BESD 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 pupil 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 pupils, 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.</p>		
<p>Assessment, Planning and Review</p>	<p>Teaching Environment and Grouping</p>	<p>Curriculum and Teaching Methods</p>	<p>Partners and Resources</p>
<p>Pupil'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>SMART behavioural targets will be set (some may be shared with other pupils where there are similar presenting problems in the same class).</p> <p>Systematic monitoring of progress to consider the impact of interventions used. Schools would need to demonstrate involvement over time (a minimum of 2 terms).</p> <p>Consideration given to an identification, assessment, planning, monitoring and review cycle for pupils with emotionally-based difficulties.</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>Peer resources might be used. This might include: Circle of Friends, peer mentoring/mediation.</p> <p>Occasional access to in-school support facility (behaviour resource centre or equivalent) for specific aspects of curriculum delivery.</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>Curriculum differentiation to reflect individual behavioural needs.</p> <p>Pupil and parent involvement in the behavioural programmes are clearly defined.</p> <p>Staff use a range of teaching and learning strategies/delivery styles to ensure maximum engagement.</p>	<p>Arrangements which broadly reflect in the region of 5 hours additional adult support or equivalent.</p> <p>The SENCo/head of year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the pupil.</p> <p>Identified adult, e.g. SENCo/head of year or class teacher to act as a stable point of reference for pupil and parents/carers.</p> <p>Class or subject teachers oversee delivery of individualised or group behavioural programmes.</p> <p>External professionals including (e.g.) behaviour support staff may provide whole school staff training.</p> <p>Parents/carers to be consulted on levels of concern and actively involved in programmes/interventions.</p>

<p>Parents/carers and pupils involved in target setting and review. Pupils 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> <ul style="list-style-type: none"> • Targets can be included on the school's Provision Map and class/subject teachers will implement targets in lessons. Targets will be reviewed at least termly 	<p>Environmental audit completed and appropriate adjustments made.</p> <ul style="list-style-type: none"> • Pupils are encouraged to participate fully in the life of the school including extra-curricular activities 	<p>Pupils are encouraged to identify appropriate role models within schools.</p> <p>SEAL (or similar curriculum) delivered in conjunction with other class wide approaches that consider social/emotional needs (e.g. Circle Time).</p> <p>Staff monitor and support pupils during break times and lunchtimes.</p> <ul style="list-style-type: none"> • Curriculum and ethos actively promotes positive attitudes to SEN • School ensures that any lesson withdrawal is not affecting the continuity of progress the pupil is making and the impact of withdrawal on progress is monitored 	<p>Use of ICT, audio visual support, self-directed time out (as required) to support pupil's access to the curriculum.</p> <p>Staff trained and able to support pupils with BESD and its impact on curriculum access.</p> <p>TAs/keyworkers contribute to planning pupil programmes and review targets.</p>
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**School Action Plus
Behavioural, Emotional and Social Difficulties**

<p>Level and description of difficulty</p>	<p>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 BESD 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 well-being, resulting in unhappiness/stress. Possible long periods of absence/disengagement.</p>		
<p>Assessment, Planning and Review</p>	<p>Teaching Environment and Grouping</p>	<p>Curriculum and Teaching Methods</p>	<p>Partners and Resources</p>
<p>Analysis of the pupil's strengths and weaknesses in social/emotional and behavioural development.</p> <p>Clear assessment processes that enable the pupil'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>On-going recording of difficult behaviours to provide baseline(s). Recording should enable clear analysis of antecedents, behaviours, consequences (ABCs).</p> <p>ILPs and/or PSPs set following involvement from external professionals including staff from specialist settings, BESD Outreach support, educational psychologist. CAMHS may also become involved.</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>Opportunities for periods of respite using withdrawal to smaller groups. This might include self-directed/ individual time-out.</p>	<p>Increasing adult/pupil 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 ILP targets.</p> <p>Interventions include more specialist strategies (skills based programmes, therapeutic input/mentoring), more focused rewards/sanctions.</p> <p>Individual counselling and/or therapeutic support from external agencies/ appropriately qualified professionals (as appropriate).</p>	<p>Arrangements which broadly reflect in the region of 15 to 20 hours additional adult support or equivalent.</p> <p>The SENCo/head of year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the pupil.</p> <p>Identified adult, e.g. SENCo/head of year or class teacher to act as a stable point of reference for pupil and parent/carer.</p> <p>Class or subject teachers oversee delivery of individualised or group behavioural programmes.</p> <p>Staff trained and able to implement strategies to support positive behaviour (e.g. IDP).</p>

<p>ILPs/IBPs and/or PSPs include positively phrased SMART targets, which reflect the pupil's priority needs.</p> <p>Systematic monitoring and review of pupil progress and specific response to interventions outlined in the ILP/IBP and/or PSP reviews to involve professionals, parents/carers and pupils. Schools would need to demonstrate involvement over time (a minimum of 2 terms) from appropriate services/professionals.</p> <p>Parents/carers and pupils involved in the setting and review of targets. Pupils should understand the targets they are working to achieve.</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> <ul style="list-style-type: none"> • School has a well-planned programme for introduction back to school after suspension • Clear systems to ensure effective communication between class teachers/subject teachers/SENCOs/heads of year/schools at times of transition 	<p>The opportunity to attend in-school behaviour resource 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>Pupils remain included within the curriculum unless as part of an IBP.</p>	<p>A structured behaviour management programme developed in conjunction with relevant external professionals.</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>Reference to/use of IDP materials (or similar).</p> <p>Use of equipment to motivate and sustain learning e.g. ICT and audio-visual equipment.</p> <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 (In addition) Alternative programmes of study at KS4 should be provided where appropriate.</p>	<p>Staff trained and able to deliver interventions that address BESD. This may include: functional analysis of behaviour, use of assessment tools that consider developmental issues (e.g. Boxall Profile), use of restorative approaches to support conflict resolution, use of ProAct Scipr (or similar approach). Other additional/specialist training for key staff (behaviour management, attendance, targeted BESD interventions etc.).</p> <p>Parents/carers involvement in programme development for both school and home.</p> <p>Guidelines for Health and Safety available.</p> <ul style="list-style-type: none"> • Advice and input from external agencies • Pupil has access to school counsellor and social worker at secondary level • Outcomes of external assessments are shared with parents/carers
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Cognition and Learning

Moderate Learning Difficulties (MLD)

The majority of pupils 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 emotional and behavioural difficulties.

Pupils subject to curriculum enhancements through targeted support, e.g. short term booster sessions, should not be categorised as having MLD 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 pupils in the school, through a differentiated curriculum
- Consistently evident problems with memory or 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 limits 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 difficulties' is an umbrella term which indicates that pupils display differences across their learning. Pupils with SpLD may have a particular difficulty in learning to read, write, spell or manipulate numbers so that their performance in these areas are below their performance in other areas. Pupils may also have problems with short-term memory, organisational skills and co-ordination.

Specific learning difficulties include:

Dyslexia –dyslexia is a continuum of difficulties in learning to read, write or spell, which persist despite appropriate learning opportunities. These difficulties are not typical of performance in most other cognitive and academic areas. A pupil, in spite of adequate teaching and learning opportunities, does not acquire literacy skills, such as reading and spelling.

Dyscalculia - pupils with dyscalculia have difficulty in acquiring mathematical skills. Pupils may have difficulty understanding simple number concepts, lack an intuitive grasp of numbers and have problems learning number facts and procedures. Their difficulties are not typical of their performance in most other cognitive and academic areas.

Dyspraxia/developmental co-ordination disorder - pupils with dyspraxia are affected by an impairment or immaturity of the organisation of movement, often appearing clumsy. Gross and fine motor skills are hard to learn and difficult to retain and generalise. Pupils may have poor balance and coordination and may be hesitant in many actions (running, skipping, hopping, holding a pencil, doing jigsaws, etc.) Their articulation may also be immature and their language late to develop. They may also have poor awareness of body position.

**School Action
Moderate Learning Difficulties (MLD) and Specific Learning Difficulties (SpLD)**

<p>Level and description of difficulty</p>	<p>There may be an overlap of presenting needs/difficulties for pupils 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. 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.</p>		
<p>Assessment, Planning and Review</p>	<p>Teaching Environment and Grouping</p>	<p>Curriculum and Teaching Methods</p>	<p>Partners and Resources</p>
<p>Identification of needs through end of Key Stage levels, cognitive ability tests (CATs), standardised tests, teacher observation, views of pupil and parents/carers.</p> <p>Schools use a range of diagnostic tests, observational checklists, dynamic forms of assessment which may involve:</p> <ul style="list-style-type: none"> • observing and recording responses in different environments • identifying strengths and weaknesses • identifying learning rates and learning styles <p>Progress is tracked using FSP, 'P' Levels or Jersey Curriculum levels</p> <p>Assessment may sit within Provision Map planning.</p> <p>SMART learning targets are set (some may be shared with other pupils where there are similar presenting problems in the same class).</p>	<p>Grouping arrangements or additional support in the classroom used flexibly to promote progress.</p> <p>Opportunities for small group teaching to address Provision Map targets.</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 pupils 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"> • use of visual timetable • prompt and/or instruction sheets • visually identified expectations and teaching outcomes 	<p>Staff understand/are aware of and able to provide for the needs of individual pupils.</p> <p>Staff are aware of the implications of a range of learning difficulties (including dyslexia, dyspraxia and dyscalculia).</p> <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 which are multi-sensory, well-structured with opportunities for repetition and consolidation (over learning) of skills.</p> <p>Curriculum and ethos actively promote positive attitudes to SEN.</p> <p>Strategies and targeted interventions (as required) to:</p> <ul style="list-style-type: none"> • increase independent learning as appropriate • develop curricular skills 	<p>Arrangements which broadly reflect in the region of 5 hours additional adult support or equivalent.</p> <p>The SENCo/head of year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the pupil.</p> <p>Identified adult, e.g. SENCo/head of year or class teacher to act as a stable point of reference for pupil and parent/carer.</p> <p>Class or subject teachers oversee delivery of individualised or group learning programmes.</p> <p>Staff trained and able to support pupils with MLD and/or SpLD.</p> <p>TAs/keyworkers contribute to planning and review targets.</p> <p>Access to specialised programmes and materials to support learning.</p> <p>Access to/support from a homework club.</p> <p>IT equipment – knowledge and use of a</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/carers and pupils are involved in target setting and review. Pupils understand the targets they are working to achieve.</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>	<ul style="list-style-type: none"> • frequent visual supports for teaching including signalling and signing <p>Pupils are encouraged to participate fully in the life of the school including extra-curricular activities.</p>	<ul style="list-style-type: none"> • develop personal organisation (timetabling and personal equipment) • extend concentration and attention to task • support weak spatial and perceptual skills • support problem solving • assist with developing fluent handwriting and/or opportunities to develop word processing skills • pre-teach topic specific vocabulary • develop social skills <p>Access to an appropriate peer group for role modelling and peer support influence.</p> <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>Support for homework (and to ensure that tasks are clearly recorded). This might include a homework club.</p> <p>(In addition) At KS4: wider curriculum opportunities through Entry Level Course, alternative accreditation, work related learning and college opportunities.</p> <ul style="list-style-type: none"> • college links for post 16 education • programmes to develop life skills • access to work experience <p>Small group teaching for specific awards or courses.</p> <p>School ensures that any lesson withdrawal is not affecting the continuity and progress the pupil is making and the impact of withdrawal on progress is monitored.</p>	<p>range of ICT equipment including PCs, iPads etc.</p> <p>Software/programmes and Apps – knowledge of a wide range of software programmes and apps to generate learning and facilitate access to the curriculum.</p>
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School Action Plus
Moderate and Specific Learning Difficulties

<p>Level and description of difficulty</p>	<p>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 sustained progress or regression despite appropriate intervention.</p>		
<p>Assessment, Planning and Review</p>	<p>Teaching Environment and Grouping</p>	<p>Curriculum and Teaching Methods</p>	<p>Partners and Resources</p>
<p>Detailed analysis of strengths and weaknesses. Assessments completed by external professionals e.g. educational psychologist, speech and language therapist and other Health professionals (where appropriate).</p> <p>ILPs to be set following involvement and consultation with external professionals.</p> <p>ILPs include: positively phrased SMART targets, which reflect the pupil's priority needs and will specify teaching arrangements and resources required with clearly defined success criteria. They will include strategies that reflect the pupil's preferred learning styles.</p> <p>Pupil progress will be subject to systematic monitoring and specifically, their response to interventions outlined in the ILP.</p> <p>ILPs will be reviewed at least termly.</p> <p>Parents/carers and pupils are involved in target setting and review and pupils should have an understanding of the targets they are working to achieve. There should be an on-going cycle of identification, assessment, planning, implementation, monitoring and review.</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 an appropriate out of class facility.</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 i.e. well defined and labelled resources using writing and visuals, etc.</p> <p>In-class support in targeted subject areas.</p> <p>At KS4: Flexible teaching arrangements which include:</p> <ul style="list-style-type: none"> • alternative/vocational courses • timetabling that allows for reduced options to facilitate supported study options in other subjects • links with FE Colleges • access to alternative settings in order to deliver full curriculum entitlement 	<p>Class/subject teachers/departments plan to implement aspects of the ILP 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"> • work linked to ILP targets • opportunities for pre and post teaching • develop language and communication skills • develop attention and listening skills • support practical work with concrete/visual materials to establish concepts and skills • support over learning and revision • support pupils who have difficulty with recording • to develop personal organisation in response to timetabling/managing equipment/independence 	<p>Arrangements which broadly reflect in the region of 15 to 20 hours additional adult support or equivalent.</p> <p>The SENCo/head of year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the pupil.</p> <p>Identified adult, e.g. SENCo/head of year/class teacher or key worker to act as a stable point of reference for pupil and parents/carers.</p> <p>Class or subject teachers oversee delivery of individualised or group behavioural programmes.</p> <p>Access to advice and training from external agencies. This might include specialist teachers, educational psychologists, Mont a L'Abbe Outreach.</p> <p>TAs/keyworkers skilled and experienced in supporting pupils with general and specific learning difficulties.</p> <p>Access to an appropriate facility during unstructured times of the day (as required).</p>

<p>Assessments focus on the reasons for any slow progress; how the pupil is learning; more in-depth analysis of strengths/weaknesses; progress in relation to time, peers starting from similar level, and to age expectations. e.g. using 'P' levels/small steps.</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>Clear systems to ensure effective communication between class teacher/ subject teachers/SENCOs/ Heads of Year/schools at times of transition.</p>	<p>Support arrangements which include appropriate on/off site arrangements for awards and alternative/vocational courses.</p>	<ul style="list-style-type: none"> • deliver a range of curriculum-based interventions (including specialist programmes for dyslexia) <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>Help support emotional regulation where need.</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>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> <ul style="list-style-type: none"> • Specialist guidance to inform Key Stage 4 planning/grouping • Teaching arrangements for alternative curriculum through entry level course, alternative accreditation, work related learning and college opportunities • Programmes to deliver life skills • Access to work experience 	<p>Access to a 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 pupils in their understanding of their diagnosis/needs.</p> <p>Regular home-school liaison.</p> <p>Sharing of pupils' strengths and needs between all stakeholders at times of transition.</p> <p>Outcomes of any external assessments are shared with parents.</p>
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		<ul style="list-style-type: none">• Support for organising and completing extended coursework and revision <p>Alternative accreditation schemes.</p> <p>Reasonable adjustments/arrangements made for formal assessment tasks such as additional time, amanuensis, rest breaks, use of ICT, coloured paper.</p>	
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Communication and Interaction

Autism is a lifelong developmental condition that affects how a person communicates with, and relates to, other people. It also affects how they make sense of the world around them.

It is a spectrum condition, which means that, while all people with autism share certain difficulties, their condition will affect them in different ways. Some people with autism are able to live relatively independent lives but others may have accompanying learning disabilities and need a lifetime of specialist support. People with autism may also experience sensory sensitivities. There are two main dimensions that lead to difference: the intellect of the pupil and the severity of their autism. Diagnosis enables all who live and work with the pupil to understand and address their needs. School presents a number of challenges which may lead to anxiety and challenging behaviour.

The causes of autism are still being investigated. However, research suggests that a combination of factors - genetic and environmental - may account for changes in brain development. Autism is not caused by a person's upbringing or their social circumstances and is not the fault of the individual with the condition. At present, there is no 'cure' for autism. However, there is a range of interventions - methods of enabling learning and development - which people may find helpful. A diagnosis is the formal identification of autism, carried out by TAASC in Jersey (Team for the Assessment of Autism and Social Communication).

The characteristics of autism vary from one person to another but are generally divided into these main groups:-

- difficulty with social communication and language
- difficulty with social interaction
- difficulty with social imagination and flexible thinking
- sensory issues

Asperger Syndrome is a form of autism. People with Asperger Syndrome are often of average or above average intelligence. They have fewer problems with speech but may still have difficulties with understanding and processing language. If a person has difficulties with the social use of language that affects their social interactions then they may be described as having social communication difficulties or a semantic pragmatic language disorder.

Difficulty with social communication and language

People with autism have difficulties with both verbal and non-verbal language. For people with autistic spectrum disorders, 'body language' can appear just as difficult to interpret as if people were speaking a foreign language. Many have a very literal understanding of language, and think people always mean exactly what they say. They can find it difficult to use or understand:

- facial expressions or tone of voice
- jokes and sarcasm, metaphors and similes
- common phrases and sayings; an example might be the phrase 'It's cool', which people often say when they think that something is good, but strictly speaking, means that it's a bit cold.

Some people with autism may not speak, or have fairly limited speech and may use sign language or visual symbols. Others will have good language skills, but they may still find it hard to understand the give-and-take nature of conversations, perhaps repeating what the other person has just said (echolalia) or talking at length about their own interests. It helps if other people speak in a clear, consistent way and give people with autism time to process what has been said to them.

Difficulty with social interaction

People with autism often have difficulty recognising or understanding other people's emotions and feelings, and expressing their own, which can make it more difficult for them to fit in socially. They may:

- not understand the unwritten social rules which most of us pick up without thinking: e.g. they may stand too close to another person, or make inappropriate comments
- appear to be insensitive because they have not recognised how someone else is feeling
- prefer to spend time alone rather than seeking out the company of other people
- not seek comfort from other people
- sometimes appear to behave 'strangely' or inappropriately, unaware of context

Pupils may have difficulty working or playing with others, turn-taking or listening to others' points of view.

Difficulties with social interaction can mean that people with autism find it hard to form friendships: some may want to interact with other people and make friends, but may be unsure how to go about this.

Difficulty with social imagination and flexibility of thinking

Social imagination allows us to understand and predict other people's behaviour, make sense of abstract ideas, and to imagine situations outside our immediate daily routine. Difficulties with social imagination means that people with autism may have difficulty with:

- understanding and interpreting other people's thoughts, feelings and actions
- predicting what will happen next, or what could happen next

- lack understanding of the concept of danger
- showing less imaginative play and mainly engage in repetitive play
- preparing for change and planning for the future
- coping in new or unfamiliar situations, e.g. new school, transitions
- choice, problem-solving and decision making

Difficulties with social imagination should not be confused with a lack of imagination. Many people with autism are very creative and may be, for example, accomplished artists, musicians or writers.

Sensory perceptions and responses

Many pupils on the autism spectrum have sensory processing difficulties. This can occur in one or more of the seven senses - sight, sound, smell, touch and taste, vestibular and proprioception. A person's senses are either intensified (hypersensitive) or under-sensitive (hypo-sensitive). A person with autism may find certain background sounds, which other people ignore or block out, unbearably loud or distracting. This can cause anxiety or even physical pain. People who are hypo-sensitive may not feel pain or extremes of temperature. Some may rock, spin or flap their hands to stimulate sensation, to help with balance and posture or to deal with stress. People with sensory sensitivity may also find it harder to use their body awareness system.

- Pupils may experience over-sensitivity or under-sensitivity in each of the senses and will have different tolerances to sensory stimuli.
- Staff should make reasonable adjustments within school and classrooms to reduce sensory issues using a Sensory checklist.
- Pupils may find it harder to navigate rooms avoiding obstructions, stand at an appropriate distance from other people and carry out 'fine motor' tasks.

**School Action
Social Communication / Autism Spectrum**

<p>Level and description of difficulty</p>	<p>The pupil has difficulty with communication, interaction and imagination which impedes his or her access to learning and the curriculum. These difficulties persist despite differentiated learning opportunities by the school. The incidence of autism suggests that schools can expect to have one or more pupils on the autism spectrum at some time.</p> <p>The difficulties may include inability to interpret social cues, poor social timing, lack of social empathy, sensory issues 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, delay in processing information, resistance to change, solitary play and unusually focused special interests.</p>		
<p>Assessment, Planning and Review</p>	<p>Teaching Environment and Grouping</p>	<p>Curriculum and Teaching Methods</p>	<p>Partners and Resources</p>
<p>Pupil's strengths and difficulties 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, from other sources, e.g. Inclusion site on VLE and the views of the young person/parents/carers.</p> <p>Assessment will 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 pupils 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>Individual or small group support (either in class or as part of a withdrawal).</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>Pupils may need access to a range of individualised approaches. This might include: a workstation; use of symbols; ICT; communication tools e.g. ICT packages to support communication. Consideration would need to be given to levels of support required to introduce/embed these approaches.</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>Targets will be addressed through small group work and class work across the curriculum.</p> <p>Support would consider:</p> <ul style="list-style-type: none"> • Simple clear use of language • Emphasis on relevance of key literacy/numeracy skills • Calm delivery of instructions to all pupils to minimise anxieties of pupil with AS • Additional explanations where required • Use of (low level) alternative means of communication e.g. symbols • Social use of language support • Practical support for personal organisation, timetabling and developing independence <p>Teacher explanation should be explicit and consistent. Schools should consider the function of a pupil's behaviour (e.g. non-compliance as a difficulty with inflexible thinking).</p>	<p>Arrangements which broadly reflect in the region of 5 hours additional support or equivalent.</p> <p>The SENCo/head of year or class teacher to act as a stable point of reference for pupil and parent/carer</p> <p>Class or subject teachers oversee delivery of individualised or group behavioural programmes.</p> <p>Whole school information/training as appropriate (e.g. Inclusion Development Plan). 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> <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 pupil's potential for learning.</p>

<p>The Provision Map will specify: teaching arrangement; resources; strategies that reflect the pupil's preferred learning style and success criteria.</p> <p>Parents/carers and pupils will be involved in target setting and review.</p> <p>Pupils 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 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>Progress is tracked using FSP or 'P' levels or Jersey curriculum.</p>	<p>Environmental audit to be considered.</p> <p>Reasonable adaptations agreed and made as necessary. This might include: controlled lighting; good listening conditions; seating arrangements; quiet area etc.</p> <p>Pupils are encouraged to participate fully in the life of school, including extra-curricular activities.</p>	<p>Vocabulary, inference, active listening and active response to general instruction may need to be specifically taught.</p> <p>Staff monitor and support pupils during unstructured times of the day.</p> <p>Life skills may need to be taught across all Key Stages.</p> <p>Social stories may be used.</p> <p>School ensures that any lesson withdrawal is not affecting the continuity of progress the pupil is making and the impact of withdrawal on progress is monitored.</p> <p>Curriculum and ethos actively promote positive attitudes to SEN.</p>	<p>Time-out facilities should be provided for times of stress.</p> <p>Use of home-school diary to aid communication might be considered.</p> <p>Staff are able to monitor and assess for access to special exam arrangements.</p> <p>Access to school counsellor where required.</p> <p>SENCo informed.</p> <p>Regular face to face home/school contact at least termly.</p>
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School Action Plus
Social Communication / Autism Spectrum

<p>Level and description of difficulty</p>	<p>Despite carefully planned and executed interventions at School Action, the pupil 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.</p>		
<p>Assessment, Planning and Review</p>	<p>Teaching Environment and Grouping</p>	<p>Curriculum and Teaching Methods</p>	<p>Partners and Resources</p>
<p>Detailed analysis of the pupil's strengths and difficulties in social communication/ interaction, flexible thinking/behaviour, environmental intolerance and basic skills levels.</p> <p>ILPs to be set following consultation with external professionals, such as the AS outreach services, educational psychologists, health professionals</p> <p>ILPs will include: positively phrased SMART targets, which reflect the pupil's priority needs and will specify teaching arrangements/resources required and clearly defined success criteria. They will include strategies that reflect the pupil's preferred learning styles.</p> <p>Pupil progress will be subject to systematic monitoring and specifically their response to interventions outlined in the ILP.</p> <p>Specific targets relevant to their needs.</p> <p>ILPs will be reviewed at least termly.</p> <p>Parents/carers and pupils, where appropriate, will be involved in target setting and review and pupils should have an understanding of the targets they are working to achieve.</p>	<p>Grouping arrangements 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; clear learning expectations and 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 pupil's ILP.</p> <p>Environmental audit completed.</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>Daily meet and greet with known member of staff.</p> <p>An appropriate level of differentiation across the curriculum to reflect individual 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>Structured teaching approaches such as TEACCH to support the curriculum and teaching methods. There will be the use of rule based learning, immediate feedback and structured reward systems.</p> <p>Stress reducing factors to be implemented (e.g. sensory or social overload). This might include lesson breaks/noise reduction/time alone/quiet time.</p> <p>Strategies/support and targeted intervention to:</p> <ul style="list-style-type: none"> • support movement around school e.g. from one school/teacher to another. This may include: passports; a 	<p>Arrangements which broadly reflect in the region of 15 to 20 hours additional adult support or equivalent.</p> <p>An individual in school trained/ experienced in supporting pupils on the autism spectrum. This individual will be in a position to advise class/subject teachers and meet with parents/carers/carers. School would consider The AET Professional Competency Framework.</p> <p>Staff trained and able to implement strategies and support pupils with autism (e.g. IDP materials). Key staff/TAs may access additional training e.g. SPELL</p> <p>TAs/keyworkers contribute to planning pupil programmes and review targets.</p> <p>Regular advice and input from external agencies such as the AS Outreach, educational psychologists, SALT and OTs.</p> <p>Staff skilled and able to manage and implement changes and adaptations to the learning environment.</p> <p>Withdrawal facilities should be available for times of stress. Pupils may require individual support/debrief following incidents.</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 pupil is learning; more in-depth analysis of strengths/weaknesses; progress in relation to time, peers starting from similar level, and to age expectations e.g. using 'P' Levels/Small Steps.</p> <p>Clear systems to ensure effective communication between pastoral staff and learning support staff.</p> <p>Other factors in the pupil's family or environment may also need to be considered as part of the assessment process.</p> <p>Risk assessments as required.</p> <p>Clear systems to ensure effective communication between class teachers/subject teachers/SENCOs/Head of Year/schools at times of transition.</p>	<p>School awareness that pupils on the autism spectrum remain vulnerable to bullying and provide support/monitoring.</p> <p>Appropriately equipped areas available to enable individual and small group teaching and therapeutic programmes e.g. social skills/sensory and relaxation training.</p>	<p>familiarisation book of photos of the new environment; a file of coping strategies/equipment and social stories etc.</p> <ul style="list-style-type: none"> • promote social thinking, social success/appropriate behaviour (e.g. Social Stories, Circles of Friends). This might link with the teaching of life skills and preparation for employment in all key stages • address speech and communication needs. This would include social use and understanding of language • teach vocabulary, inference and active listening <p>Peer awareness and sensitivity for pupils with ASD. This could include input from external professionals e.g. 'buddy' system.</p> <p>Peer support may be used both in and out of the classroom.</p> <p>Considerable preparation for pupils in readiness for changes in routine.</p> <p>Pastoral support.</p> <p>Opportunities for enhanced pastoral and break/lunchtime support for social interaction.</p> <p>Home school diary with visual prompts.</p> <p>Easy access to ICT.</p>	<p>On-going multi-agency support and intervention may be required due to the overlap of educational/care and health needs.</p> <p>Regular home-school liaison.</p> <p>Face to face meeting between home and school at least termly.</p> <p>Access to a school counsellor.</p> <p>SENCo involvement.</p> <p>Sharing of pupils strengths and needs between all stakeholders at times of transition.</p> <p>Outcomes of any external assessments are shared with parents/carers.</p>
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Speech, Language and Communication Needs (SLCN)

Speech, language and communication needs (SLCN) is the term used to describe the extensive range of needs related to all aspects of communication – from understanding others to forming sounds, words and sentences, to expressing ideas and emotions and using language socially. Speech, language and communication skills underpin all learning development and children and young people with SLCN may present with emotional and behavioural 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, facial or body tension, repetitions of words or sounds)

Language refers to:

- speaking (expressive language); using words to convey a message
- 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, e.g. to question, to clarify, to describe, to debate
- non-verbal communication, e.g. eye contact, turn-taking, gestures and body language

The range of needs will encompass pupils 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.

**School Action
Speech, Language and Communication**

<p>Level and description of difficulty</p>	<p>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 limits 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 speech sound production that may interfere with acquisition of literacy. Needs regular support to use vocabulary precisely and effectively may take cues from the actions of others.</p>		
<p>Assessment, Planning and Review</p>	<p>Teaching Environment and Grouping</p>	<p>Curriculum and Teaching Methods</p>	<p>Partners and Resources</p>
<p>Pupil's strengths and weaknesses in expressive and receptive language are observed and recorded. This may include reference to the pupil's understanding and use of vocabulary, grammatical structure, conversational skills and speed of language processing.</p> <p>Assessment informed by teacher observation, information from other sources and the views of the young person/parents/carers.</p> <p>Assessment may sit within Provision Map planning.</p> <p>Individual SMART targets set, will consider SLC needs (some may be shared with other pupils where there are similar presenting problems in the same class). Specific targets are additional to whole class curriculum planning.</p>	<p>Complete Communication Friendly Environment Audit and make adaptations as required.</p> <p>Individual or small group support available to support learning with a special focus on SLCN 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, minimal distractions; ensure uninterrupted view of the teacher.</p> <p>Verbal instructions, explanations will require simplification and visual or concrete support.</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 Speech and Language Therapy Inclusion purple file.</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"> • vocabulary • comprehension and inference • use of language, sentence structures • the speech sound system • sequencing • active listening skills 	<p>Arrangements which broadly reflect in the region of 5 hours additional adult support or equivalent.</p> <p>The SENCo/head of year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the pupil.</p> <p>Identified adult, e.g. SENCo/head of year or class teacher to act as a stable point of reference for pupil and parent/carer</p> <p>Class or subject teachers oversee delivery of individualised or group programmes.</p> <p>Staff skilled/experienced in supporting pupils with SLCN. This would include training on SLCN.</p>

<p>Targets can be included on the school's Provision Map and class/subject teachers will implement targets in lessons.</p> <p>The Provision Map will specify teaching arrangements, resources, strategies that reflect the pupil's preferred learning style and success criteria.</p> <p>Parents/carers and pupils will be involved in target setting and review. Pupils 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>Pupils are encouraged to participate fully in the life of the school including extra-curricular activities.</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>A speech and language therapy (SALT) referral considered.</p> <p>Curriculum actively promotes positive attitudes to SEN.</p> <p>School ensures that any lesson withdrawal is not affecting the continuity of progress the pupil is making and the impact of withdrawal on progress is monitored.</p>	<p>A wide range of concrete objects of reference and visual supports to maximise pupil'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>
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School Action Plus
Speech, Language and Communication

<p>Level and description of difficulty</p>	<p>Continuing difficulties with receptive and expressive language skills and/or a speech sound disorder, 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. Needs prompts 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.</p>		
<p>Assessment, Planning and Review</p>	<p>Teaching Environment and Grouping</p>	<p>Curriculum and Teaching Methods</p>	<p>Partners and Resources</p>
<p>Detailed analysis of the pupil's strengths and weaknesses in receptive and expressive language. A SALT will be the key professional involved in this.</p> <p>ILPs will be set in consultation with external agencies including a SALT, educational psychologist (as appropriate).</p> <p>ILPs will include positively phrased SMART targets which reflect the pupil's priority needs and will specify teaching arrangements and resources required with clearly defined success criteria. They will include strategies that reflect the pupil's preferred learning styles.</p> <p>Pupil progress will be subject to systematic monitoring and specifically their response to interventions outlined in the ILP.</p> <p>Specific targets are relevant to particular curriculum areas and these are agreed with the appropriate staff members.</p> <p>ILPs 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"> • the use of visual timetable • prompt and/or instruction sheet • visually identified expectations and teaching outcomes • frequent visual supports for teaching, including signalling and signing <p>(Teachers would be expected to use several or all of these strategies).</p>	<p>Opportunities for targeted individual or small group intervention either within the class or withdrawal. The advice of a SALT will inform teaching and learning. This may include direct involvement from a SALT.</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>Arrangements which broadly reflect in the region of 15 to 20 hours additional adult support or equivalent.</p> <p>TAs skilled/experienced in supporting pupils with SLCN both in class and as part of individual/small group withdrawal.</p> <p>TAs/key workers contribute to planning pupil programmes and review targets. Staff trained and able to implement strategies and support for pupils with SLCN (e.g. Speech and Language Inclusion purple file resources, speech and language keyworker training). Key staff/TAs may access additional training.</p> <p>Input/involvement from SALT, SALT key worker, educational psychologist 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>Parents/carers and pupils will be involved in target setting and review and pupils 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>Clear systems to ensure effective communication between class teachers/ subject teachers/SENCOs/ Heads of Year /schools at times of transition.</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>School awareness that pupils with SLCN remain vulnerable to bullying and provide an appropriate level of support/monitoring.</p> <p>Some access to appropriate out-of-class 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"> • 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 SALT and/or a learning support teacher • social communication skills • motor co-ordination difficulties • organisational strategies • curricular skills <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. Pupils 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>	<p>Sharing of pupil's strengths and needs between all stakeholders at times of transition.</p> <p>Outcomes of external assessments are shared with parents.</p>
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Sensory and Physical Needs

Physical Needs

For some pupils with physical needs, the only resource required will be minor to moderate adaptations to allow access. This should always be considered in the first instance, before looking towards other types of support.

Physical needs 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 pupils with the most complex physical needs, the Department will consider an Exceptional Action Assessment to be necessary. However, for many pupils with a lesser level of physical need, intervention at School Action or School Action Plus will be appropriate.

Pupils with severe physical needs are normally identified at the pre-school stage. Exceptions to this would include pupils 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 pupil 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 pupil'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 pupil's access to educational opportunities or on his/her levels of attainment, and/or give rise to emotional, behavioural and social difficulties. The medical condition may, in itself, significantly impair the pupil's ability to participate fully in the curriculum and the wider range of activities in school. Some prolonged conditions will affect the pupil's progress and performance intermittently, others on a continuous basis throughout the pupil's school career.

Drug therapies may compound the problem of the condition and have implications for the pupil's education. Medication may similarly impair concentration and lead to difficulties for the pupil in the classroom. In some cases, pupils with potentially life-limiting conditions may have periods of hospitalisation or frequent attendance as out-patients; emotional and behavioural 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 pupil has special educational needs. Indeed, a pupil with a particular diagnosis or medical condition may not require a Record of Need or any form of additional educational provision in any phase of his/her education. In the context of these criteria, it is the pupil's special educational needs rather than a particular medical diagnosis that must be considered.

**School Action
Physical Needs**

<p>Level and description of difficulty</p>	<p>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 mild difficulties in aspects of learning and physical access. Will have some gross and fine motor difficulties. Minor difficulties with perceptual skills. 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 show signs of increasing fatigue during the school day. Use specialist aids relating to their disability e.g. splints. 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.</p>
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Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Assessment will be informed by teacher observations, information from other sources, e.g. Inclusion site on VLE and the views of the young person/parents/carers.</p> <p>Pupil'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 and will ensure SMART targets.</p> <p>Monitoring of pupil progress in terms of effectiveness of the interventions arising from the Provision Map.</p> <p>Targets can be included on the school's Provision Map and class/subject teachers will implement targets in lessons. Targets will be review termly.</p> <p>Regular review meetings should be held involving both parents/carers/carers and pupils. 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>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>Pupils are encouraged to participate fully in the life of school including extra-curricular activities.</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 (sloping board, foot rest etc.).</p>	<p>Provision should aim to help the pupil 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, e.g. splints/footwear.</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>An identified link with a consistent adult as required.</p>	<p>Arrangements which broadly reflect in the region of 5 hours additional adult support or equivalent.</p> <p>The SENCo/head of year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the pupil.</p> <p>Identified adult, e.g. SENCo/head of year or class teacher to act as a stable point of reference for pupil and parent/carer.</p> <p>Class or subject teachers oversee delivery of individualised or group learning programmes. Some additional support may be required at periods throughout the day.</p> <p>Social situations such as breaks may need particular attention.</p> <p>Parents/carers to be consulted</p>

School may also have to initiate a separate individual care plan to address the pupil's needs (however, such a plan is not part of the SEN process).

Curriculum and ethos actively promote positive attitudes to SEN.

School ensures that any lesson withdrawal is not affecting the continuity of progress the pupil is making.

regularly.

**School Action Plus
Physical Needs**

<p>Level and description of difficulty</p>	<p>Will have moderate physical difficulties. Has 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 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, e.g. access to standing frame/Kaye walker. Will need differentiation of opportunity and extra time allowed to access the curriculum. May need help to record work/may need Alternative and Augmentative Communication. 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 and will require close supervision to ensure safety and physical wellbeing. Requires regular therapy. Has physical difficulties impacting on attainment levels in most curricular areas i.e. linked with condition, progress may be depressed by irregular attendance. May have associated sequencing and organisational difficulties.</p>		
<p>Assessment, Planning and Review</p>	<p>Teaching Environment & Grouping</p>	<p>Curriculum & Teaching Methods</p>	<p>Partners and Resources</p>
<p>Detailed analysis of the pupil's physical/wider needs. A range of health professionals, educational psychology and specialist teachers will contribute.</p> <p>ILPs will be set in consultation with external agencies.</p> <p>ILPs will include positively phrased SMART targets, which reflect the pupil's priority needs and will specify teaching arrangements and resources required with clearly defined success criteria. They will include strategies that reflect the pupil's preferred learning styles.</p> <p>Pupil progress will be subject to systematic monitoring and specifically their response to interventions outlined in the ILP.</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, for example, changing and showering.</p> <p>Consideration to timetabling and location of rooms.</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 need (though therapy may support these areas of need).</p> <p>Pace of teaching takes account of possible fatigues and frustration experienced by the pupil.</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>Arrangements which broadly reflect in the region of 15 to 20 hours additional adult support or equivalent.</p> <p>Differentiation techniques widely used to promote full access to practical activities.</p> <p>Specialist transport arrangements may be required, e.g. for a school trip.</p> <p>Access to appropriate facility for time out/to 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 pupil 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>ILPs will be reviewed at least termly.</p> <p>Parents/carers and pupils will be involved in target setting and review and pupils 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 pupil's family or environment may also need to be considered as part of the assessment process.</p> <p>Risk assessments as required.</p> <p>Clear systems to ensure effective communication between class teachers/subject teachers/SENCOs/heads of year/schools at times of transition.</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 pupil with physical disability.</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/small group support with:</p> <ul style="list-style-type: none"> • practical lessons • personal care • physiotherapy programmes • learning programmes • physical aids • movements around school <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>Specific training in managing health needs for class/subject teachers and TAs.</p> <p>Training in Manual Handling 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>Access to outreach advice from the manager of the resource provision for Physical Needs.</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. TAs/keyworkers contribute to planning pupil programmes and review targets.</p> <p>Access to a range of equipment including a range of furniture/storage and equipment to support the pupil.</p> <p>Access to specialist equipment to support communication.</p> <p>Access to specialist equipment to support mobility.</p> <p>Sharing of pupils strengths and needs between all stakeholders at times of transition.</p> <p>Outcomes of any external assessments are shared with parents.</p>
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Sensory and Physical Needs

Sensory and Physical Impairment

Hearing Impairment (HI)/dDeaf

Hearing impairment can have a significant impact on a child's educational development and may result in language and learning delay and/or disorders and reduced access to the curriculum. This will require careful monitoring by schools and external professionals and early intervention is paramount

HI can be mild, moderate, severe or profound in degree. It can be temporary or permanent, conductive or sensorineural. Most children with HI will have been diagnosed at the neonatal or pre-school stage and will have accessed some level of support from the education support service and health colleagues; (teacher of the deaf (ToD), educational audiologist, speech and language therapist, senior practitioner, educational psychologist, clinical audiologist, ENT). When any of these professionals are involved, pupils should be placed at School Action Plus on the school SEN Register.

Pupils with hearing needs over and above School Action Plus have a Record of Need and are usually managed within the Total Communication Centre. This provides an island resource base and specialist support for pupils of primary and secondary age who are profoundly deaf or whose hearing impairment has a significant impact on communication skills, language development, learning and/or well-being.

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

A significant proportion of pupils have some degree of hearing difficulty at some time, this is usually caused by the condition known as 'glue ear'. Glue ear typically causes a temporary, fluctuating hearing loss due to a build-up of fluid in the ear. Glue ear is very common during childhood with eight out of 10 children having a bout of it sometime before the age of 10 years. It is most common in Reception and Year 1 age groups with one in five children having glue ear at any one time. Glue ear usually resolves itself within three months without the need for treatment. However, a smaller proportion of children have persistent glue ear and may require grommet surgery or temporary hearing aids. Occasionally a long-term conductive loss may cause a permanent hearing impairment. Glue ear can compound other learning difficulties.

Permanent hearing losses can be uni-/bilateral and are usually sensorineural in origin. A permanent hearing impairment may give rise to severe and complex communication and language difficulties. A permanent loss in one ear and temporary loss in the other may also cause significant hearing impairment, as would a unilateral hearing loss.

Listening to spoken language through hearing aids and/or cochlear implant processors and the visual concentration required to follow lip reading and sign language is very tiring. Although hearing aids and cochlear implants give access to speech information, they do not restore normal hearing and even when aided, pupils may still have the equivalent of a mild hearing loss. Studies have shown that deaf children are at higher risk of falling behind academically and of developing social and emotional difficulties and/or mental health problems when compared to their hearing peers.

Children with HI will require all or some of the following:

1. Regular and frequent access to and input from specialist support staff, teacher of the deaf, audiologist working in education.
2. Access to and management of hearing assistive equipment e.g. hearing aids, cochlear implants, FM systems, Soundfield systems, loop systems, Bluetooth equipment.
3. Access to all areas of the curriculum through hearing assistive equipment, specialist aids, IT technologies and disapplication where appropriate.
4. Delivery of lessons employing deaf awareness strategies and recommendations sent to schools by HI Service.
5. Delivery of lessons with effective differentiation to meet individual needs and learning styles.
6. Spoken language to be a minimum of 15dB above background noise and effective management of classroom noise levels by teachers.
7. Understanding of information and instructions given checked by retelling: (yes/no/smiling and nodding are not acceptable answers to ensure understanding).
8. Flexible teaching arrangements: 1-1, small group, whole class in quiet environments with appropriate communication codes.
9. Appropriate seating and positioning.
10. Appropriate acoustic conditioning and lighting.
11. Access to different modes of communication or alternative and augmented forms of communication.
12. Adaptations to the physical environment of the school: equipment, furniture, fixtures and fittings, materials and building specifications including maintenance, replacement and updating as required.
13. Hearing needs to be included in school policies, procedures and documents.

School Action Hearing Impairment			
Level and description of difficulty	<p>Mild functional hearing difficulties</p> <p>A pupil with some hearing difficulties that may impact on the pupil's ability to access the mainstream curriculum and other school activities on an equal basis. A pupil with mild functional hearing difficulties will be managed in the classroom using simple strategies enabling them to achieve in school on a par with their normally hearing peers of similar cognitive ability.</p> <p>These may include, but are not limited to, pupils with glue ear, and some unilateral hearing losses. Parents should inform school as these pupils will not be known to the Hearing Impaired Support Service. If a teacher suspects a child has a mild functional hearing difficulty they should follow referral procedures.</p> <p>Pupils with mild functional hearing difficulties may be monitored by the Ear Nose and Throat department, General Hospital. Those diagnosed with any permanent (or long standing temporary) hearing loss are routinely referred to the Education Support Team's Hearing Impaired Support Service and would then be placed at School Action Plus.</p>		
Assessment, Planning & Review	Teaching Environment & Grouping	Curriculum & Teaching Methods	Partners & Resources
<p>Pupil'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>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 pupils 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. Targets will be reviewed termly.</p>	<p>Staff should be aware of the pupil's hearing loss and its implications in school (e.g. delayed language and vocabulary acquisition, attention and concentration skills).</p> <p>Pupils 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>Adults to remain aware of pupil'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>Pupils are encouraged to participate fully in the life of school including extra-curricular activities.</p> <p>Ensure the lighting in the classroom is good and that the pupil can see clearly at all times. Reduce background noise, consider listening conditions and develop an</p>	<p>Class teacher to plan/deliver differentiated classroom activities to reflect pupil'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.) SLCN, social skills, curricular skills and behaviour.</p> <p>Plan use of audio-visual materials carefully.</p> <p>Teach active listening skills.</p> <p>Curriculum and ethos actively promote positive attitudes to SEN.</p> <p>The speaker should identify themselves in some way so that the pupil can locate them before they begin to talk. This is of particular importance in group discussion.</p> <p>The speaker should speak clearly (but without exaggerating lip movements,</p>	<p>Arrangements which broadly reflect in the region of 5 hours additional adult support or equivalent.</p> <p>The SENCo/head of year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the pupil.</p> <p>Identified adult, e.g. SENCo/head of year or class teacher to act as a stable point of reference for pupil and parent/carer.</p> <p>Class or subject teachers oversee delivery of individualised or group learning programmes.</p> <p>Universal training from the HI Support Service to build and maintain capacity. Information can be obtained from reliable sources as recommended.</p> <p>Strategic use of peer support.</p> <p>Medical intervention and monitoring undertaken by the Audiology clinic. Parents/carers involved in planning and carrying out interventions. This would include active support in a pupil's use of amplification.</p>

<p>The Provision Map will specify: teaching arrangements, resources, strategies that reflect the pupil's preferred learning style and success criteria.</p> <p>Parents/carers and pupils will be involved in target setting and review. Pupils 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 will focus both on progress and the setting of new targets.</p>	<p>acoustic friendly classroom environment.</p> <p>If appropriate, discuss with the pupil where they find it easiest to hear and when it is difficult for them; make changes accordingly. Be aware that the pupil may not know where is best for them, as you do not miss what you haven't heard.</p> <p>Pupils should be seated in good listening and visual positions.</p> <p>Provide pupils with visual representations to support understanding of what is spoken. This might include use of pictures, key vocabulary lists, diagrams.</p>	<p>shouting or whispering).</p> <p>Check that pupils have heard/ understood all instructions. Pupils should (in particular) be made aware of safety measures in technology rooms, science labs etc.</p> <p>Cue in the pupil when someone else is speaking in a group discussion and where possible repeat what the other pupil has said.</p> <p>Encourage variety in use of teaching approaches/senses to support learning (movement, vision, touch etc.).</p> <p>Effective transition planning (school to school).</p> <p>School ensures that any lesson withdrawal is not affecting the continuity of progress the pupil is making.</p>	<p>School staff with skills/experience in supporting pupils with HI.</p> <p>Visual supports to maximise pupil's potential for learning.</p>
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**School Action Plus
Hearing Impairment**

<p>Level and description of difficulty</p>	<p>Mild/Moderate/Severe functional hearing difficulties A pupil with significant hearing difficulties which will impact on the pupil's ability to access the mainstream curriculum and other school activities on an equal basis. These pupils' needs may be managed in the classroom using strategies adapted to the needs of the individual child with advice and support from the Education Support Team's Hearing Impaired Support Service to enable them to achieve in school on an equal basis with their normally hearing peers of similar cognitive ability. This usually includes visits from the teacher of the deaf and/or audiologist working in education.</p> <p>These may include but are not limited to pupils with: Permanent bilateral mild/moderate/sloping high frequency/hearing loss and/or auditory neuropathy spectrum disorder (ANSD), auditory processing disorder (APD): Pupils will usually wear hearing aids in each ear individually programmed to their individual hearing levels. Children require additional support in communication and language development, to access the curriculum and other school activities over and above consistent use of their hearing aids. Children also require support in school managing equipment, such as daily checks, troubleshooting, minor repairs etc. This may include but is not limited to teaching assistants, key workers, additional learning support, assistive listening equipment such as radio aids or Soundfield systems etc.</p> <p>All pupils with moderate functional hearing difficulties receive regular audiological reviews and monitoring undertaken by the Audiology Department, General Hospital. All babies and children diagnosed with any permanent (or long standing temporary) hearing loss are routinely referred to the Education Support Team's Hearing Impaired Support Service for advice and support in the early years to support early language development within the family and any pre-school placements. An annual letter with recommendations is sent to every school for each child known to the service. Schools also receive advice for internal and external tests/exam access arrangements to meet the individual communication and processing needs of the child.</p>		
<p>Assessment, Planning & Review</p>	<p>Teaching Environment & Grouping</p>	<p>Curriculum & Teaching Methods</p>	<p>Partners & Resources</p>
<p>Detailed analysis of the pupil's strengths and weaknesses in relation to the pupil's HI, curricular skills, SLCN and social/emotional development.</p> <p>ILPs to be set following consultation with external professionals, such as educational psychologists, teacher of the deaf, audiologist, health professionals (e.g. SALT) taking account of their hearing/language needs.</p> <p>ILPs will include: positively phrased SMART targets which reflect the pupil's priority needs and will specify teaching arrangements and resources required</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</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 teacher of the deaf.</p> <p>Differentiation to reflect individual needs both in relation to the curriculum and speaking and listening.</p> <p>Targeted interventions/support may address (e.g.):</p>	<p>Arrangements which broadly reflect in the region of 15 to 20 hours additional adult support or equivalent appropriate to needs.</p> <p>Access to teacher of the deaf, audiologist working in education, BSL tutor, appropriate Deaf role model (as required).</p> <p>Staff trained and able to support and include pupils 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. TAs/keyworkers contribute to planning pupil programmes and review targets.</p>

<p>with clearly defined success criteria. ILPs will include strategies that reflect the pupil's preferred learning styles.</p> <p>Pupil progress will be subject to systematic monitoring and specifically their response to interventions outlined in the ILP.</p> <p>ILPs will be reviewed termly.</p> <p>Parents/carers and pupils will be involved in target setting and review. Pupils 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 pupil's family or environment may also need to be considered as part of the assessment process.</p> <p>Risk assessments as required.</p>	<p>with appropriate adjustments.</p> <p>Classroom environment should provide good acoustics (including use of Soundfield systems) and good lighting.</p> <p>Acoustic friendly classroom environment and quiet listening conditions/space for 1:1 work. This might include access to an appropriate facility.</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 pupil understood and implemented.</p> <p>Additional specialist systems may be required to enhance listening in the learning environment.</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>Reference annual recommendations re classroom communication and positioning,</p>	<ul style="list-style-type: none"> • specific HI needs (including use/care/security of equipment • SLCN (e.g.) vocabulary comprehension and inference, use of language, sentence structures, the speech sound system and active listening • social language skills • motor co-ordination difficulties • organisational strategies • curricular skills (and may include more extensive teaching to specific gaps <p>Teachers should try to stay in one place when talking to allow the pupil to have a good view of the face at all times.</p> <p>Timetabled learning breaks as advised by external professionals. Pre-tutoring of subject specific vocabulary and/or concepts.</p> <p>Teacher/TA to check pupil's understanding of concepts throughout lessons.</p> <p>Opportunities for the pupil to learn sign language (as appropriate).</p> <p>Staff to check pupil'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>Staff with knowledge and understanding of how hearing aids perform in a mainstream environment. Staff with knowledge and understanding of how to use radio aids and in which situations it is most beneficial to the pupil. This will include advice and support from teacher of the deaf and audiologist working in education.</p> <p>Staff skilled and able to monitor pupils with mild, moderate, severe, profound sensorineural hearing losses plus high frequency and long term conductive losses and liaise with schools/parents/carers as appropriate.</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 pupil's audiological independence skills. This might be provided by an audiologist working in education, teacher of the deaf.</p> <p>Appropriate software and technology to support access to the curriculum.</p> <p>Staff able to monitor and provide evidence for special exam arrangements.</p> <p>Outcomes of any external assessments are shared with parents/carers.</p>
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	<p>sent out from the Hearing Impaired Service.</p> <p>Pupils fitted with hearing aids should be encouraged to wear them as instructed by the audiologist. Any concerns and/or observations about the use of the prescribed aid should be followed up with the parents/carers and advice from the appropriate support services sought if difficulties cannot be resolved.</p>	<p>Reference annual recommendations re teaching delivery, sent out from the Hearing Impaired Service.</p>	
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Sensory and Physical Needs

Visual Impairment (VI)

Visual impairment can have a significant impact on a pupil'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 agencies, 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 EST and external agencies.

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

Visual difficulties take many forms, with widely differing implications for a pupil's education. They range from relatively minor and remediable conditions to total blindness. Some pupils 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 pupil'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 pupil's ability to adapt socially and psychologically, as well as to progress in an educational context.

Definitions for Children and Young People with Visual Impairment

Cerebral Visual Impairment: A condition where some of the special "vision" parts of the brain and its connections are damaged and the pupil with this is unable to make sense of what they see.

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)

Registered Blind (CVI): Below 1.0 logmar (6/60)

There are some conditions where the central vision remains good e.g. the pupil has excellent visual acuities for distant vision, but may have severely restricted visual fields e.g. down to 10%. These pupils require high input from support services, especially when night vision does not exist.

There are some conditions where the central vision remains poor with excellent peripheral vision; these pupils require input from the qualified teacher for the visually impaired (QTVI) to compensate for central vision loss.

School Action Visual Impairment			
Level and description of difficulty	<p>The pupil has a level of visual 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 pupil e.g. positioning in class, use of equipment etc. Impaired functional vision in the educational setting is the key criterion.</p> <p>While it is difficult to categorise these pupils 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.</p> <p>Where a pupil exhibits more than one of these difficulties it is more likely that they will be at School Action plus.</p>		
Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Partners and Resources
<p>Pupil's strengths and weaknesses including functional vision in the educational setting are considered.</p> <p>Assessment will be informed by teacher observations, information from other sources, e.g. Inclusion site on VLE, information from the VI Service and the views of the young person/parents/carers.</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 regularly, at least termly.</p> <p>The Provision Map will specify: teaching arrangements; resources; strategies that reflect the pupil's preferred learning style and success criteria – use of specialist aides, equipment and mobility needs.</p> <p>Parents/carers and pupils will be involved in target setting and review. Pupils should have an understanding of the targets they are working to achieve.</p>	<p>Staff should be aware of the pupil's VI and its implications in school.</p> <p>Pupils 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 pupil'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> <ul style="list-style-type: none"> • clear signage • high contrast colour schemes • visually highlighting equipment • controlled lighting (including blinds) • overall classroom layout • additional lighting needs <p>Pupils are encouraged to participate fully in the life of school including extra-curricular activities.</p>	<p>Class teacher to plan/deliver differentiated classroom activities to reflect pupil'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.) 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"> • use of IWB, ICT etc. • accessibility of printed materials • use of auditory/tactile stimuli to support visual stimuli • speed of work • physical position of pupil <p>Social interaction with other pupils may need to be encouraged through a range of peer support approaches (e.g. 'buddying').</p> <p>Curriculum and ethos actively promotes positive attitudes to SEN.</p>	<p>Arrangements which broadly reflect in the region of 5 hours additional adult support or equivalent.</p> <p>The SENCo/head of year or class teacher facilitates assessment, planning and monitoring and oversees additional support provided for the pupil.</p> <p>Identified adult, e.g. SENCo/head of year or class teacher to act as a stable point of reference for pupil and parents/carers.</p> <p>Class or subject teachers oversee delivery of individualised or group learning programmes</p> <p>Pupils may benefit from using some specialist equipment/ visual aids e.g.</p> <ul style="list-style-type: none"> • sloping reading/writing boards • low power magnifiers • dark pens/pencils • dark lined books/paper • large print materials (e.g. reference books) • bright PE equipment • ICT access <p>Staff trained and able to support pupils with VI. This would address visual awareness of VI and its impact on learning.</p>

<p>Systematic monitoring of progress to consider the impact of interventions used will focus both on progress and the setting of new targets.</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). Appropriate access arrangements for assessments/exams to be implemented as appropriate.</p> <p>School ensures that any lesson withdrawal is not affecting the continuity of progress.</p>	<p>Strategic use of peer support. This may involve some awareness raising activity with pupils.</p> <p>Parents/carers and pupils involved in planning and delivering interventions.</p>
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**School Action Plus
Visual Impairment**

<p>Level and description of difficulty</p>	<p>Moderate: Has a moderate level of visual 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 pupil 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 pupil will usually have poor visual 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 visual impairment which may include a cerebral visual impairment and/or perceptual or processing difficulties. May use LVAs such as magnifiers, binoculars, monoculars and specialist access technology such as CCTV, Zoom Text, Windows magnifier, tablets and interactive whiteboard access. Visual impairment will have a moderate impact on the pupil'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. May require mobility and independence advice and programmes.</p>		
<p>Assessment, Planning and Review</p>	<p>Teaching Environment and Grouping</p>	<p>Curriculum and Teaching Methods</p>	<p>Partners and Resources</p>
<p>Detailed analysis of the pupil's strengths and weaknesses in relation to the pupil's VI, curricular skills, social/emotional development and mobility.</p> <p>ILPs to be set following consultation with external professionals, such as educational psychologists, QTVI, health professionals.</p> <p>ILPs will include: positively phrased SMART targets which reflect the pupil's priority needs and will specify teaching arrangements and resources required with clearly defined success criteria. ILPs will include strategies that reflect the pupil's preferred learning styles.</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 an appropriate facility for small group/individual work and with good lighting.</p> <p>Peer support both in class and at break times to facilitate social interaction where required</p> <p>Classroom environment should have good lighting.</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 be trained in the following (e.g.):</p> <ul style="list-style-type: none"> • use of IWB and ICT • accessibility of printed materials, and how they should be adapted 	<p>Arrangements which broadly reflect in the region of 15 to 20 hours additional adult support or equivalent.</p> <p>Staff trained and able to support and include pupils with VI in all areas of the curriculum. This would include the planning and preparation of appropriate resources/materials and the ability to implement more specialist strategies/interventions as advised by QTVI. TAs/keyworkers contribute to planning pupil programmes and review targets.</p> <p>Regular advice and input from external agencies such as the VI Service, educational psychologists, orthoptists and OTs.</p> <p>Staff aware, skilled and able to implement and manage changes and adaptations to the learning environment.</p>

<p>Pupil progress will be subject to systematic monitoring and specifically their response to interventions outlined in the ILP.</p> <p>ILPs will be reviewed at least termly and success will be celebrated.</p> <p>Parents/carers and pupils will be involved in target setting and review.</p> <p>Pupils 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 pupil's family or environment may also need to be considered as part of the assessment process.</p> <p>Consider whether a holistic assessment framework would be appropriate.</p> <p>Risk Assessments to be carried out where appropriate.</p> <p>Clear systems to ensure effective communication between class teachers/subject teachers/SENCOs/ heads of year/schools at times of transition.</p>	<p>The pupil may need additional task lighting.</p> <p>Seating arrangements for pupil 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>	<ul style="list-style-type: none"> • modification of teaching methods • speed of work • physical position of pupil <p>Targeted interventions/support may be necessary to:</p> <ul style="list-style-type: none"> • prepare pupil for a class activity/learning experience (pre and post teaching) • reinforce work • provide additional hands-on experience of materials or presentations • provide additional experiences of the environment to compensate limitations resulting from VI • develop specific skills to improve curriculum access (e.g. touch typing, use of magnifiers, distance aids and other specialist equipment) • increase social interaction with peers • teach independence, organisational and mobility skills. This would include independent living skills • support small group games and activities as an alternative to fast, large team games in PE and at break times <p>Regular opportunities to practice use of specialist equipment. Timetabled learning breaks as advised by external professionals.</p> <p>Staff to check pupil's understanding of task requirements. This would include homework.</p>	<p>Pupils may benefit from using a range of specialist equipment (e.g.):</p> <ul style="list-style-type: none"> • sloping reading/writing boards • magnifiers • large print materials • accessibility software for ICT • larger computer monitor; separate TV monitor • dark pens/pencils • dark lined books/paper • bright PE equipment • lap- top • digital voice recorder • tablets <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> <p>Sharing of pupils strengths and needs between all stakeholders at times of transition.</p> <p>Outcomes of any external assessments are shared with parents.</p>
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		<p>Materials to support and develop peer awareness of VI.</p> <p>Opportunities for the pupil to understand the implications of their VI.</p> <p>Pupil 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.</p> <p>Use of home/school diary.</p>	
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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 have a Record of Need, or 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 medical diagnosis 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 a Record of Need or school-based SEN provision but they have medical conditions that, if not properly managed could hinder their access to education.

Children with medical conditions will include those with Asthma, Diabetes, Arthritis, Epilepsy, Spina Bifida, Hydrocephalus, Sickle Cell, Anaphylaxis, HIV, Psoriasis, severe allergies, Incontinence, Eczema, Cystic fibrosis Tracheotomy, Colostomy, Ileostomy, Chronic Fatigue Syndrome/ ME and other anxiety-based conditions that cause a barrier to learning.

Available guidance should be considered by all school staff.

**School Action
Medical Needs**

<p>Level and description of difficulty</p>	<p>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 situation e.g. science lab, swimming, using PE apparatus and other outdoor excursions...</p>		
<p>Assessment, Planning and Review</p>	<p>Teaching Environment and Groupings</p>	<p>Curriculum and Teaching Methods</p>	<p>Partners and Resources</p>
<p>A range of professionals may be involved depending on the nature of the student's needs that may be diverse.</p> <p>Risk assessments as required with reference to Fire Evacuation Plans to be developed and personalised for students with physical needs.</p> <p>Comprehensive health care planning in advance of admission/entry/ transition, when appropriate to and from school with reference to risk assessments if required or facilitate a 'return to school' meeting following any operation/medical intervention (eg. broken leg) to ensure school are prepared to temporarily meet the needs appropriately in the Care Plan as advised by professionals.</p> <p>Assessment may sit within a provision map. A provision map/ ILP is required only when the child/young person's needs demand additional and different arrangements beyond the existing differentiated plan within normal activity in the classroom/setting. This will include SMART/ positively phrased targets; teaching arrangements; resources; strategies that reflect the student's</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 with written parental consent in line with localised Health and Safety policy.</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.) as far as possible in accordance with risk assessments.</p>	<p>Differentiation to provide for individual needs and (in particular) to take account of difference in pace.</p> <p>Support in place by class/subject teacher to allow students to catch up following periods of absence and during examination periods.</p> <p>Suitable arrangements for administration of medication provided by health care professional.</p> <p>Supervision of health/hygiene/personal care procedures.</p> <p>Monitoring/ support for social situations (such as breaks) may be required.</p> <p>Modification of classroom routines and organisation which could include differentiated learning materials, appropriate seating and specialist equipment.</p> <p>Curriculum promotes personal care and safety.</p> <p>Access to alternative methods of recording and communication across the</p>	<p>Arrangements which broadly reflect up to 5 hours additional adult support or equivalent.</p> <p>Identified adult to act as a stable reference point.</p> <p>Specialist transport arrangements may be required post operation.</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</p>

<p>preferred learning style and success criteria.</p> <p>Specific consideration may also be given to the following:</p> <ul style="list-style-type: none"> - Monitoring/support (for safety) during practical/PE lessons - Supervision of medication outside the classroom in accordance with agreed policy - Pastoral support - Liaison with home/hospital service for absence from school during periods of hospitalisation. This might include involvement of a range of specialist teachers. - Supervision of unstructured times - Teaching strategies that take into account medical condition, age, ability and learning style to ensure full curriculum access. <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>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>curriculum where appropriate as well as access to appropriate IT equipment</p> <p>Specific information sharing on the causes and implications of the medical condition circulated to relevant members of staff where appropriate.</p> <p>It may be appropriate to incorporate manual handling training as part of health care planning.</p> <p>Strategic use of peer support (eg. 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>Where confidentiality issues are raised by parent/child, the designated individuals will be entrusted with information on the child's condition.</p>	<p>necessary.</p> <p>Parents/carers to be consulted on levels of concern and asked for further advice.</p> <p>Support/training from Parenting Services at the Bridge (as required).</p>
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School Action Plus Medical Needs			
Level and description of difficulty	<p>Medical condition may result in regular absence from school</p> <p>Medical condition may require regular supervision/support for medication/diet needs</p> <p>May have some incontinence including Ileostomy and colostomy</p> <p>Medical condition may impact on ability to access the curriculum (this may be permanent)</p> <p>May work at a slower pace than peers or show signs of increasing fatigues during the school day</p> <p>Condition may influence tiredness and concentration levels</p> <p>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)</p> <p>Sudden onset of complex psychological needs that impacts on a student's ability to attend school</p> <p>Medical condition requires supervision/support with appropriate training provided to TA</p>		
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>ILPs will include; positively phrased SMART targets, which reflect the student's priority learning needs and will specify teaching arrangements and resources required with clearly defined success criteria, to reduce the impact of medical difficulties. They should include strategies that reflect the student's preferred learning styles in order to promote independent learning.</p> <p>Student progress will be subject to systematic monitoring and specifically their response to interventions outlined in the ILP or Provision Map.</p> <p>ILPs will be subject to termly review.</p> <p>Specific targets relevant to particular curriculum areas and these are agreed</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 ILP.</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>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>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>Specific consideration given to the educational, social and emotional need to 'catch up' following periods of absence.</p> <p>Targeted interventions in areas of particular difficulty or to develop specific skills.</p>	<p>Arrangements which broadly reflect in the region of 15 to 20 hours additional adult support or equivalent</p> <p>Identified adult to act as a stable reference point.</p> <p>Access to TA/Key Worker or similar facility for time out/managing fatigue.</p> <p>SENCo to lead in co-ordinating provision long term or temporarily post operation.</p> <p>Specialist transport arrangements may be required post operation.</p> <p>Specialist transport arrangements may be required post operation.</p> <p>Regular liaison between external professionals such as School Nurse, Paediatric Nursing, OT or Physiotherapist and school staff in relation to specific programmes and targets.</p>

<p>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 Care Plan may be developed to ensure regular 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 may be required.</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>Monitoring/supervision/support for subjects/tasks 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 such as crowded corridors and travel between lessons.</p> <p>Plan for provision of medication in relation to any side effects and storage, dose, time. As well as other needed facilities, equipment and their testing.</p> <p>Curriculum designed to teach students to self-management of the majority of their health and personal care needs.</p> <p>Strategies to reduce impact of medical difficulties on learning which in turn promotes independent learning</p> <p>Students included in all school assessments and tasks with permitted adaptations.</p> <p>Consideration of concessions for examinations etc.</p>	<p>Parents/carers to be consulted on levels of concern and to be asked for further advice.</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/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 ILP and/or Review procedure.</p> <p>Regular home school liaison.</p> <p>Guidelines for Health and Safety and Risk Assessments available in accordance with ESC policies.</p> <p>Appropriate involvement from a specialist teacher/Health Care Professional for advice and support.</p> <p>Support/training from Parenting Services at the Bridge (as required).</p>
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Health Care Plan - Allergy

Name:

D.O.B:

School:

Problem/Issue

..... has an allergy to

Goal(s) agreed with you

To limit exposure to allergy. To recognise signs and symptoms and treat as required

Negotiated plan of care

SYMPTOMS OF AN ALLERGIC REACTION MAY INCLUDE ANY/ALL OF THESE:

- **MOUTH** Itching & swelling of lips, tongue or mouth, mouth "feels hot"
- **THROAT** Itching, tightness in throat, hoarseness, cough
- **SKIN** Hives, itchy rash, swelling of face and extremities
- **STOMACH** Nausea, abdominal cramps, vomiting, diarrhoea
- **LUNG** Shortness of breath, repetitive cough, wheezing
- **HEART** "Thready pulse", "passing out"

Treatment: (Clearly state use of anti-histamine +/- Epipen adult/junior and use of salbutamol inhaler)

.....

If no improvements or symptoms increase:

- **Call 999 in 2 minutes only when signs of anaphylaxis; in 5 minutes when widespread rash only OR**
- **If symptoms improve call parent and ask her to collect from school.**

If you have any concerns inform the head teacher.

If further training or information is required please contact the school nurse team on 443691

Parent/carer agreement: I agree that the information contained on this plan is correct and agree that it can be shared with individuals involved with my child's care and education. I must notify the school of any changes to this plan in writing.

Signed.....Print.....Date.....

Head teacher agreement: It is agreed that this child will be supported in the management of their medical condition within school according to the details of this care plan. The arrangement will continue until the next review or until advised by parents/carers. It is the responsibility of the school to arrange the review and training.

Signed.....Print.....Date.....

Health Care Plan - Seizures

Name:.....

D.O.B:.....

URN:

Or Affix Patient Label

Problem/Issue

..... could have a seizure.

Objective/Expected Outcome

..... will remain safe within the school environment.

Negotiated plan of care

Emergency action: Call 999

Clear area around them to avoid injury. Call for help and follow Action plan! Check Health Care Plan if known diabetic. When help arrives, clear area.

Action Plan:

Stay calm and reassure the young person:

Observe the following -

- *How they acted before and after the seizure*
- *What happened during the seizure including which parts of their body were affected*
- *How long the seizure lasts*
- Never leave them alone during a seizure
- If the seizure stops within 5 minutes allow them to recover, lying down in the recovery position and maintain their airway. They may want to sleep
- Ensure they are supervised at all times and inform parents

Do Not:

- Stop or restrain the young person's movements
- Place anything inside the child's mouth
- Attempt to move the child unless they are in a position of danger
- Give anything to eat or drink until fully recovered

FOLLOW UP CARE:

Close observation of the young person will be required until ambulance arrives

Parent/carer agreement: I agree that the information contained on this plan is correct and agree that it can be shared with individuals involved with my child's care and education. I must notify the school of any changes to this plan in writing.

Signed Print Date

Head teacher agreement: It is agreed that this child will be supported in the management of their medical condition within school according to the details of this care plan. The arrangement will continue until the next review or until advised by parents/carers. It is the responsibility of the school to arrange the review and training.

Signed Print Date

Health Care Plan - Asthma

Name:

D.O.B:

School:

Problem/Issue
..... has asthma
Goal(s) agreed with you
To manage and treat symptoms whilst in school
Negotiated plan of care
<p>SYMPTOMS OF AN ASTHMA EPISODE MAY INCLUDE ANY/ALL OF THESE:</p> <ul style="list-style-type: none"> ▪ CHANGES IN BREATHING: coughing, wheezing, breathing through mouth, shortness of breath ▪ VERBAL REPORTS of: chest tightness, chest pain, cannot catch breath, dry mouth, "neck feels funny", doesn't feel well, speaks quietly ▪ APPEARS: anxious, sweating, nauseous, fatigued, stands with shoulders hunched over and cannot straighten up easily <p>Provide the student with inhaler. Do not let them collect this alone Allow student to take 2-4 puffs of inhaler using spacer</p> <p>Refer to flow chart if no improvements within 5 minutes or symptoms increase:</p> <ul style="list-style-type: none"> • Administer 10 puffs of inhaler via spacer. • If no improvement call 999 <p>DON'T WORRY ABOUT OVERDOSING; TOO MUCH IS BETTER THAN TOO LITTLE!</p> <p>STORAGE OF INHALERS</p> <ul style="list-style-type: none"> • It is parents/carers responsibility to ensure inhalers are sent into school and that they are in date • Inhalers should NOT be locked away, children with asthma need rapid access to their inhaler • Storage of inhalers and spacers should be kept with the child or within easy reach at all times • Inhalers and spacers should always be taken on school trips and staff should be aware of triggers for each child in their care <p>If you have any concerns inform the head teacher. If further training or information is required please contact the school nurse team on 443691</p>

Parent/carer agreement: I agree that the information contained on this plan is correct and agree that it can be shared with individuals involved with my child's care and education. I must notify the school of any changes to this plan in writing.

Signed.....Print.....Date.....

Head teacher agreement: It is agreed that this child will be supported in the management of their medical condition within school according to the details of this care plan. The arrangement will continue until the next review or until advised by parents/carers. It is the responsibility of the school to arrange the review and training.

Signed.....Print.....Date.....

Glossary

AAC	Alternative, Augmentative Communication
AS	Autism Spectrum
BESD	Behavioural, Emotional and Social Difficulties
BST	Behaviour Support Teacher
CAF	Common Assessment Framework
CAMHS	Child and Adolescent Mental Health Services
CIN	Child In Need
CoP	Code of Practice
CPR	Child Protection Register
DfESC	Department for Education, Sport and Culture
EA	Exceptional Action
EAL	English as an Additional Language
EP	Educational Psychologist
EST	Education Support Team
EWO	Education Welfare Officer
EWS	Education Welfare Service
G&T	Gifted and Talented
HI	Hearing Impairment
HQT	High Quality Teaching
IDP	Inclusion Development Programme
ILP	Individual Learning Plan
IBP	Individual Behaviour Plan
IWB	Interactive Whiteboard
KW	Key worker
LAC	Looked After Child
LSA	Learning Support Assistant
MFL	Modern Foreign Language
MLD	Moderate Learning Difficulties
PARM	Planning and Review Meeting
PEP	Personal Educational Plan
PMLD	Profound and Multiple Learning Difficulties
PN	Physical Needs
PSP	Pastoral Support Plan
QTVI	Qualified Teacher of the Visually Impaired
RON	Record of Need
SA	School Action
SA+	School Action Plus
SALT	Speech and Language Therapy
SEAL	Social and Emotional Aspects of Learning
SEN	Special Educational Need
SEND	Special Educational Needs and Disabilities
SENCo	Special Educational Needs Co-ordinator
SLCN	Speech, Language and Communication Needs
SLD	Severe Learning Difficulties
SALT	Speech and Language Therapist
SMART	Specific, measurable, achievable, realistic/relevant, time bonded
SpLD	Specific Learning Difficulties
TA	Teaching Assistant
TEACCH	Treatment & Education of Autistic and Related Communication Handicapped Children
ToD	Teacher of the Deaf
VI	Visual Impairment
VLE	Virtual Learning Environment