East Sussex County Council (ESCC)

Special Educational Needs Matrix

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Special Educational Needs Matrix

Guidance to accompany the East Sussex County Council (ESCC) Special Educational Needs Matrix.

Mainstream schools Matrix

The **ESCC SEN Matrix** is an East Sussex County Council framework drawn up by the Inclusion, Special Educational Needs and Disabilities (ISEND) Services in collaboration with staff working in educational settings across the County, Children's Integrated Therapy Services (CITS) and parents and carers. It is designed to:

- Provide a shared understanding for schools, the Local Authority, parents/carers, and services such as Health and Social Care, about how to identify the Special Educational Needs of children and young people [1]
- Provide guidance on provision and resources recommended to meet these needs, and to facilitate educational progression
- Support development of knowledge and understanding about SEND
- Contribute to the development of good SEN and inclusive practice ('build capacity')
- Provide a framework from which the Local Authority and its moderation partners will make consistent decisions about funding levels for children to facilitate their educational progression

'Local Authorities may develop criteria as guidelines to help them decide when it is necessary to carry out a Needs Assessment (and following assessment whether it is necessary to issue an EHC Plan).' Code of Practice 2015, 9.16. This Matrix constitutes those criteria.

The Matrix is available in digital format on the ESCC website, and through links on the Local Offer pages. It can be printed and is easily personalised. It should be read in conjunction with other ISEND publications including the East Sussex Quality Mark for Inclusion which supports educational settings in developing inclusive practice.

By the end of 2018, there will be four Matrices providing guidance on Special Educational Needs provision and progression in: Early Years settings, Mainstream settings, Post 16 Further Education and Colleges and Special Schools

Each Matrix is structured according to the four main areas of need outlined in the SEN Code of Practice 2015:

- **Communication and Interaction** including speech language and communication (SLCN) and autism spectrum condition (ASC)
- **Cognition and Learning** including, moderate learning difficulties (MLD), severe learning difficulties (SLD), profound and multiple learning difficulties (PMLD), specific learning difficulties (SpLD). SpLD encompasses a range of difficulties such as dyslexia, dyscalculia and dyspraxia.

- **Social, Emotional and Mental Health** including attention deficit hyperactivity disorder (ADHD), attention deficit disorder (ADD), oppositional defiant disorder (ODD), trauma and attachment difficulties, anxiety and depression.
- **Physical and Sensory** including visual impairment (VI), hearing impairment (HI), multisensory impairment (MSI), physical difficulties (PD)

A child or young person may have needs that span two or more categories, for example a young person with a hearing impairment may experience difficulties with reading and have some difficulties relating to low self-esteem.

They may also have a medical condition:

'The Children and Families Act 2014 places a duty on maintained schools and academies to make arrangements to support pupils with medical conditions. Individual healthcare plans will normally specify the type and level of support required to meet the medical needs of such pupils. Where children and young people also have SEN, their provision should be planned and delivered in a coordinated way with the healthcare plan. Schools are required to have regard to statutory guidance 'Supporting pupils at school with medical conditions' (www.gov.uk/government/uploads/system/uploads/attachment_data/file/638267/supporting-pupils-at-school-with-medical-conditions.pdf) (COP 2015, 6.11)

Levels of need

Most children and young people with SEN will have their needs met through good quality, personalised planning and teaching in a mainstream educational setting, (COP 2015, 9.1). Where a child is underachieving, good differentiated teaching and appropriately targeted interventions will accelerate progress.

Relatively few children and young people who are falling behind or making inadequate progress may need school based support, additional to and different from what is normally available. This should be set out in an **Additional Needs Plan**. *(https://czone.eastsussex.gov.uk/inclusion-and-send/additional-needs-plan/)*

Children and young people who continue to experience barriers to accessing their learning, despite receiving additional school based SEN support, may need further support. It is these children who can be identified as having a special educational need that may require an Education, Health and Care Plan (EHCP) Needs Assessment (Code of Practice, 2015, 9.13-9.19).

The Matrix sets out a graded response following increased complexity and intensity of need. Each level of need builds on that described at the previous level. Each of the areas of SEN has three levels of need linked to a different level of funding. These are:

1 For the purpose of this matrix and guidance children and young people will be referred to throughout as children. This refers to all children, young people and young adults between ages 0-25.

East Sussex County Council (ESCC)
Special Educational Needs Matrix

ISEND
CHAMPIONING CHANGE FOR CHILDREN
Inclusive Innovative Solution Focussed Act with Integrity Collaborative

- **SEN Support:** Children and young people whose SEN can be effectively supported within resources that are available to the school or colleges for this purpose; the notional SEN budget. Schools have a statutory duty to utilise this resource and where necessary, **'to provide high quality, appropriate support from the whole of its budget,'** (COP 6.95-6.97).

- **Targeted:** Children require a level of additional or different SEN support at times throughout the day. The level of resourcing may exceed what the school or college can provide from its budget.

Targeted A		Targeted B	
Monthly (£)	**Annual (£)**	Monthly (£)	**Annual (£)**
130.35	**1,564**	169.46	**2,034**

- **Enhanced:** Children require ongoing strategies, intervention and additional SEN support specifically targeted at their needs. The level of resourcing required may exceed what the school or college can provide from its budget and is at a higher level than that required for provision at the targeted support level.

Enhanced A		Enhanced B	
Monthly (£)	**Annual (£)**	Monthly (£)	**Annual (£)**
273.74	**3,285**	430.16	**5,162**

SEN Needs Section

This section describes needs at the three levels of SEN Support, Targeted and Enhanced for Communication and Interaction, Cognition and Learning, Social and Emotional Health and Physical and Sensory needs.

The descriptors are intended to be indicative; they are not an exhaustive list. A learner does not need to be experiencing all the needs described. Children identified as having needs within the 'Targeted' level may have an Education Health and Care Plan.

SEN Provision Section

The Matrix gives examples of the provision that would be expected at each level of need. This is not an exhaustive list, but an indication of the quality provision that should be available in all East Sussex settings.

Provision outlined in the Matrix assumes a foundation of quality first teaching for all learners, including those with special educational needs. Quality first teaching:

- involves highly focused lesson design with sharp objectives, based on the prior knowledge of learners
- is informed by formative and summative assessment and sequential steps in learning linked to an evaluation of learners' current understanding
- demands learner involvement and engagement with learning and high levels of interaction
- draws on effective pedagogy including teacher questioning, modelling, explaining, and feedback
- provides opportunities for learners to talk both individually and in groups
- has an expectation that learners will accept responsibility for their own learning and work independently
- uses encouragement and authentic praise to engage and motivate children
- includes development of learners' emotional and social literacy skills e.g. self-awareness, self- regulation, empathy, motivation and social skills
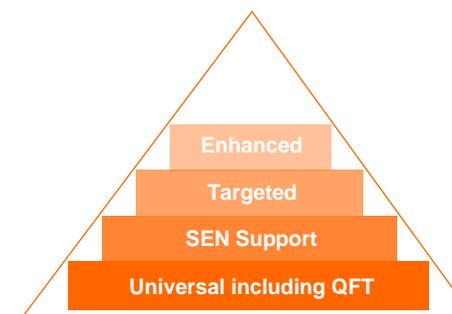
Special Educational Needs Matrix

It is expected that the progress of all learners on the SEN register is carefully monitored. Their progress should be tracked and the impact of provision reviewed, to ensure that it is effective in meeting planned outcomes. All settings should adopt the same graduated approach with four stages of action **Assess, Plan, Do, Review.**

Planning and review of provision should be agreed between learners, parents, carers and practitioners, through co-production. Where a child is looked after, social workers and Virtual School caseworkers should also be involved.

All provision should be informed by evidence based practice.

It is expected that learners with SEND will move fluidly on this continuum and that effective, targeted intervention against identified outcomes will, over time, reduce the level of support required.

'Early years providers, schools and colleges should know precisely where children and young people with SEN are in their learning and development. They should: • ensure decisions are informed by the insights of parents and those of children and young people themselves • have high ambitions and set stretching targets for them • track their progress towards these goals • keep under review the additional or different provision that is made for them • promote positive outcomes in the wider areas of personal and social development, and • ensure that the approaches used are based on the best possible evidence and are having the required impact on progress.' (COP 1.25)

SEN Support in the Early Years: It is particularly important in the early years that there is no delay in making any necessary special educational provision. The Early Years Foundation Stage (EYFS) is the statutory framework for children aged 0 to 5 years. All early years providers must follow the safeguarding and welfare requirements of the EYFS and the learning and development requirements, unless an exemption from these has been granted. Early action to address identified needs is critical to the future progress and improved outcomes that are essential in helping the child to prepare for adult life. Where a setting identifies a child as having SEN they must work in partnership with parents to establish the support the child needs. Where a setting makes special educational provision for a child with SEN they should inform the parents and a maintained nursery school must inform the parents.

Early Years children will be assessed using a range of tools; predominately Early Years Foundation Stage, Development Matters and Developmental Journals.

Reliable and accurate assessment at the end of the EYFS is underpinned by the following principles:

- Assessment is based primarily on the practitioner's knowledge of the child. Knowledge is gained predominantly from observation and interaction in a range of daily activities and events

- Responsible pedagogy must be in place so that the provision enables each child to demonstrate their learning and development fully
- Embedded learning is identified by assessing what a child can do consistently and independently in a range of everyday situations
- An effective assessment presents a holistic view of a child's learning and development
- Accurate assessments take account of contributions from a range of perspectives including the child, their parents and other relevant adults
- Support from ISEND Services is needs led. Where a school has concerns about a child's SEN they should refer to the Front Door process to access support, advice and make a referral. (https://czone.eastsussex.gov.uk/inclusion-and-send/front-door-referrals/)

Strategies and Resources Section

Each of the four areas of need addressed within the Matrix is accompanied by a list of strategies and resources that will help teachers to differentiate within their classrooms and ensure effective delivery of interventions. These strategies can also be used by SENCos and senior leaders to advise and support class and subject teachers.

The strategies and resources are a live and interactive component of the ESCC SENCo Network, a confidential online forum hosted on Yammer. This will facilitate peer support, partnership learning and sharing of good practice both within settings and between schools. Invitations to join the Network have been sent to all school and post-16 provider SENCos and registered East Sussex SENCos are encouraged to contribute to the site. If you have not received an invitation, or are having problems connecting to the Network, please email ISEND.Comms@eastsussex.gov.uk.

Communication and Interaction

Children and young people may have limitations in understanding and interpreting the intentions of others, which can create high anxiety levels and lead to social problems if they lack sensitivity to the views and feelings of others. Conversely they may be invasive of others' interpersonal space, finding social conventions difficult to understand or follow. They may demonstrate the need for a highly ordered and structured setting where changes to routine or transitions are particularly stressful. Children who may present as verbally articulate and acquire vocabulary easily (even exceeding early learning goals) can be overestimated, and may struggle with nuance, jokes, idioms or figures of speech. A child may develop a high level of technical vocabulary around a particular topic or subject, causing difficulties in transitions to other learning tasks or away from the subject of interest.

All staff should be aware of the stages of typical language development; the impact of SLCN difficulties in the classroom; and the importance of the language environment on a child's ability to access academic, social, personal and extra-curricular opportunities.

Where it is considered that a child or young person has language, communication and/ or interaction difficulties a referral for full assessment should be made to tthe Children's Integrated Therapy Service (CITS). Undiagnosed language difficulty can be an underlying factor in complex SEND presentations, impacting on other areas of learning including social and emotional. Further information regarding the CITS referral process, including referral form and contact details, can be found on https://www.kentcht.nhs.uk/service/childrens-integrated-therapy-service/

Needs

SEN Support

Targeted: *SEN Support level plus the following:*

Enhanced: *SEN Support & Targeted levels plus the following:*

SEN Support	Targeted	Enhanced
Key Stage 1 and 2 **Expressive Language** ☐ Demonstrates areas of delay in speech sound acquisition as identified through Speech Link assessment ☐ Experiences difficulties in conveying more abstract and complex thoughts ☐ May need support to organise their thoughts ☐ Has difficulty using language to identify relevant information ☐ Reluctant to comment in group situations, even when in a known area of interest ☐ Has difficulties using curriculum-specific vocabulary **Social Communication** ☐ Experiences difficulties in playing and talking with peers appropriately ☐ Demonstrates poor awareness of the listener's needs ☐ Needs support to sustain topic maintenance ☐ Has difficulties taking turns and sharing in learning and social situations	**Key Stage 1 and 2** **Expressive Language** ☐ Exhibits frustration and anger due to lack of language required to express emotions and feelings ☐ Has difficulty in expressing ideas through language for example word finding and sequencing ☐ Speech intelligibility breaks down in connected speech ☐ Is unable to organise language to describe events **Social Communication** ☐ Uses inappropriate communication and interaction with others or to meet their own needs **Attention and Listening** ☐ Attention is not yet fully under child's control ☐ Requires frequent support to sustain attention in most contexts	**Key Stages 1 and 2** **Expressive Language** ☐ Is unable to copy single speech sounds ☐ Speech may be unintelligible to listeners who do not know the child or young person well **Social Communication** ☐ Restricted interests prevent meaningful engagement with learning and social interactions **Attention and Listening** ☐ Adult attempts at redirection result in significant and prolonged frustration, and distress **Receptive Language** ☐ Difficulties understanding verbal information in various contexts significantly impacts on all areas of learning and progress ☐ Difficulties with working memory results in the need for close adult support

Communication and Interaction

Needs *continued...*

SEN Support

- Does not vary speaking style dependent on audience or situation

Attention and Listening

- Difficulties with dual channelled attention e.g. listening to the teacher whilst performing another activity
- Difficulty with shifting attention to and from tasks without adult support
- Finds it difficult to sustain attention for an adult directed activity

Receptive Language

- Relies on time prompts or following peers rather than verbal instructions
- Needs time to process and respond to verbal information
- Can only process part of sequence of instructions e.g. the last sentence
- Understands a good range of everyday vocabulary, but is less confident with curriculum specific words
- Has difficulty understanding inference
- Demonstrates areas of delay on language understanding as identified through Language Link assessment

Key Stage 3 and 4

Expressive Language

- Difficulties with retrieval of specific vocabulary
- Needs support to organise ideas, talk about what they are doing, things they have learnt and previous experiences
- Needs support to use language for a range of purposes such as questioning, negotiating, seeking information and expressing views

Targeted: *SEN Support level plus the following:*

Receptive Language

- Experiences difficulty hearing the difference between sounds
- To be able to follow simple, verbal instructions they must be presented by a familiar adult, in a clear context with no distractions
- Has underdeveloped understanding of everyday and curriculum vocabulary

Key Stage 3 and 4

Expressive Language

- Difficulties with retrieval of specific vocabulary impacts upon progress in all areas of the curriculum
- Difficulties with structuring and organising ideas result in below expected levels of progress

Social Communication

- Self-esteem will be low
- Difficulties engaging appropriately with a range of partners, including peers

Attention and Listening

- Difficulties in maintaining attention impacts upon progress in all areas of curriculum

Receptive Language

- Difficulties with following complex directions

Enhanced: *SEN Support & Targeted levels plus the following:*

- Receptive language skills are limited to familiar contexts and routines

Key Stages 3 and 4

Expressive Language

- Severely reduced speech/sound systems
- Severe language impairment involving more than one component of language

Social Communication

- Significant impairment in receptive and/ or expressive language skills results in confusion and/ or distress. Expressions of frustration impact on social integration

Attention and Listening

- Difficulties in maintaining attention results in off task behaviour. This negatively impacts on other learners

Receptive Language

- Difficulties understanding verbal information in various contexts significantly impacts on all areas of learning and progress

Communication and Interaction

Needs *continued...*

SEN Support	**Targeted:** *SEN Support level plus the following:*	**Enhanced:** *SEN Support & Targeted levels plus the following:*
Social Communication ☐ Unable to infer information in a social context ☐ Is not able to engage appropriately in reciprocal conversations ☐ Difficulty in interaction with peers appropriately impacts on their social activity **Attention and Listening** ☐ Requires support to maintain attention to, or shift attention from, a topic **Receptive Language** ☐ Difficulties with understanding vocabulary, grammar and sequence		
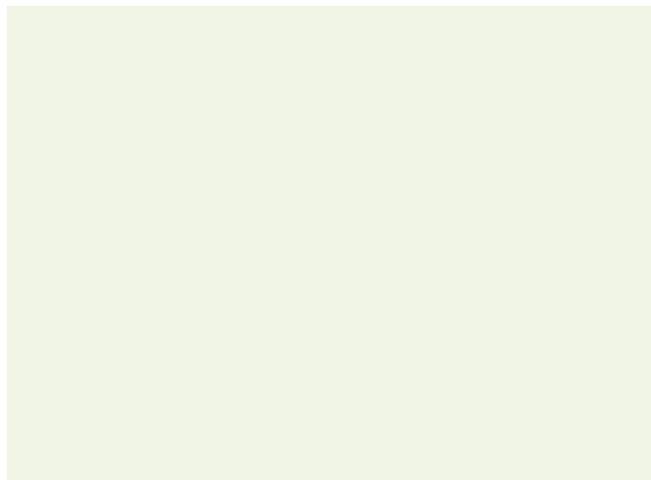
Provision
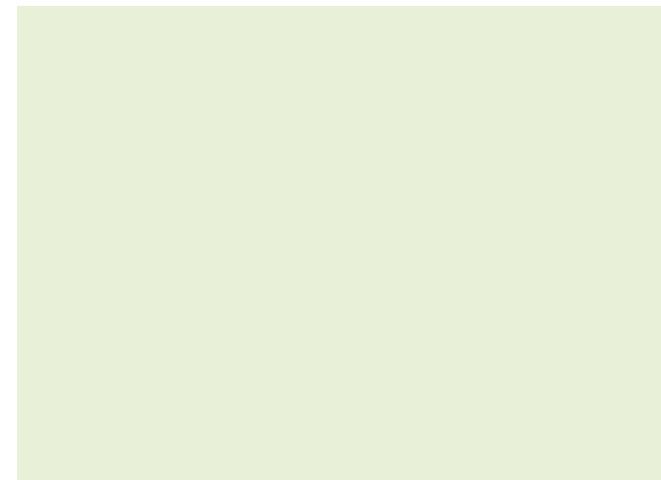
SEN Support	**Targeted:** *SEN Support level plus the following:*	**Enhanced:** *SEN Support & Targeted levels plus the following:*
☐ Curriculum is adapted to promote full participation, support hands on learning, use talk for learning, promote independence, and support social inclusion ☐ Advice from outside agencies incorporated into classroom or intervention sessions ☐ Curriculum differentiated so that content can be accessed independent of language and communication while supporting the development of key skills ☐ Additional time to process information and to respond to questions	☐ Specialist advice and input for school staff on how to enable full access to the curriculum and provide support for curriculum, skill areas and/or task analysis ☐ A structured and personalised language and interaction programme that is embedded throughout the day ☐ Adults use the developmental language appropriate to the child in questioning and explaining ☐ More time is allowed to enable learning to automaticity before further skills are taught (previous skills learned to automaticity, a small amount of new material is introduced and all the material is practised together)	☐ Development of choice making, initially by establishing simple and limited choices ☐ Personalised planning for delivery of information shared in classrooms ☐ All communication modes actively incorporated into planning ☐ High level of differentiation in delivery of instructions – simple language use with instructions chunked ☐ Personalisation of outcomes, modes of delivery and tasks with ICAN small steps assessment to ensure progress and inform next steps

Communication and Interaction

Provision *continued...*

SEN Support

- Modification of teaching environment to take account of sensory needs within and outside classroom e.g. transition from one room to another
- Meet with parents/ carers at least 3 times a year to discuss progress and plan school and home support for outcomes. These meetings should coincide with PEPs for Looked After Children where possible

Key stage 1 and 2:
- Attention and listening activities are built into daily activities
- A range of opportunities are provided for children to develop their understanding of curriculum specific and general vocabulary, such as digital media, real life experience and visits
- Explicit vocabulary teaching uses phonological and semantic cues
- Guided reading for decoding and comprehension, especially inference with targeted comprehension groups identified through appropriate assessment
- Pre-teaching of new vocabulary
- Carry out Language Link programme or equivalent resources to develop language understanding and evaluate for 12 weeks prior to consideration for specialist referral to Speech and Language Therapist
- Follow Speech Link programme and generalise targets into the classroom and evaluate after 12 weeks, prior to consideration for specialist referral to Speech and Language Therapy
- Planned opportunities for group pre-teaching key elements (literacy and numeracy)

Targeted: *SEN Support level plus the following:*

- Greater personalisation of outcomes (refer to outcomes relating to earlier aspects of the curriculum) to provide the child with the experience of success
- Visual supports are embedded to support language understanding eg symbols using Communication In Print
- Access to reduced stimulus workstation within classroom where appropriate
- Access to low stimulus, calm areas at times of stress where appropriate
- Adult facilitator to ensure understanding and support completion of tasks and to promote participation and independence in key areas of the curriculum
- Intervention (individual, paired or small group) focussed on delivery of specific skills to a level of automaticity, based on detailed, ongoing assessment of children's attainment and progress e.g. children are likely to benefit from targeted pre-teaching of vocabulary, use of video clips or role play to explore social communication e.g. Language Link groups
- Additional support of pastoral/ social care
- Additional level of parent/ carer liaison

Key stage 1 and 2:
- Visual support for vocabulary learning and visual/ kinaesthetic memory cues
- Access to a range of opportunities to develop their skills in sequencing, classification and categorisation
- Access to and enablement to use alternative methods of recording
- Support to practice vocabulary and to prepare contributions to group discussion

Enhanced: *SEN Support & Targeted levels plus the following:*

- Tasks and presentation personalised to the child's needs, monitored regularly to ensure they remain appropriate
- Significant modification of curriculum resources and materials e.g. modified text to enable full access to the curriculum and provide support for curriculum or skill areas and/or task analysis, differentiated activities and resources
- Greater use of cumulative learning and distributed practice to enable acquisition and retention of learning to take place
- Use of closed questions, with the possible provision of forced alternatives which will require close key adult prompting
- Adult support to ensure transfer of language skills into generalised curriculum use
- Peer interaction will require adult facilitated support
- In order to communicate their needs, opinions and knowledge, children will require non-verbal supports such as pictures and sign
- Intervention (individual, paired or small group) focussed on delivery of specific skills e.g. social communication, peer interaction, vocabulary, understanding of question words and concepts to a level of automaticity, based on detailed, ongoing assessment of children's attainment and progress. Development of skills expected of children working at significantly below age expected expectations and as advised by specialist teams
- Intervention in social and emotional aspects of learning, personal care and preparation for independence and adulthood
- High levels of pastoral / social care
- High levels of parent / carer liaison

Communication and Interaction

Provision *continued...*

SEN Support

Key stage 3 and 4:

- Curriculum provides opportunities for pre-teaching of and re-enforcement of vocabulary
- Curriculum delivery to include encouragement to explain what, where, when, how and why smart phone apps
- Use of adult/peer facilitator to scaffold and check understanding at key points in the curriculum
- Children are supported to make verbal contributions to the group in identified/focus areas
- Use of peer mentor and peer support systems
- Consider where the child is seated e.g. front of the class or away from distractions
- Designated working area with few distractions
- Teaching of strategies to alleviate load on auditory memory and organisation of information e.g. post it notes, digital recorders, smart phone apps
- Use of resources and strategies to alleviate load on auditory memory and organisation of information e.g. subject specific word banks and glossaries, post it notes, digital recorders, smart phone apps
- Planned groupings in class so that peers provide role models re communication with reference to explicit and implicit information
- Use of tailored support strategies to scaffold oral responses, such as writing frames, story boards, sequencing or cue cards
- Delivery of whole class and / or small group interventions (individual, paired or small group) focussed on delivery of specific skills to a level of automaticity, based on detailed, ongoing assessment of children's attainment and progress e.g. vocabulary groups, emotional language groups

Targeted: *SEN Support level plus the following:*

- Opportunities to rehearse appropriate interactions in different scenarios and with different people through role play

Key stage 3 and 4:

- Personalised bank of key curriculum vocabulary and adult support to draw from this in lessons
- Adults in class provide models of extended speech within the context of lessons e.g.
  - To make connections between existing and new vocabulary
  - To assist children in understanding and engaging with peer interactions
  - To improve communication skills and the understanding of listeners needs
- Interventions to support emotional wellbeing where learning difficulties may have a negative impact: to include identification of stress levels and assessment of any behaviours causing concern
- Support given to use acquired language in a range of situations and environment e.g. community, workplace, shops and public transport
- Support to develop PFA outcomes through universal provision and additional intervention (see PFA outcomes) with specialist support where appropriate (https://www.preparingforadulthood.org.uk/SiteAssets/Downloads/yeded5wb636481748062535810.pdf)

Enhanced: *SEN Support & Targeted levels plus the following:*

Key stage 1 and 2:

- All children will have specific targets and outcomes related to speech and language in their provision plan and personalised strategies to support them to access the curriculum
- Incorporation of specialist teachers, therapists and educational psychology advice into individual plans
- Consideration of longer term access to Assistive Augmentative Communication (Personalised visual supports as appropriate)
- Development over time of individualised frameworks to support development of confidence and structure in speaking, such as semantic webs, personalise dictionaries or mind maps

Key stage 3 and 4:

- Use of specialist ICT equipment, apps and software enabling communication aids e.g. text or symbol to voice programmes appropriate to the needs of individual learners
- All communication modes actively incorporated into planning
- Tasks and presentation personalised to the child's needs, monitored regularly to ensure they remain appropriate
- Assistance with use of specialised alternative recording methods for most curriculum areas
- Specific teaching is given to use acquired language in a range of situations and environment e.g. community, workplace, shops and public transport
- Specific teaching is given in language relating to life skills and safeguarding where reinforcement of whole school curriculum is required

Communication and Interaction

Provision *continued...*

SEN Support	Targeted: *SEN Support level plus the following:*	Enhanced: *SEN Support & Targeted levels plus thefollowing:*
Social Communication ☐ Teaching of specific interaction skills and social use of language e.g. SULP with opportunities to generalise skills on a daily basis ☐ Visual approaches to develop social understanding e.g. Social Stories		

Progress of children and young people should be reviewed using a process of Assess, Plan, Do, Review.

As part of the review SEN(D)Cos should ask the following questions. Review should take place as appropriate according to intervention but at least three times a year:

- Have short term outcomes been met?
- Is there progress towards long term outcomes?
- What impact have different types of provision made?
- Which provisions have been successful but need to continue?
- Which provisions have been successful and no longer need to continue?

- Which provisions have not been successful and need to change?
- Where do the needs of the child sit within the thresholds?
- Is there a change in level of need?

Whilst making optimal progress in their own right children and young people with cognitive and learning difficulties, may make progress at a slower pace than the majority of their age group. This will not necessarily mean that the varying levels of provision in schools are not meeting their needs appropriately; it may reflect best possible progress.

Strategies All strategies may be appropriate to children and young people at all stages but will be dependent on their level of functioning – think stage not age.

- Ensure the child is seated centrally, directly facing the adult who is delivering the lesson
- Cue attention individually, before giving whole group instructions/information, by saying individual's name first and waiting for eye contact before continuing to talk
- Monitor the language demands of expected tasks to ensure successful engagement
- Give clear and simple explanations using simple grammar
- Chunk instructions into small steps and give time to process in between
- Restrict range of vocabulary used and re-inforce key vocabulary
- Use visual lesson plans so the child knows what will happen in the lesson and cross off as each task is completed

- Give extra time to process what has been said, and check understanding e.g. check that the child understands what they need to do at the start of independent work. Use verbal rehearsal i.e. ask others in the group to re-cap what they have to do – most effective if a different child states one step of sequence of instructions, rather than one child saying all. Ask them to repeat back to you what they have to do
- Give extra time for responses
- Ensure that the pace of lessons is modified to enable children to process learning successfully
- Be aware of individual child's level of understanding and moderate language accordingly
- Ensure learning objectives use child friendly language

Communication and Interaction

Strategies *continued...*

- Adults model correct sentences and correct grammatical structures, reinforcing these when the child's syntax is wrong
- Use a broad range of sentence activities, e.g. description, news telling
- Allow talk partner opportunities so that children explain learning to others
- Use visual strategies to support communication e.g. communication in print supported text, visual models, pictures, symbols, mind-mapping
- Encourage children to ask questions to confirm, develop and secure their understanding and enable development of narrative skills
- Provide a range of play and learning opportunities to encourage children to talk including role play. Link language with physical movement for younger children e.g. songs and rhymes
- Provide opportunities to speak aloud in a range of contexts for example assembly, to visitors or recorded by digital media, with rehearsal of talk for these different purposes
- Use talking frames to encourage the development of narrative structures
- Use differentiated questioning techniques to support independent response formulation
- Use prompt cards to support focus e.g. listening time, group talk
- Provide simplified lesson plans with a list of tasks to mark off as completed
- Provide banks of key curriculum vocabulary to enable children to draw from this in lessons
- Make explicit connections between old and new vocabulary
- Provide models of extended speech where children might not encounter this other than in learning setting
- Ensure order of mention is the same as order of action (i.e. "first look at the graph and then draw a picture of the three most popular pets" rather than "draw the three most popular pets after looking at the graph.")
- Provide clear reference points e.g. number activities and give a visual representation of sequences of instructions so that there's a permanent record to check if they forget verbal instructions
- Make references explicit – avoid inferences, ambiguities, sarcasm, non-literal language and metaphor

To support auditory memory

- Reinforce verbal instructions with visual support and physical demonstration
- Model and encourage use of mind-mapping to support recall of verbal information
- Sequence and link ideas as visually as possible e.g. flow-charts, mind maps, word webs
- Praise any child who requests clarification or repetition of instructions

- Encourage visualisation, prompting children to think about the task in pictures or imagine themselves doing it
- Highlight key-words in handouts and provide visual (photo/symbol/icon) for key-words
- Summarise content regularly, emphasising key skills/concepts in whole class group work
- Support recall of key teaching points by using variations of simple, familiar memory games with whole group – instead of "Granny went to market and bought….." play "the Vikings came to Britain because they wanted……"

To support self-esteem, participation and social interaction skills

- Find genuine opportunities to praise the child in front of peers
- Include the child in praise where more popular, socially competent children are also named
- Allocate roles or tasks within groups in group work, giving the child a role/task in which s/he is competent. This will increase the child's own and peers' experience of the child being a valuable group member
- Increase participation in whole class discussion by repeating the contribution of peers and asking if s/he agrees
- Establish routines with predictable sequences and prepare for changes that occur in routine
- Prepare for transitions e.g. staff leaving, staff illness, cover teachers, enrichment days
- Provide time out – quiet space if the child is overwhelmed
- Consider break and lunchtime arrangements for a child who does not like noisy, crowded spaces
- Consider arrangements regarding busy corridors at change of lessons

Work together with staff delivering intervention so that strategies are consistent.

Resources

- Training in supporting children with SLCN and ASC or specific related programmes - training provided by CLASS/CITS SLT or external providers such as ELKLAN / ICAN
- Universal screening tools e.g. Language Link
- Specific software to support the development of language and communication e.g. Primary Language Link, Talk Fitness Mastering Memory
- Specific intervention programmes to support the development of language and interaction and numeracy e.g. SULP
- Visual/kinaesthetic memory cues
- Individual communication modes e.g. PECs, signing, symbols with articulation and support learning

Cognition and Learning

Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation. Other children and young people may have more specific learning difficulties which can act as barriers to accessing the curriculum. Learning needs (see below) are often associated with other difficulties such as communication / language difficulties or sensory impairment.

'A detailed assessment of need should ensure that the full range of an individual's needs is identified, not simply the primary need. Schools are expected to promote equality of opportunity and to anticipate and remove or minimize barriers for learners with disabilities.' (Progression Guidance DCSF 2009)

Needs

SEN Support

Key Stage 1:
- ☐ Attainment levels are up to 2 years below age related expectations

Key Stage 2 to 4:
- ☐ Attainment levels are up to 3 years below age related expectations
- ☐ Specific difficulties in acquiring basic skills in literacy and/or numeracy
- ☐ Difficulties in most developmental and curriculum areas

Key Stage 2 upwards:
- ☐ Children have difficulties with language concepts required for learning
- ☐ Children have difficulties with retaining skills and information, generalising skills, staying on tasks/ attention, confidence, organisation
- ☐ Following the graduated approach and provision of SEN support, the child still requires specialist and/or additional resources to access the full curriculum or to enable participation in further education or training

Targeted: *SEN Support level plus the following:*

Key Stage 1:
- ☐ Attainment levels are more than 2 years below age related expectations.
- ☐ Cognitive assessment by an EP or specialist teacher has identified difficulties with cognitive processes that have had limited response to intervention

Key Stage 2 upwards:
- ☐ For Key Stage 2 to 4 – attainment levels are more than 3 years below age related expectations. Needs persist and appear resistant to previous interventions Children do not have the necessary pre-requisite language skills for verbal reasoning, including understanding 2 keyword instructions, understanding and using basic past tense, relating items which go together (e.g., knife and fork, cow and milk), recognising and explaining similarities and differences between items, describe a scene in a picture, answer what, who and where questions
- ☐ Sustained and marked difficulties in acquisition of literacy/numeracy skills, phonological awareness, graphophonic skills and/or handwriting, affecting access to the curriculum
- ☐ The pupil has moderate learning difficulties. S/he is slow to learn and to generalise learning. S/he has difficulties working alone and cannot access the curriculum without considerable modification to programmes and materials which allows for repetition and over-learning
- ☐ May also have difficulties with other areas e.g. motor skills, behaviour, social or emotional, self-esteem, speech and language

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Life-long learning difficulties or disabilities, across several areas of development requiring targeted and specialist intervention
- ☐ Cognitive and learning difficulties have a profound impact on making choices and expressing their everyday needs; this impacts on ability to maintain good health and well-being
- ☐ Processing difficulties limit independence such that additional adult support needed in all curriculum areas
- ☐ Severe Learning Difficulties – children present with significant cognitive difficulties
- ☐ Long term lack of progress despite a high level of specialist advice and intervention

Cognition and Learning

Needs *continued...*

SEN Support

Targeted: *SEN Support level plus the following:*

Enhanced: *SEN Support & Targeted levels plus the following:*

Key Stage 3 upwards:

☐ Children do not have the necessary pre-requisite language skills for verbal reasoning, including following longer spoken directions, comparing items, justifying predictions, problem solving and inference

☐ Complex Learning Difficulties (CLD) – children with CLD have conditions that co-exist. They may present with a range of issues and combination of layered needs. Their attainments may be inconsistent, presenting an atypical or uneven profile

☐ Processing difficulties may limit independence and need additional adult support in some areas, requiring a moderated curriculum

Provision

To access the curriculum, a number of cognitive skills are needed. A child needs to focus attention on the task, inhibit inappropriate responses, hold information in mind, transfer information to long term memory, make decisions on the basis of the information and plan how best to organise their response
Provision in mainstream schools will range from the normal differentiated curriculum which is part of quality teaching practices in the classroom, through to detailed programmes advised on by support services, and delivered by additional staff as necessary.

Intervention programmes that are used to support learning must have a strong evidence base of effectiveness. Staff delivering intervention programmes should be fully trained and delivery of intervention should be monitored If intervention programmes are used away from the main class, the class / subject teacher should plan to consolidate the same skills/ strategies in lessons. Time for children to over-learn and master skills should be planned into targeted provision so that outcomes are achieved. If children are supported in-class, the focus should be promoting thinking skills and strategy use rather than task completion

SEN Support

Targeted: *SEN Support level plus the following:*

Enhanced: *SEN Support & Targeted levels plus the following:*

☐ Curriculum is adapted to promote full participation, support hands on learning, use talk for learning, promote independence, and support social inclusion

☐ Advice from outside agencies or specialists within school incorporated into classroom or intervention sessions

☐ Curriculum differentiated so that content can be accessed independent of specific difficulties while supporting the development of key skills

☐ Greater personalisation of curriculum and outcomes (refer to outcomes relating to earlier aspects of the curriculum) to provide the child with the experience of success

☐ Specialist advice and input for school staff on how to enable full access to the curriculum and provide support for curriculum or skill areas and/or task analysis

☐ Personalised curriculum provides a high level of opportunities for repetition, over learning and consolidation of skills

☐ Personalised planning for delivery of information shared in classrooms e.g. simple language with instructions chunked. All communication modes actively incorporated into planning

Cognition and Learning

Provision *continued...*

SEN Support

☐ Curriculum provides opportunities for repetition, over learning and consolidation of skills at an appropriate level

☐ Questioning supports children in their learning and in developing independence

☐ Encouragement to verbalise, share and develop ideas prior to writing

☐ Pre teaching of vocabulary

☐ Use of developmental language appropriate to the child in questioning and explaining

☐ Visual supports are embedded to aid language understanding e.g. pictures, symbols, objects of reference, signing, gestures

☐ Use of strategies for scaffolding of literacy based tasks e.g. writing frames, prompt and cloze activities, sequencing, cue cards, highlighting

☐ Access to alternative methods of recording (mind mapping, video or audio recording, posters, dictation, use of ICT)

☐ Use of specific ICT programmes and specialist equipment to enhance recording and presentation of work e.g. CIP, Write on Line, Read and Write

☐ Use of specialist resources to support the development of numeracy e.g. Numicon, number frames and rods, counting and number lines

☐ Use of specialist resources to support the development of literacy e.g. word banks and glossaries, ACE dictionaries

☐ Delivery of whole class and/ or small group interventions in literacy, numeracy or cognitive functions for children (working at up to 2 years below age expected expectations. e.g.

   • Oral language

Targeted: *SEN Support level plus the following:*

☐ Opportunities to work with peers operating at the same curriculum level

☐ More time is allowed to enable learning to automaticity before further skills are taught (previous skills learned to automaticity, a small amount of new material is introduced and all the material is practised together)

☐ Use of different levels of prompts working towards mastery and so independence e.g. visual strategies, modelling, 'hand over hand' approach

☐ Increased levels of mediation and support needed for children to make progress in other areas of need

☐ Use of additional adult to ensure understanding and support completion of tasks and to promote participation and independence in key areas

☐ Assistance with using alternative recording methods which enable the child to demonstrate knowledge without the requirement for extended written work

☐ Support given to use acquired language in a range of situations and environment e.g. community, workplace, shops and public transport

☐ Intervention (individual, paired or small group) focussed on delivery of specific skills to a level of automaticity. Development of skills expected of children working at more than 2 years below age expected expectations

☐ Intervention to support emotional wellbeing where learning difficulties may have a negative impact: to include identification of stress levels and assessment of any behaviours causing concern

☐ Support to complete out of class learning for children

Enhanced: *SEN Support & Targeted levels plus the following:*

☐ Daily implicit and explicit teaching on how to generalise and transfer skills learnt to other and everyday contexts

☐ Assistance with use of specialised alternative recording methods for all curriculum areas

☐ Development of choice making, initially by establishing simple and limited choices

☐ Intervention focussed on delivery of specific skills to a level of automaticity. Development of functional skills expected of children working at significantly below age expected expectations and as advised by specialist teams or in school specialist teachers

☐ Personalised timetable may include highly differentiated programmes in social and emotional aspects of learning, personal care, preparation for independence and adulthood and safeguarding

☐ Specific teaching is given to use key skills in a range of situations and environment e.g. community, workplace, shops and public transport.

☐ A high level of support at points of transition

☐ The evaluation and use of specialist or adapted equipment / software where appropriate to access the curriculum & for communication

☐ High levels of pastoral / social care

☐ High levels of parent and carer liaison

Cognition and Learning

Provision *continued...*

SEN Support

- Structured phonics programmes
- Comprehension programmes
- Spelling programmes
- Numeracy interventions
- Interventions to develop cognitive function, for e.g. comparison, categorisation, metacognition, etc.…

☐ Modification of environment and the teaching of skills to develop:

- Attention and on task behaviour
- Memory and retention of information
- Planning and organisation
- Thinking and reasoning

☐ Additional discussions between current and future staff at points of transition

☐ Meet with parents / carers at least 3 times a year to discuss progress and plan school and home support for outcomes. These meetings should coincide with PEPs for Looked After Children where possible

Targeted: *SEN Support level plus the following:*

across all key stages

☐ Focus on functional learning across the setting, home and community

☐ Support to develop PFA outcomes through universal provision and additional intervention(see PFA outcomes) with specialist support where appropriate (https://www.preparingforadulthood.org.uk/SiteAssets/Downloads/yeded5wb636481748062535810.pdf)

☐ Personalised planning for transition

☐ Additional support re pastoral / social care

☐ Additional level of parent and carer liaison to include Annual Review

Enhanced: *SEN Support & Targeted levels plus thefollowing:*

Progress of children and young people should be reviewed using a process of Assess, Plan, Do, Review.
As part of the review SEN(D)Cos should ask the following questions. Review should take place as appropriate according to intervention but at least three times a year:

- Have short term outcomes been met?
- Is there progress towards long term outcomes?
- What impact have different types of provision made?
- Which provisions have been successful but need to continue?

- Which provisions have been successful and no longer need to continue?
- Which provisions have not been successful and need to change?
- Where do the needs of the child sit within the thresholds?
- Is there a change in level of need?

Whilst making optimal progress in their own right children and young people with cognitive and learning difficulties, may make progress at a slower pace than the majority of their age group. This will not necessarily mean that the varying levels of provision in schools are not meeting their needs appropriately; it may reflect best possible progress

Cognition and Learning

Strategies

- Cue attention individually, before giving whole group instructions/information. Say the child or young person's name first and wait for eye contact before continuing to talk
- Follow instructional hierarchy: clear and simple instructions, breaking down longer instructions and giving one instruction at a time
- Use visual lesson plans cross off as each task is completed
- Use the developmental language appropriate to the child in questioning and explaining
- Allow more time to enable learning to automaticity before further skills are taught (previous skills learned to automaticity, a small amount of new material is introduced and all the material is practised together)
- Use cumulative learning to improve retention; small amount of material learned to fluency, then new material added and practised alongside. New material always combined with old
- Link previous learning to new, start lesson with mind map/semantic web
- Adopt a multi-sensory approach to learning (VAK) including reading and spelling
- Clarify, display and refer back to new and/or difficult vocabulary
- Use real life examples to replace abstract concepts
- Give direct instruction: 'model, lead, test or my turn, together, your turn' to provide verbal scaffolds to aid response and model by 'thinking aloud'
- Use rehearsal opportunities to support verbal explanations and feedback
- Check for understanding
- Use positive language consistently
- Jot down key points and instructions
- Give additional time for processing
- Give additional time before response is needed
- Use visual cues and prompts to support verbal information
- Give opportunities for collaborative working
- Display, give access to key vocabulary
- Provide a visually supportive environment e.g. working walls, word mats
- Use language consistently
- Provide opportunities for repetition and reinforcement of skills
- Ensure feedback is accessible to the child
- Mark content rather than presentation as appropriate

- Give opportunity to access and record information in a variety of ways e.g. (mind mapping, video or audio recording, posters, dictation to peer/adult, use of ICT)
- Use paired reading
- Deliver structured phonic programmes based on multi-sensory approach
- Teach study skills explicitly alongside content
- Teach and practice a range of working memory strategies
- Scaffold understanding and recording through use of:
    1. Writing frames
    2. Prompt and cloze activities
    3. Sequencing
    4. Cue cards
    5. Annotation
    6. Highlighting

Resources

- Visual timetable
- Aids to support literacy e.g. writing frames with visual support, ACE dictionaries, high frequency word lists, coloured overlays
- Modified curriculum resources e.g. simplified language
- Scaffold tools e.g. writing frames, prompt and cloze exercises, sequencing activities, cue cards and hi-lighters
- Diaries, planners, post its and checklists to promote organisation
- Aids to support numeracy e.g. Numicon, number cubes and rods, number squares
- Supportive software e.g. Clicker, Write on line, Read, Write, Dragon Dictate and reading pens
- Specific software to support the development of literacy and numeracy e.g. Number Shark, Lexia, Rapid Plus, RM Maths, Mastering Memory
- Literacy programmes e.g. Read, Write Inc, Fresh Start, Sounds Write,
- Numeracy programmes e.g, FirstClass@Number, Number Counts (Every Child Counts).RM Maths,
- Memory games and programmes e.g. Kim's game, Mastering Memory
- Individual communication modes e.g. PECs, signing, symbols with articulation and support learning

Hearing Impairment

A child or young person has a hearing impairment (HI) if their unaided hearing threshold is more than 20 dBHL across a range of frequencies. This will be determined by a medical professional (e.g. audiologist, nurse etc.). Hearing impairment is a low incidence disability which has many different causes and varies widely in its effects on the child or young person's functional hearing, language and access to the curriculum. It is important to understand that each child or young person's use of residual hearing will be different from the next even if they have the same diagnosis or level of hearing.

There is considerable variation in the levels and types of childhood deafness. Children and young people who are deaf may have a permanent mild, moderate, severe or profound hearing loss in one or both ears and/or a temporary loss such as glue ear. Deafness often has an impact on early acquisition of language and this is often pervasive with long term effect. Language delay will have a significant impact on a child's ability to access a school curriculum, their self-esteem and their social and emotional development.

Hearing impairment: The level of hearing loss alone does not determine the degree of difficulty that the child or young person may experience in the school setting. Children with hearing impairment whose needs can be met at this level will typically have a mild sensori-neural hearing loss, unilateral hearing loss or a mild fluctuating temporary loss associated with glue ear.

Needs

SEN Support

- Language levels will be age appropriate or just in the 'below average' category. Language level and progress need to be monitored as children with hearing impairment find it harder to assimilate new vocabulary into their auditory memory
- The school may not need or receive on-going support for the Sensory Needs Service. An Advisory Teacher of the Hearing Impaired will carry out an initial assessment of need and provide advice to schools on transition
- Schools may re-refer to Sensory Needs if they have concerns about attainment and progress
- The child's speech will be intelligible
- Children with fluctuating hearing loss may appear to be dis-engaged, show signs of frustration or appear unusually tired or irritable, because they have to try harder to listen to things. Hearing may drop to moderate levels. When hearing is down the child or young person may have considerable ear pain and only be able to understand face-to-face conversations that take place at a short distance and says 'pardon' a lot
- Children with hearing loss are more prone to develop mental health issues, experience isolation and find it difficult to form friendships

Targeted: *SEN Support level plus the following:*

- The child may have a moderate to severe sensori–neural hearing impairment that is permanent or a permanent conductive hearing loss, or a chronic temporary conductive hearing impairment
- Children in this group may have a diagnosis of unilateral Auditory Neuropathy Spectrum Disorder or a degenerative condition
- Language levels may show some delay and may require targeted support from Teacher of the Deaf and Speech and Language Therapist
- A child may have reduced social integration as a result of difficulties in following speech in a group and a lack of awareness of social situations
- A child may have some speech difficulties
- A child may make less progress than expected due to difficulties associated with their language levels

Enhanced: *SEN Support & Targeted levels plus the following:*

- Typically the child has a severe or profound sensori–neural hearing impairment which is permanent. Children in this group may have a late diagnosis or a deteriorating condition
- They may have an additional or separate diagnosis of Auditory Neuropathy Spectrum Disorder
- Language levels will show significant delay: typically two or three years below their chronological age and will require targeted support from Teacher of the Deaf and Speech and Language Therapist
- The child may make slow progress and be well below age appropriate NC expectation due to difficulties associated with their language levels
- A child may have reduced social integration as a result of difficulties in following speech in a group and a lack of awareness of social situations
- A child may have speech difficulties and require specialist HI SALT input
- A child has limited ability to use and understand spoken language and uses sign as their primary mode of communication
- Children may display emotional and behaviour difficulties linked to their frustrations

Hearing Impairment

All children with HI are eligible for special consideration under The Equalities Act 2010. Practical implications for individual learners with hearing impairments should be considered such as one to one or small group teaching to support curriculum access, management of personal audiological equipment (hearing aids, cochlear implants, radio aids and Bone Anchored Hearing Aids), language modification of both curricula and examination carrier language, specific language assessments, deaf awareness training and advice on learning environment modifications (lighting, seating and acoustics).

Use of personal aids: The child or young person may or may not have hearing aids prescribed. Hearing aids do not restore hearing to normal and work best within 1-2 metres of the speaker

Room Acoustics: Building Bulletin 93 requires that new build schools and some refurbished classrooms comply with a reverberation time of 0.6s in in primary classrooms and 0.8s in secondary classrooms

Classroom acoustics: Where possible classrooms should have carpets, low ceiling and/or acoustic tiling, curtains or blinds and doors to corridors should be shut during lessons

Provisions

SEN Support

Children within this category should make age appropriate progress through High Quality Teaching and Learning

- Specialist advice on strategies and teaching approaches from the SSS hearing impaired professional
- Children may require additional time to complete tasks
- Attention to positioning in class. Children should be seated no more than two metres from the teacher for instruction. Children with mild or fluctuating hearing loss may need to lip-read the speaker to supplement their auditory access
- Consideration given to the child's access to spoken language in assemblies. Where possible use a PA system in assemblies
- Consideration given to the child's access to spoken language in large reverberant rooms such as school halls and gyms
- Use of subtitles and or a written script when being shown video clips, DVDs etc. Children with hearing impairment should not be asked to take notes when they are watching

Targeted: *SEN Support level plus the following:*

- Specialist advice and input for school staff on how to enable full access to the curriculum and provide support for curriculum or skill areas and/or task analysis
- Greater personalisation of outcomes (refer to outcomes relating to earlier aspects of the curriculum) to provide the child with the experience of success
- Access to personal aids: The child will have hearing aids and may require a personal radio aid to support access to learning
- Regular individual / small group intervention to reinforce new concepts and language
- Individual / small group intervention re specific areas e.g. Speech and Language, Vocabulary and Phonics
- Additional support from a key adult with appropriate training to reinforce lesson content, support language development and ensure children are accessing the curriculum and support social interaction
- Access Arrangements for school based and external assessments if appropriate
- Sign Supported English may be necessary whilst developing their language in Early Years
- On-going advice and training from a Teacher of the Deaf in how to differentiate lessons so children can access them

Enhanced: *SEN Support & Targeted levels plus the following:*

Personalisation of outcomes across the curriculum.

- Individual/ small group intervention in order to reinforce new concepts and language and to target areas of concern such as speech and language, vocabulary and phonics in a quiet environment. These will be more frequent
- Additional support from a key adult with appropriate training to prepare for and reinforce lesson content, support language development and ensure children are accessing the curriculum
- Adapted and modified resources
- A radio aid system
- Specialist provision in a mainstream school with a Hearing Support Facility if appropriate
- Access Arrangements for assessments which should take place in a quiet room
- Sign support in class (usually Sign Supported English but may need British Sign Language) if appropriate
- Ongoing and further/more advanced training and advice from Teacher of the Deaf on appropriate strategies and approaches to ensure that children make good language (academic) progress

Hearing Impairment

Provision *continued...*

SEN Support

- ☐ Teaching staff repeat the contributions of other children as these may be missed
- ☐ Individual / small group intervention to introduce and consolidate new language and concepts
- ☐ A multi-sensory approach including the use of visual aids and contextual clues. This is especially important during phonics sessions when children are establishing their phoneme-grapheme correlation and may mishear sounds
- ☐ Individual / small group intervention to help children to accept and manage their hearing loss and develop a positive self-image as a deaf child
- ☐ Other children may need support to understand and accommodate their deaf peers' needs
- ☐ Consideration of Access Arrangements for assessments
- ☐ Training and advice from a Teacher of the Deaf on appropriate strategies and teaching approaches to ensure that the child or young person continues to make good language progress and develops positive self – esteem
- ☐ Training in how to manage the child's hearing aids
- ☐ Monitoring of and support for the use of hearing aids
- ☐ Additional discussions at points of transition
- ☐ Meet with parents / carers at least 3 times a year to discuss progress and plan school and home support for outcomes. These meetings should coincide with PEPs for Looked After Children where possible

Targeted: *SEN Support level plus the following:*

- ☐ Training to understand the impact of hearing impairment on language, concept development and social skills
- ☐ Training in how to use and troubleshoot children's personal radio aid equipment/ cochlear implants and personal radio aid equipment
- ☐ Support to develop PFA outcomes through universal provision and additional intervention (see PFA outcomes) with specialist support where appropriate (https://www.preparingforadulthood.org.uk/SiteAssets/Downloads/yeded5wb636481748062535810.pdf)
- ☐ Personalised planning for transition
- ☐ Additional support re pastoral / social care
- ☐ Additional level of parent/ carers liaison to include an Annual Review

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Significant modification of resources and materials so that they are accessible (staff will need time to do this)
- ☐ Dedicated access to a quiet room for intervention
- ☐ A balanced approach to support and intervention
- ☐ A high level of support at points of transition
- ☐ Ongoing and more advanced training and advice from SNS
- ☐ High levels of pastoral / social care
- ☐ High levels of parent / carer liaison
- ☐ Further/more advanced training in how to manage children's hearing aids / cochlear impairments and personal radio aid equipment

Hearing Impairment

Provision *continued...*

Progress of children and young people should be reviewed using a process of Assess, Plan, Do, Review. As part of the review SEN(D)Cos should ask the following questions. Review should take place as appropriate according to intervention but at least three times a year:

- Have short term outcomes been met?
- Is there progress towards long term outcomes?
- What impact have different types of provision made?
- Which provisions have been successful but need to continue?
- Which provisions have been successful and no longer need to continue?

- Which provisions have not been successful and need to change?
- Where do the needs of the child sit within the thresholds?
- Is there a change in level of need?
- **Whilst making optimal progress in their own right children and young people with cognitive and learning difficulties, may make progress at a slower pace than the majority of their age group. This will not necessarily mean that the varying levels of provision in schools are not meeting their needs appropriately; it may reflect best possible progress**

Strategies

- Children and young people with hearing needs will benefit from a multi-sensory approach including the use of visual aids and contextual clues. This is especially important during phonics sessions when children are establishing their phoneme-grapheme correlation and may mishear sounds
- Some children may need sign support in class (usually Sign Supported English but may need British Sign Language)

Visual Impairment

A child or young person has a visual impairment if their sight cannot be corrected by glasses. Vision impairment is a low incidence disability with many different causes. It varies widely in its effects on a child's functional vision and access to the curriculum. It is important to understand that each child's functional use of vision will be different from the next even if they have the same diagnosis and level of vision.

The professional judgement of a QTVI should be applied as necessary to decide on the classification of the visual impairment. For example a child may have a mild reduction in visual acuity but be functioning within a different visual category due to an additional ophthalmic condition e.g. nystagmus, visual field reduction, cerebral visual impairment, and/or additional learning difficulties.

All children with vision impairment are eligible for special consideration under The Equalities Act (2010). Differentiation should be considered, for example, the modification of print materials, suitable seating position, lighting conditions, use of specialist technologies and, how to ensure children can move independently around your setting safely. This may include an environmental audit with recommended adaptations.

Needs

SEN Support

Targeted: *SEN Support level plus the following:*

Enhanced: *SEN Support & Targeted levels plus the following:*

Mild Vision Loss

☐ Distance vision:6/12 to 6/18 Snellen*

☐ Near vision: Font size equivalent to N14-N18

☐ There may be great variation in functional use of vision

* Snellen scale 6/12 would indicate that what a fully sighted persons sees at 12 metres, the child with vision impairment would need to view from 6 metres to see the same level of detail. This acuity would be with corrected vision (glasses or contact lenses if prescribed)

Moderate Vision Loss

☐ Distance vision: 6/19 to 6/36 Snellen*

☐ Near vision: Font size equivalent to N18-N24

☐ There may be great variation in functional use of vision

Severe and Profound Vision Loss

☐ Within this category there are 'severe' and 'profound' vision impairments

☐ The child may be educationally blind and unable to access learning through print

☐ Severe vision loss: Distance vision: 6/36-6/120 Snellen* - registered sight impaired (partially sighted)

☐ Near vision: Font size equivalent to N24-N36.

☐ Profound vision loss: Distance vision: <6/120 - registered severely sight impaired

☐ Near vision: Educationally blind/braille user/can access small quantities of print larger than N36

Visual Impairment

Provision

SEN Support

- Specialist advice and training on strategies and teaching approaches from the Sensory Needs Service (SNS) qualified teacher of the visually impaired (QTVI)
- Children within this category should make age appropriate progress through quality first teaching guided by the SNS
- Curriculum differentiated so that content can be accessed independent of visual impairment
- Adaptation of printed resources
- Additional time to complete tasks if needed
- Attention to layout of classroom and positioning in class dependent on the child's best visual field and as advised by SNS
- Children may need support from a key adult with appropriate training to reinforce lesson content and ensure the child is accessing the curriculum and support social interaction
- Advice and support for mobility, orientation and independence skills
- Support for social interaction and inclusion
- Health, Safety and Risk management re visual impairment e.g. trips and extra curricula activities
- Individual/ small group intervention to help children to manage their visual impairment and develop a positive self-image
- Children may require individual teaching from a QTVI to improve visual processing
- Direct teaching from SNS to develop specialist skills e.g. touch typing and low visual aids
- Other children may need support to understand and accommodate needs of their visually impaired peers

Targeted: *SEN Support level plus the following:*

- Specialist advice and training for school staff on how to enable full access to the curriculum and provide support for curriculum or skill areas and / or task analysis
- Greater differentiation and / or modified planning and preparation required across the curriculum on the advice of the QTVI and implemented by the setting
- Children should have the option of alternative ways of recording their work
- Children may need individual and small group work to introduce and consolidate new concepts and learning opportunities
- More time is allowed to enable learning to automaticity before further skills are taught (previous skills learned to automaticity, a small amount of new material is introduced and all the material is practised together)
- Greater personalisation of outcomes (refer to outcomes relating to earlier aspects of the curriculum) to provide the child with the experience of success
- Children may require additional support from a key adult with appropriate training to reinforce lesson content, support language development and ensure the child is accessing the curriculum and support social interaction
- Direct teaching from SNS to develop specialist skills known as the VI curriculum e.g. touch typing and use of Low Vision Aids (LVAs)
- Intervention programme from the SNS Habilitation Officer
- Access arrangements for school based and external assessments
- Differentiation for inclusion in outdoor activities and extra curricula activities

Enhanced: *SEN Support & Targeted levels plus the following:*

- On-going personalised advice and training from the SNS for school staff to enable full access to the curriculum
- A high level of dedicated support from a trained key adult
- Teacher and key adult need to work collaboratively to ensure the best outcomes for the child
- High level of differentiation by teaching staff and key adult
- Personalisation of outcomes in all areas of the curriculum
- Delivery of information actively incorporated into planning
- Lesson plans available in advance so that specialist resources can be prepared
- Intensively modified printed, tactile and/or auditory materials and teaching resources on the advice of the SNS provided by the setting
- Children may need additional time to experience and understand new activities
- High levels of additional support from a specialist TA who can reinforce lesson content and ensure the child is accessing the curriculum and support social interaction
- An appropriate level of direct teaching from SNS to develop specialist skills, known as the VI curriculum e.g. braille, use of tactile resources
- Intervention from the SNS Technical Officer or STA to develop tactile skills, touch typing and / or the use of specialist technologies e.g. screen reading software, braille readers
- An on-going programme of mobility and Independent Living Skills devised and delivered by the SNS Habilitation Officer

Visual Impairment

Provision *continued...*

SEN Support

- ☐ Consideration of Access arrangements for school based and external assessments
- ☐ Environmental audit of setting by Sensory Needs Habilitation Officer to highlight and reduce risks
- ☐ At least 1 annual functional vision assessment from a QTVI
- ☐ Additional discussions between current and future staff at points of transition
- ☐ Meet with parents / carers at least 3 times a year to discuss progress and plan school and home support for outcomes. These meetings should coincide with PEPs for Looked After Children where possible

Targeted: *SEN Support level plus the following:*

- ☐ Support to develop PFA outcomes through universal provision and additional intervention (see PFA outcomes) with specialist support where appropriate (https://www. preparingforadulthood.org.uk/SiteAssets/Downloads/ yeded5wb636481748062535810.pdf)
- ☐ Personalised planning for transition
- ☐ Additional support re pastoral/ social care.
- ☐ Additional level of parent and carer liaison to include Annual Review

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Dedicated access to a quiet room for individual teaching and learning sessions delivered by school staff and SNS
- ☐ A balanced approach to support an intervention to facilitate social inclusion
- ☐ A high level of support at points of transition
- ☐ High levels of pastoral/ social care
- ☐ High levels of parent/ carer liaison

Progress of children and young people should be reviewed using a process of Assess, Plan, Do, Review.

As part of the review SEN(D)Cos should ask the following questions. Review should take place as appropriate according to intervention but at least three times a year:

- Have short term outcomes been met?
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Strategies

- Address all children by name
- Speaker position themselves to be clearly seen e.g. avoid standing with back to a window
- Consider child's position in class to ensure access to visual stimuli
- Consider grouping arrangements to ensure social interaction
- Support written feedback with oral feedback at an appropriate level of understanding

- Teaching of and reinforcement of visual and spatial concepts and language e.g. brighter, darker, left, right, higher, lower, size, shape, distance and scale
- Use of multi-sensory real life experiences to enable children with a visual impairment to develop a shared understanding of the world
- Use of accessible image books, resources in alternative formats e.g. braille, tactile diagrams as appropriate

Visual Impairment

Strategies *continued...*

- Allow children to work with tangible objects and artefacts for longer than peers
- Use role play and descriptive language to explore ideas
- Use a range of source material
- Consider lighting of classroom environment and environments of any extra – curricula activities
- Follow advice from specialist teachers re presentation of the curriculum
- Use of whiteboard
- Accessibility of printed resources – font – text size - layout
- Ensure child is seated so that they can see teacher and boards
- Allow extra time to process information
- Support delivery of information with auditory and tactile approaches where appropriate e.g. give oral descriptions of visual materials
- Use of ICT to increase access
- Ensure clear turn taking rules and a hands up or non – interruption rule
- Children to have their own individual copy of textbooks and worksheets (resources)
- Children may miss incidental learning opportunities provided by displays in classrooms and would require personal copies of information displayed e.g. keywords, timelines
- Children can miss social cues and misunderstand social situations. Social situations may need to be explained to the child

Resources

- Sloping reading and writing boards
- Magnifiers
- Large print resources
- Accessibility software
- Large computer monitor
- Separate TV monitor
- Dark pens and pencils

- Dark lined books and paper
- Bright PE equipment

Specialist resources for children with a higher level of need include:
- o Braille and tactile resources
- o Laptop with speech software
- o Braille/ note taker
- Training and advice from Teacher of the Visually Impaired
- Children may need use of standard technologies e.g. tablets and laptops
- Use of specialist learning materials or equipment
- Use of technology such as IPad and laptops to support learning including near or distance tasks
- Modified printed curriculum resources
- Ongoing training and advice from SNS on use of specialist software and equipment
- Training to understand the impact of visual impairment on development of academic and social skills
- Ongoing training in how to modify resources / differentiate delivery for children with a visual impairment
- Ongoing and further/more advanced training and advice from SNS e.g. production of tactile resources, use of specialist equipment
- Training to understand the impact of visual impairment on academic and social and emotional development.
- Access to intensively modified resources printed materials and teaching resources (staff will need time to do this)
- Provision of a radio aid system
- Provision of specialist technologies to access learning through Braille, enlarged print or audition
- Ongoing and further/more advanced training and advice from SNS e.g. production of tactile resources, use of specialist equipment
- Time for specialist TA to prepare adapted materials
- Appropriate input from other educational and non-educational professionals.
- Settings will provide a minimum of one key adult who is willing and able to learn Unified English Braille

Multisensory Impairment

Children and young people with multi-sensory impairment (MSI) have impairments of both sight and hearing. Many children also face other challenges, such as medical conditions or physical disabilities. A very small number of children and young people with MSI are totally blind and deaf, but most have some useful vision and/or hearing. A huge range of conditions can cause MSI. There's no single or main cause.

It may not be clear at first how well a child can see or hear, especially if they have other problems. Many children with MSI have impairments of other senses, as well as sight and hearing. They may have poor balance, limited movement, under- or over-sensitive touch or an impaired sense of smell.

MSI is a very rare impairment, particularly in children. There are an estimated 4,000 children with MSI in the United Kingdom (about 3 in every 10,000 children).

We normally get most of our information about the world around us through sight and hearing, so multi-sensory impairment (MSI) makes a significant difference to children's learning and development.

Without extra help, MSI effectively restricts experience of the here-and-now – what is happening at this moment, within arm's reach. Children may not realise that the wider world exists, or they may find it so confusing and threatening that they ignore it as far as possible.

Sensory Processing Difficulties:
Sensory processing refers to how we use the information provided by all of the senses within our body and from our environment. All of the information is received, processed and integrated to give us an understanding of who we are, where we are and what is happening around us.

Children who have sensory processing difficulties may have difficulty in figuring out what is happening inside and outside of their bodies. The sensory information their body is registering may not be accurate. This can affect a child's ability to attend, they may appear to consistently be in a heightened state of alert, seek constant movement or appear not to register a response. Poor sensory processing can also affect a child's acquisition of motor skills e.g. balance and ability to catch a ball.

Needs

SEN Support

- ☐ Mild loss in both hearing and sight and making good use of at least one modality (hearing or sight)
- ☐ Hearing aids and/or Low Vision Aids
- ☐ Non-progressive condition
- ☐ Slower pace of working but has good compensatory strategies
- ☐ Difficulty with listening, attention and concentration
- ☐ Language and communication largely match potential given appropriate support
- ☐ Low level of support needed to manage equipment/aids
- ☐ Additional learning needs
- ☐ Auditory processing disorder, Auditory Neuropathy, Cerebral Visual Impairment
- ☐ Sensory processing difficulties

Targeted: *SEN Support level plus the following:*

- ☐ Moderate loss in both modalities (hearing and sight)
- ☐ Additional language and / or learning needs associated with multi-sensory impairment
- ☐ Difficulties accessing incidental learning, including signed and verbal communication
- ☐ Slower pace of learning
- ☐ Difficulties with attention, concentration
- ☐ Difficulties with the development of independence and social skills

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Severe/profound loss in one modality and moderate in the other or has a late diagnosed or recently acquired multi-sensory impairment
- ☐ Delayed development in some areas of learning and difficulties generalising learning and transferring skills
- ☐ Difficulties coping with new experiences and under-developed independence and self-help skills
- ☐ Communication difficulties
- ☐ Significant difficulties in accessing incidental learning and the curriculum
- ☐ Significant difficulties with attention, concentration, confidence and class participation
- ☐ Unable to access learning and social interactions independently and to develop life-skills
- ☐ Significantly slower pace of learning
- ☐ Significant challenging behaviours resulting from sensory responses e.g. self-injurious

Multisensory Impairment

Provision

SEN Support

- ☐ Specialist advice and training on strategies and teaching approaches from the Sensory Needs Service
- ☐ Curriculum differentiated so that content can be accessed independent of language and communication and other difficulties while supporting the development of key skills
- ☐ Planning to ensure full participation in class activities
- ☐ Adaptation of resources and use of technology to personalise resources
- ☐ Specialist equipment e.g. low vision aids and electronic magnification
- ☐ Modification to presentation of assessments
- ☐ Explanation, clarification and reinforcement of lesson content
- ☐ Additional time to complete tasks if needed
- ☐ Additional support from key adult with appropriate training to reinforce lesson content and ensure the child is accessing the curriculum and is socially included at key points in the day
- ☐ Sensory - motor based activities e.g. movement breaks, fidget toys or workstations
- ☐ Environmental audit of setting by Sensory Needs Habilitation Office to highlight and reduce risks
- ☐ Health, Safety and Risk management re visual impairment
- ☐ Individual/ small group intervention to help children to manage their multisensory impairment and develop a positive self-image
- ☐ Support for other children to understand and accommodate needs of their multisensory impaired peers
- ☐ Access arrangements for assessments
- ☐ Advice on support for mobility, orientation and independence

Targeted: *SEN Support level plus the following:*

- ☐ Specialist advice for school staff on how to enable full access to the curriculum and provide support for curriculum or skill areas and/or task analysis
- ☐ Advice from SNS re aspects of learning requiring specific intervention
- ☐ Greater personalisation of outcomes (refer to outcomes relating to earlier aspects of the curriculum) to provide the child with the experience of success
- ☐ More time to enable learning to automaticity before further skills are taught (previous skills learned to automaticity, a small amount of new material is introduced and all the material is practised together)
- ☐ Planning to ensure full access top learning and development of social and emotional skills
- ☐ Key adult to reinforce lesson content, support language development and ensure access to the curriculum and social interaction
- ☐ Teacher and key adult work collaboratively
- ☐ Direct teaching from SNS to develop specialist skills e.g. touch typing use of Low Vision Aids (LVAs)
- ☐ Intervention programme from the SNS Habilitation Officer
- ☐ Intervention to teach strategies that enable children to manage their own arousal levels e.g. 'Alert Programme' delivered by trained staff
- ☐ Flexible provision that allows time for children to preview and review lessons and experience new activities in a quiet area
- ☐ Access arrangements for school based and external assessments
- ☐ Sensory circuits (min 3 days a week, ideally 5 days)
- ☐ Support to develop PFA outcomes through universal

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ On-going personalised advice and training from the SNS to enable full access to the curriculum and social inclusion
- ☐ Additional support from a dedicated, specialist key adult across the curriculum to prepare resources and give direct support
- ☐ Settings will provide a minimum of one key adult who is willing and able to learn Unified English Braille where appropriate
- ☐ Greater personalisation of outcomes (refer to outcomes relating to earlier aspects of the curriculum) to provide the child with the experience of success
- ☐ A tactile approach to learning with access to real objects and context based learning experiences and/or access to visual or tactile signed communication
- ☐ Access to modified resources printed materials and teaching resources and staff time to prepare resources
- ☐ Specialist technologies to access learning including a radio aid system as appropriate
- ☐ Delivery of information actively incorporated into planning
- ☐ Lesson plans available in advance so that specialist resources can be prepared
- ☐ Dedicated access to a quiet room for intervention
- ☐ Direct teaching from SNS to develop specialist skills e.g. VI curriculum including braille, use of tactile resources
- ☐ Intervention from the SNS Technical Officer or TA to develop tactile skills, touch typing and / or the use of specialist technologies e.g. screen reading software, braille readers
- ☐ Mobility and Independent Living Skills Intervention programme from the SNS Habilitation Officer

Multisensory Impairment

Provision *continued...*

SEN Support

☐ Additional discussions between staff at points of transition

☐ Training to understand the impact of multisensory impairment on development of academic and social skills

☐ Meet with parents / carers at least 3 times a year to discuss progress and plan school and home support for outcomes. These meetings should coincide with PEPs for Looked After Children where possible

Targeted: *SEN Support level plus the following:*

provision and additional intervention (see PFA outcomes) with specialist support where appropriate (https://www. preparingforadulthood.org.uk/SiteAssets/Downloads/ yeded5wb636481748062535810.pdf)

☐ Training and advice from SNS on use of specialist software

☐ Training On- line Alert Programme

☐ Personalised planning for transition

☐ Additional support of pastoral / social care

☐ Additional level of parent / carer liaison

Enhanced: *SEN Support & Targeted levels plus the following:*

☐ Access to sensory circuits

☐ Ongoing training and advice from SNS e.g. production of tactile resources, use of specialist equipment

☐ High levels of pastoral / social care

☐ High levels of parent / carer liaison

Progress of children and young people should be reviewed using a process of Assess, Plan, Do, Review.

As part of the review SEN(D)Cos should ask the following questions. Review should take place as appropriate according to intervention but at least three times a year:

- Have short term outcomes been met?
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Whilst making optimal progress in their own right children and young people with cognitive and learning difficulties, may make progress at a slower pace than the majority of their age group. This will not necessarily mean that the varying levels of provision in schools are not meeting their needs appropriately; it may reflect best possible progress

Strategies

- Curriculum plan reflects levels of achievement and includes individually focussed plan targets
- Attention to seating, lighting, visual environment and acoustics
- Full inclusion within national curriculum
- Teaching methods which facilitate access to the curriculum, social/emotional development and class participation
- Information and advice is shared with all appropriate staff
- Flexible class groups with frequent opportunities for small group and 1:1 work in a quiet environment
- Additional time to experience new activities, complete work, preview and review lessons

Resources

- Multi-sensory impairment related training opportunities for staff as requested
- Liaison with Sensory Needs Service for sourcing of appropriate aids, including radio aids.
- Additional targeted support for explanation, clarification and reinforcement and to accommodate slower pace of learning
- Input from other educational and non-educational professionals as appropriate
- Need for balanced approach to support and intervention to facilitate social inclusion
- Training and support from Sensory Needs Service for the role of intervenor/individual support

Please see strategies and resources for visual and hearing impairment

Physical Difficulties

Within the group of children and young people considered to have physical and neurological difficulties there may be different forms of need:

- A child may have a physical condition that directly affects their learning outcomes. For example, significant involuntary control of the muscles of the arm will affect a child's ability to write; significant involuntary control of oral musculature may lead to the need for alternative and augmentative communication (AAC); or perceptual difficulties may cause difficulty with the process of learning to read

- A child may have a physical condition with less immediately obvious associated learning difficulties, sensory needs or neurological problems. A neurological impairment can impact on aspects of thinking and learning such as verbal/non-verbal reasoning, executive functioning, memory and processing

- A child may primarily have problems with physical access which does not directly require modifications to learning content but rather the provision of appropriate mobility aids and modifications to the school environment

- A child may have a specific medical disability that requires regular specific nursing or medical /paramedical intervention in order to benefit from school [1]

Consequently, there are children whose physical disabilities require either separately or in overlapping combination:

- Appropriate modification to curriculum access (for example presentation and recording)
- Appropriate modification to curriculum content
- Support for the development of independent learning skills
- Appropriate modifications to physical access and the physical environment
- Specialist equipment and appropriately trained staff to focus primarily on health care needs
- School staff will need to understand the importance of all of the individual needs and aspirations of the child rather than attending only to the most immediate factors linked to their particular disability or condition

If the child reviewed has needs requiring modification to curriculum content in addition to their main physical needs, then their progress and provision level will also need to be assessed within the appropriate section/s of the provision guidance.

1 Department for Education, 2015, Supporting pupils at school with medical conditions, https://www. gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3

Needs

SEN Support

- ☐ Children have persistent minor health problems relating to physical disability or a medical condition requiring an increased level of monitoring
- ☐ They can move and position independently but have stability and/or gross/fine motor coordination difficulties; hand function may be restricted
- ☐ Mobility is affected, particularly over medium to long distances
- ☐ They can make independent use of available safety features of the School environment, such as handrails
- ☐ Disability limits the amount of self-care possible and verbal reminders and limited adult assistance may be required

Targeted: *SEN Support level plus the following:*

- ☐ Impaired motor functions, affecting dexterity or mobility within school, which would without intervention, directly obstruct or hamper access to the curriculum
- ☐ Environmental adaptations to access school curriculum. For example, ramping, widening doorways, provision of care-suite for hygiene or adapted toilet facilities
- ☐ Adult assistance to access the curriculum, manage their condition or move safely around the environment
- ☐ Exhibits fatigue, lack of concentration or motivation due to their condition, which is having a marked effect on classroom performance
- ☐ Learning frequently affected by health problems and hospital visits

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Children are likely to have life-long learning difficulties or disabilities, across several areas of development, and will require very targeted and specialist intervention
- ☐ Utilises specialist equipment to enable access to curriculum and activities of daily living e.g. hoisting, complex modular seating systems, lying boards, standing frames, toileting equipment, manual-handling aids such as transfer boards
- ☐ Children have significant difficulty performing physical skills
- ☐ Neurological factors have a significant impact on learning and functioning
- ☐ Disability prevents self-care in one or more tasks, such as toileting, feeding, dressing

Physical Difficulties

Needs *continued...*

SEN Support	**Targeted:** *SEN Support level plus the following:*	**Enhanced:** *SEN Support & Targeted levels plus the following:*
	☐ Needs specialist input to comply with health and safety legislation e.g. to access learning in the classroom for personal care needs, at break and lunch times ☐ Increased use of alternative methods for extended recording e.g. scribe, predictive text software, low/high tech AAC including access to specialist switching/mounting	☐ Balance is required between educational, medical and therapeutic needs and interventions

Provision

SEN Support	**Targeted:** *SEN Support level plus the following:*	**Enhanced:** *SEN Support & Targeted levels plus the following:*
Staff Knowledge and Understanding ☐ All staff involved are aware of the nature of the physical or neurological difficulty and linked learning and/or access requirements ☐ All staff are aware of the principles of effective differentiation and can put them into practice for children with moderate physical and neurological difficulties ☐ Effective systems of internal communication between school staff are in place so that appropriate information is shared with regard to the implications for the children's individual needs in relation to their physical disability or neurological impairment **Expected access arrangements to support learning** ☐ Resources are chosen that limit the need for manipulation ☐ Access is maximised for teaching approaches which involve visual and practical resources ☐ Written recording demands are reduced	**Staff Knowledge and Understanding** ☐ Awareness of the additional teacher/therapist liaison is required to ensure appropriate balance between educational and direct therapy objectives (linked to developing holistic goals/outcomes) ☐ Access is available to specific training for support staff in implementing therapy programmes (within the holistic approach) ☐ Staff training related to administration or assistance with specific medical/personal care needs may be required ☐ All teaching staff will need to have received relevant and specific training on how to assess and meet the needs of children with significant physical disabilities and (for some children) learning related difficulties ☐ Staff need to undertake risk assessments regularly for individual children in different contexts ☐ Disability-aware staff remain actively focused on all the needs of the individual child and take account of their views	**Staff Knowledge and Understanding** ☐ Expected access arrangements to support learning ☐ Adult support is needed for transferring resources between lessons ☐ Adult support ensures effective mobility access when required/ requested ☐ Adult support is provided for identified self-care tasks ☐ Differentiation of the curriculum takes into account missed schooling and the possible need for home tuition ☐ Hoists may be required for transfers ☐ Access to tail-lift transport is needed to and from school and for educational trips ☐ The use of mobility resources are effectively reviewed and managed ☐ Access to hydrotherapy is required for some children

Physical Difficulties

Provision *continued...*

SEN Support

- ☐ Regular rest breaks reduce mental and physical fatigue
- ☐ Appropriate seating and seating placement is considered
- ☐ Additional support for self-care is provided when required/requested
- ☐ Access is provided to a variety of strategies and personalised low-tech resources, such as a writing slope or modified scissors
- ☐ The school environment already has adapted safety/ support resources

Targeted: *SEN Support level plus the following:*

Expected access arrangements to support learning
- ☐ Access to supportive seating is required
- ☐ Access to an additional mobility resource is needed, such as a walking frame or wheelchair
- ☐ Aspects of the school environment are adapted for specific needs, such as ramped access or an accessible toilet
- ☐ Modified personalised Information Communication Technology resources are made available, linked where appropriate with Assisted Communication or Alternative and Augmentative Communication (AAC) resources and equipment
- ☐ A scribe is used when required
- ☐ Specialist transport arrangements and advance planning are provided to ensure maximum access and involvement on school trips
- ☐ Additional support is available for physically active lessons such as PE or modified PE
- ☐ Appropriate staffing is needed to monitor and support for specific activities, such as swimming
- ☐ Expected interventions to support emotional well-being for learning
- ☐ Stress levels due to any sensory needs are monitored and appropriate strategies to reduce these are implemented consistently
- ☐ Regular opportunities are provided for the child concerned to express their concerns and identify preferences
- ☐ Up-to-date access to specialised and personalised resources and equipment (recommended by physiotherapist/occupational therapist/speech and language therapist/paediatrician or specialist nurse) is regularly maintained

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Expected interventions to support emotional well-being for learning
- ☐ A high level of adult support is provided to:
  - • maintain child safety;
  - • provide emotional support and help clarify signs of stress or concern;
  - • meet personal care needs;
  - • Provide rapid response to any emerging medical need
- ☐ High levels of pastoral / social care
- ☐ High levels of parent / carer liaison

Physical Difficulties

Provision *continued...*

- ☐ Additional support of pastoral / social care
- ☐ Additional level of parent / carer liaison

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Strategies

- Give opportunities to record information in a variety of ways
- Use low tech specialist equipment e.g. word processor with accessibility options , adapted pens and rulers, writing slopes, foot box
- Access to adapted ICT hardware e.g. large key boards
- Access to recording software e.g. voice activated software, Read, Write
- Ensure layout of classroom allows easy access to seat and resources
- Ensure layout allows social interaction
- Children and young people with physical disabilities may have additional needs e.g. language needs – please see strategies appropriate to support these needs

Resources

- Adapted hardware and accessibility options e.g. large keyboard
- Recording software e.g. Dragon Dictate
- Specialist seating and foot box to support posture
- Adapted equipment e.g. writing materials, scissors, kitchen equipment, art materials, PE equipment
- Mobility aids – see specialist advice for individual children
- Personal care aids – see specialist advice for individual children

- ICT accessibility options e.g. voice activated software
- Resources organised and accessible to all children
- Specialist equipment e.g. non-slip mat (Dycem), adapted equipment e.g. pens, foot stool, writing slope
- Specific intervention programme resources e.g. Jump Ahead
- Manual handling training delivered in school to adhere to health and safety training
- Training in personal care and the impact of health needs where appropriate
- Multi agency collaboration regarding education, health and care needs
- Specialist ICT hardware and software
- Adapted site may be necessary to enable access to the building and/ or the curriculum
- Hygiene/ medical room may be necessary
- Training in personal care and the impact of health needs where appropriate
- Multi agency collaboration re education, health and care needs
- Specialist ICT hardware and software
- Specialist complex, modular seating and equipment e.g. x-panda, triton chair
- Specialist ICT hardware and software e.g. eye gaze technology

Social, Emotional and Mental Health

Children and young people may experience a wide range of social, emotional and mental health difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated as well as displaying challenging, disruptive and disturbing behaviours. These behaviours may reflect underlying mental health issues such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder. **SEND Code of Practice, 2015, 6.32**

Only medical professionals should make a formal diagnosis of a mental health condition. Schools, however, are well-placed to observe children day-to-day and identify those whose behaviour suggests that they may be suffering from a mental health problem or be at risk of developing one. This may include withdrawn children whose needs may otherwise go unrecognised

Children and young people with social, emotional and mental health difficulties may struggle to cope with school routines and making and sustaining relationships. They will be considered to have special educational needs if they require educational arrangements or interventions that are different from those generally offered in a mainstream school. However, although there are challenges, children and young people with social, emotional and mental health difficulties should be supported to fully participate in school and academic expectations for this group should remain high. Any intervention must be carefully planned with an expectation of re-integration to a full time curriculum and to social interaction. Where a clear plan is not in place there is a danger of increased disengagement from teaching and learning and from inclusion in all aspects of school life

Persistent disruptive or withdrawn behaviours do not necessarily mean that a child or young person has SEN. Where there are concerns, there should be an assessment to determine whether there are any causal factors such as undiagnosed learning difficulties, difficulties with communication or mental health issues. If a child has poor attendance or is not attending at all, the school should make appropriate referrals to Local Authority or external services and work with the children, families and team around the child to bring about reintegration or placement change. The school maintains responsibility for the child, and should co-ordinate support for the child, even where other agencies, including Teaching and Learning Provision (TLP) are involved

Professionals should also be alert to other events that can lead to learning difficulties or wider mental health difficulties, such as bullying or bereavement. Such events will not always lead to children and young people having SEN but it can impact on well-being and sometimes this is severe. Schools should ensure they make appropriate provision for the child's short-term needs in order to prevent problems escalating. Where there are long-lasting difficulties schools should consider whether the child might have SEN
The emphasis of this guidance is on whether the child meets expectations of progress in school. Experience shows that:

- Schools and teachers differ in their expectations and thresholds of tolerance
- The way in which schools, classrooms, the curriculum and individual children are managed makes a substantial difference to the behaviour of children and can make a substantial difference to the emotional development of vulnerable children
- If the ethos of the school is welcoming to all children, staff are flexible in approach and able to work together to solve the complex issues that sometimes arise; children with quite challenging social, emotional and mental health difficulties are able to be successfully managed and included
- Schools should regularly audit the quality of provision in school and seek external validation of their self-assessment processes
- Measuring the progress of children with social, emotional and mental health difficulties is key to establishing effective interventions
- Schools that monitor trends in incidents, exclusions and vulnerable child groups will be more successful in targeting support to improve emotional well-being
- Most serious incidents start with a relatively minor incident that escalates into a serious episode of non-compliance or violence; schools need to develop expertise in defusing non-compliance and de-escalating confrontations

These criteria therefore put considerable emphasis on the level and quality of provision for the child in school. It will be expected that:
- The school will have in place effective policies and practice covering teaching and learning, behaviour, pastoral care, child protection, discipline and special educational needs
- The implementation of these policies should ensure that all staff working with children, especially those who present with emotional, social and mental health difficulties have a consistent and positive approach
- The progress of children in response to an intervention programme will be measured and tracked to inform decisions re-adjustments to the intervention programme
- Exclusion is never an appropriate intervention in terms of the SEN Code of Practice
- Interventions will be specific, include clear baselines and progress measures and should be those which have research evidence of success in bringing about changes in well-being and behavior
- Involvement of parents/carers and children will be sought to support the child in a proactive approach
- Support for wider family should be coordinated by the school where a child's behaviour, mental health, wellbeing or attendance is a result of wider home or social factors

Social, Emotional and Mental Health

Needs

SEN Support

Self-care:
- ☐ Lacks awareness of or interest in own physical presentation
- ☐ Demonstrates impulsive behaviour which carries risk
- ☐ Has slow assimilation and poor application of life skills needed to keep self-safe despite teaching and reinforcement of these in curriculum (for example road crossing)
- ☐ Has slow assimilation and poor application of life skills which contribute to development of good functioning in social situations impacting on dignity and self-worth (for example poor understanding of how to eat with cutlery)
- ☐ Intermittent or poor attendance affects social and academic functioning

Attachment and relationships:
- ☐ Difficulties seeking comfort from familiar adults or seeks to gain and maintain frequent close physical contact with adults
- ☐ Difficulty in maintaining relationships with members of staff
- ☐ Difficulty separating from main carer and requires support and encouragement from a familiar adult to do so
- ☐ Difficulty in working independently

Social behaviours:
- ☐ Difficulties complying with boundaries, routines and adult requests
- ☐ Difficulties inhibiting own actions/ behaviours
- ☐ Difficulties understanding impact of behaviour on others
- ☐ Difficulties accepting praise
- ☐ Difficulties relating to unfamiliar people and new social situations

Targeted: *SEN Support level plus the following:*

Self-Care:
- ☐ A high level of adult support needed for increasing independence and personal care skills
- ☐ Delayed development of hygiene and self-care i.e. regular soiling, that is not related to sensory or medical condition and is affected by significant contextual events, i.e. abuse or in response to transitions
- ☐ Difficulties understanding potentially high risk situations
- ☐ Does not demonstrate fear or pain when appropriate to do so
- ☐ Inappropriate relationship with food or addictive substances
- ☐ Evidence of self-harming behaviours
- ☐ Attendance is continual cause for concern and is subject to school attendance monitoring systems

Attachment and Relationships:
- ☐ Repeatedly seeks affection, approval and reassurance but insecurity remains to an extent which prohibits successful functioning
- ☐ Places importance on objects rather than relationships showing traits of obsessiveness

Social Behaviours:
- ☐ Difficulties in forming and maintaining positive relationships, which also prevents being able to cooperate/ work in a group with other peers and adults and impedes functioning in learning tasks
- ☐ Difficulties developing the associated necessary skills and learning behaviours to enable effective initiation, sustaining and completion of tasks

Enhanced: *SEN Support & Targeted levels plus the following:*

Self- Care:
- ☐ A very high level of adult support needed for increasing independence and personal care skills
- ☐ Evidence of self-harming, substance abuse, eating disorders or physical symptoms that are medically unexplained which have required a medical or mental health referral
- ☐ Attendance has been the subject of legislative measures

Attachment and Relationships:
- ☐ Demonstrates the need for daily and on-going support and encouragement from a familiar adult when separating from main carer which causes distress for a prolonged period
- ☐ Over dependent on key adults, with a sense of desperately needing to hold attention and expressing hostility or violence to that adult if thwarted in this
- ☐ Demonstrates hypervigilance and an absence of trust in adults and/or a lack of trust or compliance with any adult authority
- ☐ Projects inappropriate negative emotions onto adults
- ☐ Behaves in contradictory ways such as approaching adults whilst looking away
- ☐ Use of transitional object or 'holding in mind' activities and rituals

Social Behaviours:
- ☐ Over reacts dramatically and overwhelmingly to situations which do not appear to warrant it
- ☐ Seek out 'higher' authorities and has over inflated perception of self and abilities
- ☐ Consistently seeks out other vulnerable children, either to look after or to exert power over

Social, Emotional and Mental Health

Needs *continued...*

SEN Support

- ☐ Displays some attention seeking behaviour which is inappropriate or challenging
- ☐ Victim of bullying or intimidation or bullies or intimidates others
- ☐ Difficulties distinguishing between fact and fiction
- ☐ Difficulties interacting positively with peers
- ☐ Difficulties adapting to change in systems and routines
- ☐ Limited concentration and organisation in relation to age expectations
- ☐ Behaviours in class or group settings which can interrupt the progress of the activity or lesson

Emotional regulation:

- ☐ Difficulties with self-regulation and in managing feelings
- ☐ Difficulties expressing own preferences and interests
- ☐ Low self-confidence and low self-esteem
- ☐ Easily sensitive to disapproval
- ☐ When disapproval is shown, attention is withdrawn or when thwarted
- ☐ Requires encouragement to stay on task
- ☐ Frequently displays behaviour which is sullen, resentful or self-critical

Targeted: *SEN Support level plus the following:*

- ☐ Experiences disrupted learning and limited progress with actions that hinder the progress of others
- ☐ Damages or destroys own achievements, those of others and the learning environment
- ☐ Frequent, aggressive interaction with peers
- ☐ Can bear grudges or seeks revenge in relation to past confrontations

Emotional Regulation:

- ☐ Inability to self-regulate without high levels of support
- ☐ Displays high levels of anxiety that can result in aggressive behaviours
- ☐ Displays high levels of anxiety that can result in withdrawal from learning or social situations.
- ☐ Extremely sensitive to criticism or implied humiliation

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Displays anxiety through rocking, self-soothing or ritualistic behaviours
- ☐ Denies the need for help and support from adults, exerts control through refusal to accept help
- ☐ Demonstrates over preoccupation with tidying up, organising and always reverts to adult roles despite discouragement and distraction. Expresses overt anxiety when not able to perform these tasks
- ☐ Obsesses over small insignificant injuries (bruises, tiny cuts), but shrugs off significant injuries or incidents, or shows neurotic behaviours

Emotional Regulation:

- ☐ Lacks ability to value own achievements and those of others, and is reluctant or even responds with hostility, fear or violence when encouraged to try new things
- ☐ Demonstrates avoidance to tasks, peers or adults through extreme behaviours such as hiding or running
- ☐ Requires continued and profound adult assistance to contain, process and express own emotional states due to inability to regulate feelings independently
- ☐ Resorts to fight, flight or freeze states to manage difficult emotional states, showing hypervigilance frequently or reacting to unseen triggers
- ☐ Displays detachment, is shut down and disconnected from self or others, with dazed expression
- ☐ 'Splits off' at times of trauma or stress, or in response to triggers not evident to others
- ☐ Displays issues around food and eating or hoarding/ obsessing/stealing of objects
- ☐ May have Foetal Alcohol Syndrome, Personality Disorder, Anxiety Disorder, Obsessive Compulsive Disorder

Social, Emotional and Mental Health

Provision

SEN Support

- ☐ Careful planning and discussion with parents/carers and children about transition to secure continuity of experience for the child as they move from one setting e.g. classroom, teacher, school, to another
- ☐ Assessment e.g. Thrive, Boxall, Strengths and Difficulties questionnaire used to assess needs and inform curriculum
- ☐ Planning for social and emotional needs of children dependent on presentation and nature of needs e.g. different types of attachment
- ☐ Maximize opportunities through whole class teaching and where appropriate small groups, to develop: a sense of belonging, esteem, communication skills, listening skills, emotional literacy, resilience, social and emotional aspects of learning, self-awareness, self-organisation and independence, opportunities for taking responsibility, opportunities to take on a role outside of current expertise
- ☐ Key worker in place who forms a meaningful and genuine relationship with the child
- ☐ Provision of experiences and tasks that are challenging but achievable
- ☐ Opportunities for adults to model and facilitate positive interactions that enable children to develop positive ideas about themselves and others
- ☐ Opportunities for adults to role model the valuing of difference and of taking account of diverse needs and diverse expectations
- ☐ Planning for inclusion of children in group work e.g. working with a range of peers, making turn taking and sharing explicit, children take on different roles to support inclusion of all

Targeted: *SEN Support level plus the following:*

- ☐ Individualised personal care plans drawn up with parents, carers and others professionals which mitigate against risk to the child's safeguarding and dignity
- ☐ Specialist advice and input for school staff on how to enable full access to the curriculum and provide support for children with SEMH difficulties
- ☐ Referral to and joint working with other agencies to support families in meeting the developmental needs of the child and responding to emerging situations which place families and children in crisis
- ☐ Robust frameworks for child protection which recognise and identify risk factors, have clearly outlined pathways and accountable people to lead this
- ☐ Greater personalisation of outcomes, including social and emotional outcomes, to provide the child with the experience of success
- ☐ Deployment of key worker with appropriate skills at key times during the school day
- ☐ Adaptations to less structured times with planned adult supported activities
- ☐ Intervention regarding behaviour management leading to specific behaviour plans which are shared with all involved
- ☐ Enhanced PSHEE/ SEAL programme and re- enforcement throughout the school day including:
  - Use of thinking tools: Executive functioning skills, Mind-sets e.g. Carol Dweck, solution focussed approaches and coaching
  - Use of behavioural tools e.g. ABC analysis, rewards, recognition, corporation training
  - Social toolset, social skills, goal analysis

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Personalised curriculum with flexibility may be needed throughout the day
- ☐ High level of differentiation in behaviour management practice
- ☐ Personalisation of outcomes regarding academic, social and emotional outcomes to provide the child with the experience of success
- ☐ Planning for key worker support in all classrooms
- ☐ Flexibility of timetabling allows development of key skills and positive social behaviours individually or in small groups
- ☐ Different arrangements e.g. on site longer term time out facility but with the aim of reintegration
- ☐ A high level of support at points of transition – including daily transitions
- ☐ Additional support of pastoral / social care
- ☐ Additional level of parent / carer liaison

Social, Emotional and Mental Health

Provision *continued...*

SEN Support

☐ Differentiation of behaviour policy to take account of diverse needs

☐ Children's involvement in developing Additional Support Plans e.g. agreeing expectations and problem solving strategies such as mediation

☐ Staff are vigilant to injustice and explicit in how these are addressed and resolved

☐ Talk to the child about their feelings and those of others so that they are able to label and so express their emotions

☐ Enhanced PSHEE/ SEAL programme and re-enforcement throughout the school day including:

- Ongoing support for children in understanding their right to be kept safe by others
- Opportunities to explore ways of managing emotions so that children don't hurt others
- Opportunities to explore the development of close relationships, enabling the growth of self-assurance and promoting a sense of belonging which allows children to explore the world from a secure base

☐ Inclusion in nurture groups or intervention set up with Nurture Principles, run by trained staff, co-ordinated across the school setting and seeking to reintegrate children by reviewing carefully targeted outcomes

☐ Range of additional opportunities for social and emotional development e.g. social skills, buddy systems, circle time, circle of friends

☐ Consideration of seating plans according to the child's needs e.g. are they better placed near to the teacher, which peers should they sit with? Seating plans and classroom layout adjusted to meet sensory, attention needs

Targeted: *SEN Support level plus the following:*

- Planned calming routines as needed during the school day. These will have been pre taught and involve the child in planning
- Safe spaces identified for when quiet time is needed
- Provision of stability in staffing and peer relationships as far as possible
- Behaviour system in place for less structured times of the day and for extra curricular activities with planned intervention for identified children
- Time out opportunities within and outside the classroom which follow procedures agreed with the child and which focus on task completion

☐ Support to develop PFA outcomes through universal provision and additional intervention (see PFA outcomes) with specialist support where appropriate (https://www.preparingforadulthood.org.uk/SiteAssets/Downloads/yeded5wb636481748062535810.pdf)

☐ Personalised planning for transition

☐ Additional support of pastoral/ social care

☐ Additional level of parent/ carer liaison

Enhanced: *SEN Support & Targeted levels plus the following:*

Social, Emotional and Mental Health

Provision *continued...*

SEN Support

- ☐ Safe spaces identified for when quiet time is needed
- ☐ Provision of stability in staffing and peer relationships as far as possible
- ☐ Positive behaviour system in place for less structured times of the day and for extra curricula activities with planned intervention for identified children
- ☐ Time out opportunities within and outside the classroom which follow procedures agreed with the child and which focus on task completion
- ☐ Transitions identified and prepared for including changes in school day and annual change of staff
- ☐ Other external agencies e.g. Early Help, may become involved to support the family
- ☐ Therapeutic or counselling support where appropriate e.g. school counselling, CAMHs intervention
- ☐ Additional discussions between current and future staff at points of transition
- ☐ Meet with parents / carers at least 3 times a year to discuss progress and plan school and home support for outcomes. These meetings should coincide with PEPs for Looked After Children where possible

Targeted: *SEN Support level plus the following:*

Enhanced: *SEN Support & Targeted levels plus the following:*

Progress of children and young people should be reviewed using a process of Assess, Plan, Do, Review.
As part of the review SEN(D)Cos should ask the following questions. Review should take place as appropriate according to intervention but at least three times a year:

- Have short term outcomes been met?
- Is there progress towards long term outcomes?
- What impact have different types of provision made?
- Which provisions have been successful but need to continue?

- Which provisions have been successful and no longer need to continue?
- Which provisions have not been successful and need to change?
- Where do the needs of the child sit within the thresholds?
- Is there a change in level of need?

Whilst making optimal progress in their own right children and young people with cognitive and learning difficulties, may make progress at a slower pace than the majority of their age group. This will not necessarily mean that the varying levels of provision in schools are not meeting their needs appropriately; it may reflect best possible progress

Social, Emotional and Mental Health

Strategies

- Use a 'positive unconditional regard' approach. 'Positive unconditional regard separates what a person has done in the past from the inherent value they possess. This separation allows a safe space for our inevitabl failures, and creates part of the conditions for us to change and work towards succeeding.' (https://www.dumbofeather.com/articles/why-i-teach-with-unconditional-positive-regard/)
- Establish routines with predictable sequences and events with preparation for changes that may occur in routine
- Encourage children to freely express ideas and feelings, such as joy, sadness, frustration and fear, enabling children to develop strategies to cope with new, challenging or stressful situations
- Give careful explanations as to why some children may need extra help or support for some things or feel upset by a particular thing, to help children understand that their needs will be met
- Involve children in identifying issues and finding solutions whilst encouraging them to think about issues from the viewpoint of others
- Establish routines with predictable sequences and events and prepare for changes that may occur in routine
- Use social stories to support understanding of change, new and experiences and areas of challenge
- Use logical consequences as part of a stepped approach to behaviour management
- Use visual prompts to support ideas
- Provide an emotionally secure and safe environment, with good school/classroom organisation which provides predictability for children and consistency of management in all curriculum areas
- Have a flexible approach to a range of different behaviours
- Provide opportunities for recovery and 'fresh start' after every incident.
- Allocate a safe place for children to go to and check in or take time if things get too much
- Think toddler: Wonder aloud, notice and give commentaries as you would with a much younger child.
- Relate to the child at their emotional/ social age rather than the chronological age
- Get to know what makes the child tick and use areas of strength to build confidence and resilience
- Do not take difficult or comfortable feelings personally
- Hold onto successes for children e.g. success books
- Be mindful of curriculum topics that might trigger traumatic events. Prepare children for these sessions so they can prepare
- Use non-confrontational strategies when addressing inappropriate behaviours. Ignoring, ridiculing, shaming, demanding eye contact can lead to an escalation of behaviours.

- Gently challenge perceptions of issues. Perceptions are often a result of hidden fear or panic based on past experiences and as such children will do everything they can to stop themselves feeling vulnerable and that includes accepting responsibility.
- Comment rather than interrogate – think on the part of the children
- Provide opportunities for reparation as close to incidents as possible
- Allow extra processing time
- Explicitly empathise as empathy breeds empathy
- Persevere
- Work closely with family members and any other agency staff
- Give specific opportunities for adults and supportive peers to model appropriate behaviour responses and attitude/approach to learning. These should be planned by the teacher and shared with all adults working with the children
- Plan targeted support around the identified needs of individuals to develop skills in the areas of social, emotional and behavioural development, for example Circle of Friends intervention (or other support group), to encourage belonging and social skills development
- Pre – teach resilience tools and build use into the everyday curriculum e.g. relaxation skills, breathing exercises, visualisation, massage, music, colouring
- Use covert or normalised strategies which do not single out the child, shared with all staff and carry out consistently
- Give opportunities for 'shame recovery' for vulnerable children, i.e. ability to return to learning, use of delayed sanction/pre- agreed protocol where necessary
- Involve children in activities in which they are listened to e.g. school councils
- Sharing of policies and practice with parents, ensuring an accurate two-way exchange of information through plain English, an interpreter or through translated materials, where necessary
- Consistently used 'scripts' for verbal interaction
- Establishment of routines with predictable sequences and events with preparation for changes that may occur in routine
- Encouragement in choosing a variety of friends
- Encouragement to freely express ideas and feelings, such as joy, sadness, frustration and fear, enabling children to develop strategies to cope with new, challenging or stressful situations
- Involvement of children in identifying issues and finding solutions whilst encouraging them to think about issues from the viewpoint of others

Social, Emotional and Mental Health

Strategies *continued...*

Resources

- Risk assessments which identify proactive as well as reactive measures are reviewed regularly and shared with staff and parents/ carers
- Key adults in place for identified children to aid development of secure attachments
- Close liaison with parents and carers to maintain a joint approach
- Training for staff in understanding how a child may be communicating through their behaviour
- Training in Attachment Awareness
- Training in positive handling – positive touch?
- Positive handling policy reviewed regularly and shared with stakeholders
- SEAL/ emotional literacy resources e.g. Margot Sunderland
- Safe and quiet spaces
- Range of sensory tools which aid focus and attention e.g. therapeutic
- Key worker liaison with the family
- Identified staffing to support access to the curriculum or personal development

- Support from other professionals to manage attendance and behaviour
- Multi agency liaison where appropriate
- Positive handling plan considered and discussed with family
- Targeted staff trained to deliver a range of SEAL interventions
- High level of Key worker liaison with the family and other professionals to support a range of areas such as attendance, behaviour, well-being, child protection and mental health e.g. counselling, CAMHs, Early Help and social care
- Identified staffing to support access to the curriculum or personal development
- Safe space or children to go with pre- agreed protocol and recovery strategies
- Use of Boxall or Thrive assessment to inform curriculum re SEMH needs
- Joint working with parents/ carers to consistently apply predetermined strategies for task completion after school hours or to ensure a 'fresh start' approach when school day ends
- Specific staff trained to deliver more advanced interventions and to train or advise others where appropriate

Early Years Speech, Language and Communication Needs

Language impairment/speech disorder maybe in addition to other areas of SEND
Some children and young children will have longer term difficulties with articulation and/or language development. These may be exhibited through:

- Difficulties with receptive language; listening and attention skills
- Difficulties in articulation and phonology
- Difficulties in understanding the meaning of language

- Difficulties with expressive language, putting words into meaningful sentences and/or forming structured sentences appropriate to a child's age and development
- Difficulty with vocabulary acquisition
- Difficulties with social use of language and social communication

Needs

SEN Support

- ☐ Child has low/moderate delay in expressive and/or receptive language and/ or child has a mild to moderate speech sound disorder
- ☐ Mostly confident with occasional difficulty integrating or in fulfilling social activity,
- ☐ Mild, occasional upset, frustration or anger relating to speech and language needs,
- ☐ Can show reluctance to comment, ask questions in group situations,
- ☐ Capable of clear speech when prompted but clarity deteriorates in spontaneous speech,
- ☐ Intelligible to familiar listeners in context, variable intelligibility to non-familiar listeners,
- ☐ Some reliance on visual prompts or following peers rather than verbal instructions,
- ☐ Only processes part of several past instructions, e.g. the last sentence.
- ☐ May require regular input from speech and language therapist with advice for specific programs to be carried out by the setting/school/provider.
- ☐ Some difficulties with understanding basic concepts.
- ☐ Uses spontaneous commentary in play

Targeted: *SEN Support level plus the following:*

- ☐ Moderate to severe language and /or speech sound disorder/ limited language.
- ☐ Uses mix of speech and augmented communication systems; Makaton symbol use, PECS
- ☐ Some ability to follow simple, verbal instructions in a clear context,
- ☐ Difficulties with self confidence in communicating with others,
- ☐ In need of social skill support/development as part of small group or when following SALT programmes.
- ☐ Uses Makaton or symbol use to enhance communication; both receptive and expressive.
- ☐ Intelligible to familiar listeners in context, variable intelligibility to non-familiar listeners
- ☐ Does not use language as primary means of establishing social contact, sharing feelings, experiences and thoughts
- ☐ Only able to use talk relating to the here and now
- ☐ Difficulty maintaining a conversation e.g. staying on topic, awareness of listener need
- ☐ Uses single words and short, simple phrases only to communicate

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Severely limited language skills, uses alternative communication systems to make needs/choices known
- ☐ Moderate to severe difficulties in accessing curriculum areas without a significant level of support.
- ☐ Complex, long-term speech & language difficulties barriers to learning and social relationships,
- ☐ Severe language impairment in one predominant area involving language use, comprehension, expression or phonology,
- ☐ Considerable visual support is required to follow simple instructions
- ☐ Good use of consonants and vowels at a single word level but poor transfer of sounds into sentences,
- ☐ Difficulty in expressing ideas through language e.g. word finding, sequencing,
- ☐ Difficulties with self confidence in communicating with others,
- ☐ Social isolation, frustration and peer isolation is evident
- ☐ Difficulty understanding social situations and may respond inappropriately, emotional immaturity as a consequence.
- ☐ Uses signing and or other AAC as main form of communication.

Early Years Speech, Language and Communication Needs

Needs *continued...*

SEN Support

Targeted: *SEN Support level plus the following:*

Enhanced: *SEN Support & Targeted levels plus the following:*
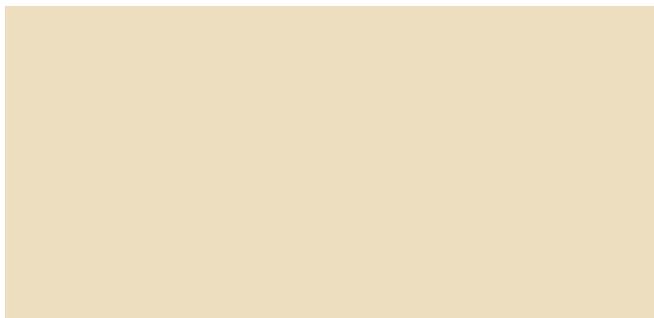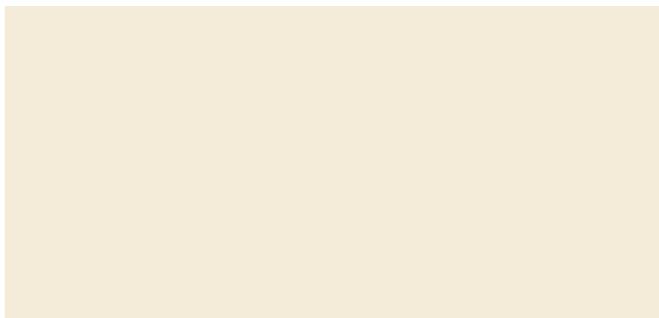
- ☐ Has difficulty making needs known; speech, AAC or body language.
- ☐ Significantly reduced intent to communicate through interaction with another.
- ☐ May show signs of distress and confusion
- ☐ Lacking the language skills required to express emotions and reason about them,
- ☐ Impacts significantly on learning in most/all subjects

Progress of children and young people should be reviewed using a process of Assess, Plan, Do, Review.

As part of the review SEN(D)Cos should ask the following questions. Review should take place as appropriate according to intervention but at least three times a year:

- Have short term outcomes been met?
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Early Years Speech, Language and Communication Needs

Provision

SEN Support

- Awareness that the child may have a range of strengths and difficulties in different areas of development and may have some mild comprehension difficulties
- When giving an instruction, staff ensure that they use the child's name first to gain attention
- Activities that involve interaction and co-operation with other children in line with their usual good practice
- Use of visual aids (such as a visual timetable) where possible to support the understanding of all children in the classroom
- A language-rich environment in which the children have opportunities to learn from:
  - Adults using lots of language with them by asking questions, labelling objects and commenting on what they are doing
  - Language modelled by adults and other children
  - Reinforcement of instructions through individual repetition, visual prompts and questions
- Staff monitor informal social situations from a distance, allowing children to make clumsy social approaches and only intervening where necessary

Targeted: *SEN Support level plus the following:*

- Staff learn to interpret minimal or unclear communication signals from the child
- Understanding that challenging behaviour as a form of communication, and seek the cause of the problem in order to address it
- Staff are aware of strategies for managing such behaviour, including distraction techniques and providing alternatives to socially inappropriate strategies/ communication such as pinching others
- A visual environment that would cue the child into the meaning of words. Visual input could include modelling of what is required, gestures and pictures and symbols to reinforce verbal information
- Support to use Alternative and Augmentative Communication such as Makaton signing and/or PECS (Picture Exchange Communication System) to make choices and requests
- Frequent checking on the child's understanding and provision of opportunities for the child to demonstrate their understanding nonverbally
- A visual timetable which sets out the schedule for the current session. The child is alerted to changes on the way by these being pointed out on the visual timetable
- A First, Then schedule which visually sets out a 'contract' in which the adult-chosen activity will be rewarded by a child-chosen activity
- Involved adults provide models of language for the child by frequently just commenting on what the child is doing, at their level of understanding

Enhanced: *SEN Support & Targeted levels plus the following:*

- Support to use Alternative and Augmentative Communication systems such as picture exchange (e.g. PECS), signing (e.g. Makaton) and/or computer software (e.g. Clicker 7)
- Use of advice and/or training from professionals with knowledge of understanding and meeting the needs of children with autism/ social communication difficulties
- 'Intensive Interaction' used, where staff join and imitate the child's play to help them recognise social interaction as something enjoyable as a first step in developing their play
- Social activities may need to take place for the child in short bursts initially
- Highly structured routines with individual support and/or prompts. The child may need to be warned of change in advance, and be alerted to this on their visual timetable
- Advice and input from a Speech and Language Therapist, as deemed appropriate.
- A social language programme that supports and extends the child's comprehension and use of social language should be in place.
- Paired and small group sessions with a member of the setting staff to work on social skills and communication targets should be incorporated
- A key member of staff with appropriate knowledge and supervision available to support the learner when needed
- A plan for how adults will manage issues of extreme concern (this might be called a 'Care Plan'), for example self-harming, smearing of faeces

Early Years Speech, Language and Communication Needs

Provision *continued...*

SEN Support

Targeted: *SEN Support level plus the following:*

☐ Structured approaches used to develop the child's social skills. These could include activities to improve their joint attention, imitating of behaviour, turn-taking, sharing and role-taking

☐ Frequent encouragement of the child's communication skills through their special interests

☐ Social narratives used with the child as often as necessary, with straightforward text and picture/photograph cues

Enhanced: *SEN Support & Targeted levels plus the following:*

☐ A language enriched adapted curriculum differentiated through presentation, pace of delivery and recording mechanisms

Specialist provision

☐ Individualised multi-sensory delivery of the whole curriculum provided for the child throughout the day

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East Sussex County Council (ESCC) Special Educational Needs Matrix

Early Years Cognition and Learning

Area of Need:

- Difficulties with focus and attention on table top activities
- Difficulties with pattern recognition
- Difficulties with number recognition
- Difficulties with letter recognition
- Shows little interest in books
- Struggles to generalise skills between tasks

- Doesn't link information
- Struggles to access appropriately differentiated tasks.

Children will be at approximately these Early Years Stage Foundation levels:

SEN support: 22-36 months

Targeted: 16-26 months

Enhanced: 0-11, 8-20 months

Needs

SEN Support

- ☐ Delayed play skills. Shows repetitive play and/or restricted interests
- ☐ Needs play to be modelled by adult
- ☐ Finds it difficult to select own activity
- ☐ Needs encouragement to explore new activities
- ☐ Limited concentration in a large group
- ☐ Restless and aimless, unable to concentrate on activity without some adult input
- ☐ May need pre-teaching
- ☐ Has difficulties retaining concepts over time

Targeted: *SEN Support level plus the following:*

- ☐ Small step teaching programme with intervention programme.
- ☐ Finds it hard to pay attention in a group
- ☐ Fleeting attention to activities
- ☐ Reliant on adult support to maintain concentration
- ☐ Frequent and observed repetitive play and/or restricted interests
- ☐ Prefers solitary play
- ☐ May use resources inappropriately
- ☐ Reluctant to explore activities or try new resources even with adult support
- ☐ Significant difficulty with early learning
- ☐ Regression or loss of previously mastered skills.

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Highly restricted attention to activities (less than a minute)
- ☐ Activities remain at sensory motor, self-stimulatory level or are self-absorbed/repetitive to the exclusion of other activities.
- ☐ Unable to sustain activities without significant , consistent adult attention and intervention
- ☐ Shows no desire or interest in exploring toys
- ☐ Only engages in solitary play and resists adult help or intervention
- ☐ Profound and complex difficulties with learning
- ☐ Intensive and ongoing support required involving outside agencies

Early Years Cognition and Learning

Provision

SEN Support

- The child is based in the classroom but may be withdrawn for targeted support/wave 2 interventions if appropriate.
- Regular, structured teaching or activities planned by the class teacher which are given to a small group of learners to help them meet clearly-defined targets
- Differentiation of the curriculum through presentation timing and recording methods
- Use of real life examples to replace abstract concepts
- Personalised reward systems which are known to all staff who have contact with the learner and are used consistently across the curriculum
- The class teacher takes the lead in the child's assessment of progress and targets and teaches to address relevant gaps in understanding through high quality differentiation and targeted support
- Staff to provide a visual timetable to prepare the child for changes
- An understanding that children may require more time to complete tasks and might need to approach some activities in a different way
- Learning outcomes for children that are suitable for their development
- A positive classroom climate in which learners generally receive more praise than correction, and are given specific praise for appropriate behaviour
- Children are encouraged to play with small world toys if they will benefit from modelling of imaginative play from an adult
- Visual supports are embedded to aid language understanding across aspects of the environment to help access to the curriculum (e.g. pictures, symbols, objects of reference, signing, gestures)

Targeted: *SEN Support level plus the following:*

- A plan which is personal to the learner and specific, measurable targets are described and progress towards those targets are recorded
- Children are in class for the vast majority of the day following an increasingly individualised curriculum linking content of whole class work and learning outcomes that are appropriate to the child
- Detailed differentiation of learning and development programmes required to set out smaller steps
- Class teacher and TA alternate between supporting the child as part of a small group, within the class, or 1:1 and working with other children
- Opportunities for repetition, over-learning and consolidation of skills are planned for within their timetable
- Some children might be given specific equipment (ICT, writing slopes, coloured overlays) in order to remove barriers to learning
- Regular access to supervised areas at unstructured times of the day
- Preparation for changes to routines/activities/staffing at a small group or individual level
- Trained staff who have experience of working with children with additional learning needs
- Involvement of external specialist agencies to assess, provide advice, and review the learner's progress over time (following an assess, plan, do, review cycle)
- Involvement of parents/carers in identifying the learner's strengths, difficulties and areas in which support is needed

Enhanced: *SEN Support & Targeted levels plus the following:*

- Curriculum adapted to meet the needs of children with complex learning difficulties differentiated through presentation, pace of delivery and recording mechanisms
- Multi-sensory approach to learning where necessary
- Sustained specialist interventions, therapies and teaching approaches with the necessary support to access the curriculum
- Use of total communication approach
- Focus on skills being taught include varying levels of prompts to ensure mastery of skill leading to independence for example 'hand over hand', modelling, visual strategies
- Opportunities for reinforcement/learning enrichments to apply skills learnt, support with life skills, organisational and problem solving skills
- Individual learning programmes/wave 3 intervention used to support learning throughout the school day, providing opportunities for repetition and over-learning
- Access to intervention programmes which focus on functional learning across school, home and the wider community
- Use of specific IT programmes and specialist equipment to enhance recording and presentation of work
- Highly structured routines with individual support and/ or prompts
- Regular liaison between external professionals and school staff about specific programmes and targets for the learner. This may be coordinated through the Common Assessment Framework (CAF) system

Early Years Cognition and Learning

Provision *continued...*

SEN Support

Targeted: *SEN Support level plus the following:*

- ☐ Formal reviews which involve parents/carers held at least twice a year
- ☐ Evidence needs to be recorded, measured and reviewed to demonstrate differentiated levels of support needed

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Parents understand and agree on the intervention, support and expected outcomes, with transparency on school and high needs funded support
- ☐ Enhanced home-school liaison, for example an on-going home-school diary which is completed daily

Progress of children and young people should be reviewed using a process of Assess, Plan, Do, Review.
As part of the review SEN(D)Cos should ask the following questions. Review should take place as appropriate according to intervention but at least three times a year:

- Have short term outcomes been met?
- Is there progress towards long term outcomes?
- What impact have different types of provision made?
- Which provisions have been successful but need to continue?
- Which provisions have been successful and no longer need to continue?

- Which provisions have not been successful and need to change?
- Where do the needs of the child sit within the thresholds?
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Early Years Physical/Medical/Neurological Impairment

Physical impairment maybe in addition to other areas of SEND

Children and young people with motor disabilities and severe medical problems are most frequently identified at the pre-school stage. Exceptions to this would be child experiencing severe trauma, possibly as the result of an accident or illness, leading to long term disability.

Physical disabilities or impairment may arise from:

- physical, neurological or metabolic causes such as cerebral palsy, achondroplasia, or spina bifida
- severe trauma, perhaps as a result of an accident, amputation or serious illness
- degenerative conditions, like muscular dystrophy (Duchenne)
- moderate or severe gross motor and/or fine motor dysfunction in conjunction with other learning difficulties e.g. dyspraxia and autistic spectrum disorders
- moderate or severe difficulties with fine and/or gross motor movements without any specific attributable causes

Physical disabilities arising from this wide spectrum of need may show themselves by difficulties with accessing the following:

- physical environment of the school
- educational facilities and equipment
- whole school and class activities, including assessments
- practical lessons safely
- all areas of the curriculum especially practical subjects

As well as difficulty in:

- achieving independent self-care skills
- communicating through speech and other forms of language.

Emotional stress, physical fatigue, complex learning and social needs and multi-sensory difficulties can also be experienced

Needs

SEN Support	Targeted: *SEN Support level plus the following:*	Enhanced: *SEN Support & Targeted levels plus the following:*
☐ Level difficulties e.g. mild hemiplegia which contributes to difficulties in some areas, e.g. toileting, handwriting and for which alternative approaches need to be planned	☐ PD ambulant may have personal care needs throughout the day	☐ Significant physical difficulties with associated health and personal care issues
☐ Child may also experience difficulties with confidence and social relationships as a result	☐ Medical needs e.g. supervision of insulin dosage	☐ Associated language/communication and learning difficulties affect access to the curriculum
☐ Children will achieve their mobility independently (whether or not they are wheelchair users or require mobility aids), although building adaptations such as ramps and disabled toilet facilities may need to be in place	☐ Physiotherapy programme is delivered daily under supervision of therapist	☐ Child is likely to have conditions that are complex, severe and long-term, requiring specialist and /or additional support to access the curriculum
☐ Children will be independent in the majority of self-help skills	☐ Time for CT/TA/Physio/OT to meet to evaluate progress and plan programmes	☐ Child will have significant additional learning, communication and/or behavioural difficulties
☐ Children may:	☐ Moderate difficulties in accessing some aspects of the curriculum, e.g. electric wheelchair user	☐ Child may need support with equipment, in the management of self-help and the development of independence
• have medical conditions which reduce their levels of independence e.g. need for staff to monitor signs of severe asthma.	☐ Child is able to be independent in most activities with IEP targets focusing on specific areas, e.g. physical programme.	☐ Rate of learning is limited and is likely to be affected by absences, fatigue, medication
• have intermittent needs which require monitoring, e.g. arthritis and diabetes.	☐ Mild physical difficulties – ambulant	☐ Long-term physical and associated areas of difficulty with other distinct areas of need, e.g. child with quadriplegic cerebral palsy who has no functional speech.
	☐ No additional learning needs	
	☐ Staff awareness of any possible impact on learning	
	☐ Administration of routine medicines	

Early Years Physical/Medical/Neurological Impairment

Needs *continued...*

SEN Support

- tire more quickly than other children and young people.
- have physical abnormalities which make them self-conscious, isolated, defensive or behave erratically.
- require medication to stabilise condition.
- have medical conditions which reduce their levels of independence e.g. need for staff to monitor signs of severe asthma.
- have intermittent needs which require monitoring, e.g. arthritis and diabetes.

☐ Mild physical difficulties – ambulant
☐ No additional learning needs
☐ Staff awareness of any possible impact on learning
☐ Administration of routine medicines
☐ Can manage fairly well in the setting with occasional adult support based on need, e.g. help with toileting
☐ Can walk and move around independently although may find walking longer distances tiring
☐ Can eat and drink, get dressed and see to their toileting needs as you would expect for their age

Targeted: *SEN Support level plus the following:*

☐ Has persistent minor health problems relating to physical disability or medical condition requiring an increased level of monitoring
☐ Can move and position independently but has difficulties with balance or with controlling their movements; may have trouble with some hand movements or require adult support at key times during the day, e.g. meal times
☐ Has difficulty moving over medium to long distances and navigating some obstacles
☐ Can use safety features in the setting such as handrails
☐ Needs help with self-care and may also need reminding about it
☐ May use a walking frame with some independence and confidence
☐ May require some assistance with some aspects of personal care on occasions
☐ May require some routine procedures, e.g. peg feed at lunchtime

Enhanced: *SEN Support & Targeted levels plus the following:*

☐ Child is dependent on adult or peer support for most activities
☐ Extensive periods of hospitalisation, use of specialist equipment and adaptations to physical environment
☐ Support needed to access the curriculum at times throughout the day because of physical difficulties-in need of scribe/support with use of IT
☐ PD –non-ambulant
☐ Needs support throughout the day with seating/positioning
☐ Support needed for learning needs associated with physical /medical needs
☐ Severe, complex physical/medical needs
☐ Degenerative condition in need of possible end of life care
☐ Children are likely to have life-long learning difficulties or disabilities, across several areas of development, and will require ongoing, very targeted and specialist intervention
☐ Learning can be frequently affected by health problems and hospital visits
☐ Children take medication that may affect their attention or make them tired
☐ Has significant difficulty performing physical skills and relies on the physical support of another
☐ Physical skills may be variable and could deteriorate impacting significantly on independence and learning
☐ Neurological factors may have a significant impact on development and learning
☐ May be unable to bear their weight and/or transfer e.g. from chair to wheelchair/ walking frame independently
☐ Disability prevents self-care in two or more tasks e.g. toileting, feeding, dressing

Early Years Physical/Medical/Neurological Impairment

Needs *continued...*

SEN Support

Targeted: *SEN Support level plus the following:*

Enhanced: *SEN Support & Targeted levels plus the following:*
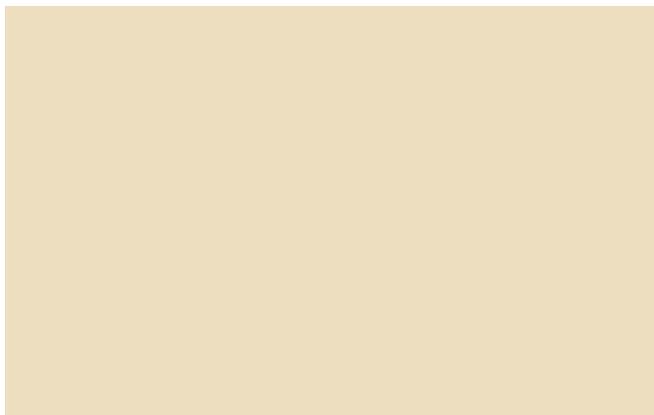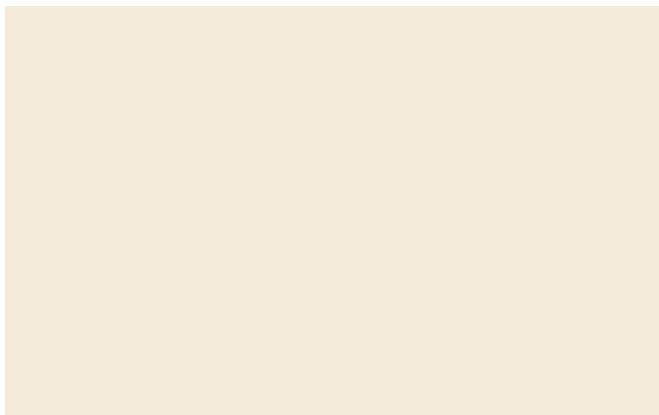
- ☐ Child's medical condition may inhibit progress with the curriculum
- ☐ Access to specialist changing facilities over and above a disabled toilet facility
- ☐ Problems with spoken language because of their physical difficulties
- ☐ Needs help in order to access some parts of the building, e.g. two storey buildings
- ☐ High levels of medical need at regular points requiring prompts response by the school
- ☐ Significant intermittent medical needs

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Early Years Physical/Medical/Neurological Impairment

Provision

SEN Support

- Awareness of how to meet the needs of learners with sensory processing difficulties
- Awareness of the implications for learning of a child's physical disability/medical condition
- Staff having access to appropriate training to enable them to meet children's learning needs. This should be anticipatory as far as is possible; best practice would be to have any necessary training prior to the child starting school
- The child may need occasional support so that the medical condition does not impede or disrupt access to the curriculum, ability to take part in specific classroom activities or participation in aspects of school life
- Minor modifications made, in terms of equipment/classroom organisation, access arrangements
- Care plan for medical needs e.g. diabetes, epilepsy, asthma
- A risk assessment in place where appropriate
- Access to named quiet areas in school and playground
- Support for basic eating, medical or personal care tasks, for example assistance with toileting
- Adult supervision when taking medication (if appropriate)
- Where there are suspicions of undiagnosed physical or medical difficulties, school should advise parents to seek medical advice (e.g. GP, School Nurse)
- Close home-school links, so school is aware of changes in circumstances/medical condition that may impact on progress in learning
- Activities to develop motor skills should be provided in line with good practice
- Visual environment to be provided which is not distracting or over-stimulating

Targeted: *SEN Support level plus the following:*

- Awareness that many children with social communication difficulties or autism have sensory issues (e.g. stimming, flapping) which can dominate the behaviour and needs of such children in their early years
- Alternative experiences may need to be provided for sensory behaviours which are inappropriate (e.g. punching)
- Assessment / observation by school staff to identify how the child's physical disabilities affect access to the curriculum and plan for successful modification so that medical condition does not impede or disrupt access to the curriculum, ability to take part in specific classroom activities or participation in aspects of school life
- Close liaison and consultation with external professionals such as assessment and advice from Occupational Therapy / Physiotherapy
- Measures which allow the child to negotiate the school environment safely and as independently as possible
- Appropriate support to ensure equal access to the curriculum and out-of-hours learning opportunities
- Planned strategies to combat fatigue (i.e. rest breaks)
- Fine or gross motor skills intervention programme
- Appropriate use of alternative equipment to meet physical and medical needs (e.g. writing slopes, specialist scissors)
- An appropriate programme of support to develop self-help skills such as toileting and dressing
- Adult support in some areas of the curriculum (e.g. swimming, cutting, cooking)
- Use of assistive technology
- Support to attend educational trips and school visits

Enhanced: *SEN Support & Targeted levels plus the following:*

- Regular opportunities for the child to address their sensory issues and to regulate these should be provided in line with Occupational Therapist advice
- Consider alternatives to restraint for children with autism as they may actively seek out opportunities to receive deep pressure; thus physical restraint risks being in some way calming and rewarding
- Care plan, including risk assessment/medical interventions throughout the day e.g. tube feeding, ventilated
- Daily access to medical treatment and/or a therapy programme (hydro/physio/OT /S&LT)
- Planned transition back to school after prolonged periods of absence due to medical condition
- Support to catch up on missed learning after absences due to illness/ treatment/ therapy
- Multi-agency approach taken to specialist assessment with advice leading to a more specifically focussed plan
- Time for staff to plan/co-ordinate work of a variety of agencies
- Significant adult support for personal care/ feeding/medical treatment
- Frequent specialist teaching and/or support at regular intervals
- Fundamental changes to teaching and learning methods to meet the individual needs of the learner, for example: use of hand over hand support, support for moving, low vision aids, individual touch screen
- Individual teaching from an appropriately-trained adult of skills which are specific to the learner, for example, touch typing, braille reading, orientation to a visually-impaired learner

Early Years Physical/Medical/Neurological Impairment

Provision *continued...*

SEN Support

Targeted: *SEN Support level plus the following:*

- ☐ Changes to school or classroom environment based on advice from external agencies, for example, access to an individual workstation or quiet area, reduction of sound/light/noise distractions, changes to lighting for child with visual impairment
- ☐ Appropriate environment for medical interventions and meeting personal hygiene needs
- ☐ Support for medical/nutritional/personal care as advised by a suitably qualified professional, for example giving insulin injections, epipens
- ☐ Support for physical movement (manual handling) as advised by a suitably qualified professional, for example by an IDS physical disability teacher

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Significant individual adaptations to curriculum and/or learning materials, for example because learner has a severe visual impairment or sensory processing difficulties
- ☐ Use of an alternative communication system for a learner with significant hearing loss, for example British Sign Language/sign supported English or focused verbal therapies
- ☐ Intensive support for social interactions, for example: use of British Sign Language or signed support for learner with hearing loss in both ears
- ☐ Learner-specific changes to the school or classroom environment to enable the learner to fully join in with the whole curriculum both on and off site, for example in response to a visual/hearing environmental audit

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East Sussex County Council (ESCC) Special Educational Needs Matrix

Early Years Social, Emotional and Mental Health

Area of Need:

- Difficulties managing responses to situations
- Difficulties with understanding and identifying emotions
- Difficulties with accepting boundaries
- Difficulties with emotional regulation
- Minimal/ no motivation to engage in interactions or learning
- High levels of anxiety that restrict access to learning environment

- May use physical aggression to express emotions such as frustration, anger and anxiety
- Limited understand of social situations

Children will be at approximately these Early Years Stage Foundation levels:

SEN support: 22-36 months

Targeted: 16-26 months

Enhanced: 0-11, 8-20 months

Needs

SEN Support

Requires understanding and occasional interventions within school resources, including;

- ☐ Some short term difficulties settling in
- ☐ Shows little awareness when parent/carers leave/arrive
- ☐ Higher than expected levels of anxiety at times of change (routine, environment, people)
- ☐ Clings to familiar objects and resists having them taken away
- ☐ Some difficulties regulating own emotions and recognising those of others which may be evidenced by some challenging behaviour
- ☐ Takes time to calm
- ☐ Lacks confidence/has low self esteem, leading to reluctance to take part, withdrawal or avoidance
- ☐ Shows little awareness of danger and needs constant reminders to stay safe

Targeted: *SEN Support level plus the following:*

- ☐ Significant separation difficulties that persist
- ☐ Attachment to key carers not securely established
- ☐ Shows no awareness when parent/carers leave/arrive
- ☐ Significant, frequent high levels of anxiety at times of change (routine, environment, people)
- ☐ Shows reluctance to engage with activities by withdrawing or challenging behaviour
- ☐ Significant and frequent unusual behaviours requiring adult intervention
- ☐ Significant difficulties regulating own emotions/anxieties and recognising those of others
- ☐ mental and emotional health that require advice from outside agencies and are impacting on the child's development
- ☐ Shows no awareness of danger and needs constant supervision to stay safe

Enhanced: *SEN Support & Targeted levels plus the following:*

- ☐ Severe attachment difficulties affecting development
- ☐ Emotions may be very extreme such as very happy/very distressed
- ☐ Frequent emotional outbursts at times of change
- ☐ Shows no awareness of the environment/people around them
- ☐ Persistent, unpredictable extremes of demanding behaviour which affects the child's safety and that of others
- ☐ Severe and persistent levels of anxiety requiring intensive support to enable emotional regulation
- ☐ Persistently presents a significant danger to self and others and destroys materials

Early Years Social, Emotional and Mental Health

Provision

SEN Support

- Teachers have training in classroom management and strategies for children experiencing social emotional and mental health difficulties
- Schools actively promote well-being and emotional resilience through the whole school PSHEE curriculum which is stimulating and effectively delivered
- Behaviour managed through prevention and early intervention from staff
- Effective policies and practice covering behaviour, pastoral care, child protection, discipline and special educational needs
- All staff working with children have a consistent and positive approach
- The progress of children in response to an intervention programme is measured and tracked to inform decisions re-adjustments to the intervention programme
- Interventions are specific, include clear baselines and progress measures and should have research evidence of success in bringing about changes in well-being and behaviour
- Involvement of parents / carers and children are sought to support the pupil in a proactive approach
- Routines that promote emotional wellbeing, for example staff routinely 'meeting and greeting' all learners on entry to the classroom
- Access to named quiet areas in school and playground. Staff available to support learners at break and lunch times
- An effective approach to managing conflict, for example Restorative Justice

Targeted: *SEN Support level plus the following:*

- Parents discuss their concerns with class teacher and SENCO and a focussed programme of support is planned to address areas of difficulty and specific outcomes set are recorded
- School staff and parents plan to review specific outcomes on a half termly basis
- Fine-tuned assessments / profiling tools like the Boxall Profile and Strength and Difficulties Questionnaire could be used
- Where possible, the child's views on their difficulties and approaches to support are gathered and recorded (All About Me / One Page Profile)
- External services such as Behaviour Support Teachers / EPs may be asked to undertake specialist assessments, discuss progress and give advice. This could include use of solution focussed therapeutic approaches or cognitive behaviour therapies
- Additional support from other agencies such as Targeted Youth Services, Early Help, mental health services and social care to support the child and their family
- Small group social skill/self-esteem work 3 x weekly or more /1:1 mentoring daily
- Time for staff to evaluate/plan programmes with outside agencies
- Schools may choose to use delegated resources to run a nurture group or commission additional counselling / therapeutic support
- Regular access to supervised areas at unstructured times of the day, for example a safe place to go to for learners who find lunchtimes a challenge

Enhanced: *SEN Support & Targeted levels plus the following:*

- Daily interventions from an adult to sustain peer relationships
- A social skills/nurturing programme is delivered in a small group/ 1:1 mentoring at times each day. This may include work focussed on links between thoughts, feelings and behaviour
- Support for most of the day in order to support behaviour management and focus on learning
- CAMHs may be involved to address mental health needs
- Time for staff to carry out the high levels of planning and liaison needed to deliver the curriculum
- Time for staff to work in collaboration with other schools or alternative providers to meet needs.
- Therapy/counselling at least weekly
- Small group or 1:1 teaching throughout the day via a highly differentiated curriculum to engage the child in learning. This is likely to include significant adaptations to teaching style and provision
- Individual plan including risk e.g. physical intervention programme and reward systems
- Regular review (at least half-termly) and multi-agency working is to problem solve with family/carers and establish consistent approaches
- Staff trained and skilled in supporting children with exceptionally challenging behaviour
- Strategies to manage regular or occasional self harming behaviours
- A personalised timetable which is introduced in partnership with the learner, parents/carers and staff,

Early Years Social, Emotional and Mental Health

Provision

SEN Support

- ☐ Regular anti-bullying activities across the whole school which mean that learners feel confident in reporting incidents
- ☐ Effective communication between adults during the school day, for example between office staff, classroom staff and lunchtime supervisors
- ☐ Systems for learners to support each other for which they are given appropriate training and ongoing support, for example playground buddies, 'bully buster' playground support, or peer mentoring
- ☐ Systems for monitoring and reporting concerns around learner's health, safety and wellbeing.
- ☐ Access to extended school provision, for example breakfast club, homework club, lunchtime clubs

Targeted: *SEN Support level plus the following:*

- ☐ All staff know the needs, strategies and individual targets for the pupil they support
- ☐ Extra arrangements for communication and/or transitions between homes and school, for example meeting and greet, emotional check-ins, use of a home-school book, face to face updates between parents and class teacher/ TA at regular, agreed intervals
- ☐ Frequency records of behaviour which are kept over time and analysed to consider triggers/patterns
- ☐ Where a child's behaviour can put them or others at risk, a positive handling plan is in place which is carried out by staff with appropriate training and reviewed regularly
- ☐ Careful planning and extra support for transitions. For example additional visits to a new classroom, advance photographs of new staff/places

Enhanced: *SEN Support & Targeted levels plus the following:*

and which may include temporary withdrawal from some activities (such as assembly and non-core lessons) and offsite opportunities that focus on developing the learner's resilience and ability to engage in learning
- ☐ Highly structured routines communicated with visual supports and prompts
- ☐ Access to a work station to reduce emotional and sensory arousal when appropriate
- ☐ Prioritised access to an attractive, small space which feels safe to the learner and which is never used as a punishment
- ☐ A tailor-made environment at break and lunchtimes
- ☐ Access to a key member of school staff in the classroom with relevant training and/or experience who is emotionally available to the learner, able to remain attentive and to 'tune in' to their emotional and safety needs

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County Council