

The purpose of this guidance document is to support schools in understanding the funding available to them to make appropriate provision for children and young people with Special Educational Needs and Disabilities. It includes an overview of the funding available as well the application process for accessing additional funding. It also provides further guidance on the level of need and types of provision that additional funding may be allocated for.

Contents:

1. SEN Funding for Schools
2. Schools Block
3. Element Three - High Needs Block – Top Up Funding
4. Applying for Element Three – High Needs -Top-up Funding
5. Monitoring Top-Up Funding
6. Appealing a decision
7. Local Authority Schools’ SEN High Needs Funding
8. Provision Guidance Tables
 - Cognition and Learning
 - o Range 1
 - o Range 2
 - o Range 3
 - o Range 4a
 - o Range 4b
 - o Range 5
 - o Preparation for Adulthood
 - Communication and Interaction – Autism
 - o Range 1
 - o Range 2
 - o Range 3
 - o Range 4a
 - o Range 4b
 - o Range 5
 - o Range 6
 - Communication and Interaction – Speech and Language
 - o Range 1
 - o Range 2
 - o Range 3
 - o Range 4a
 - o Range 4b
 - Communication and Interaction Preparation for Adulthood
 - Social Emotional and Mental Health
 - o Range 1
 - o Range 2
 - o Range 3

- Range 4a
- Range 4b
- Range 5a
- Range 5b
- Range 6a
- Range 6b
- Range 7
- Preparation for Adulthood
- Hearing Loss
 - Range 1
 - Range 2
 - Range 3
 - Range 4
 - Range 5
 - Preparation for Adulthood
- Vision Loss
 - Range 1
 - Range 2
 - Range 3
 - Range 4
 - Range 5
 - Range 6
 - Preparation for Adulthood
- Physical Difficulties and Medical Needs
 - Range 1
 - Range 2
 - Range 3
 - Range 4
 - Range 5
 - Range 6
 - Preparation for Adulthood

9. Guidance to support recommendation of Support Units

10. Appendices:

- Process maps for funding decisions

1. SEN Funding for Schools

The Local Authority receives money from central government each year to fund schools. This is called the Dedicated Schools Grant (DSG). The DSG is split into four blocks of 'block' funding:

- Early years block
- Schools block
- High needs block
- Central block

2. Schools Block

The schools block is the main budget for mainstream schools. The schools block is made up of:

- **Element 1 – per pupil funding.** This is used by individual schools to support all pupils. It includes those who have special educational needs.
- **Element 2 – SEN funding.** This is for schools to spend directly on making special educational provision. Element 2 funding is often referred to as the SEN Notional Budget.

The SEN funding (element 2) for each school is calculated using a formula. This formula uses the following SEN 'proxy indicators'.

- Pupil numbers (AWPU) - 5%
- Low Prior attainment - 100%
- Social deprivation (IDACI, FSM, FSM6) – 50%

Each year the school is informed through their School Budget Share how much Notional SEN money they will receive in support of low-cost high incident pupils.

Schools should use their Notional SEN funding to meet the needs of the cohort of children and young people with SEND in their setting.

Things that a school may want to consider when allocating funding on resources:

- Expertise within the school to plan for any resources needed
- Curriculum pathways
- Specialist advice needed
- Specific SEND resources
- Provision specified in Education Health Care Plans
- Evidence-based interventions

3. Element Three - High Needs Block – Top Up Funding

Schools and academies should have sufficient funding in their delegated SEN funding budget to enable them to support the majority of pupils' SEND where required, up to the nationally agreed cost threshold of £6,000 per pupil. Where individual pupils require additional support that costs more than £6,000, the extra costs can be met by requesting Element 3 funding for the individual pupil.

Top-Up funding is intended to provide additional, individually targeted support for named pupils who have a range of complex special educational needs whilst remaining in mainstream schools. Top-up funding is provided where these needs, and the provision required to meet them, are more significant than those typically met by resources that are already available to schools.

Pupils who access top-up funding will have exceptionally complex special educational needs. Examples of the different types and levels of need children may experience are outlined in the presenting needs section of the provision guidance tables below. The tables are split into area of need and the range of complexity at which this falls. The table also contains guidance on the type of provision that is required to meet need at each level and focus' on how the pupil's individual profile affects their access to the curriculum and school/setting life.

Pupils with needs in the higher ranges are likely to require:

- significant levels of regular teaching and/or support of a teaching assistant to address individual targets;
- daily highly structured learning opportunities;
- frequent access to small groups or individualised teaching;
- additional support required to ensure an integrated learning experience;
- support to ensure equal access and social integration opportunities during the school day;
- additional curriculum activities/arrangements that need to be in place within or outside of the usual learning environment for the child or young person to achieve.

Top-up funding can be used for a range of responses to SEND including:

- providing support for pupils with complex needs in mainstream settings;
- purchase one off resources or equipment for a specific child or young person;
- SEN training and development for specific members of staff in order to deliver specific provision.

4. Applying for Element Three – High Needs -Top-up Funding

It is expected, that prior to making an application for Top-Up funding a school or setting should be able to demonstrate how it has implemented universal and targeted SEN support through a graduated approach. This should include ongoing assessment, observation, support, advice and training for staff from the SEND support services,

including health, in order to identify the level and complexity of need and appropriate provision to meet these needs.

The guidance below has been developed to help formulate the type and level of provision needed over and above those usually available to schools. The guidance is broken down into areas of need and give details of the presenting behaviours, appropriate assessment and planning, teaching and learning strategies, curriculum/intervention resources and staffing for each of the ranges.

Although the ranges are hierarchical no one statement, within each range, is more important than another. It is not envisioned that all children will need provision for all statements. These statements should support SEND Support Services, SENCOs and school leaders in defining the detailed and personalised support a pupil with complex and significant needs requires. This provision should increase access to the curriculum and learning environment and to support the child or young person in achieving their outcomes.

School should present the detail of what the provision looks like within their setting as part of the application for funding and should include specifics around what is needed to be delivered (e.g. social skills group, play therapy, learning intervention, support during recreational time, etc.), how often (15 minutes per day, 3x per week, every lunchtime etc.), by whom (TA, School staff, specialist etc.) and where (e.g. in the classroom, in a quiet withdrawal place etc.) School and settings will be able to provide this in a variety of formats relevant to their setting but may want to consider the use of individualised provision maps.

In the first instance the child or young person should be discussed at the multi-agency individual school locality team meeting. In the majority of cases, it is expected that the initial application for top up funding within a mainstream setting, would be done using a SEND Support Provision Plan, without the need for an Education, Health and Care Plan. A SEND Support Provision Plan should not replace an Education, Health and Care Plan, but should provide short term funding to support schools and settings in making high levels of provision in the short term and, in some places, support the evidence required to demonstrate the graduated approach as part of a statutory assessment.

All applications will have been co-produced and supported by the most appropriate SEND Support Service representative together with any other relevant agencies, including health and social care where relevant.

When submitting a request for funding schools and associated Local Authority SEND service representatives will be asked to provide a recommendation of how many Support Units will be required to deliver the provision within the associated plan.

The final decision will be considered by the LA. For EHCPs, the recommended number of Support Units will be considered by SENAR, for SSPPs the recommendation will be considered by SSPP funding group made up from representatives from the SEND Advisory services. Consideration will be made of the provision outlined in the appropriate plan and supporting evidence from the school and supporting professionals, in order to determine the additional resources required above that already available to the school/setting to deliver this provision and over what period. The funding will be allocated

via support units. The higher the level of provision required; the more support units will be allocated.

Details of the amount and length of funding will be fed back to the school following the decision. For EHCPs typically an indicative amount will be provided with the draft plan or notice of proposed amendments and confirmed to the school named in Section I of the final plan on issue. This will be done in line with the statutory timelines.

For SSPPs the school making the application will be informed of the final decision and length of funding. The aim is to provide this within two working weeks of the application

The funding should be reviewed as part of the statutory Education Health and Care Plan reviews and for SEND Support Provision Plans at the review date indicated on the front page of the plan. Funding associated with a single SEND Support Provision Plan can run for no longer than 12 months. Following the review a new SEND Support Provision Plan would need to be submitted for funding to continue.

The additional resources will be monitored termly by the SEND advisory teams as part of the multi-agency planning meetings.

Funding already allocated to each setting, including the notional SEN budget, will be considered alongside each new application for funding.

Funding may be awarded for individual or targeted approaches, but the LA expects that this is shared, where possible, so that other children and young people can benefit from the enhanced resources, equipment training or support.

Schools can also request funding for one off payments (e.g. purchase of equipment etc.) where it is felt the cost of providing this one-off purchase falls outside of the usual resourcing of a school and beyond the notional SEN budget.

Applications for adaptations to the environment (e.g. buildings) will be considered through the Sensory support Decision Making Group.

The SEND Support Service input (e.g. assessments, observations, attendance at reviews etc.) will not usually be funded through the top-up funding except in exceptional circumstances as this forms part of the core allocation from the Local Authority.

5. Monitoring Top-Up Funding

It is expected that the most appropriate SEND agency would continue to be involved with the pupil will meet termly to monitor provision in place and the impact of it.

Initially this will be a discussion about the impact of funding within the termly individual school, multi-agency planning meetings. There is no expectation that SEND Support Service representatives will attend termly review meetings for each child or young person in receipt of top-up funding.

Where there are concerns that the additional provision being funded is not supporting the child or young person to progress towards achieving their short-term outcomes, further actions will be set.

These actions may include additional individual progress meetings, observations of provision being delivered or further assessments to inform relevance of provision.

6. Appealing a decision

Where a school or setting disagrees with the decision made by Local Authority, they should discuss their concerns with their Principle Officer for children with EHCPs or the supporting professional for SSPPs, who will provide feedback on the decision made and where necessary liaise with the appropriate person directly to resolve the concern.

If a resolution cannot be reached, then this will be escalated to the Assistant Director for SEND and Inclusion.

7. Local Authority Schools' SEN High Needs Funding

The rest of the high needs block is used by the Local Authority to fund other types of SEN support and provision. The money is spent on many different types of support. This includes:

- State funded special schools.
- Resource Based provision in mainstream school
- Places in alternative provision and independent schools
- Pupil Referral Units (PRUs)
- Post 16 places and top ups (elements 1,2,3)
- All SEN packages (0-25years)
- Central services such as:
 - Advisory teacher support services
 - SEND Support in the early years
 - SEND Keyworkers
 - Medical provision

Provision Guidance Tables

These provision tables support the identification of appropriate provision for children with high incidence, low cost needs – these are communication and interaction, cognition and learning and Social, emotional and mental health needs.

Using the Guidance to Support Learning

It is important to recognise that High Quality Teaching will provide a firm basis upon which to use the additional strategies identified at each range. Strategies and advice from earlier ranges need to be utilised alongside more specialised information as the ranges increase. Specialist health and Social Care interventions may be required at any level.

The ranges are colour-coded throughout the school age guidance as follows:

Range 1	– Universal
Range 2	– Universal/Targeted
Range 3	– Targeted
Range 4	– Targeted/Specialist
Range 5	– Specialist
Range 6	– Highly Specialist
Range 7	– Highly Specialist Provision possibly 24 hours

It is expected that the provision detailed in ranges 1 – 3 would be met from the resources typically available to schools. In some cases, where there is a combination of needs across several different areas, some top-up funding may be available via a SEN Support Provision Plan or EHCP to support the provision within range 3.

Cognition and Learning Provision Guidance Statements

C&L Range 1 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources & Staffing
<p>The pupil will have mild difficulties in aspects of literacy, numeracy or motor co-ordination despite regular attendance, appropriate intervention and quality teaching. Pupil may have difficulties with some or all of the following:</p> <ul style="list-style-type: none"> • Below expected rate of attainment • Below age-related and national expectations • Difficulty with the acquisition/ use of language, literacy, numeracy skills • Difficulty with the usual pace of curriculum delivery • Some problems with concept development • Evidence of some difficulties in aspects of literacy, numeracy and/or motor co-ordination • Attainment levels are likely to be approximately a year delayed (e.g. identified as needing universal support on Birmingham SEN Toolkits) 	<p>SCHOOL</p> <ul style="list-style-type: none"> • Part of normal school and class assessments • Normal curriculum plans include Quality First Teaching (QFT) strategies • Parents and children involved in monitoring and supporting their targets <p>Assessment</p> <ul style="list-style-type: none"> • In addition to normal classroom assessments, the teacher will also discuss next steps with the SENDCO • As appropriate, complete further literacy and maths assessments using the Birmingham SEN Toolkits • For concerns regarding motor skills use a motor skill check list and/or speak to the school nurse/OT • Seek advice and information regarding specific difficulties from the Birmingham Dyslexia guidance or speak to PSS/EPS. <p>Planning</p> <ul style="list-style-type: none"> • Normal curriculum plans to include QFT strategies and adjustments to activities to remove any barriers which difficulties may present • Timetable any small group intervention into weekly routine as appropriate (the number of sessions would be dependent on the intervention) • Monitor effectiveness of interventions ensuring clear entry and exit points and detailed provision map • Parents and children involved in monitoring and supporting their targets 	<ul style="list-style-type: none"> • Mainstream class with flexible grouping arrangements • Consider collaborative learning strategies to promote co-operation and communication and increase pupil engagement in learning • Opportunities for small group work based on identified need e.g. listening/thinking • Mainstream class with flexible grouping arrangements • Opportunities for small group work based on identified need e.g. reading, maths, motor skills • Opportunities for generic type one-to-one programmes aimed at addressing gaps – any intervention should have clear entry and exit criteria 	<ul style="list-style-type: none"> • Quality First Teaching • Simplify level/pace/amount of teacher talk • Emphasis on assessment for identifying and teaching gaps in learning • Opportunities for skill reinforcement/revision/transfer and generalisation • Formal teaching of vocabulary and concepts 	<ul style="list-style-type: none"> • Main provision by class/subject teacher • Mainstream class with enhanced differentiation • Time limited programmes of small group work based on identified gaps in learning • Opportunities for small group support focused on specific targets, with outcomes closely monitored • Pupils should be in mainstream classes and should not routinely be withdrawn and taught by a TA • All school staff should have access to regular, targeted Continuing Professional Development • Full inclusion within the curriculum through use of differentiation and group support • Activities planned through QFT with emphasis on concrete, experiential and visual supports • Multi-sensory learning opportunities • Strategies employed to encourage cognitive engagement, transferring and generalising learning e.g. Thinking Skills and problem solving • Links established between new and prior learning with support from review and overlearning techniques

C&L Range 2 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The pupil will have mild but persistent difficulties in aspects of literacy, numeracy or motor co-ordination despite regular attendance, appropriate intervention and quality teaching.</p> <p>Take note of descriptors for other SEN needs, which may not be primary need.</p> <ul style="list-style-type: none"> Continuing and persistent difficulties in the acquisition/use of language/literacy/numeracy skills The pupil is operating at a level well below expected outcomes and there is evidence of an increasing gap between them and their peers despite targeted intervention and differentiation through support plan Evidence of difficulties with aspects of cognition i.e. memory, concept development, information processing, understanding, sequencing and reasoning that impact on learning and/or limit access to the curriculum Progress is at a slow rate but with evidence of response to intervention Support is required to maintain gains and to access the curriculum Attainment is well below expectations despite targeted differentiation (e.g. identified as needing targeted support on Birmingham SEN Toolkits) Processing difficulties limit independence and may need adult support in some areas May have difficulties with organisation and independence in comparison to peers Self-esteem and motivation may be an issue Possibly other needs or circumstances that impact on learning 	<p>SCHOOL As Range 1 plus:</p> <p>Assessment</p> <ul style="list-style-type: none"> SENDCO will use screening tools available for use in schools to establish a profile of the pupil's strengths and weaknesses. This will inform areas for intervention and adjustments/arrangements required for access to the curriculum and exams <p>Planning</p> <ul style="list-style-type: none"> Teaching plans clearly show adjustments made for individual pupil to access the curriculum This should include planning for additional adults supporting the pupil within the classroom SENDCO to monitor planning of a personalised multi-sensory intervention. This should be time-tabled, and a private area made available where applicable SENDCo and PSS/EPS to explore SPLD factors in relation to relevant guidance, including the Birmingham Dyslexia Guidance Regular monitoring and reviewing of interventions so they can be adapted accordingly – this should take place termly Staff trained regularly on whole class differentiation, / scaffolding. with opportunities for peer support 	<ul style="list-style-type: none"> Mainstream class with enhanced differentiation, with some targeted small group support Time limited programmes of small group work based on identified need Opportunities for 1:1 support focused on specific targets, with outcomes closely monitored <p>As Range 1 provision plus:</p> <ul style="list-style-type: none"> Specific multisensory, cumulative, structured programmes to support the acquisition of literacy, cursive handwriting, numeracy and motor skills e.g. Cued spelling, Direct Phonics, Write Start. Opportunities for mixed groupings as pupil's cognitive ability is likely to be higher than their literacy skills might indicate The child experiences success through carefully planned interventions and expectations 	<ul style="list-style-type: none"> Quality First Teaching Programme includes differentiated and modified tasks within an inclusive curriculum Modify level/pace/amount of teacher talk to pupil's identified need Programmes to consist of small achievable steps Pre-teach concepts and vocabulary Multi-sensory learning opportunities Emphasis on using and applying and generalisation of skills Individual targets, within group programmes and/or 1:1, are carefully monitored and reviewed <p>As Range 1 provision plus:</p> <ul style="list-style-type: none"> Differentiated curriculum with modifications that include alternative methods to record and access text. This will include ICT as appropriate e.g. word prediction, text-to-speech 	<ul style="list-style-type: none"> Parents are fully informed of school provision for child and involved in decisions about interventions to meet the pupil's needs Main provision by class/subject teacher with support from SENDCO and advice from specialist teachers as appropriate Additional adult, under the direction of teacher, provides sustained and targeted support on an individual/group basis Include withdrawal on a time limited basis, entry and exit criteria clearly stated <p>As Range 1 provision plus:</p> <ul style="list-style-type: none"> staff to deliver specific multisensory, cumulative, structured programmes. Adults use the developmental level of language appropriate to the child in questioning and explanation Simple Thinking Skills Activities/ Intensive use of 'Thinking Skills' approach, sorting/ matching/visual sequencing/ classifying and categorising <p>Other resources may include:</p> <ul style="list-style-type: none"> Use real objects wherever possible Individual reading Alphabet arc activities Busy box 5-minute box Visual timetables, timeline <ul style="list-style-type: none"> QFT is supplemented by appropriate small group work with close monitoring in place Work on individualised outcomes (e.g. ITP) are incorporated into provision Clear entry and exit criteria

C&L Range 3 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The pupil will have moderate and persistent difficulties with literacy, numeracy or motor co-ordination despite regular attendance, significant levels of focused intervention, effective provision mapping and quality teaching</p> <ul style="list-style-type: none"> • Persistent difficulties in the acquisition/use of language/literacy/numeracy skills and appear resistant to previous interventions • Pupil operating at a level significantly below expected outcomes (e.g. identified as needing specialist support in some areas of the Birmingham SEN Toolkits) • Evidence of an increasing gap between them and their peers despite targeted intervention, differentiation and curriculum modification • Moderate difficulties with independent working • Needs a modified curriculum • Cognitive and school assessment indicates significant and enduring difficulties with several aspects of cognition e.g. memory, concept development, information processing, understanding, sequencing and reasoning • Difficulties impact on learning and/or limit access to the curriculum • Significant discrepancies between different areas of cognition or a highly unusual profile of strengths and difficulties which require a personalised support plan • Difficulties in some aspects of cognitive processing will be present, i.e. slow phonological processing, poor working memory, difficulties with auditory and visual processing • Difficulties will affect access to curriculum • Specialist support/advice and arrangements required • Likely to need assistive technology • Difficulties with learning may impact on self-esteem, motivation and emotional wellbeing despite positive support 	<p>SCHOOL</p> <ul style="list-style-type: none"> • SENDCO should take advice from education and non-education professionals as appropriate (e.g. recommendations by PSS/EPS) • Reviews should take note of evidence-based needs • Curriculum plans, and progress are closely monitored • Targets are individualised, short term and specific (e.g. ITP) • Continued regular engagement of parents/carer • Involvement of pupil in target setting and personalised learning • Consideration of specific literacy/ learning difficulties evidence • Consider use of SSPP to record provision and impact 	<ul style="list-style-type: none"> • Mainstream class, predominantly working on modified curriculum tasks • Frequent opportunities for small group work based on identified need • Frequent opportunities for 1:1 support focused on specific support plan targets through intervention (e.g. Precision Teaching, Toe-by-Toe, Wordwasp, Power of 2) • Grouping needs to be flexible and include positive peer models with input from class teacher as well as additional adults • Adults use the developmental level of language appropriate to the child in questioning and explanation 	<ul style="list-style-type: none"> • Quality First Teaching • Tasks and presentation increasingly individualised and modified in an inclusive curriculum • Visual cues to support auditory information at all stages of delivery • Individualised level/pace/amount of teacher talk • Ensure transfer and generalisation of skills has occurred before teaching anything new • Small steps targets within group programmes and/or 1:1 • Alternative ways of recording as appropriate • Individualised targets are incorporated into provision • Clear entry and exit criteria • Access arrangements and adjustments are part of everyday learning and practice (normal way of working) 	<ul style="list-style-type: none"> • Main provision by class/subject teacher with support from SENDCO and advice from PSS/EPS and non-education professionals as appropriate • A consistent structured environment which may include withdrawal, carefully monitored and planned by class teacher for a specific target • Additional adult, under the direction of the teacher, provides sustained targeted support on an individual/group basis • Clear monitoring of effectiveness of interventions • Additional adult to be trained to deliver interventions and support • Use of 'Thinking Skills' approach, sorting/matching/visual sequencing/classifying and categorising • Pupil experiences success through carefully planned interventions and expectations • SLCN activities • Motor co-ordination programme

C&L Range 4a Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The pupil will have significant and persistent difficulties with language, literacy, numeracy and/or motor co-ordination despite regular attendance and high-quality specialist intervention and teaching.</p> <ul style="list-style-type: none"> • Key language, literacy and/or numeracy skills are well below functional levels for their year group (e.g. identified as needing specialist/specialist plus support across most areas of the Birmingham SEN Toolkits) • Pupil cannot access text or record independently • Pupil has significant levels of difficulty in cognitive processing requiring significant alteration to the pace and delivery of the curriculum • Difficulties likely to be long term/lifelong • The condition is pervasive and debilitating and significantly affects access to curriculum and academic progress • High levels of support are required which include assistive technology • Social skills and behaviour may be affected, and issues of self-esteem and motivation are likely to be present • The pupil may appear to be increasingly socially immature and vulnerable because of limited social awareness, difficulties with reasoning, understanding or expressing thoughts 	<p>SCHOOL SENDCO should take advice from education and non-education professionals as appropriate (e.g. assessment by PSS/EPS/Health and Social Care)</p> <ul style="list-style-type: none"> • Curriculum plans, and progress are closely monitored • Targets are highly individualised and based on a small step assessment programme e.g. Birmingham SEN Toolkits, B Squared etc. • Continued regular engagement of parents • Curriculum plans, classroom support, interventions and graduated approaches are recorded carefully to monitor the progress towards achievement of outcomes. (e.g. SSPP) 	<ul style="list-style-type: none"> • Mainstream class, predominantly working on modified curriculum tasks • Frequent opportunities for small group work based on identified need • Daily opportunities for 1:1 multi-sensory support focused on specific support plan targets across a range of areas 	<ul style="list-style-type: none"> • Quality First Teaching • Tasks and presentation increasingly individualised and modified in an inclusive curriculum • Visual cues to support auditory information at all stages of delivery • Teaching and activities are adapted to reduce the impact of processing difficulties e.g. working memory, processing speed • Individualised level/pace/ amount of teacher talk • Ensure transfer and generalisation of skills has occurred before teaching anything new • Individualised targets within group programmes and/or 1:1 • Tasks and presentation are personalised to the pupil's needs and monitored regularly to ensure they remain appropriate • Emphasis on language, literacy, numeracy, PSHE and ICT • Access arrangements and adjustments are part of everyday learning and practice (normal way of working) 	<ul style="list-style-type: none"> • Main provision delivered by class/subject teacher via a modified curriculum following advice from SENDCo, education and non-education professionals as appropriate (e.g. PSS/EPS/Health and Social Care) • A consistent structured environment may include withdrawal, carefully monitored, and planned by class teacher for a specific target • Additional adult, under the direction of the teacher, provides sustained individual support, with the pupil still being included in group activities wherever possible • Clear and regular monitoring of effectiveness of interventions by class teacher, SENCo and other appropriate professionals • Additional adult to be trained to deliver interventions and support • Use real objects for thinking skill activities (explore the context for the objects) • Access to assistive technology should be made for those pupils with SPLD – e.g. Clicker, Text Help, Read/Write, and audio recording devices.

C&L Range 4b Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Severe and persistent difficulties in the acquisition/use of language /literacy/numeracy skills, within the curriculum and in out of school activities</p> <ul style="list-style-type: none"> • Cognitive impairment severely restricts access to the curriculum • Cognitive impairment that is a lifelong disability and significantly impacts on social development and independence • Moderate/Severe Learning Difficulties • Complex needs formally identified/diagnosed • The level of adjustment and specialist teaching across the curriculum required is significantly greater than is normally provided in mainstream setting 	<p>SCHOOL SENDCo/Resource Base Lead should take advice from education and non-education professionals as appropriate (e.g. assessment by PSS/EPS/Health and Social Care)</p> <ul style="list-style-type: none"> • Targets are individualised, short term and specific and based on a small step assessment programme e.g. Birmingham SEND Toolkits, Engagement scales, B Squared etc. • Continued regular engagement of parents • Progress is closely monitored and tracked • Curriculum plans, classroom support, interventions and graduated approaches are recorded carefully to monitor the progress towards achievement of outcomes. (e.g. SSPP/EHCP) 	<ul style="list-style-type: none"> • Modified curriculum tasks delivered within smaller class sizes • Daily opportunities for small group/1:1 multi-sensory support, focused on specific support plan targets across a range of areas • The pupil experiences success through carefully planned interventions and expectations 	<ul style="list-style-type: none"> • Modified class curriculum • Quality First Teaching • Tasks and presentation increasingly individualised and modified in an inclusive curriculum • Visual cues to support auditory information at all stages of delivery • Individualised level/pace/ amount of teacher talk • Ensure transfer and generalisation of skills has occurred before teaching anything new • Small steps targets within group programmes and/or 1:1 • Emphasis on literacy, numeracy PSHE and ICT • Tasks and presentation are personalised to the pupil's needs and as 4a monitored regularly to ensure they remain appropriate • Highly adapted teaching methods which incorporate the use of learning aids and multi-sensory teaching as standard 	<ul style="list-style-type: none"> • Main provision by class/subject teacher with support from SENDCo/Resource Base lead and advice from specialist teacher and non-education professionals as appropriate • A consistent structured environment may include withdrawal, which is carefully monitored, and planned by the class teacher for a specific target • Sustained targeted support on an individual/group basis • Clear monitoring of effectiveness of interventions • All adults trained to deliver interventions and support • Intensive use of 'Thinking Skills' approach, sorting/ matching/visual sequencing/ classifying and categorising • Use real objects wherever possible • Pupil still included in year group activities wherever appropriate • Visual timetables, timeline, cues, task plans • For those pupils with SPLD access to assistive technology must be made • Individualised literacy/ numeracy incorporated into provision • Clear entry and exit criteria • 1:1 Speech and Language Therapy if appropriate

C&L Range 5 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Severe and persistent difficulties in the acquisition/use of language /literacy/numeracy skills, within the curriculum and in out of school activities.</p> <ul style="list-style-type: none"> • Severe learning difficulties have been identified • Complex and severe language and communication difficulties • Profound Learning Difficulties, which are lifelong. • Complex Needs identified 	<p>SCHOOL</p> <ul style="list-style-type: none"> • As 4b with long term involvement of specialist provision and appropriate non-educational professionals in accordance with the outcomes identified within the Education, Health and Care Plan. • Previous assessment informs the planning process for appropriate programmes • Targets are short-term and specific, monitored and reviewed on a short-term basis and may be based on non-subject specific assessment such as the engagement scales • Parents/carers are involved in all aspects 	<ul style="list-style-type: none"> • Extremely modified curriculum and individualised work • Small group and 1:1 daily developing basic skills • Need for specialist advice and guidance to model interventions for schools to follow above and beyond usual school offer. 	<ul style="list-style-type: none"> • As 4b plus access to aids personalised to the pupil's needs e.g. communication needs • Ensure that appropriate advice and materials are always available such as PECS, Makaton, ICT 	<ul style="list-style-type: none"> • Staff need to be trained and have experience working with pupils with complex cognition and learning needs • Access to extra staffing to support pupils in times of crisis and stress and to escort pupils on outings and trips • Appropriately trained staff to deal with medical and physical issues as appropriate • Group activities carefully monitored to ensure the pupil is not isolated or excluded • Pupil still included in group activities wherever appropriate • Emphasis on using real objects and experiences for all activities • Visual support throughout • Specialist ICT hard and software • AAC systems to support communication environment • Specialist equipment to promote self-help, physical access and mobility • Appropriate indoor and outdoor provision in a safe and secure setting • Specialist hygiene facilities if necessary • Access to specialist educational and non-educational services in accordance with the EHC Plan.

Cognition and Learning: PfA Outcomes and provision

	Employability	Independent Living	Community Inclusion	Health
Reception to Y2 (5-7 years)	<p>Child will have the listening skills and concentration to increase the amount of time they are able to maintain focus upon learning tasks</p> <p>Child will be developing early concepts of literacy and numeracy skills to enable them to lay the foundations of later learning.</p> <p>Child will have an awareness of 'growing up', and beginning to have some ideas of what they would 'like to be', when they are older.</p>	<p>Child will understand the concept of time and will develop the skills necessary to access digital and analogue clocks.</p> <p>Child will understand the concept of cooking and the contribution of ingredients to produce different foods.</p>	<p>Child will have an understanding of the concept of friendships and will be applying this in their approach to shared play with peers.</p>	<p>Child will understand the concept of being healthy, including the benefits of exercise and making healthy food choices and will begin to apply this in the context of mealtimes and attendance at clubs and sports activities.</p> <p>Child will understand the need for regular dental, vision and hearing checks to maintain good health.</p>
Y3 to Y6 (8-11 years)	<p>Child will understand and be able to talk about different careers and education options so that they are able to make choices about what they will do next.</p> <p>Child will begin to develop a profile of interests and aspirations in order to demonstrate individual strengths and skills.</p>	<p>Child will understand the concept of money, demonstrating awareness that different objects are of different monetary values and beginning to use money to pay for items such as snacks in school.</p> <p>Child will begin to understand concepts relation to travel and transport including paying for a ticket/pass, timetables, and road signs and will be aware of the role of these in facilitating independent travel.</p> <p>Child will understand the concept of recipes relating to preparation of food and will be able to follow these with adult support to make simple foods (cupcakes, sandwiches etc.)</p>	<p>Child will understand the importance of being safe within the local community, including online, and will begin to understand potential areas of risk, e.g. strangers, online hazards, bullying and ways to take steps to avoid these.</p> <p>Child will be familiar with the local area, including particular places, routes of travel to enable them to begin to understand where they are going and methods to get there.</p>	<p>Child will understand the purpose of vaccinations and will cooperate with these to ensure good medical health.</p> <p>Child will understand changes to their body associated with puberty and will be aware of self-care routines required to maintain good physical health.</p> <p>Child will understand minor health needs that they may have, asthma, eczema, difficulties with vision and/or hearing; they will understand the strategies and resources to manage these.</p>
Y7 to Y11 (11-16 years)	<p>Child will be able to understand information relating to course options (GCSE, NVQ, Entry level qualifications, vocational options etc.) including the requirements for access to a range of HE options to enable realistic and informed choices.</p> <p>Child will be able to think about subject option choices alongside longer term career goals and will be able to choose subjects and course options to enable next steps in their chosen direction.</p> <p>Child will begin to think about and plan work experience/part-time opportunities</p>	<p>Child will understand monetary value, how much money they have and how much money items cost, and will be able to make decisions in relation to what they spend their money on as a first step towards financial budgeting.</p> <p>Child will demonstrate skills in accessing local transport services, buying a ticket/pass, understanding bus times, using these systems of travel to access school, for example.</p> <p>Child will understand information relating to different food groups and meal planning and will be able to understand instructions within a recipe</p>	<p>Child will understand risks associated with social media, online gaming and online communities and will be increasingly competent in understanding how to keep themselves safe.</p> <p>Child will understand social norms and conventions in relation to a variety of friendships and relationships and will be able to use this knowledge to enable them to engage appropriately within a range social contexts.</p> <p>Child will understand options in relation to a range of leisure and social activities available and will be able to</p>	<p>Child will understand information relating to sex education and sexual health in preparation for adulthood.</p> <p>Child will understand the role of the GP and the support available to them.</p> <p>Child will understand the risks associated with drugs and alcohol and will apply information learned to keep themselves safe.</p> <p>Child will have a more active role in understanding and managing more complex health needs to facilitate greater independence.</p>

	<p>to enable them to understand workplace demands and requirements and to gain early experience in areas of interest for future employment. Child will continue to develop a profile of interests and achievements in order to demonstrate individual strengths and skills. This will be used in accordance with careers sessions and guidance. Child will understand supported employment options e.g. Access to Work.</p>	<p>card/book to enable them to cook simple meals with support.</p>	<p>use this to make informed and positive choices about how they want to spend their free time. Child will show increased understanding of the wider picture and will build resilience to support emotional wellbeing.</p>	
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the School Age Ranges Guidance: Cognition and Learning.			

Communication and Interaction – Autism Provision Guidance Statements

ASC Range 1 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources & Staffing
<p>• Pupils will have communication and interaction needs that may affect their access to some aspects of the National Curriculum, including the social emotional curriculum and school life</p> <p>• The pupil does not have a diagnosis of autism made by an appropriate multi-agency team</p> <p>• Students may or may not have low level sensory needs</p> <p>NC Level Across the expected range with an uneven-learning profile showing relative weaknesses in some areas and strengths in others.</p>	<p>Assessment:</p> <ul style="list-style-type: none"> • Will be part of school/setting and class teaching and assessments <p>Planning:</p> <ul style="list-style-type: none"> • Curriculum plans should include individual/group targets • Family to be involved regularly and support targets at home • Pupil will be involved in setting and monitoring targets, where appropriate • Information around the specific pupil will be shared with staff in setting at pupil progress, or equivalent, meetings 	<ul style="list-style-type: none"> • Must be included in mainstream class with specific support for targets which involve communication and interaction. • Should be offered opportunities for small group work within the usual classroom planning and management. 	<p>Resources/Provision:</p> <ul style="list-style-type: none"> • The use of Quality First teaching approaches to support the development of social communication and interaction skills • Must have full inclusion to the National Curriculum • Flexibility may be required to enable the pupil to follow instructions and/or record work • Instructions may need to be supported by use of visual and written cues • Preparation for change and the need for clear routines will be required • Reduction of complex language, especially when giving instructions and asking questions, will be required 	<p>Setting:</p> <ul style="list-style-type: none"> • Flexible use of resources and staffing available in the classroom • Staff trained in de-escalation strategies <p>Staff working directly with pupils must have knowledge and training in autism good practice when working with pupils with communication and interaction needs or autism evidenced using guidance such as AET standards with reference to the Autism Good Practice Guidance.</p>

ASC Range 2 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources & Staffing
<ul style="list-style-type: none"> • Pupils will have communication and interaction needs that affect access to a number of aspects of the National Curriculum, including the social emotional curriculum and school life • Students may or may not have low to moderate sensory needs <p>There may not be a diagnosis of autism by an appropriate multi-agency team.</p> <p>NC Level Across the expected range but with an unusual profile showing relative weaknesses in certain areas and strengths in others.</p>	<p>Assessment: As range 1 plus:</p> <ul style="list-style-type: none"> • Use of more detailed NC assessment tools • Could also include other assessments relating to need, advice from SLT or OT advice (where applicable) <p>Planning:</p> <ul style="list-style-type: none"> • Curriculum plans will reflect levels of achievement and include individually focused targets, especially in Speech, Language and communication 	<ul style="list-style-type: none"> • Will be mainstream class-based and will have opportunity for small group and individual work to target specific needs relating to communication and interaction needs • May need adaptations to the working environment such as a quiet area within the classroom for individual work <p>As range 1 plus</p> <ul style="list-style-type: none"> • The use of <i>Quality First</i> teaching approaches to support the development of social communication and interaction skills • Flexibility will be required to enable the pupil to follow instructions and/or record work • Clear use of visual and written cues will be useful to support instructions • Preparation for change and the need for clear routines will be required • Reduction of complex language, especially when giving instructions and asking questions, will be required 	<p>As range 1 plus:</p> <ul style="list-style-type: none"> • Curriculum access will be facilitated by using a structured approach to provision which should involve using visual systems or timetables; reducing language for instructions/ information giving • Teaching approaches should take account of difficulties identified within the range descriptors 	<p>As range 1, plus:</p> <p>Setting:</p> <ul style="list-style-type: none"> • Will need additional professional support from skilled colleagues, e.g. SENDCO, to aid curriculum modifications • Should consider staff training to ensure that they are trained to meet the needs of the students in their class • Will need additional professional support from skilled colleagues to develop strategies to address social interaction, social communication and social understanding • Will need use of additional school support to implement specific materials, approaches and resources as appropriate • Staff trained in de-escalation strategies. • Schools are encouraged to have an Autism Lead Practitioner in their setting- training and advice is provided by a Communication and Autism Team Advisor (CAT). Staff working directly with pupils must have knowledge and training in good practice when working with pupils with communication and interaction needs/Autism evidenced using guidance such as the AET standards with reference to the Autism Good Practice Guidance.

ASC Range 3 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources & Staffing
<ul style="list-style-type: none"> • Pupils will have communication and interaction needs that will moderately affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life • This is especially true in new and unfamiliar contexts • The pervasive nature of autism or C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment • Pupils may or may not have a diagnosis of autism made by an appropriate multi-agency diagnostic team • Students may or may not have moderate sensory needs 	<p>Assessment: As range 1 and 2 plus:</p> <ul style="list-style-type: none"> • More specialised assessment tools in relation to specific descriptors such as: PSE, AET Progression Framework, TALC; Motivational Assessment; STAR behavioural analysis • Accurate and up to date assessment of independent levels (NC/P-Levels) must be kept as a working document to aid planning and to share with family • Assessment includes a profile of sensory needs <p>Planning:</p> <ul style="list-style-type: none"> • Curriculum plans will reflect levels of achievement and must include individually focused targets • Planning may need to incorporate adaptations such as rest breaks, time allocated to sensory difficulties and processing needs 	<p>As range 1 and 2 plus:</p> <ul style="list-style-type: none"> • Inclusion within the mainstream classroom. However, there will be a need for an enhanced level of individual support • Targeted support will be needed which may include unstructured parts of the day, e.g. start and end of school day, breaks, lunchtimes and trips out of school • Support for areas of sensory needs which may include ‘time out’ space and other environmental adaptations to reduce stress and anxiety <p>As range 1 and 2 plus:</p> <ul style="list-style-type: none"> • The use of Quality First teaching approaches to support the development of social communication and interaction skills • Flexibility will be required to enable the pupil to follow instructions and/or record work • Clear use of visual and written cues will be useful to support instruction. • Preparation for change and the need for clear routines will be required • Reduction of complex language, especially when giving instructions and asking questions, will be required • Staff will need to implement recommendations made by the Autism Lead Practitioner and/or Communication and Autism Team Advisor (CAT). 	<p>As range 1 and 2 plus:</p> <ul style="list-style-type: none"> • Will need to make noticeable adaptations to the curriculum to aid access and reduce anxiety • Will need differentiation by presentation and/or outcome • Will need enhanced PSHCE teaching to ensure skills embedded • 	<p>As range 1 and 2 plus:</p> <p>Setting:</p> <ul style="list-style-type: none"> • Advice/ training information from Early Bird/Early Bird Plus/1st Steps and Jigsaw/ Local Offer. Training will be sought • Teaching approaches must take account of difficulties identified within the range descriptors • Staff working directly with pupils must have knowledge and training in good practice when working with pupils with communication and interaction needs/Autism evidenced using guidance such as the AET standards with reference to the Autism Good Practice Guidance. • Schools should consider using the Autism Education Trust staff competencies to support development of specialist skills • Schools should consider ELKLAN Communication Friendly Schools or equivalent training to enhance skill levels in working with pupils with these needs • Staff trained in the use of de-escalation strategies • Liaison with autism lead and CAT to individualise provision.

ASC Range 4a Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources & Staffing
<p>• Pupils will have communication and interaction needs that significantly affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life</p> <p>• This is especially true in new and unfamiliar contexts but will also affect access at times of high stress in some known and familiar contexts and with familiar support/people available</p> <p>• The pervasive nature of the Autism/ C&I need is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment</p> <p>• Pupils will have an uneven learning profile, but their attainment levels suggest they can access a differentiated mainstream curriculum</p> <p>• Pupils may or may not have a diagnosis of autism by an appropriate multi-agency diagnostic team</p> <p>• Students may or may not have significant sensory needs The pervasive nature of the Autism/ C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment.</p> <p>The pupil will have an uneven learning profile but their attainment levels suggest they can access a differentiated mainstream curriculum.</p> <p>NC Level Across the expected range but with a significantly uneven profile showing weaknesses in some areas and strengths in others.</p>	<p>As range 1 – 3 plus:</p> <p>Assessment:</p> <ul style="list-style-type: none"> • Should include assessment advice from other agencies, e.g. SLT/OT/CAT/EP • Assessment should include details about sensory needs <p>Planning:</p> <ul style="list-style-type: none"> • Increased level of understanding by teaching and support staff will require plans for developing whole school understanding of pupil's needs • To include all setting staff that come into contact with pupil on a daily basis • Shadowing staff in specialist settings • Planning must include adaptations to curriculum to ensure the development of independent learning and life skills 	<p>As range 1 -3 plus:</p> <ul style="list-style-type: none"> • Robust planning to meet objectives defined in support plans 	<p>As range 1- 3 plus:</p> <p>Must implement recommendations of AS /AOT Support</p> <p>As range 1 -3 plus</p> <ul style="list-style-type: none"> • Significant adaptations to curriculum, teaching methods and environment needed to access the curriculum. These will include: conceptual understanding of everyday language and subject specific vocabulary; pace of delivery; significant pre-learning and over learning of concepts and functions and use of alternative recording methods • Where appropriate an alternative curriculum must be offered to develop independence and life skills • Will need enhanced PSHCE and SRE programmes to ensure skills embedded; these are likely to need some element of individual work 	<p>As range 1 – 3 plus:</p> <p>Setting:</p> <ul style="list-style-type: none"> • All staff aware of de-escalation strategies • Key staff trained in Team Teach approaches • Additional training of mainstream staff to support curriculum modifications and social interaction, social communication and social understanding • Staff working directly with pupils must have knowledge and training in good practice when working with pupils with communication and interaction needs/Autism evidenced through the use of guidance such as the AET standards and competency frameworks, with reference to the Autism Good Practice Guidance.

ASC Range 4b Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources & Staffing
<p>• Pupils will have communication and interaction needs that severely affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available</p> <p>• The pervasive nature of the Autism/ C&I needs is likely to have a significant effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment</p> <p>Pupils may have an uneven learning profile, but their attainment levels suggest they can access a differentiated mainstream curriculum. They will require significantly more support than is normally provided in a mainstream setting.</p> <p>NC Level Across the expected range but with a significantly uneven profile showing weaknesses in some areas and strengths in others.</p>	<p>Assessment: As ranges 1 – 4a plus:</p> <ul style="list-style-type: none"> • Must include detailed assessment for PSHCE, life skills and sensory needs • Risk assessments must be carried out and shared with all staff and family <p>Planning:</p> <ul style="list-style-type: none"> • Where needed, positive plans to support behaviour must be completed and shared with family • Must include planning for whole day, including unstructured times • Planning must consider learning styles, identified strengths and learning needs 	<p>As ranges 1 – 4a plus:</p> <ul style="list-style-type: none"> • Robust planning to meet objectives defined in Support Plan/EHCP • Access to a quiet area within the classroom must be available when needed to offer opportunities for distraction free learning • A variety of groupings must be used to ensure learning, including time in a quiet, distraction free environment 	<p>As ranges 1 -4a plus:</p> <ul style="list-style-type: none"> • Curriculum modifications must be selected to engage with C&I needs/Autism in relation to curriculum content and peer group • Therapeutic approaches will be integral to curriculum delivery and used to support the emotional wellbeing of pupil • Planning for unstructured times must be provided 	<p>As ranges 1 – 4a plus:</p> <p>Setting:</p> <ul style="list-style-type: none"> • Flexibility of staffing available to accommodate need, especially during unstructured times such as start and end of day, breaks and lunch and trips out of setting • Key staff must have accredited training in Autism/C&I needs such as Elklan (or equivalent), or through the Autism Education Trust programmes with reference to the Autism Good Practice Guidance. • Additional training of mainstream staff to support specific curriculum modifications in relation to needs identified in the range descriptors <p>As range 1-4a plus:</p> <ul style="list-style-type: none"> • Specialist staff to devise strategies which will be shared with mainstream staff and implemented into planning <p>Staff working directly with pupils must have knowledge and training in good practice when working with pupils with communication and interaction needs/Autism evidenced using guidance such as the AET standards and competency frameworks with reference to the Autism Good Practice Guidance.</p>

ASC Range 5 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>• Pupils will have communication and interaction needs that severely affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available</p> <p>• The pervasive nature of the Autism/ C&I needs is likely to have a significant effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment</p> <p>The pervasive nature of the Autism/ C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment.</p> <p>Pupils at range 5 may be in the following settings:</p> <p>Mainstream The pupil may have a significantly uneven learning profile, but their attainment levels suggest they can access a differentiated mainstream curriculum. They will require significantly more support than is normally provided in a mainstream setting.</p> <p>Special Attainment profile is below expected NC key performance indicators in most areas. Complex Needs Identified *</p> <p>NC Level</p> <p>• Across the expected range with a significantly uneven learning profile showing relative weaknesses in some areas and strengths in others</p> <p>• For pupils in special school settings, attainment profile is below expected NC levels.</p>	<p>As range 1 – 4 plus</p> <ul style="list-style-type: none"> • Must include detailed assessment for PSHCE, life skills and sensory needs • Assessment of behaviour and medical needs to inform the planning process where required • Where needed, risk assessments, behaviour support plans and positive handling plans must be carried out and shared and co-produced with all staff and family • Must include planning for whole day, including unstructured times • Accurate and up to date assessment of independent levels (NC/Pre-Key stage descriptors or P Levels) must be kept as a working document to aid planning and to share with family • Long term involvement of education and non-education professionals is likely to be needed 	<p>As range 1– 4 plus</p> <ul style="list-style-type: none"> • Robust planning to meet objectives in the support plan/ EHCP if applicable • A variety of groupings must be used to ensure learning, including time in a quiet, distraction free environment • Daily opportunities to manage their own anxieties by graded access to a range of environments 	<p>As range 1– 4b plus:</p> <ul style="list-style-type: none"> • Curriculum modifications must be selected to engage with C&I needs/Autism in relation to curriculum content, peer group etc. • Therapeutic approaches must be part of the curriculum and used to support the emotional wellbeing of the pupil • Access to specialist approaches and equipment as part of a holistic package to meet the individual’s sensory, social communication and understanding needs • Use a range of alternative augmentative communication to support social and functional communication skills to enhance interaction and understanding (e.g. PECS, Makaton, electronic voice output communication aids (VOCA) 	<p>As range 1– 4b plus:</p> <p>SETTING:</p> <ul style="list-style-type: none"> • Flexibility of staffing available to accommodate need, especially during unstructured times • Key staff must have advanced training in C&I needs/Autism • Additional training of mainstream staff to support pupil specific curriculum modifications in relation to needs identified in the range descriptors <p>Staff working directly with pupils must have knowledge and training in good practice when working with pupils with communication and interaction needs/Autism evidenced using guidance such as the AET standards and competency frameworks with reference to the Autism Good Practice Guidance.</p>

ASC Range 6 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources & Staffing
<ul style="list-style-type: none"> • Pupils will have communication and interaction needs identified by the range descriptors that profoundly affect their access to the National Curriculum, including the social emotional curriculum and all aspects of school life, even in known and familiar contexts and with familiar support/people available • Pupils will need an environment where interpersonal challenges are minimised by the adult managed setting • The pervasive nature of the Autism/C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment • Students may or may not have profound sensory processing needs • Pupils within the specialist provision need an environment where interpersonal challenges are minimised by the adult managed setting The pervasive nature of the Autism/ C&I needs is likely to have a detrimental effect on the acquisition, retention and generalisation of skills and therefore on the result of any assessment. <p>Pupils within the Communication and Interaction specialist setting, or enhanced DSP setting need an environment where interpersonal challenges are minimised by the adult managed setting.</p> <p>Complex Needs Identified</p>	<p>Assessment</p> <ul style="list-style-type: none"> • Targets must be individualised, short term, specific & reviewed • Detailed pre-NC assessments (e.g. PIVATS, B-squared) to inform planning/target setting • Ongoing teaching assessments including social communication skills, emotional wellbeing and life skills, including preparation for adulthood • Long-term involvement of educational and non-educational professionals as appropriate in assessment and planning • Assessment of emotional regulation, sensory needs, individual behaviour needs, and medical needs must be used to inform the planning process • Curriculum planning closely tracks levels of attainment and incorporates individual targets and therapy programmes • Individual care plan/protocol to be in place • Positive handling plan • Behaviour Support Plan and risk assessment • Use of AET Progression Framework to show progress with social/emotional and independence skills. 	<ul style="list-style-type: none"> • Robust planning to meet the objectives in the EHCP • Small groups within a specialist provision for communication and interaction needs • Specialist educational setting • Daily opportunities for small group and 1:1 teaching and learning • Where possible, graded access to mainstream learning activities and leisure opportunities 	<ul style="list-style-type: none"> • Curriculum access will be facilitated by using a predictable approach which may involve using visual systems or timetables and reducing language for instruction/information giving • Teaching strategies should consider difficulties with transfer of skills; teaching approach should take account of difficulties in understanding the social rules and expectations of the classroom • Use a range of alternative augmentative communication to support social and functional communication skills to enhance interaction and understanding (e.g. PECS, Makaton, electronic voice output communication aids (VOCA)) • Use of adapted teaching materials and resources to support teaching and learning for those with sensory and/or physical impairment • Enhanced PSHCE/life skills and SRE programmes to ensure skills embedded 	<ul style="list-style-type: none"> • High staffing ratio to support teaching and learning with sustained opportunities for 1:1 support • All staff trained and experienced in working with pupils with autism. • Additional staffing to escort pupils and support at times of crisis and stress • All staff trained and experienced in Team Teach approaches • Consistent staff team experienced in working with students who present with a range of needs because of their autism diagnosis • Access to specialist approaches, equipment and therapeutic services as part of the curriculum <p>Staff working directly with pupils must have knowledge and training in good practice when working with pupils with communication and interaction needs/Autism evidenced using guidance such as the AET standards and competency frameworks with reference to the Autism Good Practice Guidance.</p>

Communication and Interaction – Speech and Language Provision Guidance Statements

S&L Range 1 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>SLCN may be an emerging but not yet clearly identified primary area of need; the pupil has some difficulty with speaking or communication.</p> <p>Pupils will present with some/all of the difficulties below and these will <i>mildly</i> affect curriculum access and social development:</p> <ul style="list-style-type: none"> • Pupil does not have a diagnosis of an autism spectrum disorder made by an appropriate multi-agency team • Speech is understood by familiar adults but has some immaturities, which may impact on social interaction. Speech sound difficulties may impact on literacy difficulties. • Difficulties with listening and attention that affect task engagement and independent learning • Comments and questions indicate difficulties in understanding the main points of discussion, information, explanations and the pupil needs some support with listening and responding • Difficulties in the understanding of language for learning (conceptual language: size, time, shape, position) • Reduced vocabulary range, both expressive and receptive • Pupils may rely on simple phrases with everyday vocabulary • Social interaction could be limited and there may be some difficulty in making and maintaining friendships • Behaviour as an indicator of SLCN: difficulties with independent learning, poor listening and attention, frustration, stress, lack of engagement • Pupils may present with difficulty in talking fluently e.g. adults may observe repeated sounds, words or phrases, if this is consistent, higher levels of need may be present 	<p>School must:</p> <ul style="list-style-type: none"> • Identify evidence that the pupil's language is delayed • Use EYFS profile, Birmingham SEN Toolkits assessment and checklists as a system of identification and monitoring • Ensure the pupil is part of normal school and class assessments • SENDCO and class teacher could be involved in more specific assessments and observations to clarify SLCN as the primary area of need, and the nature of the difficulty • Other assessment tools schools use: Welcomm, Speech/Language Link, Communication Trust Progression Tools, • School to consider whether other professionals need to be involved • Schools could use www.talkingpoint.org.uk to help define if the issues are mild or moderate 	<p>Mainstream classroom with attention paid to position in the classroom and acoustics following the communication friendly classroom model.</p> <ul style="list-style-type: none"> • Flexible pupil groupings; positive peer speech and language models • Groupings reflect ability with modifications made to ensure curriculum access • Opportunity for planned small group activity focusing on language and communication within classroom activities 	<p>School:</p> <ul style="list-style-type: none"> • Whole school understanding of the pupil's individual needs through training such as ICAN Communication Friendly Schools • Literacy tasks may require some modification • Instructions supported by visual and written cues • To support pupils in attending to/understanding information and instructions, adults to use short instructions with everyday vocabulary, with repetition • Flexibility in expectations to follow instructions /record work • Opportunities for developing the understanding and use of language across the curriculum • Opportunities for time limited small group work based on identified need • Planning shows opportunities for language-based activities • Family supports targets at home • Pupil involved in setting and monitoring their own targets 	<p>School:</p> <ul style="list-style-type: none"> • Main provision by class/subject teacher with advice from SENDCO • Additional adults routinely used to support flexible groupings, small group activities and differentiation under the guidance of the teacher • Adults actively support pupils by modifying teacher talk and scaffolding/modelling responses • Adults provide support to enable pupils to listen and respond to longer sequences of information in whole class situation • Adults provide encouragement and support to collaborate with peers in curriculum activities • Adults provide pre and post tuition to secure key and specific vocabulary at the start of a topic <p>Resources:</p> <ul style="list-style-type: none"> • Refer to The Communication Trust What Works for Pupils with SLCN database • Quality First Teaching strategies <p>Interventions such as:</p> <ul style="list-style-type: none"> • Talk across the Curriculum • Talking Partners@primary • Talking Partners@secondary • Colourful Stories • Chatterbox • Word aware • ICT, clicker voice recorder, Talk to Text, Widget, Communicate in Print

S&L Range 2 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>SLCN is identified as the primary area of need; pupil has some difficulty with speaking or communication. Pupil will present with some/all of the difficulties below and these will mildly/moderately affect curriculum access and social development.</p> <ul style="list-style-type: none"> • Speech is usually understood by familiar adults; unfamiliar people may not be able to understand what the child is saying if out of context. • The child's speech may have some immaturities or use of more unusual sounds within their talking, which may impact on social interaction. Speech sound difficulties may impact on the acquisition of literacy. • Difficulties with listening and attention that affect task engagement and independent learning • Comments and questions indicate difficulties in understanding the main points of discussion, information and explanations • Pupil needs some support with listening and responding • Difficulties in the understanding of language for learning (conceptual language: size, time, shape, position) • Reduced vocabulary range, both expressive and receptive • May rely on simple phrases with everyday vocabulary • May rely heavily on non-verbal communication to complete tasks (adult's gestures, copying peers) and this may mask comprehension weaknesses <p>Social interaction could be limited and there may be some difficulty in making and maintaining friendships</p> <p>Behaviour as an indicator of SLCN: difficulties with independent learning, poor listening and attention, frustration, stress, lack of engagement</p> <p>Pupil is likely to present with difficulty in talking fluently e.g. adults may observe repeated sounds, words or phrases more consistently</p>	<p>School must:</p> <ul style="list-style-type: none"> • Identify evidence that the pupil's language is delayed <p>Use EYFS profile, Birmingham SEN Toolkits and checklists as a system of identification and monitoring</p> <p>Ensure the pupil is part of normal school and class assessments</p> <p>Actively monitor behaviour as an indicator of SLCN</p> <p>SENDCO and class teacher should be involved in more specific assessments and observations to clarify SLCN as the primary area of need, and the nature of the difficulty</p> <p>Other assessment tools schools use: Welcomm, Speech/Language Link (Primary), Communication Trust Progression Tools,</p> <p>School to consider whether other professionals need to be involved (e.g. PSS)</p>	<p>Mainstream classroom with attention paid to position in the classroom and acoustics following the communication friendly classroom model.</p> <p>Flexible pupil groupings; positive peer speech and language models</p> <p>Groupings reflect ability with modifications made to ensure curriculum access</p> <p>Small group/individual work to target specific needs</p>	<p>School: Whole school understanding of the pupil's individual needs through training such as ICAN Communication Friendly Schools</p> <p>Instructions supported by visual and written cues</p> <p>To support pupils in attending to / understanding information and instructions, adults to use short instructions with everyday vocabulary, with repetition</p> <p>Flexibility in expectations to follow instructions /record work</p> <p>Opportunities for developing the understanding and use of language across the curriculum</p> <p>Opportunities for time limited small group/individual work based on identified need</p> <p>Planning shows opportunities for language-based activities</p> <p>Family supports targets at home</p> <p>Pupil involved in setting and monitoring their own targets</p> <p>Literacy tasks require regular modification</p>	<p>School: Main provision by class/subject teacher with advice from SENDCO</p> <p>Adults routinely used to support flexible groupings and differentiation under the guidance of the teacher</p> <p>Adults actively support pupils by modifying teacher talk and scaffolding/modelling responses</p> <p>Regular, planned support to listen and respond to longer sequences of information in whole class situation</p> <p>Regular, planned encouragement and support to collaborate with peers in curriculum activities</p> <p>Staff working directly with the pupil should have knowledge and training in good practice for teaching and planning provision for children with SLCN</p> <p>Resources:</p> <p>Refer to The Communication Trust What Works for Pupils with SLCN database</p> <p>QFT strategies</p> <p><i>Interventions such as:</i> Talk across the Curriculum Talking Partners@primary Talking Partners@secondary TalkBoost (I CAN) Early TalkBoost (I CAN) Talking Maths Nurturing Talk Colourful Stories Chatterbox ICT support: Clicker 7 voice recorder, talk to text, communication apps Splingo</p>

				Language Steps Rhodes to language Semantic Links Colourful semantics Word aware Elklan Wellcomm Language for thinking
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S&L Range 3 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>SLCN will be identified as the primary area of need with the nature of the difficulty clarified from observations and assessments by school, specialist education professionals and health professionals.</p> <p>Will present with some/all of the difficulties below and these will <i>moderately</i> affect curriculum access and social development: Persistent delay against age related speech, language and communication</p> <p>Persistent difficulties that do not follow normal developmental patterns (disordered)</p> <p>Speech</p> <p>Speech may not be understood by others where context is unknown.</p> <p>Difficulty in conveying meaning, feelings and needs to others due to speech intelligibility</p> <p>Speech sound difficulties impact on literacy development</p> <p>Speech sound difficulty may lead to limited opportunities to interact with peers</p> <p>May be socially vulnerable May become isolated or frustrated. Phonological awareness (speech sound awareness) difficulties may impact on literacy development.</p> <p>Expressive</p>	<p>As for ranges 1 & 2 plus:</p> <p>Provide evidence of monitoring and identification of pupil needs to support making a referral for assessment and advice from a specialist teacher or S&LT where required.</p> <p>Reviews should consider the evidence base if there is a need to consider specialist resources and provision</p>	<p>Mainstream classroom with attention paid to position in the classroom and acoustics following the communication friendly classroom model.</p> <p>Flexible pupil groupings; positive peer speech and language models</p> <p>Groupings reflect ability with modifications made to ensure curriculum access</p> <p>Regular, focused, time limited small group/individual interventions</p>	<p>As for ranges 1 & 2 plus:</p> <p>Planning identifies inclusion of and provision for individual targets</p> <p>Whole school understanding of the pupil's individual needs through training such as ICAN Communication Friendly Schools</p> <p>Additional steps are taken to engage families and the pupil in achieving their targets</p> <p>Mainstream class predominantly working on modified curriculum tasks Frequent opportunities for time limited small group and individual work based on identified need</p> <p>Attention to position in the classroom and acoustics</p> <p>Tasks and presentation personalised to pupil needs</p> <p>Curriculum access facilitated by a structured approach using visual systems, modification /reduction of language for instructions and information</p> <p>Consideration to the transference and generalisation of skills</p>	<p>School Main provision by class/subject teacher with advice from SENDCO/specialist teacher and/or S&LT</p> <p>Additional adult support informed by differentiated provision planned by the teacher</p> <p>Additional adult support focused on specific individual targets and any specialist teacher or S&LT advice as appropriate</p> <p>Staff working directly with the pupil must have knowledge and training in good practice for teaching and planning provision for children with SLCN</p> <p>Other resources: Refer to The Communication Trust 'What Works for pupils with SLCN' database</p> <p>Interventions: As range 1&2</p>

The pupil may have difficulty speaking in age appropriate sentences and the vocabulary range is reduced. This will also be evident in written work – sometimes children can write well but not speak well.

Talking may not be fluent

May have difficulties in recounting events in a written or spoken narrative

Receptive

Difficulties in accessing the curriculum, following instructions, answering questions, processing verbal information, following everyday conversations

Needs regular and planned additional support and resources

Difficulties with listening and attention that affect task engagement and independent learning

May not be able to focus attention for sustained periods

May appear passive or distracted

Difficulties with sequencing, predicting, and inference within both social and academic contexts. This may impact on behaviour and responses in everyday situations e.g. not understanding the consequences of an action

Social Communication

Difficulties with speech and/or language mean that social situations present challenges resulting in emotional outbursts, anxiety, social isolation and social vulnerability

Difficulties with using and understanding non-verbal communication (NVC) such as facial expressions, tone of voice and gestures

Poor understanding of abstract language and verbal reasoning skills needed for problem solving, inferring and understanding the feelings of others

Anxiety related to lack of understanding of time and inference

S&L Range 4a Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>SLCN will be identified as the primary area of need with the nature of the difficulty clarified from observations and assessments by school, specialist education professionals and health professionals.</p> <p>Will present with some/all of the difficulties as described at Range 3 and these will <i>severely</i> affect curriculum access and social development.</p> <p>Could communicate or benefit from communicating using Augmented and Alternative Communication</p> <p>Some or all aspects of language acquisition are significantly below age expected levels</p> <p>Significant speech sound difficulties, making speech difficult to understand for all listeners when out of context and sometimes where it is known.</p> <p>Must have an identified Speech, Language and /or Communication Delay/Disorder. This could be difficulties in:</p> <p>Understanding and/or using language Speech Sound development Social Interaction</p> <p>More likely to be following a disordered pattern of language development (DLD) Having difficulty with specific grammatical elements and vocabulary. Have difficulty finding words and with use of non-specific vocabulary e.g. 'stuff' or using the wrong words for things. May exhibit dysfluent behaviours as a result of their underlying language disorder. Experience difficulty putting words into a recognisable sentence structure. May need more time to construct sentences. May display misbehaviour or internalise and withdraw as can't make self understood</p> <p>Identification Diagnosed by a Speech and Language Therapist</p>	<p>As for ranges 1 - 3 plus:</p> <p>Provide an appropriately trained teacher or teaching assistant to implement the advice of the SLT</p> <p>Where there is a diagnosis of Language Impairment or Speech Impairment the pupil's individual academic potential should not be underestimated. However, planning must include a significant level of additional adult support and significant personalised differentiation to ensure curriculum access</p> <p>Planning, targets and assessments must address pastoral considerations relevant to the individual pupil's emotional well-being as well as social and functional use of language</p>	<p>Mainstream classroom with attention paid to position in the classroom and acoustics following the communication friendly classroom model.</p> <p>Flexible pupil groupings</p> <p>Positive peer speech and language models</p> <p>Groupings reflect ability with modifications made to ensure curriculum access</p> <p>Daily, focused, time limited small group/individual interventions</p>	<p>As for ranges 1 - 3 plus:</p> <p>Mainstream class predominantly working on modified curriculum tasks</p> <p>Individual targets following advice from SLT/specialist teacher must be incorporated in all activities throughout the school day</p> <p>Whole school understanding of the pupil's individual needs through training such as ICAN Communication Friendly Schools and/or training from SLT service</p> <p>Additional training of mainstream staff to support curriculum modifications</p> <p>Use of staff to implement specific materials, approaches and resources under the direction of the SLT</p> <p>Daily opportunities for individual / small group work based on identified need</p> <p>Provide 1:1 support focused on specific individual targets and any SLT advice as appropriate Pay attention to position in the classroom and acoustics</p> <p>Provide systematic and intensive mediation to facilitate curriculum access</p> <p>Ensure specific structured teaching of vocabulary and concepts, in context</p> <p>Provide support for social communication and functional language use</p>	<p>Main provision by class/subject teacher with advice from SENDCO which must include advice from specialist teacher and/or Speech and Language Therapist</p> <p>Additional adult 1:1 support focused on specific individual targets following SLT advice /programme as appropriate</p> <p>Staff working directly with the pupil must have knowledge and training in good practice for teaching and planning provision for pupils with SLCN</p> <p>Additional training of mainstream staff to support curriculum modifications</p> <p>Additional adult support informed by differentiated provision planned by the teacher to include advice from Speech and Language Therapist</p> <p>Resources: Shape coding, cued articulation, Makaton, Widgit</p>

<p>Pupils with DLD may have associated social communication difficulties</p> <p>Pupils with DLD may have difficulties with literacy associated with writing fluency, reading comprehension and spelling</p> <p>Pupils with DLD may have behavioural, emotional and social difficulties which impact on everyday interactions and learning</p>			<p>Provide specialist support with recording and communication</p> <p>Provide specific programmes to develop independent use of ICT, recording skills and communication through AAC as appropriate</p>	
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S&L Range 4b Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>SLCN is identified as the primary area of need with the nature of the difficulty established and clarified from observations and assessments by school, specialist education professionals and health professionals.</p> <p>Will present with some/all of the difficulties as described at Range 3 and these will <i>severely</i> affect curriculum access and social development to the extent that needs cannot usually be met in a mainstream setting without specialist and intensive support.</p> <p>Some or all aspects of language acquisition are significantly below age expected levels</p> <p>Significant speech sound difficulties making speech difficult to understand out of context</p> <p>Must have a diagnosis of DLD The main categories are:</p> <p>Mixed receptive/expressive language impairment/disorder</p>	<p>As range 4a plus: Provide an appropriately trained teacher or teaching assistant to carry out SLT programmes daily.</p> <p>All curriculum areas are planned in detail to incorporate specialised teaching approaches (e.g. shape coding, cued articulation, makaton) and finely graded assessment.</p> <p>Where there is a diagnosis of Developmental Language Disorder (with or without associated speech impairment) or where there is a severe speech impairment, the pupil's individual academic potential should not be underestimated. However, planning must include a significant level of additional adult support and significant personalised differentiation to ensure curriculum access</p> <p>It must be recognised that language impairment is a persistent, severe and lifelong disability</p> <p>Planning, targets and assessments must address pastoral considerations relevant to the individual pupil (emotional well-</p>	<p>Flexible pupil groupings</p> <p>Positive peer speech and language models Groupings reflect ability with modifications made to ensure curriculum access</p> <p>Will require small group and one-to-one support for speech and language targets across all curriculum areas.</p> <p>There will need to be planned and monitored opportunities for social interaction with adults and peers to develop language.</p> <p>Group teaching of: oro-motor skills, phonological awareness, narrative, social skills etc.</p> <p>Concepts are delivered in language children can access and new learning continually broken down into small, achievable steps</p> <p>Emphasis on teaching language skills – phonic awareness, expressive language, vocabulary, specific grammar, comprehension, repetition of key concepts</p>	<p>As range 4a plus: Small class sizes Daily targeted speech intervention Access to regular speech and language therapy Interventions embedded into curriculum</p>	<p>School Should have a placement with access to specialist teaching and non-teaching support within the classroom and wider setting to facilitate access to the curriculum and social communication</p> <p>These staff will support mainstream staff in planning and delivering appropriate, inclusive and structured interventions and a differentiated curriculum</p> <p>Ensure additional training is available for mainstream staff to support curriculum modifications, e.g. ELKLAN Materials can be used.</p> <p>Resources: Shape coding, cued articulation, Makaton, Widgit</p> <p>Additional supervision will be required for all transitions and unstructured time.</p> <p>Teachers and Support Staff have specialist knowledge in the area of Speech and Language</p> <p>Team teaching with speech and language therapists</p>

<p>Expressive only language impairment/disorder</p> <p>Higher order processing impairment/disorder Severe Speech Impairment</p> <p>Identification</p> <p>Diagnosed by a Speech and Language Therapist</p> <p>Pupils with DLD often have associated social communication difficulties evident in rigid and repetitive behaviours</p>	<p>being) as well as social and functional use of language</p>			<p>Specific speech and language programmes carried out with individual children by therapists and school staff</p>
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Communication and Interaction - PfA Outcomes and Provision

	Employability	Independent Living	Community Inclusion	Health
Reception to Y2 (5-7 years)	<p>Child will have the communication and interaction skills required to meet with adults from a range of careers and obtain information, appropriate to the child's age and developmental level, in relation to different jobs to enable them to begin to think about what they may like to do in the future.</p> <p>Child will engage with real world visits (fire stations, farms, etc.) and be able to communicate with adults present to obtain information relating to any questions they may have.</p>	<p>Child will have the communication and interaction skills required to enable them, with adult supervision support and modelling, to ask for things that they would like (ordering juice in a coffee shop, asking for a toy or food item at a shop counter etc.)</p>	<p>Child will be able to interact and communicate appropriately with peers to enable participation in teams and games, after school clubs and weekend activities.</p> <p>Child will have the communication and interaction skills required to begin to develop friendships with peers.</p>	<p>Child will have the language, communication skills required to gain the attention of an adult at times when they feel unwell in order to access appropriate medical care as required.</p> <p>Child will have the language and communication skills required to enable them to articulate choices relating to diet and physical exercise.</p>
Y3 to Y6 (8-11 years)	<p>Child will be able to articulate their ideas in relation to different career and education options and will have the communication skills required to ask questions to support them in moving towards making choices.</p> <p>Child will be able to engage with career related role models/sessions on different career paths from visitors in school to further increase their understanding of potential options/areas of interest.</p>	<p>Child will have the communication and interaction skills required to enable them to ask for things that they would like, to pay for things in a shop or school lunch hall, as step toward independent living.</p> <p>Child will have the communication skills required to facilitate the development of age-related independent living skills to include cookery, travel time, money, being able to ask questions and seek support/guidance where required.</p>	<p>Child will have the communication and interaction skills required to develop and maintain friendships with peers.</p> <p>Child will be able to interact and communicate appropriately with peers to enable participation in team games, youth and after-school clubs.</p> <p>Child will have the language and communication skills required to outline any issues relating to bullying or safety online to an adult.</p>	<p>Child will have the language and communication skills required to explain the issue to an adult at times when they are hurt or feel unwell in order to access appropriate medical care as required.</p> <p>Child will have the language and communication skills required to enable them to articulate choices relating to diet and physical exercise.</p>
Y7 to Y11 (11-16 years)	<p>Child will be able to engage with structured careers advisory sessions, communicating their thoughts and ideas relating to potential career choices and having the interaction skills to talk with adults to obtain additional information/guidance as required to enable them to make informed choices.</p> <p>Child will have the communication and interaction skills (written or verbal) required to facilitate the building of a personal/vocational profile within careers sessions, moving towards building a CV for application for further education/training or employment.</p> <p>Child will have the communication and interaction skills required to function within a workplace environment, either with respect to work experience/voluntary work or part time employment to enable them to gain work related experience and explain areas of interest.</p>	<p>Child will have the communication skills required to facilitate the development of age-related independent living skills to include cookery, travel time, money, being able to ask questions and seek support/guidance where required.</p> <p>Child will have the communication and interaction skills required to enable them to socialise with peers (unsupervised) within the community and to access activities within the local community in accordance with their preferences.</p>	<p>Child will have the language, communication and interaction skills to develop and maintain friendships with peers and to integrate successfully into a range of social groupings and situations.</p> <p>Child will be able to interact appropriately via social media, online games and within the online community to maintain personal safety and lessen potential vulnerability.</p>	<p>Child will have the language and communication skills required to ask questions in order to obtain additional information relating to sex education managing more complex health needs, risks related to drugs and alcohol and support for mental health and wellbeing as required.</p> <p>Child will be able to communicate, with adult support/prompting, any health needs or concerns to a GP to obtain appropriate medical care or support as required.</p>
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the School Age Ranges Guidance: Communication and Interaction, SLCN and Autism.			

Social, Emotional and Mental Health Provision Guidance Statements

SEMH Range 1 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Pupil experiences low level / low frequency difficulties with social and emotional difficulties which mildly affect curriculum access.</p> <p>Pupil may have difficulties with some or all of the following:</p> <ul style="list-style-type: none"> • Following classroom routines • Complying with adult direction • Responding appropriately to social situations • Forming and sustaining relationships with peers • Immature social/ emotional skills e.g. difficulties with turn-taking, reciprocal attention, sharing resources etc. • Some social isolation e.g. tends to play alone • Low-level anxiety in social situations • Feeling sad or down. 	<p>Assessment will continue as part of normal school and class assessments.</p> <ul style="list-style-type: none"> • Monitoring of the pupil's response to feedback, change in routine or environment • Assessment for learning opportunities can be used to record observations and assessment of behaviour/anxiety levels • Consideration of the pupil's learning style, including active engagement activities. • Information from the pupil regarding their views using person-centred approaches • Observations by Teacher/class Teaching Assistant /Key Stage Coordinator • School is proactive in identifying individual needs and monitors that action is taken • SENDCO/ Wellbeing Lead may initiate more specific assessments and observations if required • SEMH/Wellbeing training for all staff. 	<p>The teacher is held to account for the learning and progress of the pupil in the mainstream class.</p> <ul style="list-style-type: none"> • Quality First Teaching meets the needs of all pupil including SEMH • Flexible teaching groups • Some differentiation of activities and materials • Differentiated questioning • Use of visual, auditory and kinaesthetic approaches • Awareness that a pupil may need more time to complete tasks and that equality of access may mean that they need to do some things differently (chunking) • Resources and displays that support independence • Routine feedback to pupils • Environmental consideration to classroom organisation, seating and group dynamics • Transparent system of class/ school rewards and sanctions • Rules and expectations consistent across staff • Use of different teaching styles • Clear routines e.g. for transitions • Nurturing classroom approaches offering pupil opportunities to take on responsibilities e.g. class monitors, prefects, school council reps 	<p>The school can demonstrate an inclusive ethos that supports the learning and wellbeing of all children and young people.</p> <ul style="list-style-type: none"> • Whole school ethos is based on relational approaches and strategies to supporting SEMH and behaviour management. • Positive whole school attendance ethos • The wider curriculum promotes positive examples of diversity • Well-planned and stimulating PSHEE/ Citizenship curriculum, differentiated to needs of cohort/class • Anti-bullying is routinely addressed and pupils are confident in reporting incidents • Whole class materials and interventions to promote wellbeing available for staff use in the classroom • Provision of planned opportunities to learn and practice social and emotional skills during structured activities • Restorative Practice approaches • Educational visits are planned well in advance and take into account the needs of all pupils • Close links with Parents/Carers 	<p>The pupil's SEMH needs can be managed in a mainstream class within an inclusive setting, with differentiation of task and teaching style:</p> <ul style="list-style-type: none"> • Regularly updated policies for SEND, Behaviour and Anti-bullying • Regularly monitored inclusion policies are implemented consistently and underpin practice • Stimulating classroom and playground environments • Access to 'quiet areas' in school • The school employs additional adults to support the needs of all pupils e.g. Midday Supervisory Assistants (MSAs), Family Support Worker • All staff have received training in addressing SEMH needs and understand how to support pupils effectively • Staff are familiar with current DfE guidance • Staff access LA training to keep informed of meeting the needs of pupil • Designated time is allocated to TAs for planning and liaison with teachers • Use of playground buddies, peer mediators, peer mentors • Lunchtime clubs • Social and Emotional Learning curriculum • Staff access support e.g. via solution-focused conversations/supervision • Time to establish liaison with parents/ carers in line with school procedures e.g. parent consultation evenings • Staff 'meet and greet' their pupils daily • Structured system in place to support internal transitions • Early years learning journals at foundation stage

SEMH Range 2 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>Pupil experiences low / medium level ongoing social and emotional difficulties which are mild and moderate. These may affect curriculum access.</p> <ul style="list-style-type: none"> • Pupil may have a preference to follow own agenda • Difficulties following adult direction e.g. regular incidences of non-compliance/ uncooperative behaviour • Difficulties with self-regulating e.g. emotional outbursts, hyperactive, impulsivity, mood swings, feeling anxious/worried • Difficulties with appropriate learning behaviour e.g. sustaining attention and concentration, motivation to engage with work-related tasks • Low self-esteem and low general resilience • May experience difficulties responding to social situations, leading to social isolation from peers e.g. may be fearful or anxious in new situations • Hiding under furniture. • Immature social skills affecting ability to establish and maintain friendships • Reliance on adults for reassurance • Difficulties forming relationships with adults. • Confused thinking. • Problems sleeping. 	<p>As range 1 plus</p> <ul style="list-style-type: none"> • More detailed and targeted observation and assessment relating to SEND Support Plan formulation and intervention choice • Observations by SENDCO/Wellbeing Lead • Pupil involved in setting and monitoring their own SMART targets for individual provision map and review • Parents/carers involved regularly to support targets at home • Behaviour records analysed to consider triggers and patterns • 'Assess/ Plan/ Do/ Review' 'Cycle of Behavioural Change' used to give a context to behaviour • Close monitoring to identify 'hot spots' 	<ul style="list-style-type: none"> • Information about pupils needs/difficulties is shared with relevant staff (SEND support plan and meetings) • Sharing of advice on successful strategies and targets e.g. use of visual supports, developing organisational skills • Classroom teaching assistance is targeted towards support for specific tasks/settings, based on agreed SMART targets • Personalised reward systems covering targeted lessons/ activities • Careful consideration of group dynamics within class • Careful consideration of preferred learning style and motivational levers for the pupil when differentiating • Opportunities for small group work based on identified need • Time-limited intervention groups • Opportunities for creative play activities, drama etc. 	<ul style="list-style-type: none"> • Access to small group support e.g. Circle of Friends, Friends for Life. • Group work to be planned and tailored to meet identified need and to include good role models • Teaching effective problem-solving skills • Individual or small group support for emotional literacy e.g. recognising emotions • Learning tasks differentiated by task and outcome to meet individual needs • Preparation for changes to activities/routines/ staffing • Supervision when moving between locations/ classrooms • Pupil encouraged to participate in extracurricular activities • Educational visits planned well in advance and contingency plans in place to meet the needs of the pupil, should they be needed 	<p>The child or young person's SEMH needs require flexible use of additional support from within school resources:</p> <ul style="list-style-type: none"> • Support/advice from SENDCO/ Wellbeing Lead • Personalised programme with SMART targets reviewed and updated regularly • Additional adults routinely used to support flexible groupings • Access to targeted small group work with class Teaching Assistant • Access to intervention group work with Teaching Assistant, Learning Mentor, ELSA (Emotional Literacy Support Assistant) or Thrive trained staff or equivalent, where appropriate. • Additional adults (Teaching Assistant) for focused support during unstructured times e.g. lunchtime supervision/ targeted extra-curricular activities • Access to a quiet area for 'chill-out' time • Access to visual cues/ timetable if needed • Access to in-school support base (e.g. Nurture Group) if available • Staff access targeted LA training • Consultation with support services • Home-school communication book • Time for scheduled meetings with parents / carers on a regular basis • Self-regulation strategies such wobble cushion, stress balls and tangles

SEMH Range 3 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The pupil experiences frequent and persistent difficulties with social and emotional difficulties which will significantly affect curriculum access.</p> <ul style="list-style-type: none"> • Incidences of non-compliant and uncooperative behaviour e.g. refusal to work, disrupting the learning of others • Difficulties self-regulating e.g. frequent emotional or aggressive outbursts, sexualised language, excessive periods of anxiety, mood swings, unpredictable behaviour, which affect relationships. • Challenging behaviour requiring a range of therapeutic interventions or referral to specialist support services (Child and Adolescent Mental Health Service, Youth Offending Service) • Inappropriate responses to fears and worries. • Significant self-esteem issues affecting relationships and behaviour patterns ('acting in' or 'acting out') • Low levels of resilience when faced with adversity. • Behaviour causing a barrier to learning e.g. pupil disengaging, may destroy own / others' work, use work avoidance strategies, concentration very limited • At risk of low level offending or anti-social behaviour. • Socialising with peers and adults e.g. lack of empathy, victim or perpetrator of bullying • May show low mood or refuse to communicate for periods of time • Difficulties forming and sustaining quality relationships with adults. • Risk of isolation or becoming socially vulnerable. • Struggling with bereavement issues, feelings of guilt. <p>The pupil's SEMH needs may co-exist with other secondary needs.</p>	<p>Support plan with asses-plan-do-review cycles implemented and co-constructed with YP/parents/carers Outcomes agreed and monitored with pupil and parents/carers.</p> <ul style="list-style-type: none"> • Consideration of Family Early Help Assessment • Consider further specialist assessment • 'Round Robins' to relevant staff to gain overview of behaviour to inform planning • Pastoral/Teaching Assistants/SENDCO/Wellbeing Lead are routinely included in planning to ensure their input is effective • Behaviour records updated daily and analysed to consider frequency, duration, triggers/patterns etc. in order to plan appropriate strategies • Consultation and assessment with Educational Psychologist. Assessment of any additional needs e.g., relating to learning and language skills is considered. • Proactive assessments of potentially tricky situations to inform adaptations to learning environment • Careful planning and review of needs at transition, including effective liaison e.g. starting school, transfer to secondary or post-16 provision 	<ul style="list-style-type: none"> • Identified daily support to teach social skills and address targets and outcomes on SEND Support Plan throughout day • Use of key-working approaches to ensure the pupil has a trusted adult to offer support during vulnerable times • Personalised reward systems known to all staff in school who have contact with the pupil, implemented consistently across the curriculum • Regular/daily small group teaching of social and emotional skills • Individualised support to implement recommendations from support services • Visual systems in place: prompt cards, behaviour plans, risk assessment, diaries <p>School should have an appropriately trained & supervised Mental Health Support Team or Emotional Well-Being support Practitioners who are able to deliver time-limited evidence informed intervention programmes aimed at addressing specific needs e.g. therapeutic stories, Friends for Life. C/YP spends regular quality time with a 'Key Adult' who employs relational approaches to discuss any issues.</p>	<ul style="list-style-type: none"> • Teaching style adapted to suit pupil's learning style e.g. level/pace/amount of teacher talk reduced, access to practical activities • Personalised timetable introduced in negotiation with the pupil, parents/ carers and staff. This may include temporary withdrawal from some activities e.g. assemblies, specific non-core lessons. <p>Curriculum should be modified and/or differentiated to enable a strong emphasis on developing social & emotional regulation</p> <ul style="list-style-type: none"> • Alternative curriculum opportunities at KS4 e.g. vocational/college/work placements • Time-limited intervention programmes with staff who have knowledge and skills to address specific needs, may include withdrawal for individual programmes (e.g. understanding anger, therapeutic stories) or targeted group work (e.g. FRIENDS) • More formal meetings/conferences using Restorative Practices, to include parents/carers • Educational visits planned well in advance and risk assessments in place as appropriate and shared with key staff 	<p>The pupil is struggling to cope with aspects of his/her local mainstream school, requiring increasing levels of individual additional support from within school resources and a multi-agency approach:</p> <ul style="list-style-type: none"> • School is offering provision that is additional to and different from that of peers • School feel direct involvement of support services would be beneficial • Access to 1:1 support for re-tracking, mentoring, motivational approaches etc. • Additional individual support for tricky situations and 'hotspots', in line with risk assessments • Access to small group support outside mainstream classes <p>Small group teaching areas available to deliver planned programmes of support that promote emotional regulation and the development of social engagement skills.</p> <p>Space available for C/YP to de-escalate following episodes of emotional dysregulation</p> <ul style="list-style-type: none"> • Sustained access to intervention group work with Teaching Assistant, Learning Mentor, ELSA (Emotional Literacy Support Assistant) or Thrived trained or equivalent staff where appropriate • Personalised timetable providing access to a Teaching Assistant / mentor staff for up to 12.5 hours per week • Formal behaviour monitoring systems to log and analyse incidents daily in order to review and modify strategies

			<p>SEN Support Plan/IBP/pastoral plan identifies and outlines support required to teach social & emotional skills in order to meet short term targets. Progress should be tracked using appropriate social/emotional scales. External services undertake assessments, support the monitoring of progress & provide advice.</p> <ul style="list-style-type: none"> • 'Time-out' facilities • Specialist Staff Training (e.g. Positive Handling programmes /Team Teach). • Advice from support services e.g. Forward Thinking Birmingham, Social Care, Educational Psychologist, School, Youth Services • Allocation of appropriate space for professionals to work with the pupil, taking into account safeguarding issues • Multi-agency support to plan and review interventions • Access to time-limited short- term interventions in Alternative Hubs (not PRU) • Signposting parents/carers to parenting courses or offering access to drop-ins • Home-school communication book • Time for formal meetings with parents on a regular basis • Weekly mindfulness/individual wellbeing sessions • Sensory processing approaches <p>Minimal off-site therapeutic intervention may be required.</p> <p>Accesses 'Early Help' support.</p>
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SEMH Range 4a Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The pupil experiences frequent and persistent difficulties with social, emotional and mental health difficulties which will significantly affect curriculum access.</p> <ul style="list-style-type: none"> • Challenging behaviour requiring a continuous range of therapeutic interventions or referral to specialist support services (e.g., Forward Thinking Birmingham, Youth Offending Service) • Incidences of non-compliant and uncooperative behaviour e.g. refusal to work, disrupting the learning of others • Self-regulating e.g. frequent emotional or aggressive outbursts, sexualised language, anxiety, mood swings, unpredictable behaviour, which affect relationships • Significant self-esteem issues affecting relationships and behaviour patterns ('acting in' or 'acting out') • Emerging concerns around mental health e.g. self-harm, irrational fears, risk-taking, and substance misuse • Low levels of resilience when faced with adversity • Behaviour causing a barrier to learning e.g. pupil disengaging, may destroy own / others' work, may use work avoidance strategies, concentration very limited • Change in attendance patterns that requires in school interventions. • Issues with socialising with peers and adults e.g. lack of empathy, victim or perpetrator of bullying • May show low mood or refuse to communicate for periods of time • Risk of isolation, exploitation or becoming socially vulnerable • Inability to cope with day to day problems or stress. • Significant tiredness. <p>The pupil's SEMH needs may co-exist with other secondary needs.</p>	<ul style="list-style-type: none"> • Specialist assessments e.g., by Educational Psychologist, Primary Mental Health Worker, Youth Offending Service • Involvement of educational and non-educational professionals as part of assess, plan, do, review cycle • Risk assessment to identify dangers and need for additional support • Use of SEMH profiles for measuring impact of interventions • Completion of 'pupil passport' for Behaviour & Attendance Partnership if 'managed move' or Pupil Referral Unit place needed • Personalised transition planning is prioritised (e.g. Rec/Y1, Y6/Y7, Y9, Y11/ post-16). This will include a transition plan in Y9-14, updated on a regular basis 	<ul style="list-style-type: none"> • The class/subject teacher remains accountable for the progress of the pupil within the mainstream class • Identified individual support across the curriculum in an inclusive mainstream setting. • Daily teaching of social skills to address social and emotional targets and outcomes on support plan • Use of key-working approaches to ensure the pupil has a trusted adult to offer support/withdrawal during vulnerable times • Personalised reward systems known to all staff in school who have contact with the pupil, implemented consistently across the curriculum • Time-limited intervention programmes with familiar staff who have knowledge, skills and experience to address pupil's specific needs; may include withdrawal • Individualised support to implement recommendations from relevant professionals 	<ul style="list-style-type: none"> • Teaching focusing on both learning and social-emotional curriculum / outcomes throughout the school day • Targets informed by specialist assessment • Regular/daily small group teaching of social emotional and behaviour skills • Teaching style and tasks are adapted to suit the pupils' learning style e.g. level/pace/amount of teacher talk reduced, access to practical activities • Personalised timetable introduced in negotiation with pupil, parents and staff. This may include temporary withdrawal from some activities. • Alternative curriculum opportunities at KS4 e.g. APs/vocational/college/ work placements • Formal meetings/ conferences using Restorative Practices, to include parents/carers • Educational visits planned well in advance and risk assessments in place, key staff have rehearsed possible scenarios • Support through solution-focused approaches, for staff working with the pupil • Where the pupil is working below age-related expectations, personalised literacy and numeracy programmes will be required to address gaps in learning associated with SEMH needs • Consideration to access arrangements for internal and external examinations 	<p>The pupil is struggling to cope in a local mainstream setting, requiring considerable individualised support / resources above the delegated SEN budget. A multi-agency approach is needed.</p> <ul style="list-style-type: none"> • Wellbeing Lead and/or SENDCO provides support to Teacher and Teaching Assistants and takes responsibility for arranging appropriate CPD and quality assuring the learning experience • Access to 1:1 support within school for re-tracking, mentoring/ coaching, motivational approaches, understanding anger etc. • Additional individual support in line with risk assessments, incl. unstructured times • Access to small group support outside mainstream classes • Personalised timetable providing access to a suitably trained Teaching Assistant / mentor • Formal behaviour monitoring systems to log and analyse incidents daily in order to review and modify strategies • Time to discuss, develop and review individual reward systems and report cards • Time-out facilities • Specialist Staff Training (e.g. Positive Handling programmes/ Team Teach) • Direct involvement from support services e.g. Educational Psychologist in reviewing progress • Therapeutic intervention e.g. family therapy/ counselling/ play therapy/ art therapy if appropriate • Non-educational input e.g. YOS, and Keyworkers from the Local Area Teams to re-engage in education / training • Multi-agency support to plan and review interventions • Time and appropriate space for joint planning with pupil, parents/ carers, staff and other agencies to facilitate 'Team Around the Family' (TAF) approach • Additional 'off-site' provision may be required to supplement and enrich school-based learning e.g. vocational/practical or college/work placements within timetable • Support for parents/carers through access to targeted evidence-based parenting programmes

SEMH Range 4b Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The pupil experiences significant frequent and persistent social and emotional difficulties which will severely affect curriculum access. These difficulties require multi-agency support.</p> <ul style="list-style-type: none"> • Daily incidences of non-compliant and uncooperative behaviour which are long-lasting and frequent e.g. refusals to work, defiance, leaving classroom/school site on a regular basis • Behaviour causing a significant barrier to learning e.g. pupil disengaging, destroying own / others' work, work avoidance strategies, unable to show level of concentration • Difficulties socialising with peers and adults e.g. lack of empathy, victim or perpetrator of bullying • Increased risk exploitation, radicalisation, isolation or becoming socially vulnerable • Increasing concerns around mental health e.g. self-harm, irrational fears, risk-taking, and substance misuse • Changes in eating habits. • Poor personal hygiene. • Experiences phobias. • Difficulties with self-regulating e.g. intense emotional or aggressive outbursts / uninhibited / unpredictable outbursts • Increasing concerns around mental health e.g. self-harm, irrational fears, risk-taking, and substance misuse • The pupil does not have the social or emotional skills needed to cope in a mainstream environment without adult support for a significant proportion of the school day. 	<ul style="list-style-type: none"> • Consider specialist assessments • Use of SEMH profiles and resources for measuring impact of interventions • May consider referral for an Education, Health and Care Needs assessment if appropriate • Personalised transition planning is prioritised (e.g. Rec/Y1, Y6/Y7, Y9, Y11/ post-16). This will include a transition plan in Y9-14, updated on a regular basis 	<ul style="list-style-type: none"> • Time-limited targeted intervention programmes with familiar staff who have knowledge, skills and experience to address pupil specific needs, which may include withdrawal • Individualised support to implement recommendations from relevant professional • Specialist provision in mainstream may be appropriate for part of the week 	<ul style="list-style-type: none"> • Formal meetings/ conferences using Restorative Practices, to include Parents/Carers • Personalised curriculum – Curriculum should be significantly modified and differentiated with a priority emphasis on developing social engagement and emotional regulation skills. pupil may be disapplied from some aspects of the curriculum. • Daily access to staff with experience and training in meeting needs of SEMH pupils • Educational visits planned well in advance and risk assessments in place, key staff have rehearsed possible scenarios • Support through solution-focused approaches, for staff working with the pupil • Where the pupil is working below age-related expectations, personalised literacy and numeracy programmes will be required to address gaps in learning associated with SEMH needs • Consideration of access arrangements for internal and external examinations • Social engagement and emotional regulation skills are taught daily to address targets on the SEN Support Provision Plan. 	<ul style="list-style-type: none"> • Time to discuss, develop and review individual reward systems and report cards • Time-out facilities <p>A high level of adult support may be required across the curriculum. A trusted adult should be regularly available to provide support / withdrawal during vulnerable times. Education, health and care professionals should be working collaboratively with parents & pastoral staff in schools who have an understanding of mental health issues & how to address them.</p> <p>A flexible deployment of resources to enable access to small group enhanced SEMH provision for a proportion (e.g. 50%) of each school day for up to 12 - 18 months. This enhanced provision provides planned, frequent and evaluated intervention programmes (e.g. Theraplay) delivered by staff who are trained & skilled to address specific needs. The C/Y/P is supported by trusted staff in mainstream classes for the remainder of the day.</p> <ul style="list-style-type: none"> • Specialist Staff Training (e.g. Positive Handling programmes/ Team Teach) • Direct involvement from support services e.g. Educational Psychologist in reviewing progress • Therapeutic intervention e.g. family therapy/ counselling/ play therapy/ art therapy if appropriate • Non-educational input e.g. Youth Offending Service, and Keyworkers from the Local Area Teams to re-engage in education / training • Multi-agency support to plan and review interventions • Time and appropriate space for joint planning with the pupil, parents/ carers, staff and other agencies to facilitate 'Team Around the Family' approach • Additional 'off-site' provision may be required to supplement and enrich school-based learning e.g. vocational/practical or college/work placements within timetable • Support for parents/carers through access to targeted evidence-based parenting programmes

SEMH Range 5a Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Intervention	Resources and Staffing
<p>The pupil experiences significant complex, frequent and persistent SEMH needs with an accumulation of layered needs, which could include mental health, relationships, learning, communication and sensory. This includes:</p> <ul style="list-style-type: none"> • Lack of resilience when faced with challenge or criticism • Can be verbally or physically aggressive. • Levels of aggression pose serious risk to self and others. • High levels of anxiety affecting daily functioning, thoughts of self-harm. • Constant hyper-vigilance, severe mood swings and panic attacks. • Behaviour causing significant barrier to learning e.g. destroying own / others' work, deteriorating/anti-social relationships with peers and adults, lack of empathy, remorse, use of violence. • Poor attendance, requiring some level of additional external intervention to in school. • Some behaviours beyond parent/carer control. • May hurt others, self or animals. • Is reliant on adult to remain on task 	<ul style="list-style-type: none"> • Specialist assessments ongoing e.g. Educational Psychologist, Forward Thinking Birmingham • Long term involvement of educational and non-educational professionals as part of Education Health and Care Needs assessment and review process • Multi-agency assessments indicate that needs are highly complex and require a very high level of support – formal diagnosis pathway to be considered/identified. • Risk assessment to consider risks to self and others • Personalised transition planning is prioritised (e.g. Y6/Y7, Y9, Y11/post-16). This will include a transition plan in Y9-14, updated on a regular basis. 	<ul style="list-style-type: none"> • Identified highly skilled individual support across the curriculum • Daily teaching of social skills to address SEMH targets and outcomes within SEND support plans or EHCP if applicable • Use of key-working approaches to ensure the pupil has a trusted adult to offer support/withdrawal during vulnerable times • Personalised reward systems known to all staff in school who have contact with the pupil, implemented consistently across the curriculum • Individualised support to implement recommendations from relevant professionals • Time-limited intervention programmes with familiar staff who have knowledge, skills and experience to address the pupil's specific needs, to include withdrawal for personalised support 	<ul style="list-style-type: none"> • Daily small group teaching of social skills and personalised PHSE programme e.g. risky behaviour, Sex and Relationships Education, life skills • Teaching style/tasks are highly differentiated to suit the pupil's learning style • Personalised pathway is a priority to re-engage with education • Alternative curriculum opportunities at KS4 e.g. APs/vocational/college/ work placements • Where pupil is working below age-related expectations, personalised literacy and numeracy programmes will be required to address gaps in learning associated with SEMH needs • Consideration to access arrangements for internal and external examinations • More formal meetings/ conferences using Restorative Practices, to include parents/carers • Support through solution-focused approaches and regular supervision for staff working with the pupil 	<ul style="list-style-type: none"> • Pupil requires specialist environment <p>Consideration to be given to an environment that ensures the safety of the individual and others that ensures the safe emotional well-being & the development of the individual. Full-time access to small class groups with high teacher-C/YP ratio and high levels of support to access the curriculum.</p> <p>Access to appropriate specialist support. Intensive & frequent use of a high level of trusted adult support during vulnerable times. Adults providing pastoral support should have a sound understanding of mental health issues and how to address them. Continuous teaching of social and emotional regulation skills across the curriculum to address EHCP outcomes.</p> <p>Regular involvement from multi-agency teams of professionals (incl. education, health & care) where appropriate. Identified specialist skilled individual support across the curriculum. May require planned programmes of intensive therapeutic intervention from healthcare professionals. Accesses 'Early Help' support.</p> <ul style="list-style-type: none"> • The pupil's SEMH needs present a considerable challenge to highly skilled staff • Access to 1:1 support from experienced staff for mentoring/ coaching, motivational interviewing, conflict resolution, self-harm etc.

				<ul style="list-style-type: none"> • Additional individual support in line with risk assessments • Class sizes to be small enough to allow teaching and support to be differentiated and personalised • Personalised timetable providing access to Teaching Assistant support as specified in support plans or EHCP if applicable • Formal behaviour monitoring systems to log and analyse incidents daily in order to review and modify strategies • Time to discuss, develop and review individual reward systems and sanctions • Specialist Staff Training including Positive Handling programmes / Team Teach – development of risk management plans. • Direct involvement from support services e.g. Educational Psychologist • Therapeutic intervention e.g. counselling/family therapy/ play therapy/art therapy if available • Non-educational input e.g. Keyworkers from the Local Area Teams to re-engage in education or training, helping the pupil to plan for the future • Involvement from voluntary sector to address needs re substance misuse, self-harm, sexual exploitation
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SEMH Range 5b Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The pupil experiences severe and increasing behavioural difficulties often compounded by additional needs and requiring provision outside the mainstream environment.</p> <p>The pupil's behaviour is worrying, unpredictable and/ or severely</p>	<ul style="list-style-type: none"> • Multi-agency assessments indicate that needs can only be met in specialist placement 	<ul style="list-style-type: none"> • The pupil is accessing specialist provision where appropriate • Small class groups with high teacher: pupil ratio and high levels of support to access curriculum 	<ul style="list-style-type: none"> • Specialist teaching focusing on both learning and social-emotional curriculum / outcomes throughout the school day • Targets and outcomes informed by Annual Review/EHCP 	<ul style="list-style-type: none"> • Resources required from specialist provision, which may include time-limited personalised tuition • Specialist support, alongside a multi-agency approach is essential

<p>disrupting the learning of self and others.</p> <ul style="list-style-type: none"> • Extreme risk-taking behaviours e.g. arson, self-harm, sexualised behaviour, criminal activity, use of weapons, substance misuse • Verbally and physically aggressive • Increased risk of exclusion from Alternative Provision settings or intervention settings. • Levels of aggression pose extreme risk to self and others. • Provocative in appearance and behaviour • Sexualised language and behaviours • Majority of displayed behaviours beyond parent/carer control. • Totally reliant on adult support to stay on task • Slow to develop age appropriate self-care skills due to level of maturity or degree of learning difficulties • No sense of belonging to positive familiar relationships/positive role models. • Disengagement and isolation from school. • Often missing from home or school. <p>Physical and medical needs which require regular review</p>				
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SEMH Range 6a Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The pupil experiences continuing profound and increasing SEMH difficulties, often compounded by additional needs and requiring continued provision outside the mainstream environment, including:</p> <ul style="list-style-type: none"> • Significant challenging behaviour requiring a range of therapeutic interventions or referral to specialist support services (Forward Thinking Birmingham, Youth Offending Service) • Unable to manage self in group without dedicated support • Subject to neglect, basic needs unmet or preoccupied with hunger, illness, lack of sleep, acute anxiety, fear, isolation, bullying, harassment, controlling behaviours • Involved in substance misuse either as a user or exploited into distribution/selling • Poor attendance, requiring high levels of additional external intervention to in school. • All displayed behaviours beyond parent/carer control. • Refusal to engage, extreme abuse towards staff and peers, disengaged, wilfully disruptive • Significant damage to property • Requires targeted teaching in order to access learning in dedicated space away from others • Health and safety risk to self and others due to increased levels of agitation • Sexualised language and behaviour; identified at risk of Child Sexual Exploitation • Constantly missing from home or school. • Medical conditions, such as asthma or epilepsy, that may require particular support from specialist services • Complex needs identified • Detachment from reality (delusions) paranoia and hallucinations. 	<ul style="list-style-type: none"> • Specialist assessments e.g. by Educational Psychologist, Child Adolescent Mental Health Service, Forensic Psychology, Youth Offending Service, etc. • Long term involvement of educational and non-educational professionals as part of statutory assessment, EHCP and Annual Review processes • Ensure that the Outcomes in the EHCP are addressed when planning the individuals' curriculum and support • Regular risk assessments to consider risks to self and others • Target pupil social skills, empathy and managing behaviour whilst staying safe in school and community • All professionals agree that the pupil needs can only be met with additional resources in specialist placement • Personalised transition planning is prioritised (e.g. Y6/Y7, Y9, Y11/post-16). This will include a transition plan in Y9-14, updated on a regular basis 	<ul style="list-style-type: none"> • The pupil is on roll of specialist provision • School placement may be fragile • Identified highly skilled individual support required throughout the school day • Despite small class groups, with high teacher: pupil ratios and high levels of support to access curriculum, withdrawal of the pupil on a regular basis still needed to ensure safety of the pupil and others • Use of key-working approaches to ensure the pupil has a trusted adult to offer support/withdrawal during vulnerable times • Personalised reward systems known to all staff in school who have contact with the pupil, implemented consistently across the curriculum • Personally tailored time-limited intervention programmes with staff who have knowledge, skills and experience to address the pupil's specific needs 	<ul style="list-style-type: none"> • All of the previous • Requires additional /enhanced levels of highly skilled staff to re-engage and motivate the pupil 	<ul style="list-style-type: none"> • The pupil is struggling to cope in specialist provision, despite specialist support and high staffing ratios • The pupil requires a higher ratio of staff support within specialist provision due to high level of risk and vulnerability presented by the pupil • Staff may need additional solution-focused supervision to increase resilience • Additional resources are required to avoid the need to seek an out of area/residential placement • The pupil may be returning from an out of area specialist placement • Small class groups with high teacher: pupil ratio and high levels of support to access curriculum

Range 6b Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>The pupil experiences complex, frequent and persistent SEMH needs.</p> <ul style="list-style-type: none"> The pupil's behaviour is unpredictable and dangerous, with intense episodes of emotional and/or challenging behaviour, high levels of anxiety making daily life extremely difficult and severely disrupting the learning of self and others SEMH needs may be compounded by co-existing difficulties The pupil is extremely vulnerable and there are safeguarding issues to consider due to acute levels of mental health concerns and increased risk-taking behaviours or 'sabotage' of situations/placements Self-harm and/or suicide ideation Evidence of depression, OCD, eating disorders such as anorexia. Insomnia. <p>A multi-agency approach, including educational and non-educational professionals, is essential</p>	<p>EHCP is complete and pupil has been assessed as needing enhanced specialist provision</p> <p>Assessment will be an ongoing process to determine progress in learning, and also:</p> <ul style="list-style-type: none"> Development of social skills, empathy, managing own behaviour and emotions, staying safe in school and in the community Involvement from a range of specialist professionals in place, such as Forward Thinking Birmingham, Educational Psychologist, Youth Offending Service Multi-agency work continues, and continual assessment to feed into the cycle of annual reviews <p>Planning</p> <ul style="list-style-type: none"> EHCP and appropriate short-term targets Risk assessment will describe procedures to keep safe the pupil, other staff and pupils, and property. <p>There will be an assessment of the risk of absconding and procedures described to manage such an eventuality</p> <ul style="list-style-type: none"> Planning meetings will include parents/carers, and are multi agency 	<ul style="list-style-type: none"> Pupil is on roll at special school Pupil offered one to one support from an adult for some of the school day There will be a greater ratio of adults to pupil and staff will have specialisms in managing pupils who present with challenging behaviours 	<ul style="list-style-type: none"> Multi-Agency Interventions Provision is within a specialist environment with appropriate staff/student ratios Continued daily access to staff with experience and training in meeting the needs of pupils with SEMH 	<ul style="list-style-type: none"> Personalised to the specific needs of the pupil Advice available from relevant specialist services <p>Additional teams will include any of the following multi-agency Interventions:</p> <p>Education Social Worker Drug and Alcohol Team Police Health Forward Thinking Birmingham Educational Psychologist Social Care Community Support Worker Family Intervention Families First School Nurse Careers advice Youth Service Voluntary Sector Organisations Specialist Agency Interventions Youth Offending Service (including MAPPA) Probation Service Social Care Community Support Worker Early Help Prevent Services</p>

SEMH Range 7 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>Pupils experience all of the above but within a non-maintained educational or residential placement (Out of Area). This may include provision for identified Health and Social Care needs, including therapeutic input from specialists. Cases will be known to the Local Authority and subject to joint commissioning arrangements via Joint Panel.</p> <p>Continued long term and complex behavioural, emotional, and social difficulties, necessitating a continued multi-agency response co-ordinated as annual, interim or emergency SEND review and met in specialist provision. Difficulties likely to include:</p> <ul style="list-style-type: none"> • Extreme Self-harming behaviour • Attempted suicide • Persistent substance abuse • Extreme sexualised language and behaviour, sexually exploited • Extreme violent/aggressive behaviour • Serious mental health issues • Long term non-attendance and disaffection • Regular appearance in court for anti-social behaviour/criminal activity • Puts self and others in danger • Frequently missing for long periods • Extreme vulnerability due to Moderate Learning Difficulty/Specific Learning Difficulty • Psychosis • Schizophrenia 	<p>EHCP is complete and pupil has been assessed as needing enhanced, or more secure specialist provision. Assessment will be an ongoing process to determine progress in learning, and also:</p> <ul style="list-style-type: none"> • Development of social skills, empathy, managing own behaviour and emotions, staying safe in school and in the community • There will be involvement from a range of specialist professionals in place, such as Forward Thinking Birmingham, Educational Psychologist, and Youth Offending Service • Multi-agency work continues, and continual assessment to feed in to the cycle of annual reviews <p>Planning</p> <ul style="list-style-type: none"> • EHCP and appropriate short-term targets • Risk assessment will describe procedures to keep safe the pupil, other staff and pupils, and property. There will be an assessment of the risk of absconding and procedures described to manage such an eventuality • Planning meetings will include parents/carers, and are multi-agency 	<ul style="list-style-type: none"> • Pupil is on roll at special school • This could be out of area and/or residential special school • Pupil offered one to one support from an adult for some of the school day • There will be a greater ratio of adults to pupil and staff will have specialisms in managing pupils who present with challenging behaviour 	<ul style="list-style-type: none"> • Provision is within a specialist environment with appropriate staff/pupil ratios • Continued daily access to staff with experience and training in meeting the needs of pupils with SEMH 	<ul style="list-style-type: none"> • Personalised to the specific needs of the pupil • Advice available from relevant specialist services <p>Additional teams will include any of the following multi-Agency Interventions:</p> <p>Education Social Worker Drug and Alcohol Team Police Health Youth Offending Service Forward Thinking Birmingham Educational Psychologist Social Care Community Support Worker Family Intervention Families First School Nurse Careers advice Youth Service Voluntary Sector Organisations</p> <p>Specialist Agency Interventions:</p> <p>Probation Service Social Care Community Support Worker Early Help Prevent Services</p> <p>May require hospitalisation or inpatient facilities.</p>

Social, Emotional and Mental Health - PfA Outcomes and provision

	Employability	Independent Living	Community Inclusion	Health
Reception to Y2 (5-7 years)	Child will interact with peers and begin to form friendships to support emotional wellbeing. Child will be able to manage the transition from one class to another at the end of the academic year. They will be able to form relationships with their new class teacher(s).	Child will show awareness of independent living skills (cooking, cleaning, DIY) and will extend and develop these through real world play Child will be able to access the dining hall alongside peers, following social routines in relation to seating and turn taking, and will be able to make appropriate choices in relation to meals	Child will interact with peers and begin to form friendships with peers to support emotional wellbeing. Child will maintain positive emotional wellbeing through participation in team games, after-school clubs and weekend activities. Child will begin to identify bullying in relationships and will be able to seek adult support.	Child will attend necessary dental, medical and optical checks following parental direction and supervision. Child will cooperate with self-care and personal hygiene routines with prompting and adult support as required. Child will have the support and strategies required to promote resilience and emotional wellbeing. Child will be able to indicate choices and inform others of these.
Y3 to Y6 (8-11 years)	Child will interact with peers, making and maintaining friendships with others to support emotional wellbeing. Child will be aware of structures in place to support social and emotional wellbeing and will access these as required. Child will show awareness of different feelings and emotions and with support will identify and apply appropriate strategies to manage these.	Child will be able to maintain friendships with peers and access community based clubs/after school clubs to promote independence and emotional wellbeing. Child will have the social skills necessary to facilitate participation in sleepovers and residential trips. Child will be able to manage their feelings and emotions, accessing support to apply strategies as appropriate. Child will be developing self-advocacy.	Child will maintain friendships with peers to support emotional wellbeing and avoid isolation. Child will begin to identify bullying within relationships and will be able to identify support and strategies to manage this. Child will be able to manage social and emotional responses to change. Child will be aware of strategies and precautions to remain safe online.	Child will understand physical and emotional changes associated with the onset of puberty and will manage these appropriately, with support as required, maintaining social and emotional wellbeing. With support, child will access strategies to manage any emotional or mental health needs associated with their physical or mental health conditions/diagnoses
Y7 to Y11 (11-16 years)	Child will have acquired the necessary social skills in order to interact with employers, clients and peers within the workplace within the context of work experience, voluntary work or part-time employment. Child will be able to form friendships in the context of education or employment to facilitate emotional wellbeing. Child should be aware of structures in place to support social and emotional wellbeing and will access these as required. Child will show awareness of different feelings and emotions and, with support, will identify and apply appropriate strategies to manage these. The YP will be able to learn from mistakes and show persistence in the face of challenge.	Child will have an awareness of boundaries and social conventions with respect to different relationships and social situations, including online. Child will begin to show awareness of potential abusive and exploitative behaviour in others and with support and guidance will be able to make safe choices. Young person will begin to make choices to include money, food, exercise, opportunities to socialise, form relationships with others, to support the development of confidence and emotional wellbeing.	Child will maintain friendships with peers to support emotional wellbeing and avoid isolation. Child will maintain positive emotional wellbeing through participation in community-based activities and socialisation with peers within the community in accordance with their own personal choices. Child will have an awareness of boundaries and social conventions within a range of relationships and social contexts, including online. Child will show increased awareness of the bigger picture and will build resilience to support emotional wellbeing. They will be able to attend trips beyond the home with increased independence and know their local area and the resources available/accessible.	Child will have an understanding of sex education and the social and emotional implications of intimate relationships. YP will have an understanding of the impact of drug and alcohol use on emotions and well-being. The child will have strategies and resources to support them to maintain positive mental health and emotional wellbeing, and know where and how to access support when needed. The child will understand using electronic devices and will recognise the importance of sleep and 'down time' in supporting social and emotional health and wellbeing. Child will access strategies and support, as required, to manage any emotional or mental health needs associated with their physical or medical health conditions/diagnoses.
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the School Age Ranges Guidance: Social, Emotional and Mental Health Needs.			

Hearing Loss Provision Guidance Statements

Hearing Loss Range 1 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environment
<p>Mild Needs Pupil may have hearing aids This is likely to include children with a mild or unilateral loss which may be temporary/fluctuating conductive or permanent sensorineural but whom can manage well with some reasonable adjustments.</p>	<p>Assessment: Undertaken as part of school and class assessments</p> <p>Live speaker for MFL assessments maybe required.</p> <p>No specialist assessments by Teacher of the Deaf required.</p>	<p>Quality First Teaching.</p> <p>Fully taught in the mainstream class.</p> <p>Differentiated / scaffolded tasks with teaching broken down into smaller steps if necessary. May require small amounts of visual support (as appropriate)</p> <p>Opportunities for small group work to support listening development as appropriate</p> <p>Teachers/TA to promote independence and high expectations</p> <p>Generic management plan from Hearing Support Team required appropriate to Key Stage level.</p>	<p>Full inclusion within National Curriculum.</p> <p>Will require (if aids worn) daily checks of all audiological equipment, supported by a named, trained member of staff. May need daily TA time for audiological checks if aids worn. The pupil would check their own equipment in relation to age and development expectations.</p> <p>Strategies to reinforce language and literacy.</p>	<p>Advice given by the Teacher of the Deaf (ToD) in written format in generic management plan - no on-going visits from the ToD.</p> <p>A favourable listening environment; classroom management to take account of the seating position and pupil need to have a clear, unobstructed view of the speaker.</p> <p>Activities planned through QFT with emphasis on concrete, experiential and visual supports as appropriate.</p> <p>Key staff to have access to the Hearing Support Team online training course.</p>

Hearing Loss Range 2 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environment
<p>Mild-moderate Needs Pupil will have hearing aids or cochlear implants May require access to assistive technology (radio aid) Good perception of spoken language in favourable listening conditions Hearing loss can create some challenge with listening, attention, concentration and class participation Makes good progress in key language related areas but may have some limitations in abstract language and vocabulary range, despite their hearing loss.</p>	<p>Assessment: Undertaken as part of school and class assessments. Live speaker for MFL assessments likely to be required.</p> <p>Planning: Curriculum planning must closely track levels of achievement and all support plan targets are individualised, short term and specific.</p> <p>All staff aware of and working towards individual short-term targets focused around language acquisition.</p> <p>Speech testing and other specialist assessments may be used to assess access to spoken language</p> <p>School to work in collaboration with Hearing Support Team to follow recommendations informed by specialist assessments and develop appropriate targets around language acquisition and personal understanding of their hearing loss</p> <p>Parents to be fully involved in target setting/reviews and supported in how they can help their child develop around his/her language acquisition.</p>	<p>Quality First Teaching.</p> <p>In the mainstream class with flexible grouping arrangements where required, especially for language development activities</p> <p>Teachers/TA to promote independence and high expectations for the child with hearing loss.</p> <p>Teaching strategies to include: use of visual aids reinforcing key language clear delivery</p> <p>Likely to need support to develop independence, have positive transitions and around Preparation for Adulthood</p>	<p>Full inclusion within National Curriculum</p> <p>Daily checks of all audiological equipment is required, supported by a named, trained member of staff. Will need daily TA time for audiological checks.</p> <p>Modify level/pace/amount of teacher talk to pupil's identified need.</p> <p>Additional visual cues to be used in the delivery of all subject areas of the curriculum</p> <p>Pre-teach concepts and vocabulary.</p> <p>Small group and individual teaching required for key language/literacy /listening and auditory memory skills as appropriate to impact of hearing loss.</p> <p>Differentiated/scaffolded tasks and materials tailored to pupil's language levels; supported by visual cues.</p> <p>Language heavy tasks to be broken down into small achievable steps.</p> <p>May benefit from planned opportunities to meet other children with a hearing loss.</p>	<p>Teacher of the Deaf (TOD) support and advice as per eligibility criteria</p> <p>Activities planned through Quality First Teaching by class/subject teachers with emphasis on concrete, experiential and visual supports as appropriate. Favourable seating position near to, and with a clear, unobstructed view of the speaker in all lessons.</p> <p>Optimum acoustics, listening, lighting/blinds, as per Management Plan and advice from ToD</p> <p>School staff to refer to Management Plan, to ensure a positive and inclusive classroom environment that meets pupil's needs. School/setting to provide dedicated time to meet with Hearing Support Team staff.</p> <p>Hearing Support to provide access to a radio aid for school use (maintained by Hearing Support Team); insurance taken out by school. School to ensure optimum and effective use of equipment. School staff responsible for liaising with technicians for swift resolution of radio aid faults.</p> <p>Where applicable daily use of provided additional technology to support listening (e.g. auxiliary leads for iPads, SoundField systems where available, Mini Mics, Radio Aids, etc.)- advised upon by the TOD.</p> <p>Key staff to have completed the Hearing Support Team online training course: <i>Deaf Awareness in Education</i> (1 hour) and may have attended bespoke training around the individual pupils needs.</p>

Hearing Loss Range 3 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environment
<p>Moderate /severe needs Pupil will have hearing aids or cochlear implants Mostly likely requires assistive technology (radio aid) Will have some difficulty with listening, attention, concentration, speech, language and class participation due to hearing loss Perception of spoken language affected in unfavourable listening conditions Speech clarity may be affected, due to the hearing loss Requires face to face communication, lip reading and visual clues to support understanding. Delayed language development as a result of hearing loss. Reduced progress in some key areas, particularly language related areas, due to hearing loss.</p>	<p>Assessment: Undertaken as part of school and class assessments</p> <p>Live speaker for MFL assessments will be required.</p> <p>Must have modification to the presentation of assessments.</p> <p>Bespoke access arrangements tailored to the individual pupils needs.</p> <p>Planning: Curriculum planning must closely track levels of achievement and all support plan targets are individualised, short term and specific to language acquisition. Interventions around language acquisition to be planned and reviewed with ToD.</p> <p>All staff aware of and working towards individual short-term targets around language development</p> <p>Speech perception testing and other specialist language assessment tools must be used to assess access to spoken language.</p> <p>School to work in collaboration with Hearing Support Team to follow recommendations informed by specialist assessments.</p> <p>Schools to ensure at least 6 weeks' notice for EHCP/SSPP reviews (where appropriate) so that assessments can take place and report written/shared.</p> <p>Dedicated, timetabled time for planning and feedback between class teacher, teaching assistant (and ToD/ SS TA as agreed) to plan, discuss progress and set short term targets and share progress data.</p> <p>Parents to be fully involved in target setting/reviews and supported in how</p>	<p>Quality First Teaching</p> <p>Fully included into the mainstream class with flexible grouping arrangements where required, for targeted work around language acquisition.</p> <p>May require bespoke small group support, as discussed with ToD/HST with opportunities for pre- and post-tutoring, individualised curriculum support, vocabulary enrichment and concept development</p> <p>Access to SALT interventions as appropriate- planned in conjunction with SALT.</p> <p>Differentiated/scaffolded tasks and materials tailored to child's language levels; supported by visual cues.</p> <p>Teachers/TA to promote independence and high expectations for the pupil with hearing loss.</p> <p>Will need support to develop independence, have successful transitions and Preparation for Adulthood should be an ongoing focus.</p>	<p>Full inclusion within the National Curriculum</p> <p>Pre- and post-tutoring of core subjects (a minimum of x3 per week)</p> <p>Dedicated language enrichment sessions.</p> <p>Daily checks of all audiological equipment, supported by a named, trained member of staff. Will need daily TA time for checks of audiological equipment.</p> <p>Small group activities to develop listening skills and auditory memory</p> <p>Key vocabulary books/lists/word mats to be shared in class and at home.</p> <p>Differentiated/scaffolded tasks and materials tailored to pupil's language levels; supported by visual cues.</p> <p>Access to visual clues and real experiences, to include subtitled visual resources or transcripts, visual timetable as appropriate across the full curriculum.</p> <p>Allocated time to check understanding of lesson content and tasks.</p> <p>All staff aware of and working towards individual short-term targets around language development.</p> <p>Likely to require social Interaction Groups.</p> <p>May need Peer Awareness session.</p> <p>Will require a Personal Understanding of Deafness programme delivered</p> <p>Will need planned opportunities to meet other children with a hearing loss and deaf adults as role models.</p>	<p>Teacher of the Deaf advice and support as per eligibility criteria</p> <p>Activities planned through Quality First Teaching with emphasis on concrete, experiential and visual supports as appropriate.</p> <p>Favourable seating position with a clear, unobstructed view of the speaker.</p> <p>Optimum acoustics, listening, lighting/blinds, as per Management Plan and advice from ToD. School staff to refer to Management Plan, to ensure a positive and inclusive classroom environment that meets pupil's needs.</p> <p>School/setting to provide dedicated time to meet with Hearing Support staff.</p> <p>Teacher of the Deaf to support appropriate teaching and learning strategies.</p> <p>Staff to work with ToD in planning.</p> <p>SENCO to ensure the management plan is shared with ALL staff working with the pupil.</p> <p>School to collaborate with Hearing Support Team staff on how funding can be allocated to best meet pupil's needs.</p> <p>School to provide priority access to a distraction free room for 1:1/small group work.</p> <p>Vocabulary rich environment (key vocabulary on display e.g. with pictures).</p> <p>Sensory Support to provide access to a radio aid for school use (maintained by Hearing Support Team); insurance taken out by school. School to ensure optimum and effective use of equipment. Daily/Regular checks of audiological equipment by trained dedicated member of staff. School staff responsible for liaising with technicians for swift resolution of radio aid faults. Daily use of provided additional technology to support listening (e.g. auxiliary leads for iPads, SoundField systems where available, Mini Mics, Radio Aids, etc.)</p> <p>Audit of the classroom environment or acoustic survey to be undertaken in collaboration with ToD or Educational</p>

	they can help their child in their language development			Audiologist. Schools to make recommended adjustments in a timely manner. Key staff to have completed the Hearing Support Team online training course: <i>Deaf Awareness in Education</i> (1 hour) and will have attended bespoke training around the individual pupils needs.
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Hearing Loss Range 4 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environment
<p>Severe/profound hearing loss, Pupil will have hearing aids or cochlear implants</p> <p>Will require assistive listening technology (radio aid)</p> <p>Will have moderate difficulty with listening, attention, concentration, speech, language and class participation due to hearing loss</p> <p>Perception of spoken language significantly affected by hearing loss</p> <p>Limited progress in language/literacy which impact on other areas of learning including emotional literacy, due to hearing loss</p> <p>Communication delay requires total communication approaches for access and learning</p> <p>Speech clarity will be affected, due to the hearing loss</p> <p>Profound hearing loss will have a significant impact on speech clarity due to hearing</p> <p>Curriculum access significantly reduced without specialist intervention from a Teacher of the Deaf</p> <p>Requires significant intervention to support language/listening development</p>	<p>Assessment:</p> <p>Undertaken as part of school and class assessments</p> <p>Live speaker for MFL assessments will be required.</p> <p>Must have modification to the presentation of assessments.</p> <p>Bespoke access arrangements tailored to the individual pupils needs.</p> <p>Planning:</p> <p>Curriculum planning must closely track levels of achievement and all support plan targets are individualised, short term and specific around language development.</p> <p>All staff aware of and working towards individual short-term targets.</p> <p>Interventions to be planned and reviewed with ToD.</p> <p>Speech perception testing and other specialist tools to assess access to spoken language</p> <p>Specialist assessments to inform planning. School to work in collaboration with Hearing Support Team to follow recommendations informed by specialist assessments.</p> <p>At least fortnightly dedicated, timetabled time for planning and feedback between class teacher, teaching assistant and senco (and ToD/ SS TA as agreed) to plan, discuss progress and set short term targets and share progress data.</p> <p>Close, regular contact with parents to share learning topics, vocabulary and progress.</p> <p>Parents to be fully involved in target setting/reviews and supported in how they can help their child in their language development.</p>	<p>Quality First Teaching</p> <p>Included into the mainstream class with high level of flexible grouping arrangements.</p> <p>Daily and bespoke 1:1/small group support, as planned with ToD which will include daily opportunities for pre- and post-tutoring, highly differentiated curriculum support, vocabulary enrichment, concept development and experiential learning opportunities</p> <p>Differentiated/scaffolded tasks</p> <p>Modifications to learning materials - tailored to child's language levels and age supported by visual resources.</p> <p>Adult to check understanding of content and tasks.</p> <p>Pace of delivery and learning adapted to take account of pupil's communication, understanding and language levels. Impact of listening and lip reading fatigue to be taken into account.</p> <p>Teachers/TA to promote independence and high expectations for the child with hearing loss.</p> <p>High levels of support and advice from a Teacher of the Deaf to model and advise on specific teaching approaches.</p> <p>May have support and advice from a Specialist Teaching Assistant from Hearing Support Team to model and carry out short-term interventions.</p> <p>Access to SALT interventions as appropriate- planned in conjunction with SALT.</p> <p>Regular support to develop independence.</p> <p>Planned support for transition</p> <p>Preparation for Adulthood should be an ongoing focus.</p>	<p>Full inclusion within National Curriculum which is significantly differentiated across all curriculum areas.</p> <p>All staff aware of and working towards individual short-term targets around language acquisition.</p> <p>TA support for:</p> <ul style="list-style-type: none"> -Language related subjects (combination of in class, small group and individual), -1:1 teaching support production of resources for the pupil, in line with provision stated in ECHP/SSPP -Daily checks of all audiological equipment, supported by a named, trained member of staff -1-1 activities to develop listening skills and auditory memory -Pre- and post-tutoring of core subjects (individual sessions provided at least once a day) -Dedicated language enrichment sessions, including reading/literacy activities with the child every day <p>Total communication approach.</p> <p>When appropriate British Sign Language and Sign Supported English support in class from appropriately trained member of staff.</p> <p>Pupil requires:</p> <ul style="list-style-type: none"> -Checking understanding of content and tasks. -Opportunities for additional explanation, clarification and reinforcement of lesson content and language. -Access to visual clues and real experiences, to include subtitled visual resources or transcripts, visual timetable as appropriate. -Social Interaction Groups. -Peer Awareness session. -Personal Understanding of Deafness programme delivered and access to deaf role models -Opportunities to meet other children with a hearing loss -Key vocabulary books/lists/word mats to be shared in class and at home. 	<p>High Level of Teacher of the Deaf support as per eligibility criteria.</p> <p>School/setting to provide dedicated time to meet with Sensory Support staff. SENCO to ensure the management plan is shared with ALL staff working with the pupil. School to collaborate with Hearing Support Team staff on how funding can be allocated to best meet pupil's needs.</p> <p>School to provide priority access to a distraction free room for 1:1/small group work.</p> <p>Activities planned through Quality First Teaching with emphasis on concrete, experiential and visual supports as appropriate. Learning environment provides a language/vocabulary rich environment (key vocabulary on display eg with visual representations).</p> <p>Favourable seating position near to, and with a clear, unobstructed view of the speaker.</p> <p>Optimum acoustics, listening, lighting/blinds, as per Management Plan and advice from ToD.</p> <p>School staff to refer to Management Plan, to ensure a positive and inclusive classroom environment that meets pupil's needs.</p> <p>In class TA support for core subjects in line with provision stated in EHCP/SSPP.</p> <p>Weekly release time of TA for resource preparation.</p> <p>Sensory Support provide access to a radio aid for school and home use; insurance taken out by school. School to ensure optimum and appropriate use of equipment. Daily checks of audiological equipment by trained dedicated member of staff. Effective staff liaison with technicians for swift resolution of radio aid faults.</p>

			<p>Pupil requires support to understand needs and deaf identity.</p> <p>Will need planned opportunities to meet other children with a hearing loss and deaf adults as role models.</p>	<p>Daily use of provided additional technology to support listening (e.g. auxiliary leads for iPads, SoundField systems where available, Mini Mics, Radio Aids, etc.)</p> <p>Audit of the classroom environment or acoustic survey to be undertaken in collaboration with ToD or Educational Audiologist. Schools to make recommended adjustments in a timely manner.</p> <p>ToD to support appropriate teaching and learning strategies.</p> <p>Sensory Support to provide signing tuition.</p> <p>Key staff to work with ToD in planning. Additional targeted intervention from a specialist TA from HST as appropriate.</p> <p>Key staff to have completed the Hearing Support Team online training course: <i>Deaf Awareness in Education</i> (1 hour) and will have attended bespoke training around the individual pupils needs on an annual basis.</p>
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Hearing Loss Range 5 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/ Intervention	Resources and Staffing
<p>Profound needs Pupil will have hearing aids/cochlear implants Will require assistive listening technology (radio aid) Hearing loss creates significant difficulties with attention, concentration, confidence and participation in whole class learning. Perception of spoken language will be significantly affected due to hearing loss Severe language delay impacts on access to the curriculum due to hearing loss Severe/profound language and communication delay impacts all areas of learning including social and emotional development which requires a high level of intensive support to access the curriculum and support language, listening, communication development British Sign Language, Signed Supported English or total communication approaches will be required to support effective communication, access to the curriculum and learning.</p>	<p>Assessment: Undertaken as part of school and class assessments Live speaker for MFL assessments will be required. Must have modification to the presentation of assessments. Bespoke access arrangements tailored to the individual pupils needs. Planning: Curriculum planning must closely track levels of achievement and all support plan targets are individualised, short term and specific to the pupils high level of language needs. All staff aware of and working towards individual short-term targets. Speech testing and other specialist tools must be used to assess access to spoken language School to work in collaboration with Hearing Support Team to follow recommendations informed by specialist assessments. At least weekly dedicated, timetabled time for planning and feedback between class teacher, teaching assistant (and ToD/ SS TA as agreed) to plan, discuss progress and set short term targets and share progress data. Close, regular contact with parents to share learning topics, vocabulary and progress. Parents to be fully involved in target setting/reviews and supported in how they can help their child and develop their language acquisition.</p>	<p>Quality First Teaching Included into the mainstream class with high level of flexible grouping arrangements. Daily and bespoke 1:1/small group support, as planned with ToD/HST. Pre- and post-tutoring, vocabulary enrichment and concept development. Individualised curriculum for language/literacy. Experiential learning opportunities High levels of support and advice from a Teacher of the Deaf to model and advise on specific teaching approaches. May have support and advice from a Specialist Teaching Assistant from Hearing Support Team to model and carry out short-term interventions. Access to SALT interventions as appropriate- planned in conjunction with SALT. Differentiated/scaffolded tasks and materials tailored to child's language levels; supported by visual cues. 1-1 support to check understanding of content and tasks and reinforce key learning. Pace of delivery and learning adapted to take account of pupil's communication, understanding and language levels. Consideration to be made of the impact of fatigue caused by listening/ lipreading and the additional concentration required for divided attention Teachers/TA to promote independence and high expectations for the pupil with hearing loss. Regular support to develop independence.</p>	<p>National Curriculum is significantly differentiated and individualised due to language delay impacting on all areas of the curriculum. All staff aware of and working towards individual short-term targets. Requires opportunities for small step learning, additional explanation, clarification and reinforcement of lesson and language content. Designated TA support for: -Language related subjects (combination of in class, small group and individual), -1:1 teaching support production of resources for the pupil, in line with provision stated in ECHP/SEN Provision plan -Daily checks of all audiological equipment -1-1 activities to develop listening skills and auditory memory -Pre- and post-tutoring of all subjects (individual sessions provided at least once a day) -Dedicated daily language enrichment sessions, and support with language heavy subjects Total communication approach. When appropriate British Sign Language and Sign Supported English support in class from appropriately trained member of staff. Differentiation by presentation and/or outcome personalised to pupil identified needs (school and ToD planning) School/setting to be trained in supporting a child with hearing loss and provide dedicated time for Sensory Support Staff to deliver to key staff (one day training by Autumn 1). Pupil requires: -Access to visual clues and real experiences -Subtitled visual resources or transcripts, visual timetable as appropriate.</p>	<p>High Level of Teacher of the Deaf support as per eligibility criteria. School/setting to provide dedicated time to meet with Sensory Support staff. SENCO to ensure the management plan is shared with ALL staff working with the pupil. School to collaborate with Sensory Support staff on how funding can be allocated to best meet pupil's needs. School to provide priority access to a distraction free room for 1:1/small group work. Activities planned through QFT with emphasis on concrete, experiential and visual supports as appropriate. Learning environment provides a language/vocabulary rich environment (key vocabulary on display eg with visual representations). Visual resources appropriate to linguistic level and age of pupil. School environment promotes a Total Communication to communication (including use of sign language). Favourable seating position near to, and with a clear, unobstructed view of the speaker. Optimum acoustics, listening, lighting/blinds, as per Management Plan and advice from ToD. School staff to refer to Management Plan, to ensure a positive and inclusive classroom environment that meets pupil's needs. In class TA support for language heavy subjects in class. At least weekly release time for the TA for resource preparation. Sensory Support provide access to a radio aid for school and home use; insurance taken out by school. School to ensure optimum and appropriate use of equipment. Daily checks of audiological equipment by trained dedicated member of staff. Effective staff liaison with</p>

		<p>Bespoke and planned support for transition</p> <p>Preparation for Adulthood should be an ongoing focus.</p>	<ul style="list-style-type: none"> -Key vocabulary books/lists/word mats to be shared in class and at home. -Social Interaction Groups. -Personal Understanding of Deafness programme. -Peer Awareness sessions -Programmes for peers to learn signing. -Opportunities to meet other children with a hearing loss. -Access to deaf role models. <p>Pupil requires support to understand needs and deaf identity.</p> <p>Will need planned opportunities to meet other children with a hearing loss and deaf adults as role models.</p>	<p>technicians for swift resolution of radio aid faults.</p> <p>Daily use of provided additional technology to support listening (e.g. auxiliary leads for iPads, SoundField systems where available, Mini Mics, Radio Aids, etc.)</p> <p>Provision of iPad for named pupil to support language development/activities.</p> <p>Audit of the classroom environment or acoustic survey to be undertaken in collaboration with ToD or Educational Audiologist. Schools to make recommended adjustments in a timely manner.</p> <p>ToD to support appropriate teaching and learning strategies.</p> <p>Sensory Support to provide signing tuition.</p> <p>Key staff to work with ToD in planning. Additional targeted intervention from a specialist TA from HST as appropriate.</p> <p>Key staff to have completed the Hearing Support Team online training course: <i>Deaf Awareness in Education</i> (1 hour) and will have attended bespoke training around the individual pupils needs on an annual basis and may receive BSL training (where appropriate to pupil needs)..</p>
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PfA Outcomes for Children and Young People with Hearing Loss				
NB Age Groups are a guide only- this is a skills continuum as vision loss can occur or deteriorate at any age and we need to accommodate varied abilities and not limit progress				
	Employability	Independent Living	Community Inclusion	Health
Reception to Y2 (5-7 years)	<p>Child will cooperate with self-care routines and management of hearing loss.</p> <p>Child will access resources and equipment to support them to concentrate and maintain focus in the classroom.</p> <p>Knows their way around the classroom/school, Can choose an activity and find the relevant resources.</p> <p>Is confident to ask an adult for help, when needed.</p> <p>Knows where to seat themselves in the best position for hearing.</p>	<p>Child will cooperate with self-care routines and management of hearing loss.</p> <p>Begins to report problems with hearing technology.</p> <p>Participate in basic maintenance on their hearing equipment.</p> <p>Gives hearing equipment to adult if it is not working / falls out.</p> <p>Sits still whilst aids/processors inserted.</p> <p>Pushes mould into ear when placed there by adult.</p> <p>Puts aid behind ear.</p> <p>Indicates aid is working, if asked.</p>	<p>Child will be able to participate in team games, after-school clubs and weekend activities.</p> <p>Communicates effectively with peers and adults, using age-appropriate strategies:</p> <p>Puts hand up to get attention during teaching time.</p> <p>Gets attention from a peer using appropriate strategies (tapping on shoulder, saying name, waiting for a response)</p> <p>Shares equipment and resources</p> <p>Completes a simple task collaboratively with a peer.</p> <p>Has small group of friends in school.</p> <p>Is happy to come to school and join in group activities.</p>	<p>Child will attend relevant health, dental, optical and hearing checks as required to promote good physical health.</p> <p>Child will cooperate with self-care routines and management of hearing loss.</p> <p>Child will participate in sport and physical exercise.</p> <p>Can tell others they have a hearing loss.</p> <p>Understand the importance of their hearing aids and know that they make a difference.</p> <p>Can say they find it hard to hear (equipment not working / poor listening conditions).</p>
Y3 to Y6 (8-11 years)	<p>Child will be able to access careers information, opportunities to meet deaf role models/talks from visitors to school through adaptations and formats which consider sensory needs as appropriate to individual circumstances.</p> <p>Can access deaf role models (through books, visits etc)</p> <p>Can build a personal profile of interests.</p> <p>Is aware of the difference good acoustics and specialist equipment makes to their access.</p> <p>Has developed strategies to optimise communication and deal with communication 'breakdowns'.</p>	<p>Child will begin to develop age-appropriate life skills to include basic cooking skills, awareness of transport and requirements for travel (tickets, timetables etc.), money</p> <p>Is confident to communicate with different people in the school.</p> <p>Uses preferred communication mode – TC/BSL/oral</p> <p>Able to talk to familiar and unfamiliar adults/peers about their hearing loss and the technology that they are using.</p> <p>Uses environmental aids (e.g radio aid) outside of school, as appropriate.</p>	<p>Child will be able to access after-school clubs, youth groups, sports teams, community-based groups.</p> <p>Have confidence to communicate with a range of familiar/unfamiliar adults Willingly joins in team games /activities.</p> <p>Joins school clubs, youth clubs, sports teams etc.</p> <p>Participates in activities with deaf peers.</p>	<p>Child will be able to manage minor health needs.</p> <p>Child will make healthy eating choices and will engage in physical exercise.</p> <p>Able to insert and maintain hearing equipment at an age-appropriate level.</p> <p>Understands and can explain the importance of aids and equipment.</p> <p>Can explain the effect of their hearing loss to others.</p> <p>Can articulate what helps them to hear and understand clearly.</p> <p>Is willing to attend and co-operate at audiology and ENT appointments.</p>
Y7 to Y11 (11-16 years)	<p>Child will be able to access work experience placements, voluntary work or part-time employment opportunities through adaptations and formats which consider sensory needs as appropriate to individual circumstances.</p> <p>Child will be able to make smooth transitions to new settings to facilitate emotional wellbeing and support integration and inclusion.</p> <p>Accesses case studies of deaf people in different careers (NDCS online bank; visits etc).</p> <p>Organises work experience with support.</p> <p>Can explain their hearing needs to potential employers / college staff.</p> <p>Understands supported employment options e.g., Access to Work.</p> <p>Has created personal profile which includes hearing loss and needs</p>	<p>Child will demonstrate age-appropriate independent living skills to include cookery, access to local transport, money and time management.</p> <p>Is aware of the range of equipment available to support listening in school/college, work and social life.</p> <p>Knows how to access and use equipment in school/college and work.</p> <p>Can talk to familiar and unfamiliar adults/peers about their hearing loss and the technology that they are using.</p> <p>Uses self-advocacy skills to resolve any access issues, as they occur.</p>	<p>Child will be able to access transport options to facilitate independence and community participation.</p> <p>Can access community-based activities / groups and deaf specific activities organised by e.g. NDCS, BID.</p> <p>Is confident to express communication needs, including use of assistive technology (e.g. radio aids) to group leaders and peers.</p> <p>Can travel independently to school and within their local area.</p> <p>Knows how to access transport to travel around the city (public transport timetables; taxis etc).</p>	<p>Child will be more independent in managing health needs.</p> <p>Understands their responsibilities for appointments etc. on transition to Adult Hearing Services.</p> <p>Understands and can explain clearly the causes and implications of their hearing loss.</p> <p>Requests additional support as required e.g., counselling, academic support.</p>
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the School Age Ranges Guidance: Children and young people with hearing loss			

Vision Loss Provision Guidance Statements

Vision Loss Range 1 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing And Environment
<p>Vision Loss: Mild</p> <p>Distance Vision: 6/12– 6/15 Snellen</p> <p>Or:</p> <ul style="list-style-type: none"> - Mild field Loss and/or night blindness - Mild visual processing difficulties/ perception due to diagnosis of CVI <p>Pupil will have been under the care of a Hospital Ophthalmologist, but most likely to have been discharged</p> <p>Pupil may:</p> <ul style="list-style-type: none"> - have colour vision difficulties - have poor hand-eye coordination - have photophobia 	<p>School: School staff should share the general written advice with all relevant staff</p> <p>School should share the pupils vision management plan with all relevant staff.</p> <p>Specialist Support: General written advice will be given after referral, drawn up by a QTVI</p> <p>The QTVI may have been involved to initially assess the pupils' functional vision, but will not be involved ongoing.</p> <p>A vision management plan will have been drawn up following an assessment, if an assessment was required.</p> <p>Assessment/Access arrangements: May require visual rest breaks</p>	<p>Quality First Teaching plus ... Full inclusion in mainstream class</p> <p>Specific Teaching and Learning strategies to support pupils visual access needs, around seating position and clear presentation of work</p> <p>Modification: Learning materials may require slight modification to present them in clear format.</p> <p>Pace of Learning: Consideration needs to be given to pace of learning and completion of learning tasks due to the impact of visual fatigue in the later part of the day.</p>	<p>Curriculum: Teaching methods which facilitate visual access to the curriculum, social / emotional development and class participation</p>	<p>Specialist Support: QTVI may assess, but would only be involved for an initial assessment and individualised advice, if felt required, advice most likely to be in written format. Written advice</p> <p>Environment: Good controllable lighting conditions; overhead lighting, quality blinds on windows and task lighting Highlighted environmental features inside and out ie steps, curbs and hazards</p> <p>Resources/equipment made available by school: General Equipment- Dark-lined books and possibly bolder pens, such as felt tip, or inky handwriting pens.</p>

Vision Loss Range 2 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environmental
<p>Vision Loss: Mild- Moderate</p> <p>Distance Vision: 6/15– 6/18 Snellen</p> <p>Near Vision: EYFS & KS 1: Point 18-20 font KS's 2-5: Point 10-14 font</p> <p>Or:</p> <ul style="list-style-type: none"> - Mild-moderate field Loss and/or night blindness - Mild-moderate visual processing difficulties/ perception due to diagnosis of CVI - Mild-moderate unstable or progressive visual condition <p>Pupil will be under the care of a Hospital Ophthalmologist or have been discharged if an older student or visual condition is stable.</p> <p>Pupil may:</p> <ul style="list-style-type: none"> - find concentration difficult - have colour vision difficulties - have photophobia - have contrast sensitivity - have poor hand-eye coordination - have a slower work rate 	<p>School: School should share the pupils vision management plan with all relevant staff.</p> <p>The school must monitor pupil progress in respect of their vision Loss and share this with the QTVI</p> <p>The school must monitor progress in pupil's specialist additional curriculum, and report to QTVI to support with planning next steps.</p> <p>Planning: Consideration will need to be given to planning so that modification of materials and gathering of resources can be done prior to lessons</p> <p>Specialist Support: QTVI involvement in annually assessing functional vision advising on modification needs, approach for curriculum access and examination access arrangements.</p> <p>Drawing up of a vision management plan to reflect these</p> <p>Assessment/Access arrangements: Consideration needs to be given to approach to assessment activities at Keys stage 2 and above.</p> <p>Will require modified test papers to be ordered and visual rest breaks.</p>	<p>Quality First Teaching plus ... Full inclusion in mainstream class</p> <p>Specific Teaching and Learning strategies to support pupils visual access needs</p> <p>Seating Arrangements will need consideration</p> <p>Well managed playground activities and environment</p> <p>Prominent displays and signage</p> <p>Modification: Learning materials will require some modification.</p> <p>Consideration needs to be given to the presentation of information across most subjects</p> <p>Teachers to ensure pupils can access work displayed on interactive white boards in the method identified by the QTVI</p> <p>Pace of Learning: Consideration needs to be given to pace of learning and completion of learning tasks due to the impact of visual fatigue.</p>	<p>Curriculum: Teaching methods which facilitate visual access to the curriculum, social / emotional development and class participation</p> <p>TA support to oversee modification needs, organisation of equipment, seating and grouping arrangements, play activities and to support additional skills intervention work.</p> <p>Subject/class Teaching Staff to support with the production of teaching resources in accessible formats.</p> <p>Specialist Additional Curriculum: Provided by the QTVI working in conjunction with school adult support-pupil may require skills development in:</p> <ul style="list-style-type: none"> • Low vision aids • Use of Assistive Technology • Strategies for Independent Learning • Mobility and Life-skills development provided by Habilitation Specialist 	<p>Specialist Support: QTVI involvement determined by eligibility criteria.</p> <p>QTVI will advise on skills development programme, if felt appropriate. Habilitation specialist to be involved in carrying out a mobility and life skills assessment and implementing a programme of support as appropriate, most likely at transition phases.</p> <p>Support determined by eligibility criteria.</p> <p>School Staff Support: TA involvement will be required.</p> <p>Environment: An Environmental Audit from the QTVI advising on environmental adjustments required to meet the pupils needs</p> <p>Good controllable lighting conditions; overhead lighting, quality blinds on windows and task lighting</p> <p>Highlighted environmental features inside and out ie steps, curbs and hazards</p> <p>Prominent displays and signage</p> <p>Resources/equipment made available by school: General Equipment- Dark-lined books, felt tip pens, Frixion pens, wiki sticks. Highly contrasted PE equipment. – science equipment, rulers, protractors, DT equipment, hand-held low vision aids, downloaded modified books. IT Equipment- large print calculator</p>

Vision Loss Range 3 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environment
<p>Vision Loss: Moderate</p> <p>Distance Vision: 6/19– 6/24 Snellen</p> <p>Near Vision: EYFS & KS 1: Point 24-28 font KS's 2-5: Point 16-20 font</p> <p>Or:</p> <ul style="list-style-type: none"> - Moderate field Loss and/or night blindness - Moderate visual processing difficulties/ perception due to diagnosis of CVI - Unstable or progressive visual condition with better acuities than above. <p>Pupil will be under the care of a Hospital Ophthalmologist or have been discharged if an older student or visual condition is stable.</p> <p>Pupil is likely to:</p> <ul style="list-style-type: none"> - find concentration difficult - have colour vision difficulties - have photophobia - have contrast sensitivity - have poor hand-eye coordination - have a slower work rate 	<p>School: School should share the pupils vision management plan with all relevant staff, including cover staff and lunchtime staff.</p> <p>The school must regularly monitor pupil progress in respect of their vision Loss and share this with the QTVI</p> <p>The school must monitor progress in pupil's specialist additional curriculum, and report to QTVI to support with planning next steps.</p> <p>ITP/IEP will be required to support with planning and assessing needs and provision- drawn up in conjunction with QTVI and parents and reviewed regularly.</p> <p>Planning: Consideration will need to be given to planning so that modification of materials and gathering of resources can be done prior to lessons</p> <p>Regular planning with QTVI to plan next steps of specialist additional skills curriculum.</p> <p>Specialist Support: QTVI involvement in annually assessing functional vision advising on modification needs, approach for curriculum access and examination access arrangements.</p> <p>Drawing up of a vision management plan to reflect these</p> <p>Assessment/Access arrangements: Consideration needs to be given to approach to assessment activities at all Key Stages</p> <p>Will require modified test papers to be ordered and visual rest breaks.</p> <p>May require additional time in some areas- namely those that require reading of larger pieces of text.</p>	<p>Quality First Teaching plus ... Full inclusion in mainstream class</p> <p>Specific Teaching and Learning strategies to support pupils visual access needs</p> <p>Seating Arrangements will need consideration</p> <p>Well managed playground activities and environment for safety is required.</p> <p>Prominent displays and signage</p> <p>Modification: Learning materials will require some modification most curriculum areas.</p> <p>Consideration needs to be given to the presentation of information across all subjects</p> <p>Teachers to ensure pupils can access work displayed on interactive white boards in the method identified by the QTVI</p> <p>Pace of Learning: Consideration needs to be given to pace of learning and completion of learning tasks due to the impact of visual fatigue.</p>	<p>Curriculum: Teaching methods which facilitate visual access to the curriculum, social / emotional development and class participation</p> <p>TA support to oversee modification needs, organisation of equipment, seating and grouping arrangements, play activities and to support additional skills intervention work.</p> <p>Subject/class Teaching Staff to support with the production of teaching resources in accessible formats.</p> <p>Additional adult support for trips and unfamiliar surroundings</p> <p>Specialist Additional Curriculum: Provided by the QTVI working in conjunction with school adult support- pupil may require skills development in:</p> <ul style="list-style-type: none"> • Low vision aids • Use of Assistive Technology • Strategies for Independent Learning • Mobility and Life-skills development provided by Habilitation Specialist 	<p>Specialist Support: QTVI involvement determined by eligibility criteria.</p> <p>QTVI will advise on skills development programme, where appropriate.</p> <p>Habilitation Specialist to be involved in carrying out a mobility and life skills assessment and implementing a programme of support as appropriate. Support determined by eligibility criteria.</p> <p>School Support: Daily designated TA involvement determined by the QTVI.</p> <p>Environment: An Environmental Audit from the QTVI advising on environmental adjustments required to meet the pupils needs</p> <p>Good controllable lighting conditions; overhead lighting, quality blinds on windows and task lighting</p> <p>Highlighted environmental features inside and out ie steps, curbs and hazards</p> <p>Prominent displays and signage</p> <p>Environment fosters an inclusivity for pupil with vision loss.</p> <p>Resources/equipment made available by school: General Equipment- Dark-lined books, felt tip pens, Frixion pens, wiki sticks. Highly contrasted PE equipment. – science equipment, rulers, protractors, DT equipment, hand-held low vision aid and Downloaded/ modified books. IT Equipment- large print calculator, iPad/tablet for low vision aid use, access to IWB, various App's.</p>

Vision Loss Range 4 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environment
<p>Vision Loss: Moderate to Severe</p> <p>Distance Vision: 6/25– 6/48 Log Mar</p> <p>Near Vision: EYFS & KS1: Point 30-58 font</p> <p>KS's 2-5: Point 24-38 font</p> <p>Or:</p> <ul style="list-style-type: none"> - Severe field Loss and/or night blindness - Significant visual processing difficulties/ perception due to diagnosis of CVI - Unstable or progressive visual condition with better acuities than above. - Late or sudden sight loss <p>Pupil will be under the care of a Hospital Ophthalmologist or have been discharged if an older student or visual condition is stable.</p> <p>Pupil is likely to:</p> <ul style="list-style-type: none"> - find concentration difficult - have colour vision difficulties - have photophobia - have contrast sensitivity - have poor hand-eye coordination - have a slower work rate - a difficulty identifying any distance information, people or objects or the interactive whiteboard 	<p>School: School should share the pupils vision management plan with all relevant staff, including cover staff and lunchtime staff.</p> <p>The school must regularly monitor pupil progress in respect of their vision Loss and share this with the QTVI</p> <p>The school must monitor progress in pupil's specialist additional curriculum, and report to QTVI to support with planning next steps.</p> <p>ITP/IEP will be required to support with planning and assessing needs and provision- drawn up in conjunction with QTVI and parents and reviewed regularly.</p> <p>Planning: Significant consideration will need to be given to planning so that modification of materials and gathering of resources can be done prior to lessons</p> <p>Regular planning with QTVI to plan next steps of specialist additional skills curriculum and discuss access to the curriculum for visual access.</p> <p>Specialist Support: QTVI involvement in assessing functional vision - may be required on a very frequent basis depending upon the nature of the visual condition.</p> <p>QTVI advising on modification needs and approach for curriculum access.</p> <p>QTVI will advise on and implement skills development programme, including specialist software training, IT equipment.</p> <p>Drawing up of and updating a vision management plan to reflect these assessments.</p> <p>Assessment/Access arrangements:</p>	<p>Quality First Teaching plus ... Full inclusion in mainstream class</p> <p>Specific Teaching and Learning strategies to support pupils visual access needs</p> <p>Seating Arrangements will need consideration</p> <p>Well managed playground activities and environment for safety is required.</p> <p>Prominent displays and signage Pre and Post tutoring.</p> <p>For EYFS and KS 1- use of real objects and visual prompts.</p> <p>Opportunities for social engagement with other CYP with VI.</p> <p>Modification: Learning materials will require significant modification across all curriculum areas.</p> <p>Consideration needs to be given to the presentation of information across all subjects</p> <p>Teachers to ensure pupils can access work displayed on interactive white boards in the method identified by the QTVI</p> <p>Pace of Learning: Consideration needs to be given to pace of learning and completion of learning tasks due to the impact of visual fatigue.</p>	<p>Curriculum: Teaching methods which facilitate visual access to the curriculum, social / emotional development and class participation</p> <p>TA support to oversee modification needs, organisation of equipment, seating and grouping arrangements, play activities and to support additional skills intervention work.</p> <p>Subject/class Teaching Staff to support with the production of teaching resources in accessible formats.</p> <p>Additional adult support for trips and unfamiliar surroundings</p> <p>School pastoral staff (trained) will need to be available for social and emotional wellbeing support throughout the week.</p> <p>Specialist Additional Curriculum: Provided by the QTVI/Specialist HL/TA working in conjunction with school adult support- pupil will require skills development in:</p> <ul style="list-style-type: none"> • Low vision aids • Use of Assistive Technology • Touch Typing • Keyboard short cuts • Strategies for Independent Learning. • Mobility and Life-skills development provided by Habilitation Specialist. • Social Interaction Skills development 	<p>Specialist Support: QTVI involvement determined by eligibility criteria (of a more frequent nature)</p> <p>QTVI will advise on skills development programme</p> <p>Specialist HL/TA to support with setting up and training school staff in modification needs. Support with delivery of specialist additional curriculum.</p> <p>Habilitation Specialist to be involved potentially at a high level in carrying out a mobility and life skills assessment and implementing a programme of support as appropriate. Support determined by eligibility criteria.</p> <p>Support from a trained counsellor may be required.</p> <p>School Support: Daily designated involvement-determined by the QTVI.</p> <p>Environment:</p> <ul style="list-style-type: none"> • An Environmental Audit from the QTVI advising on environmental adjustments required to meet the pupils needs • Good controllable lighting conditions; overhead lighting, quality blinds on windows and task lighting • Highlighted environmental features inside and out ie steps, curbs and hazards • Prominent displays and signage • Environment fosters an inclusivity for pupil with vision loss. <p>Resources/equipment made available by school: General equipment- Dark-lined books, felt tip pens, Frixion pens, wiki sticks. Highly contrasted PE equipment, specialist science and DT equipment, rulers, protractors. Hand-held low vision aids, Downloaded/modified books. IT equipment- large print calculator, iPad/tablet for low vision aid use, laptop</p>

	<p>Consideration needs to be given to approach to assessment activities at all Key Stages</p> <p>Will require modified test papers to be ordered and visual rest breaks.</p> <p>Will require additional time in all areas.</p> <p>May require early opening to modify papers further</p> <p>May need practical support, where applicable.</p>			<p>with magnification software, specialist IT for dual purpose access to the IWB and near vision tasks, access to IWB, various App's.</p>
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Vision Loss Range 5 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environment
<p>Vision loss: Severe/ Profound</p> <p>Distance Vision: 6/49 – 6/90 Snellen</p> <p>Near Vision: EYFS & KS's 1: Point 60 font or larger KS's 2-5: Point 40 font or larger</p> <p>Or:</p> <ul style="list-style-type: none"> - Profound field Loss and/or night blindness - Significant visual processing difficulties/ perception due to diagnosis of CVI - Unstable or progressive visual condition with better acuities than above. - Late or sudden sight loss <p>Or a pupil who requires the learning of pre-braille and tactile skills prior to full sight loss.</p> <p>Pupil will be under the care of a Hospital Ophthalmologist or have been discharged if an older student or visual condition is stable.</p> <p>Pupil is likely to:</p> <ul style="list-style-type: none"> - find concentration difficult - have colour vision difficulties - have contrast sensitivity - have poor hand-eye coordination - have photophobia - have a significantly slower work rate - a difficulty identifying any distance information, people or objects or the interactive whiteboard 	<p>School: School should share the pupils vision management plan with all relevant staff, including cover staff and lunchtime staff.</p> <p>The school must regularly monitor pupil progress in respect of their vision Loss and share this with the QTVI</p> <p>The school must monitor progress in pupil's specialist additional curriculum, and report to QTVI to support with planning next steps.</p> <p>ITP/IEP will be needed or an EHCP will be required to support with planning and assessing needs, provision and outcomes- drawn up in conjunction with QTVI and parents and reviewed regularly.</p> <p>Planning: Significant consideration will need to be given to planning so that modification of materials and gathering of resources can be done prior to lessons</p> <p>Regular planning with QTVI to plan next steps of specialist additional skills curriculum and discuss access to the curriculum for visual access.</p> <p>Specialist Support: QTVI involvement in assessing functional vision - may be required on a very frequent basis depending upon the nature of the visual condition.</p> <p>QTVI advising on modification needs and approach for curriculum access.</p> <p>QTVI will advise on and implement skills development programme, including specialist software training, IT equipment, and potentially the early stages of pre-braille, braille and tactile skills</p>	<p>Quality First Teaching plus ...</p> <p>Full inclusion in mainstream class some 1-1 withdrawal for specialist skills development.</p> <p>Specific Teaching approaches will place a high emphasis on direct training, very finely graded and practical tasks which provide opportunities for frequent repetition and reinforcement, with additional audio description where required.</p> <p>Seating Arrangements will need consideration</p> <p>Well managed playgrounds activities and environment for safety is required.</p> <p>Prominent displays and signage</p> <p>Pre and Post tutoring.</p> <p>For EYFS and KS 1- use of real objects and visual prompts.</p> <p>Opportunities for social engagement with other CYP with VI.</p> <p>Teaching of long cane/symbol cane skills is likely to be required.</p> <p>Modification: All learning materials will require re-formatting and presented to support mode of access – electronic magnification or speech.</p> <p>Consideration needs to be given to the contrast and presentation of information in all areas.</p> <p>Consideration will need to be given to planning so that modification of materials and resources can be done prior to lessons</p> <p>Teachers to ensure pupils can access work displayed on interactive white boards in alterative formats and methods identified by the QTVI</p>	<p>Curriculum:</p> <p>Teaching methods which facilitate visual access to the curriculum and via alternative means such as audio access, social / emotional development and class participation</p> <p>TA support is to oversee modification needs, as well as produce modified resources across all curricular areas, give audio description in some lessons, organisation of pupils equipment, seating and grouping arrangements, assistance in practical subjects such as PE, science, DT, play activities and to undertake additional skills intervention work. Adult support may be required to ensure safe navigation during breaks times.</p> <p>Subject/class Teaching Staff to support with the production of teaching resources in accessible formats.</p> <p>Additional adult support for trips and unfamiliar surroundings</p> <p>School pastoral staff (trained) will need to be available for social and emotional wellbeing support throughout the week.</p> <p>Specialist Additional Curriculum: extensive skills development required, provided by the QTVI/Specialist TA/HLTA working in conjunction with the school adult support: Touch Typing Keyboard short cuts Use of Assistive Technology Use of magnification and screen reader software Social Interaction Skills development. Strategies for Independent Learning Development of early tactile discrimination skills. Extensive Mobility and orientation and Life-skills development provided by Habilitation Specialist</p>	<p>Specialist Support: QTVI involvement determined by eligibility criteria (frequent in nature)</p> <p>QTVI will advise on skills development programme</p> <p>Advice from a QTVI on sourcing large and tactile print materials</p> <p>Support and advice from a QTVI on producing tactile materials</p> <p>Support from a QTVI to develop Braille literacy across the curriculum</p> <p>Specialist HL/TA to support with setting up and training school staff in modification needs. Support with delivery of specialist additional curriculum including touch typing, pre-braille, braille and tactile skills.</p> <p>Habilitation Specialist to be involved potentially at a high level in carrying out a mobility and life skills assessment and implementing a programme of support as appropriate. Support determined by eligibility criteria.</p> <p>Support from a trained counsellor may be required.</p> <p>School Support: Designated 1-1 TA involvement for a minimum of 4 hours a day but may need to be full time, if pupil is learning tactile skills- this will be advised on by the QTVI.</p> <p>Environment:</p> <ul style="list-style-type: none"> • An Environmental Audit from the QTVI advising on environmental adjustments required to meet the pupils needs. • Good controllable lighting conditions; overhead lighting, quality blinds on windows and task lighting • Highlighted environmental features inside and out ie steps, curbs and hazards

	<p>Drawing up of and updating a vision management plan to reflect these assessments.</p> <p>Assessment/Access arrangements: Significant consideration needs to be given to approach to assessment activities at all Key Stages</p> <p>Will require modified or tactile test papers to be ordered</p> <p>visual rest breaks will be required</p> <p>Will require additional time in all areas.</p> <p>Will require early opening to modify papers further</p> <p>Will need practical support, where applicable.</p>	<p>Pace of Learning: Consideration needs to be given to pace of learning and completion of learning tasks due to the significant impact of visual fatigue and use of alternative curricular access.</p>		<ul style="list-style-type: none"> • Prominent displays and signage • Environment fosters an inclusivity for pupil with vision loss. • Tactile references where appropriate <p>Resources/equipment supplied by school: General Equipment- Dark-lined books, felt tip pens, Frixion pens, wiki sticks. Highly contrasted PE equipment, specialist science and DT equipment, rulers, protractors hand held low vision aids, Downloaded/modified books.</p> <p>IT equipment- Large print/talking calculator iPad/tablet for low vision aid use, laptop with magnification or speech software, specialist IT for dual purpose access to the IWB and near vision tasks, various App's. Modification equipment for school TA. Possible need for equipment to produce tactile diagrams, and early Braille. Supplied by school or supplied in conjunction with Vision Support Team Access Budget for Specialist IT if in mainstream.</p>
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Vision Loss Range 6 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and environment
<p>Vision loss: Profound</p> <p>Tactile learner Or pupil who requires the learning of pre-braille, braille and tactile skills prior to full sight loss with the same acuities as the previous range category</p> <p>Pupil will be under the care of a Hospital Ophthalmologist but is likely to have been discharged if little or no residual vision.</p>	<p>School: School should share the pupils vision management plan with all relevant staff, including cover staff and lunchtime staff.</p> <p>The school must regularly monitor pupil progress in respect of their vision Loss and share this with the QTVI The school must monitor progress in pupil's specialist additional curriculum, and report to QTVI to support with planning next steps.</p> <p>An EHCP will be required to support with planning and assessing needs, provision and outcomes - drawn up in conjunction with QTVI and parents and reviewed regularly.</p> <p>Planning: Significant consideration will need to be given to planning so that modification of materials and gathering of resources can be done prior to lessons</p> <p>Regular planning with QTVI to plan next steps of specialist additional skills curriculum and discuss access to the curriculum for tactile and auditory access.</p> <p>Specialist Support: QTVI involvement may need to be involved in assessing functional vision (depending on level of residual vision) QTVI advising on modification needs and approach for curriculum access.</p> <p>QTVI advising on modification needs and approach for curriculum access.</p> <p>QTVI will advise on and implement high level of skills development programme, including specialist software training, IT equipment, pre-braille, braille and tactile skills.</p> <p>Drawing up of and updating a vision management plan to reflect these assessments.</p>	<p>Quality First Teaching plus ...</p> <p>Full inclusion in mainstream class, with some daily 1-1 withdrawal for specialist skills development.</p> <p>Specific Teaching approaches will place a high emphasis on direct training, very finely graded and practical tasks which provide opportunities for frequent repetition and reinforcement, with additional audio description</p> <p>Multi-sensory opportunities of learning, including auditory means</p> <p>Use of tactile images. Use of real objects.</p> <p>Pre and Post tutoring.</p> <p>For EYFS and KS 1- use of real objects</p> <p>Seating Arrangements will need consideration</p> <p>Well managed playground activities and environment for safety is required.</p> <p>Tactile signage throughout the school</p> <p>Opportunities for social engagement with other CYP with VI.</p> <p>Teaching of long cane/symbol cane skills required</p> <p>Modification: All learning materials will require re-formatting and presented to support mode of access – tactile and/or speech.</p> <p>Significant consideration presentation of information in all areas.</p> <p>Significant consideration will need to be given to planning so that modification of materials and sourcing alternate resources can be done prior to lessons</p> <p>Teachers to ensure pupils can access work displayed on interactive white</p>	<p>Curriculum: Teaching methods which facilitate visual access to the curriculum and via alternative means such as audio access, social / emotional development and class participation</p> <p>TA support is to oversee modification needs, as well as produce modified resources across all curricular areas, give audio description in some lessons, organisation of pupils equipment, seating and grouping arrangements, assistance in practical subjects such as PE, science, DT, play activities and to undertake additional skills intervention work. Adult support may be required to ensure safe navigation during breaks times.</p> <p>Subject/class Teaching Staff to support with the production of teaching resources in accessible formats.</p> <p>Additional 1-1 adult support for trips and unfamiliar surroundings</p> <p>School pastoral staff (trained) will need to be available for social and emotional wellbeing support throughout the week.</p> <p>Specialist Additional Curriculum: extensive skills development required, provided by the QTVI/Specialist TA/HLTA working in conjunction with the school adult support: Touch Typing Speech software training Keyboard short cuts Use of Assistive Technology Use of magnification and screen reader software Social Interaction Skills development. Strategies for Independent Learning Development of early tactile discrimination skills. Extensive Mobility and orientation and Life-skills development provided by Habilitation Specialist</p>	<p>Specialist Support: QTVI involvement determined by eligibility criteria (very frequent nature)</p> <p>QTVI will advise on skills development programme</p> <p>Advice from a QTVI on sourcing large and tactile print materials</p> <p>Support and advice from a QTVI on producing tactile materials</p> <p>Support from a QTVI to develop Braille literacy across the curriculum</p> <p>Specialist HL/TA to support with setting up and training school staff in modification needs. Support with delivery of specialist additional curriculum, including touch typing, pre-braille, braille and tactile skills.</p> <p>Habilitation Specialist to be involved potentially at a high level in carrying out a mobility and life skills assessment and implementing a programme of support as appropriate. Support determined by eligibility criteria.</p> <p>Support from a trained counsellor may be required.</p> <p>School Support: Designated 1-1 TA involvement for a minimum of full time, plus additional support during break and lunch times (when designated TA has their break)</p> <p>Environment:</p> <ul style="list-style-type: none"> An Environmental Audit from the QTVI advising on environmental adjustments required to meet the pupils needs Good controllable lighting conditions; overhead lighting, quality blinds on windows and task lighting

	<p>Assessment/Access arrangements: Significant consideration needs to be given to approach to assessment activities at all Key Stages</p> <p>Will require braille and tactile test papers to be ordered</p> <p>rest breaks will be required</p> <p>Will require significant additional time in all areas.</p> <p>Will require early opening to modify papers further</p> <p>Will need practical support, where applicable.</p> <p>May require a reader in some elements of assessments</p>	<p>boards in alternative formats and methods identified by the QTVI</p> <p>Pace of Learning: Consideration needs to be given to pace of learning and completion of learning tasks due to the significant impact of using tactile means curricular access.</p>		<ul style="list-style-type: none"> • Highlighted environmental features inside and out ie steps, curbs and hazards • Environment fosters an inclusivity for pupil with vision loss. • Tactile references where appropriate • Layout of furniture in classroom and corridors considered and remain static for safe movement. • Tactile references and braille signage. <p>Resources/equipment: Supplied by school General Equipment- Sound producing PE equipment, specialist science and DT equipment with speech sounds, tactile rulers and protractors, talking calculator. Rubber mat, Wiki sticks, Tactile 100 square with Braille numbers and Number line to 10. Maths tactile supporting shapes and objects. Specialist paper e.g. braille embossing paper, Zychem swell paper, German film. Tactile book subscription. Perkins Braille x 2</p> <p>IT equipment - For staff use (school and SS-VST) - Laptop and embosser in a cabinet modification equipment for school TA/specialist TA. Canon printer to produce raised diagrams/pictures, Zyfuser machine for production of tactile images and diagrams.</p> <p>For pupil use (when QTVI advises it is appropriate) calculator with speech, laptop with speech software and BrailleNote.</p> <p>Specialist IT and Brailers supplied by school or supplied in conjunction with Vision Support Team Access Budget for Specialist IT if in mainstream.</p>
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PfA Outcomes for Children and Young People with Vision Loss

NB Age Groups are a guide only- this is a skills continuum as vision loss can occur or deteriorate at any age and we need to accommodate varied abilities and not limit progress

	Employability	Independent Living	Community Inclusion	Health
Reception to Y2 (5-7 years)	<p>E1: Developing mainstream IT skills that support vision loss</p> <p>0 - Doesn't use IT to access their learning</p> <p>1 - Uses a simple piece of IT independently i.e. Dolphin Easy Reader App</p> <p>2 - Has completed a typing course</p> <p>3 - Can use a more complex piece of IT with support i.e. adjusting settings on iPad</p> <p>4 - Uses touch typing within lessons</p> <p>5 - Can independently use a complex piece of IT problem solve glitches.</p>	<p>L1: Independent adaptation of resources</p> <p>Independent adaptation of resources</p> <p>0 - No independence with use of resources</p> <p>1 - Can use a hand-held low vision aid with support</p> <p>2 - Can use a low vision aid without support</p> <p>3 - Is learning to use accessibility functions of a tablet/iPad</p> <p>4 - Demonstrates knowledge of when to use the right piece of equipment</p> <p>5 - Independently uses accessibility functions of tablet/iPad fully</p>	<p>C1: Building positive relationships with students and staff</p> <p>0 - Requires adults to facilitate all interactions</p> <p>1 - Will communicate their needs through a designated adult</p> <p>2 - Have friends that know about their VI</p> <p>3 - Will communicate their needs with varying staff</p> <p>4 - Happy to direct their learning themselves</p> <p>5 - Organises meetings with relevant professionals themselves</p>	<p>H1: Ability to explain of own health needs inc. vision loss to others</p> <p>0 - Don't verbalise that they can't see as well as others</p> <p>1 - Can say they find it hard to see things near or far away</p> <p>2 - Can say they need print size X, to sit at the front or use piece of equipment</p> <p>3 - Can say they have X condition and can simply explain how it affects them</p> <p>4 - Can say have X condition and it affects me in this way, more detailed</p> <p>5 - Can say they have X condition, it affects me in this way but it doesn't stop me doing Y</p>
Y3 to Y6 (8-11 years)	<p>E2: Showing employability in a range of work experience tasks</p> <p>0 - No skills demonstrated</p> <p>1 - Simple IT skills are in place and being developed</p> <p>2 - Uses all their IT skills independently in lessons with prompts</p> <p>3 - Uses all their IT skills independently in lessons without prompts</p> <p>4 - Independently organises IT equipment i.e. charging, storage, collection</p> <p>5 - Can file work electronically including producing folders for curriculum areas</p>	<p>L2: Managing and looking after own equipment</p> <p>0 - Support required for equipment management</p> <p>1 - Cleans own glasses</p> <p>2 - Collects all simple relevant resources for learning task ie pen, ruler, sloping board</p> <p>3 - Is learning to set up IT equipment at beginning and pack down at end of lesson</p> <p>4 - Independently sets up IT equipment at beginning and pack down at end of lesson</p> <p>5 - Can download resources and manage apps on their tablet/iPad</p>	<p>C2: Inclusion in extracurricular set activities</p> <p>0 - Not willing to take part in any extra curricular</p> <p>1 - Takes part in a VI activity with support</p> <p>2 - Independently takes part in a VI activity</p> <p>3 - Takes part in non-VI extra curricular activities with support</p> <p>4 - Independently takes part in non-VI extra curricular activities</p> <p>5 - Attends a residential</p>	<p>H2: Articulating needs as they arise to peers and staff</p> <p>0 - Don't say what helps</p> <p>1 - Can explain managing vision needs to teachers, e.g. I'm pulling window blinds to manage glare</p> <p>2 - Speaks to teacher in advance of lessons to ensure materials and environment is accessible</p> <p>3 - Independently putting measures in place to manage vision fatigue and explaining these</p> <p>4 - Can articulate in depth what helps them maintain their best vision and why</p> <p>5 - Tackle prejudices and misconceptions of VI with positive self advocacy</p>
Y7 to Y11 (11-16 years)	<p>E3: Exploring the world of work through direct experiences</p> <p>0 - No skills demonstrated</p> <p>1 - Undertakes a simple task within the wider school, with direction</p> <p>2 - Independently undertakes a simple task within the wider school</p> <p>3 - Undertakes regular tasks within the home</p> <p>4 - Organises work experience with support</p> <p>5 - Organises work experience themselves</p>	<p>L3: Personal organisation and time management</p> <p>0 - Needs adults to direct organisation</p> <p>1 - To download all work materials ready for the start of lessons</p> <p>2 - To speak directly to teacher to resolve any access issues as they occur</p> <p>3 - Can seek IT support directly from teacher or technician when needed</p> <p>4 - Keeps track of all or organises medical/eye appointments</p> <p>5 - Independently organising College visits and interviews</p>	<p>C3: Accessing VI specific activities</p> <p>0 - Not willing to take part in any VI activity</p> <p>1 - Takes part in a fun VI activity with support, transported</p> <p>2 - Independently takes part in a fun VI activity, transported</p> <p>3 - Takes part in a PFA VI activity with support, transported</p> <p>4 - Independently takes part in a PFA VI activity, transported</p> <p>5 - Takes himself/herself to a PFA VI activity</p>	<p>H3: Managing challenging events using a range of strategies</p> <p>0 - Not able to manage anything independently</p> <p>1 - Will seek advice for vision changes when they occur</p> <p>2 - Knows where to ask for available support inc. SENCo, QTVI, medical professionals, charities</p> <p>3 - Independently manages health resources- ie glasses, cap, sun cream</p> <p>4 - Manages advanced health resources, e.g. eye drops, contact lenses, medication</p> <p>5 - Requests extra-curricular support when required i.e. counselling, mobility</p>
Examples of the overall skills continuum in practice	<p>E1 - Reading storybooks on an iPad in Y1 to using all shortcuts when touch typing in Y11</p> <p>E2 - Little jobs' in Y1 to typing and filing work electronically in Y11</p> <p>E3 - School visits in Y1 to industry work experience placements in Y11</p>	<p>L1 - Using a manual magnifier in Y1 to mentoring younger students to use accessibility features on an iPad in Y11</p> <p>L2 - Cleaning own glasses in Y1 to independently researching, downloading and using VI support apps in Y11</p> <p>L3 - Finding own tray and peg in Y1 to planning own college open day visits in Y11</p>	<p>C1 - Having a playtime buddy in Y1 to arranging meetings with careers advisors in Y11</p> <p>C2 - Being in a school play or out of school club in Y1 to participating in an activity residential Y11</p> <p>C3 - Little jobs' in Y1 to industry work experience placements in Y11</p>	<p>H1 - Telling friends 'My eyes don't work well' in Y1 to explaining in clear detail vision levels and management in Y11</p> <p>H2 - Saying "it's too small' with prompts in Y1 to actively seeking counselling support when needed in Y11)</p> <p>H3 - Wearing a cap in the playground in Y1 to actively making links with support organisations in Y11</p>

Physical Difficulties and Medical Needs Provision Guidance Statements

Physical Difficulties and Medical Needs Range 1 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources and Staffing and Environment
<p>Fine Motor CYP has mild fine motor difficulties.</p> <p>Gross Motor CYP has a mild motor/mobility difficulty or physical vulnerability.</p> <p>Toileting CYP is able to manage own toileting personal care needs with only occasional advice.</p> <p>Eating CYP can feed and drink independently at an age-appropriate level with occasional advice.</p> <p>Dressing CYP can dress self at an age-appropriate level with occasional advice.</p> <p>Sitting CYP can sit on a usual chair with occasional prompts around good sitting.</p> <p>Health and Medical This will be a minor diagnosed medical condition or an established diagnosed medical condition that is well controlled</p>	<p>Part of continual school and class assessment.</p> <p>School has awareness of their responsibilities under DDA and of educational implications of personal care.</p> <p>Continuity of subject learning, while managing occasional personal care.</p> <p>Appropriate risk assessments in place.</p> <p>School awareness of responsibilities under DDA and of statutory guidance for supporting CYPs with medical conditions.</p> <p>School based monitoring to ensure progress is made despite minor health /medical needs.</p> <p>Health Care Plan in place and regularly reviewed in school</p> <p>School training around medical needs.</p>	<p>Mainstream class with occasional additional individual or small group support</p> <p>Attention to positioning in classroom</p> <p>Differentiation of the task.</p> <p>Reduced amount of recording, use of tables, mind maps, pictures and diagrams</p> <p>Extra time and additional support within usual routines to help CYP manage their own health / medical needs with occasional supervision.</p> <p>Expectation that some CYPs will require additional time to develop their skills and independence.</p> <p>Shared strategies between home and school for routines.</p> <p>Flexible teaching to manage absence due to occasional medical appointments</p> <p>Flexibility of groupings allows for buddy support for example at times of fatigue.</p>	<p>Quality first teaching.</p> <p>The curriculum promotes and enables fine motor development and makes allowance for extra time for fine motor activities in the classroom.</p> <p>Consideration given to the pace of learning and completion of learning tasks.</p> <p>Hand aerobics and learning rest breaks.</p> <p>The curriculum promotes and enables gross motor/ mobility development and makes allowance for extra time for movement in the educational environment.</p> <p>The curriculum generally provides: an awareness of personal care and hygiene procedures and teaching and advice to help CYPs manage their own personal needs with occasional supervision.</p> <p>“Preparing a child for school” advice provided to parents before the CYP starts school.</p> <p>Independence skills are developed within general classroom routines with self-help skills e.g. more time to for eating lunch.</p> <p>Opportunities to learn eating skills through play such as water play, taking lids off, role play area with plate and cutlery.</p> <p>Playdough activities to develop skills.</p> <p>Independence skills are developed within general classroom routines with self-help skills e.g. Opportunities to learn these skills through play such as dressing up clothes.</p>	<p>Resources and Environment Class tools e.g. a variety of pencils, scissors and pencil grips for all CYPs to choose from.</p> <p>Hand aerobic activities.</p> <p>Equipment and resources to promote fine and gross motor/mobility skills</p> <p>Visual prompts – toileting routine, washing hands.</p> <p>Playdough activities, plastic cutlery, opportunities to stab and cut playdough and learn skills in a play environment.</p> <p>Healthcare resources and equipment generally available.</p> <p>School policies to support CYPs with health and medical needs such as Schools medical policy.</p> <p>Materials to generally raise awareness around a range of medical needs.</p> <p>Staffing No extra support, class teacher utilises the support of the class TA.</p> <p>Staff develop independence skills with CYP, offering occasional mentoring/modelling /guidance.</p> <p>Staff to be available occasionally for additional support e.g. an occasional toileting accident.</p> <p>Staff implement support strategies to encourage independence in eating and dressing as part of their usual routine.</p> <p>Adult Support to meet the CYP medical needs (e.g. Administering regular medication).</p>

Physical Difficulties and Medical Needs Range 2 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environmental
<p>Fine Motor CYP has mild- moderate fine motor difficulties.</p> <p>Gross Motor CYP has a mild- moderate motor/mobility difficulty or physical vulnerability.</p> <p>Toileting CYP is able to manage own toileting personal care needs with only occasional advice and supervision.</p> <p>Eating CYP can feed and drink independently at an age-appropriate level only occasional advice and appropriate supervision within accessible/supportive routines.</p> <p>Dressing CYP can dress self at an age-appropriate level with occasional advice and appropriate supervision within accessible/supportive routines.</p> <p>Sitting CYP can sit on a usual chair in the learning environment with daily prompts around good sitting and reasonable adjustments to seating.</p> <p>Health and Medical This will be a minor diagnosed medical condition or an established diagnosed medical condition that is well controlled</p>	<p>As Range 1</p> <p>SENCo to be involved in specific assessments and observations.</p> <p>Medication may be required during the school day so CYP to be supervised and supported to take medication within general school policy.</p> <p>CYP involved in monitoring and setting targets</p> <p>Care plan in place, if appropriate, written with specialist nurse/ school nurse</p> <p>Staff are aware of CYPs' individual personal care and self-help needs on a 'need to know' basis while maintaining confidentiality as necessary.</p>	<p>As Range 1</p> <p>All support offered in consultation with CYP and with an essential reference to their privacy, self-esteem and dignity.</p> <p>Reasonable adjustments to uniform to support self -help skills for dressing.</p> <p>Staff develop independence skills with CYP, offering supervision and occasional mentoring/modelling /guidance.</p> <p>CYP to be taught strategies to develop independence</p> <p>Staff implement strategies to encourage independence as part of their usual routine.</p>	<p>As Range 1</p> <p>Staff able to address fine and gross motor skills as part of normal classroom delivery.</p> <p>School following procedures as outlined in their intimate care policy and Personal Care Matters Document.</p> <p>Some differentiation to the P.E curriculum.</p>	<p>As Range 1</p> <p>Resources and Environment Seating arrangements individualised for CYP e.g. Footrest, Sloping board and Dycem</p> <p>Personal care resources available to CYPs in supervised situations.</p> <p>Visual prompts – toileting routine, washing hands.</p> <p>Healthcare resources are available for CYPs to access in a supervised situation.</p> <p>Accessible toilet/bathroom facility.</p> <p>Staffing Staff available to supervise movement around the building or transitions to the toilet.</p> <p>Staff to be available occasionally for additional support e.g. an occasional toileting accident.</p> <p>Occasional assistance available if required for CYP who is developing independence skills.</p> <p>Cover arrangements in place to ensure temporary staff are aware of needs.</p> <p>Staff to be available to give prescribed course of medication within the school day</p>

Physical Difficulties and Medical Needs Range 3 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environmental
<p>Fine Motor CYP has moderate fine motor difficulties.</p> <p>Gross Motor CYP has a moderate motor/mobility difficulty or physical vulnerability.</p> <p>Toileting CYP is able to manage regular personal care needs with some minor difficulties. CYP needs help accessing the toilet but can then manage own needs.</p> <p>Eating CYP is able to manage eating needs with some minor difficulties requiring minor modifications and some individual prompts and regular supervision, and monitoring.</p> <p>Dressing Is generally able to manage most dressing tasks but has minor difficulties which have some impact on developing independence skills. Requires minor modifications and regular supervision, individual prompts, requesting additional occasional assistance within the dressing routine</p> <p>Sitting CYP can sit on a usual chair in the learning environment reasonable adjustments and adaptations to seating.</p> <p>Health and Medical CYP has a health/medical condition which requires general monitoring and might cause them to tire more quickly. Key staff are aware of CYPs 'individual health/medical needs. Staff seek support from appropriate agencies regarding health/medical procedures.</p>	<p>As Range 1 and 2 Fine motor targets on an individual target plan.</p> <p>Fine Motor assessment by school staff.</p> <p>Gross motor individual targets on an individual target plan.</p> <p>Gross Motor assessment by school staff.</p> <p>Personal care targets are identified and supported through modelling, prompts and rewards.</p> <p>Staff seek advice from PDSS/OT and are signposted to training offer.</p> <p>Interventions evaluated and used to guide further input.</p> <p>Safeguarding procedures are followed.</p>	<p>As Range 1 and 2</p> <p>Time and space for fine and gross motor activities to take place regularly in school</p> <p>CYP requires some adaptations to be made to usual furniture to support posture, such as footstep, cushion, and backrest.</p> <p>Physiotherapy exercises are incorporated into P.E. General P.E advice is given.</p> <p>PDSS general PD Primary and Early years training is accessed.</p> <p>Staff will consult CYP about their needs and offer prompts and supervision for regular personal care needs around toileting, dressing and eating and provide occasional assistance when needed.</p>	<p>As Range 1 and 2</p> <p>Fine motor and Gross motor interventions.</p> <p>Staff timetabled to complete the interventions consistently.</p> <p>Shared approaches around a toileting, eating and dressing programme – between home and school.</p> <p>Regular individual prompt, supervision, rewards within a supportive routine for personal care and self-help skills.</p> <p>CYP is supported and encouraged to make needs known.</p> <p>Differentiation to the P.E curriculum.</p>	<p>As Range 1 and 2</p> <p>Resources and environment Fine motor equipment available to support assessment and targets.</p> <p>Bank of exercises, activities and materials available Footrest, Sloping board, Dycem.</p> <p>Appropriate height furniture needed.</p> <p>Hall space specifically allocated for Gross Motor group.</p> <p>Specialist Gross motor and P.E equipment and resources e.g. GM assessment, variety of Lightweight P.E equipment balls, bats, and T ball stand.</p> <p>Space to store Fine and Gross motor equipment</p> <p>Designated storage for personal resources. School to carry out an individual assessment around access to the bathroom e.g. grab rails and lever taps, using advice from appropriate professional if required.</p> <p>Appropriate seating in the dining room.</p> <p>Good grip cutlery</p> <p>Designated and secure storage area for healthcare resources.</p> <p>Private, accessible areas are available for routine health and medical care.</p> <p>Appropriate waste disposal systems in place if appropriate.</p> <p>Staffing Staff to implement interventions.</p> <p>Staff available to 'check in 'with CYP managing their own personal care needs with a medical overview such as a CYP managing a mitrofanoff, catheter or stoma.</p> <p>Staff available to offer assistance to cut up food.</p> <p>Staff to be available to give on-going medication regularly throughout the school day.</p>

Physical Difficulties and Medical Needs Range 4 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environment
<p>Fine Motor CYP has moderate/significant fine motor difficulties which impact on many curricular areas and daily living skills.</p> <p>Gross Motor CYP has a moderate/significant motor/mobility difficulties or physical vulnerability. CYP usually requires mobility aids and or adaptations to the environment and may use a wheelchair part time for longer distances/to manage fatigue or independently use a wheelchair to access the learning environment. CYP can manage their transfers independently with supervision.</p> <p>Toileting CYP is generally able to manage own toileting personal care given appropriate facilities, supervision and regular assistance with the journey to the bathroom and the transfer onto the toilet.</p> <p>Eating CYP is able to manage skills around eating given appropriate equipment, facilities and specialist strategies and with regular assistance over usual snack and lunchtime. Dietician involved.</p> <p>Dressing CYP requires modifications and regular supervision, individual prompts, and additional assistance within the dressing routine.</p> <p>Sitting CYP can sit on a usual chair in the learning environment with reasonable adjustments adult assistance and adaptations to seating</p> <p>Health and Medical CYP can manage some of their medical/health care given appropriate facilities and regular assistance but will have some reduced independence due to physical and medical needs.</p>	<p>As Range 1.2.and 3</p> <p>Occupational therapy involvement, specialist individual targets set.</p> <p>Physical management plan written with specialist advisory teachers.</p> <p>Appropriate risk assessments are undertaken in school using advice from agencies as required</p> <p>Staff to have manual handling training.</p> <p>Staff seek advice from PDSS regarding access to the curriculum, environment and training</p> <p>The learning may be affected by reduced attendance and some fatigue as a result of medical needs.</p> <p>CYPs may miss some learning due to health care appointments and opportunities /compensatory teaching needed.</p> <p>Personal Emergency Evacuation Plan required.</p> <p>Staff seek the necessary advice and training from appropriate agencies regarding medical and health interventions.</p> <p>Walking distances may need to be reduced due to medical health needs.</p> <p>Personal Emergency Evacuation plan to be considered for times when medical care is being carried out.</p>	<p>As Range 1.2.and 3</p> <p>Use of alternative forms of recording, voice recording, word processing.</p> <p>Use of ICT to record work.</p> <p>Staff trained to specifically include the CYP in P.E.</p> <p>Moving and handling training.</p> <p>Development of good home school links / shared strategies to help develop independence with and appropriate management of medical needs.</p> <p>School ensure continuity of subject learning, while managing/supporting regular health / medical needs.</p> <p>Staff provide the necessary assistance/support for regular intervention and mentoring.</p>	<p>As Range 1.2.and 3</p> <p>Targets on individual target plan.</p> <p>Assistance in some subjects and practical tasks required.</p> <p>CYP has regular input to address specialised targets set by OT.</p> <p>Individualised motor / mobility programmes as advised by appropriate health professional are implemented.</p> <p>The school curriculum provides regular intervention to support developing skills.</p> <p>The school curriculum is designed to teach CYPs to manage some of their own medical and health care needs as appropriate and according to their age.</p>	<p>As Range 1.2.and 3</p> <p>Resources and environment Fine motor equipment to address the OT targets. Laptops, Laptop stand, iPad, mouse and keyboard big/small keys depending on need.</p> <p>ICT programmes and apps to address recording need e.g. Siri, dragon dictate, docs plus and clicker.</p> <p>Physio equipment and/or mobility aids as advised.</p> <p>Storage for change of clothes if appropriate. Private area for changing of clothes</p> <p>Space to complete physiotherapy</p> <p>Accessible swimming pool and changing facilities.</p> <p>Accessible off-site visits and activities.</p> <p>Accessible environment designed to meet the needs of people using mobility aids. Accessible storage area for equipment and a charging facility if required.</p> <p>Personal Emergency Evacuation plan to be considered for times when medical care is being carried out.</p> <p>Accessible or adapted environment, which will include a medical facility if required.</p> <p>Staffing Staff to set up ICT equipment.</p> <p>Adult support for the transfer to the chair and to get chair to and from the table. (pull chair under the table and out again) and manage seating equipment to support posture. Staff trained to implement the physiotherapy programme. Adult support for all P.E lessons. Adult support for outside break and lunchtimes as appropriate.</p> <p>Adult support for off site visits. CYP may require additional supervision to move around the environment.</p>

Physical Difficulties and Medical Needs Range 5 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and Environment
<p>Fine motor CYP is able to reach but has difficulty grasping. CYP can access the curriculum and daily living skills when individualised programmes, adult assistance, extra time, and specialised individualised equipment are provided, despite significant fine motor difficulties impacting on independent functioning in most curriculum areas.</p> <p>Gross motor CYP has significant motor / mobility impairment or physical vulnerability, which impacts on movement around the learning environment and access to the curriculum in most areas. CYP requires a fully accessible environment. CYP is usually a wheelchair user requiring adult assistance for mobility equipment, transfers and physical management.</p> <p>Toileting CYP has either bowel or bladder control difficulties. CYP may need support for catheterisation. Personal care needs are frequently managed as and when required by direct adult intervention support and monitoring. CYP wears pads or nappies and need direct adult assistance to change. Staff support regular toileting needs with a regular medical overview or adult assisted transfer.</p> <p>Eating CYP requires direct adult management/close supervision /monitoring throughout lunchtime/regular feeding time with a medical /health professional overview CYP is fully dependent for feeding and drinking e.g. peg or tube fed. Food may require thickening.</p> <p>Dressing CYP needs considerable physical help with dressing. CYP requires direct adult</p>	<p>As Range 1.2.3 and 4</p> <p>Appropriate risk assessments around health and medical needs are undertaken and this could include moving and handling plans and are regularly reviewed with the CYP, parents/ carers and health care professionals.</p> <p>Occupational therapy involvement. P.E inclusion course for all staff to attend who teach P.E. Regular specific advice regarding P.E.</p> <p>CYPs with significant health and medical needs may have conditions which cause them to tire more quickly than other CYPs and to be slower to complete activities.</p> <p>PE will need to be specifically planned to accommodate health and medical need and ensuring advice from relevant health professionals and specialist teachers has been incorporated.</p> <p>Moving and handling plan. Liaison time with physio/PDSS staff.</p> <p>An individual care plan is developed usually with health professionals leading and regularly reviewed with the CYP, parents/ carers and health care professionals.</p> <p>Staff trained by health professionals for management of personal care intervention e.g. catheterisation.</p>	<p>As Range 1.2.3 and 4</p> <p>Use of hand-controlled assistive technology and alternative forms of recording.</p> <p>Specialist individual targets set. Use of a scribe in some curriculum areas.</p> <p>Regular use of ICT to record work. Curriculum modified to use assistive technology.</p> <p>Focus on CYP participating in management of their significant personal care needs where it is appropriate.</p> <p>Scribe may be required for recording work.</p> <p>Hand over hand (under hand) support for eating.</p> <p>1:1 assistance at lunchtimes, carry tray, to eat, use cutlery.</p> <p>Individual support for dressing using an Occupational therapy programme requiring bespoke coaching and assistance.</p> <p>IT Accessibility functions adjusted to support the CYP's needs.</p>	<p>As Range 1.2.3 and 4</p> <p>Extra time and access arrangements for assessment/exams.</p> <p>Specialist seating assessment needed.</p> <p>Individualised physiotherapy programmes, Package of care in school.</p> <p>Will need a significantly modified or adapted curriculum/ timetable due to frequent and significant personal care needs or fatigue and to ensure continuity of subject learning.</p> <p>Ensure continuity of subject while managing frequent significant health/medical needs.</p> <p>The curriculum will need to accommodate significant periods of missed learning due to medical needs.</p> <p>A higher level of supervision and assistance is required to access the school curriculum.</p> <p>Individual needs are managed as and when required and could require frequent support.</p> <p>Assistance with eating to be discreet if appropriate.</p> <p>Some assistance needed with transfers but CYP able to take own weight.</p>	<p>As Range 1.2.3 and 4</p> <p>Resources and Environment Fine motor equipment to address the OT targets.</p> <p>Laptop, iPad, mouse and keyboard big keys or small depending on need,</p> <p>Programmes and apps to address need e.g., Siri, dragon dictate, and clicker.</p> <p>Wheelchair, walker, standing frame, specialist seating. (as advised by health professionals)</p> <p>Personal Care facility with height adjustable changing bed, hoist and shower.</p> <p>Specialised and adapted P.E equipment e.g. balloons, wheelchair football, curling, boccia.at, bench, hoist, transfers,</p> <p>Height adjustable changing bed.</p> <p>Accessible transport for off site visits.</p> <p>Private changing facility with enough room for adult assistance to change for PE</p> <p>A medical room which might include a bespoke health care facility e.g., for E. B management in addition to the usual medical room.</p> <p>Educational environment that is designed to meet the needs of people using mobility aids, including wheelchairs full time.</p> <p>Staffing Staff trained to use ICT equipment, complete OT activities and how to be a scribe.</p> <p>Staff available to set up ICT equipment for CYP to access.</p>

<p>management for all dressing needs. Specialist approaches are implemented to develop independence where possible, including outdoor clothing.</p> <p>Sitting CYP can sit on a usual chair in the learning environment with reasonable adjustments, adult assistance and adaptations to seating or have access to specialist seating as advised by health care professionals. Adult assistance for all transfers.</p> <p>Health and Medical CYP will have significantly reduced independence due to complex health and medical needs. Will require multidisciplinary approaches from a range of specialist health professionals.</p>	<p>Staff seek advice from SALT for eating/drinking and swallowing.</p>			<p>Staff available to support access to the curriculum in most tasks/subjects especially practical subjects.</p> <p>Trained adult assistance for transfers to specialist seating required.</p> <p>Staff to implement physio programme and use of standing frames.</p> <p>1:1 support for all P.E lessons and swimming.</p> <p>Staff to manage all aspects of CYPs personal care intervention. Direct adult assistance for changing continence aids and managing menstruation dressing and eating.</p> <p>Adult management for all dressing needs.</p>
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Physical Difficulties and Medical Needs Range 6 Presenting Behaviours	Assessment and Planning	Teaching and Learning Strategies	Curriculum/Interventions	Resources, Staffing and environment
<p>Fine motor CYP is unable to reach or grasp consistently. CYP is unable to use hand-controlled assistive technology. CYP is able to access the curriculum and daily living skills, despite significant and complex fine motor difficulties, when individualised programmes, individual adult assistance, extra time, and specialised individualised equipment are provided in all areas throughout the day</p> <p>Gross motor CYP has significant and complex motor/mobility impairment or physical vulnerability, which greatly impacts upon access to the learning environment in all areas and throughout the day. CYP requires constant adult assistance to use their mobility equipment, to support physical management throughout the school day and to access all curriculum activities. CYP requires two adults to assist with frequent transfers.</p> <p>Toileting CYP has no bowel or bladder control. Significant and continual support and monitoring for toileting with a medical overview and requiring direct adult intervention and assistance with transfers. Personal care needs are managed by essential continuous monitoring throughout the day.</p> <p>Eating CYP requires fully trained, individual adult assistance for all aspects to support significant and complex eating /feeding needs which can extend well beyond the usual times and routines for eating in school. Individual close supervision required in case of choking</p> <p>Dressing CYP is fully dependent for all dressing. CYP requires full adult assistance for all dressing needs. (This might require 2 adults.)</p> <p>Sitting CYP requires specialist postural seating as advised by health care professionals. Adult assistance for all transfers. (2 person)</p> <p>Health and Medical</p>	<p>As Range 1.2.3.4 and 5</p> <p>Needs a focus on the CYP directing the adult support required. Focus on CYP participating in management of their significant needs where it is appropriate in this area. Possible referral to Access to Communication and Technology (ACT)</p> <p>Individual care plan is developed with health professional and with a medical overview.</p> <p>The care plan is regularly reviewed in partnership with the CYP, parents/ carers and health care professionals.</p> <p>Appropriate risk assessments and training are undertaken.</p> <p>Specialist advice for toileting transfers</p> <p>Bespoke moving and handling assessment for transfer to the toilet.</p> <p>Moving and handling plans in place. Any appropriate risk assessments and moving and handling plans are completed incorporating health advice and are regularly reviewed with the CYP, parents/ carers and health care professionals.</p> <p>SALT training regarding swallowing.</p> <p>Training by specialist nurses for tube feeding.</p>	<p>As Range 1.2.3.4 and 5</p> <p>Individualised alternative recording in all areas of the curriculum</p> <p>Use of electronic input and output devices, eye gaze technology.</p> <p>Use of mobility aids/resources to promote and maintain gross motor function.</p> <p>All staff are aware of CYP's individual personal care needs and the implications / treatment while respecting the CYP's confidentiality. Staff consult CYPs at an appropriate level.</p> <p>Supervision and assistance at all times from an adult when feeding.</p> <p>Staff consult CYP about the medical support and intervention that they are receiving whenever possible.</p>	<p>As Range 1.2.3.4 and 5</p> <p>Disapplication from exams if appropriate.</p> <p>Postural management required throughout the school day following health professional advice.</p> <p>Essential daily provision within a structured individualised curriculum for promotion and maintenance of functional mobility.</p> <p>The personal care needs have a significant impact of educational access and continuity of learning so needs a curriculum that enables a flexible response to frequent and regular personal care needs which are managed exclusively by adults.</p> <p>The school curriculum is designed to ensure continuity of subject learning, while managing significant personal care.</p> <p>The curriculum enables a flexible response to frequent urgent and life-threatening medical needs which are managed exclusively by adults.</p> <p>Curriculum access is only achieved through a very high level of support due to medical and health needs throughout the entire school day.</p> <p>CYP have a high dependency on intensive support at all times from trained adults for all aspects of their daily life; usually requiring</p>	<p>As Range 1.2.3.4 and 5</p> <p>Resources and Environment Resources</p> <p>Specialised equipment identified by Access to Communication and Technology.</p> <p>Electronic input and output devices, eye gaze technology.</p> <p>Specialist seating as advised by healthcare professionals.</p> <p>Specialised equipment, mobility aids and resources to develop motor / mobility skills and enhance access as advised</p> <p>Highly specialised individual care resources, which are immediately available to address frequently occurring emergency requirements.</p> <p>An environment with facilities readily available to support emergency medical procedures which occur frequently.</p> <p>Storage for specialist feeding equipment or food</p> <p>Staffing Multidisciplinary staff skilled in developing assistive technology.</p> <p>Multidisciplinary staff skilled in the use of mobility aids/resources to promote and maintain gross motor function.</p> <p>Staff trained by health professionals for management of personal care intervention e.g., catheterisation.</p> <p>Staff are skilled in management of significant personal care needs including toileting, dressing and feeding.</p>

CYP has an unstable / life threatening medical diagnosis which is managed by essential medical monitoring. CYP requires a multidisciplinary approach from a range of specialist health professionals.			nursing care or constant complex care.	Staff are skilled and specifically trained in management of complex and life-threatening health needs on a continuous basis.
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Physical Difficulties and Medical Needs PfA Outcomes				
	Employability	Independent Living	Community Inclusion	Health
Reception to Y2 (5-7 years)	Child will cooperate with self-care routines and medical routines, including those associated with any physical or medical conditions/diagnoses. Child will access regulatory activities to support them to concentrate and maintain focus in the classroom.	Child will cooperate with self-care routines, medical routines including those associated with any physical or medical conditions/diagnoses	Child will be able to participate in team games, after-school clubs and weekend activities in accordance with their physical and medical capabilities.	Child will attend relevant health, dental, optical and hearing checks as required to promote good physical health. Child will cooperate with self-care routines and medical routines including those associated with any physical or medical conditions/diagnoses. Child will participate in sport and physical exercise in accordance with their physical/medical capabilities.
Y3 to Y6 (8-11 years)	Child will be able to access careers information, opportunities to meet role models/talks from visitors to school through adaptations and formats which consider physical, sensory or medical needs as appropriate to individual circumstances.	Child will be able to move around the school environment as required. Child will begin to develop age-appropriate life skills to include basic cooking skills, awareness of transport and requirements for travel (tickets, timetables etc.), money in accordance with their physical and medical capabilities	Child will be able to access after-school clubs, youth groups, sports teams, community-based groups in accordance with their physical and medical capabilities.	Child will be able to manage minor health needs. Child will make healthy eating choices and will engage in physical exercise in accordance with their physical/medical capabilities.
Y7 to Y11 (11-16 years)	Child will be able to access work experience placements, voluntary work or part-time employment opportunities through adaptations and formats which consider physical, sensory and/or medical needs as appropriate to individual circumstances. Child will understand supported employment options e.g. Access to Work Child will be able to make smooth transitions to new settings to facilitate emotional wellbeing and support integration and inclusion.	Child will be able to move around the school or work-based environment as required. Child will demonstrate age-appropriate independent living skills to include cookery, access to local transport, money and time management in accordance with their physical and medical capabilities.	Child will be able to access transport options within their physical and medical capabilities to facilitate independence and community participation. Child will be able to access community-based groups/activities in accordance with their physical and medical capabilities.	Child will be more independent in managing more complex health needs in accordance with their physical and mental capabilities. Child will attend their annual health check with their GP if registered as having a learning disability.
Provision	Please refer to detail provided within the Teaching and Learning Strategies and Curriculum/Interventions sections of the School Age Ranges Guidance: Physical, Medical and Sensory Needs: HI, VI, Dual Sensory Needs, Physical and Medical Needs.			

Guidance to support recommendation of Support Units.

The purpose of this guidance is to support schools and professionals in making recommendations around the number of Support Units needed for funding for EHCPs and SSPPs. The aim is to ensure that funding is being allocated in a consistent manner across the city.

Top-up or element 3 funding is funding held by the local authority and allocated on a per pupil basis. The function of this funding is to provide additional resources to support provision for children with complex SEND where this exceeds the resources usually available to schools and settings.

Funding will be allocated in the form of support units. Each support unit is based on the amount of additional support required, on top of the resources already available within the school, to implement the provision outlined in the plan.

Prior to considering the individual pupil's provision it is important to consider:

What funding is the school already in receipt of?

- What is the Notional Budget for the school?
- What additional funding does this pupil already have to support provision (e.g. pupil premium, EAL, etc.)?
- What top-up has already been allocated to the setting that could be used to support the delivery of provision within this plan?

Are there any environmental factors to consider which may impact on funding?

- Does the environment require significant changes – is there a different allocation of funding for this?
- Are there resources required to support the environment in being appropriate – are these one-off costs or a training implication?

When considering the provision in the plan it is important to consider:

What % of adult time will be needed to deliver the provision?

- Is the level of support being outlined in the plan consistent with the level of need and recommendations from supporting professionals?
- Does the plan or supporting evidence give timings or specific tasks that need to be delivered?

- Does the provision match the descriptions at range 4 or above in the provision guidance tables or across a combination of needs at range 3?
- Does it mention support outside of the usually daily timetable (e.g. before/after school, during recreational times)?

Does the provision require a specialist to deliver it?

- Does it specifically refer to a specifically qualified member of staff to deliver the provision (e.g. Specialist teacher, S< etc?)

Please note – some school may use a teacher/SENCO to deliver provision which could be delivered by a TA. Whilst this is good practice, higher rates of funding should only be allocated in situations where the provision cannot be delivered by a TA.

Is the level of provision likely to reduce within the time of the funding allocation?

- Does the provision required include training to use a strategy that will increase independence and therefore less adult support? If so, does the split of funding need to reflect this?

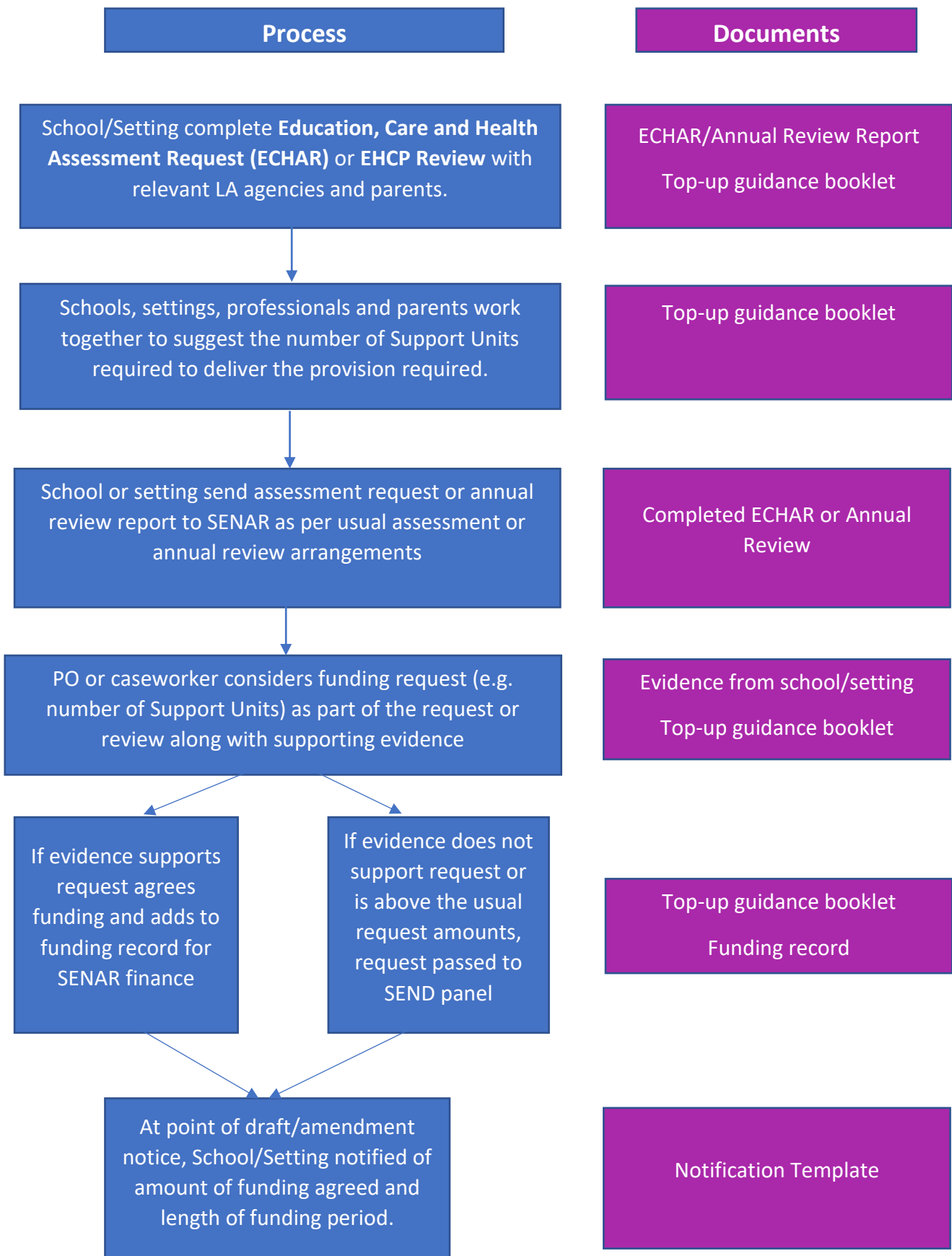
Are there any one-off payments for equipment included in the provision?

- Are these specifically for this individual pupil rather than a scheme which could be used for several pupils?
- Is this going to need replacing/relicensing?
- Is this for training and if so, is it outside of the consortium training or core offer from services? Is the training recommended by a specific professional in relation to meeting the specific individual needs of this pupil?

Support Units
<p><u>SEN Notional Budget Only – no top-up from LA</u></p> <ul style="list-style-type: none"> • Provision detailed matches with ranges 1-3 and • Requires the equivalent of 20% of additional adult support to deliver provision across the school week
<p><u>1 Support Unit</u></p> <ul style="list-style-type: none"> • Provision detailed matches with range 4a or across several needs at range 3 and • Requires the equivalent of 30% of additional adult support to deliver provision across the school week
<p><u>2 Support Units</u></p> <ul style="list-style-type: none"> • Provision detailed matches with range 4a or across several a combination of needs at range 3 and • Requires the equivalent of 40% of additional adult support to deliver provision across the school week
<p><u>3 Support Units</u></p> <ul style="list-style-type: none"> • Provision detailed matches with range 4a or across a combination of needs at range 3 and • Requires the equivalent of 50% of additional adult support to deliver provision across the school week
<p><u>4 Support Units</u></p> <ul style="list-style-type: none"> • Provision detailed matches with range 4a or across a combination of needs at range 3 and • Requires the equivalent of 60% of additional adult support to deliver provision across the school week
<p><u>5 Support Units</u></p> <ul style="list-style-type: none"> • Provision detailed matches with range 4a or b or across a combination of needs at range 4a and • Requires the equivalent of 75% of additional adult support to deliver provision across the school week
<p><u>6 Support Units</u></p> <ul style="list-style-type: none"> • Provision detailed matches with range 5 or above, or across a combination of needs at range 4 and • Requires the equivalent of 5 days a week of additional adult support to deliver provision including before/after school and during all recreational times.
<p><u>Above 6 Support Units</u></p> <p>Where the evidence is clear that the needs are high cost and require either specialist input or more than 1:1 support the relevant Support Service may specifically recommend additional factors to be considered. This should be in exceptional circumstances only.</p>

Appendices: Process maps for funding.

Process for Funding Education, Health and Care Plans



Process for SEND Support Provision Plan Funding

