<table>
<thead>
<tr>
<th>Contents</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>3</td>
</tr>
<tr>
<td>Summary – SEN Code of Practice 2015</td>
<td>4</td>
</tr>
<tr>
<td>Role of the SEN Co-Ordinator</td>
<td>6</td>
</tr>
<tr>
<td>Role of the SEN Governor</td>
<td>8</td>
</tr>
<tr>
<td>Local Offer</td>
<td>10</td>
</tr>
<tr>
<td>The Graduated Response</td>
<td></td>
</tr>
<tr>
<td>Assess, Plan, Do, Review</td>
<td>12</td>
</tr>
<tr>
<td>Identification of SEN Support</td>
<td>17</td>
</tr>
<tr>
<td>Provision Management</td>
<td>23</td>
</tr>
<tr>
<td>Specialist Services</td>
<td>24</td>
</tr>
<tr>
<td>Education, Health and Care Plan</td>
<td>26</td>
</tr>
<tr>
<td>Early Years Guidance</td>
<td>29</td>
</tr>
<tr>
<td>School Support: Area of Need</td>
<td></td>
</tr>
<tr>
<td>Cognition and Learning</td>
<td>42</td>
</tr>
<tr>
<td>Social, Emotional and Mental Health Difficulties</td>
<td>43</td>
</tr>
<tr>
<td>Communication and Interaction</td>
<td>54</td>
</tr>
<tr>
<td>Sensory and/or Physical Needs (including Medical Needs)</td>
<td>64</td>
</tr>
<tr>
<td>Process and Procedures</td>
<td></td>
</tr>
<tr>
<td>Moving a pupil to SEN</td>
<td>108</td>
</tr>
<tr>
<td>Requesting an Education Health and Care Assessment</td>
<td>110</td>
</tr>
<tr>
<td>Transfer Review 2017</td>
<td>115</td>
</tr>
<tr>
<td>Annual Review of an Education Health and Care Plan</td>
<td>119</td>
</tr>
<tr>
<td>Early / Interim Annual Reviews</td>
<td>127</td>
</tr>
</tbody>
</table>
APPENDICES

Appendix 1 Cause for concern
Appendix 2 Community Assessment Meeting
Appendix 3 Requesting Education Health and Care Plan Pack
Appendix 4 Principles for decision making in the statutory process – The Assessment and Moderation Panel
Appendix 5 Transfer Review Pack
Appendix 6 Review of Education Health Care Plan
Appendix 7 Early Years High Needs Block Funding
Appendix 8 Banding
Appendix 9 Timelines for completing an Education Health and Care Plan
Appendix 10 Timelines for completing Annual Review
Appendix 11 Data Summary Sheet
Appendix 12 Elective Home Education Flowchart
Introduction

Who is this document for?

This document provides practical guidance and information for schools, educational establishments and other professionals who work and support children with Special Educational Needs (SEN).

Information for parents can be found in ‘Special Needs and Disabilities Educational Provision in Sandwell, A Guide for Parents and Carers’, on the Sandwell website www.sandwell.gov.uk/send

The Special Educational Needs and Disability (SEND) Handbook has been revised to reflect changes in the way provision is resourced and managed in mainstream schools and academies in line with the new SEND Code of Practice 2015. This edition was revised in September 2017 to reflect the feedback given by pupils, parents and schools on the implementation of the new processes. Further revisions will be made as new processes evolve and embed over time.

Primary and secondary schools have funding, delegated via a Department for Education formula, which should allow staff to intervene early to address children’s difficulties and disabilities. This guidance sets out the processes and support that could be put in place using the devolved budget and the process for applying for additional resources via an Education, Health and Care Plan.

Please feedback your views regarding this document to sen_team@sandwell.gov.uk

This book has been published as a reference guide. It is not meant to be read from beginning to end but to be referred to for guidance, good practice and procedures for supporting pupils with SEND
Summary - SEND Code of Practice 2015

A child or young person has a Special Educational Need or Disability (SEND) if they have a significant learning difficulty or disability, which calls for special educational provision, namely provision different from or additional to that normally available to pupils of the same age.

A child of compulsory school age or a young person has a learning difficulty or disability if he or she:

- Has a significantly greater difficulty in learning than the majority of others of the same age, or
- Has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions

Every school is required to identify and address the SEN of the pupils that they support. Mainstream schools (including maintained and academy schools, maintained nursery schools, Pupil Referral Units (PRUs) alternative provision academies) must:

- Use their best endeavours to make sure that a child with SEN gets the support they need – this means doing everything they can to meet the needs of children and young people’s SEN
- Ensure that children and young people with SEN engage in the activities of the school alongside pupils who do not have SEN
- Designate a teacher to be responsible for co-ordinating SEN provision – the SEN co-ordinator, or SENCO (This does not apply to 16 – 19 academies). It is a statutory obligation for the designated teacher to complete the Nationals Standards Qualification for SENCOs within 3 years of taking up the post
- Inform parents when they are making special education provision for a child
- Prepare an SEN information report and their arrangements for admission of disabled children, the steps taken to prevent disabled children from being treated less favourably than others, the facilities provided to
enable access to the school for disabled children and their accessibility plan showing how they plan to improve access progressively over time

The information below sets out in broad terms what is expected from mainstream schools in the support and education of children and young people with Special Educational Needs (SEN). Our principles are in line with those set out in the SEN and Disability Code of Practice 0-25 years (2015). These principles are designed to support:

- The participation of children, their parents and young people in the decision making
- The early identification of children and young people’s needs and early intervention to support them
- Greater choice and control for young people and parents over the support they receive
- Collaboration between education, health and social care services to provide support
- High quality provision to meet the needs of children and young people with SEN
- A focus on inclusive practice and removing barriers to learning
- Successful preparation for adulthood, including independent living and employment
The Role of the SEN Co-Ordinator

Governing bodies of maintained schools and proprietors of mainstream academy schools must ensure that there is a qualified teacher designated as SENCO for the school.

All SENCos appointed after 2009 must obtain the National Award for Special Educational Needs Co-Ordination or be working towards obtaining it. Where the SENCO is new to the role; they must achieve the National Award within three years of appointment. The National Award must be a postgraduate course accredited by a recognised higher education provider. Sandwell LA works as partners with the University of Birmingham and Dudley LA to deliver the National Award course to schools within the Black Country. For further information about this course please contact Jan Shearer SENAT L at Inclusion Support jan_shearer@sandwell.gov.uk

It is advisable that the SENCO is part of the school leadership team as they have an important role to play with the head teacher and governing body in determining the strategic development of SEN policy and provision.

School Leadership should also ensure that the SENCO has sufficient time away from teaching and administrative support to enable them to fulfil their strategic role.

The key responsibilities of the SENCO may include:

- Overseeing the day-to-day operation of the school’s SEN policy
- Co-ordinating provision for children with SEND
- Interpreting and analysing data to ensure teaching and learning of pupils with SEND is effective.
- Liaising with the relevant Designated Teacher where a looked after pupil has SEND
- Advising on the graduated approach to providing SEN support
- Advising on differentiation and curriculum development
- Advising on the deployment of the school’s delegated budget and other resources to meet pupils’ needs effectively, including management of staff who support pupils with SEND
• Provide or facilitate training for teaching and support staff
• Liaising with parents of pupils with SEN
• Liaising with early years providers, other schools, educational psychologists, health and social care professionals, and independent or voluntary bodies
• Being a key point of contact with external agencies, especially the local authority and its support services
• Liaising with potential next providers of education to ensure a pupil and their parents are informed about opinions and a smooth transition is planned
• Working with the head teacher and school governors to ensure that the school meets its responsibilities under the Equality Act (2010) with regard to reasonable adjustments and access arrangements
• Ensuring that the school keeps the records of all pupils with SEN up to date
Role of the SEN Governor

Governing bodies have a strong focus on three core strategic functions:

- Ensuring clarity of vision, ethos and strategic direction
- Holding the head teacher to account for the educational performance of the school and its pupils: and
- Overseeing the financial performance of the school and making sure its money is well spent

Within each school governing body there should be a nominated link Governor/s for SEN, who play a key role in the strategic leadership and development of SEN provision, offering appropriate support and challenge in relation to the above areas with a specific focus on SEN.

SEN Governors will need to carry out these responsibilities in a number of ways:

- Informing themselves about SEN systems and practices in school through meetings and school visits
- Ensuring that the progress of learners with SEN is closely monitored through reviewing and understanding internal and external data
- Understanding how the notional SEN budget is used and ensuring that wider financial decisions do not adversely impact on the support for pupils with SEN
- Understanding the national and local context of SEN support
- Using their school visits to inform themselves about the work the SENCo is leading
- Ensuring that the views of pupils and parents/carers in relation to the SEN provision that is being made, are being sought
- Building a trusting and supportive relationship with the SENCo
- Putting together an annual report on SEN with input from SENCo and Governing Body Committee which is published on the website and updated annually
The SENCo and SEN Governor may meet periodically, alongside the more formal reporting systems that will be in place. This will enable the SENCo to update the SEN Governor on the progress of the pupils with SEND and how they are being supported, along with the priorities for whole school development that the SENCo has identified.

The SEN Governor should not ask about specific arrangements for individual pupils but how the cohort as a whole is being supported.

Training for governing bodies / link governors on school duties in regards to pupils with SEND can be provided on request or through SIPs education governor training programme. Please contact Moira Tallents SEND Adviser for more details moira_tallents@sandwell.gov.uk
The Local Offer

Publication of the Local Offer to children and young people with special educational needs and their parents became a statutory duty for Local Authorities from 1 September 2014.

The Local Offer has two clear purposes:

- To provide clear, comprehensive and accessible information about a range of services and provision available within the local area and how to access them
- To make provision more responsive to local needs and aspirations by directly involving disabled children and those with SEN and their parents, and service providers in its development and review.

For Sandwell’s Local Offer go to www.sandwell.gov.uk/sandwell

An agreed framework for schools contribution to the Local Offer was decided upon through consultation. The framework sets out the expectations for the levels of support pupils and parents can expect to receive at:

**Universal level**: Level of provision school offers to **all children including those who may have special education needs**. Funded via the age weighted pupil unit (AWPU) or Element 1

**SEN Support**: More personalised provision offered to pupils who have SEN, funded via the school’s SEN Notional Budget or Element 2

**EHC Plan / Statement Support**: Highly personalised provision to support the needs of children with EHC Plans or Statements. Funded via top up funding from the high needs block or Element 3

We have suggested that schools personalise this framework with the specific arrangements, provision and
activities available in their schools and publish this on their websites as part of their SEN Information report. Schools should also welcome feedback from parents and young people, as to how provision can be improved, which in turn can be fed back to the local authority.

More details about the agreed Local Offer framework for schools can be found on the SEN Virtual Office. Schools will need to contact CS_Comms@sandwell.gov.uk for their dedicated username and password which will be needed to access the SEN Virtual Office.

**SEN Information Report**

It is a statutory requirement that all schools publish information on their websites about the implementation of school policy for meeting the needs of students with SEN on their websites. See paragraphs 6.79 – 6.83 of SEND code of practice: 0 to 25 years (2015) for information that must be included within schools SEN Information report. Schools must ensure that their report is compliant with all statutory regulations.

Schools should ensure that the information is easily accessible by young people and their parents, and is set out in clear straightforward language. We suggest that school use photographs to illustrate some of the provision that is available in school.

It is required that schools SEN Information Report is up-dated on an annual basis.
The Graduated Response

Where a pupil is identified as having SEN, schools should take action to remove barriers to learning and put effective special educational provision in place.

This SEN support should take the form of a four-part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the pupil’s needs and of what supports the pupil in making good progress and securing good outcomes.

This is known as the graduated approach. The four stages of the cycle are:

- Assess
- Plan
- Do
- Review

The graduated response starts at the whole school level as all teachers are continually assessing, planning, implementing and reviewing their approach to teaching for all children. However, for pupils with SEND this approach is increasingly personalised depending on the needs of the child.

Assess

The class or subject teacher, working with the SENCO, should establish a clear analysis of the pupil’s needs. This is a prerequisite of planning effective teaching and developing provision targeted at specific needs.

This should draw on:

- teacher’s assessment and knowledge of the pupil, information on pupil progress, attainment, and behaviour
- fine-tuned assessments such as standardised tests, profiling tools, criterion referenced checklists, observation schedules
- individual’s development in comparison to their peers
- the views and experience of parents. Class / subject teacher discussions with parent, either made in person or on the telephone, should be logged and dated and include next actions
- the child’s own views
- views of outside agencies if applicable

Individual, detailed assessment should be formative and result in clear picture of the child’s strengths and areas of need.

The SENCo may ask specialist support agencies to conduct specific assessment (ECP, Advisory teachers, Speech and Language Therapists) however it is important that the findings of these assessments are shared with class / subject teachers and parents so that they can inform daily provision.

Schools should take seriously any concerns raised by a parent. These should be recorded and compared to schools own assessment and information on how the pupil is developing.

**Plan**

After a thorough assessment of a pupil’s needs has been completed, the next stage of the graduated response is to plan the provision that is most likely to be effective in meeting their needs. Pupils and parents must be consulted when planning provision so that their views are taken into account.

Two areas need to be considered when planning provision:

- High quality class / subject teaching differentiated for individual needs
- Targeted provision or intervention programmes
The SEND Code of Practice states that “Additional intervention and support cannot compensate for a lack of
good quality teaching.” It is vital that class / subject teachers, supported by the SENCO, determine how they will
adjust their day-to-day teaching in order to meet the needs of pupils with SEN within their class.

Use of targeted provision or interventions should have clear expected outcomes. Schools should use the latest
research detailing the impact of interventions and only choose programmes that have a strong evidence base of
effectiveness. If interventions take place outside the classroom, communication between class / subject teacher
and the member of staff delivering the intervention should also be planned. Specific skills / strategies taught
during intervention will need to be generalised during the day to day teaching in the classroom.

In Sandwell, we are continuing to use the “Waves” of intervention model.

**Wave 1** – high quality differentiated teaching targeted at areas of weakness. **ALL** pupils, especially those with
SEN, should receive high quality teaching.

**Wave 2** – intervention or targeted teaching for pupil’s making less than expected progress but who are not SEN.
The expectation is that these children will rapidly make progress and catch up with their peers.

**Wave 3** – highly individualised intervention for pupils with SEND. The expectation is that SEND pupils will make
good rates of progress and meet specific outcomes set.

Pupils and parents should be consulted when planning provision. Pupils and parents should agree on the
adjustments, interventions and support to be put in place, as well as the expected impact on progress,
development or behaviour. Agreements on how parents / pupils will support meeting agreed outcomes should
also be made (i.e. attendance at homework club, practicing key skills during time away from school.) A date to
review outcomes must be set.

SENCOs should use active provision management to strategically plan provision and training across the school
in response to changing needs. (See Provision Management p20)
Do
In the ‘Do’ stage teachers and other school staff gain a growing understanding of the most effective ways to support the pupil.

The class or subject teacher should remain responsible for working with the child on a daily basis and plan appropriate work for them. Where interventions involve group or one-to-one teaching away from the main class, teachers should still retain the responsibility for the pupil. They should work closely with any teaching assistants or specialist staff involved to plan and assess the impact of support / interventions on pupil progress and how skills taught within intervention can be generalised back in the classroom.

The Senior Leadership Team and SENCo should monitor the delivery and impact of the targeted provision / intervention to ensure that pupils with SEND receive high quality teaching both in main classes and, if appropriate, when withdrawn from the classroom.

The SENCO is responsible for facilitating training for support staff on the interventions / specific approaches delivered within school; however, class teachers need to ensure that staff employed in their classrooms are fully briefed in order to deliver effective support within lessons. SENCOs and Senior Leadership Teams need to consider school strategy on providing joint planning and reflection time so the teachers and teaching assistants can work collaboratively together.

Training for both teachers and teaching assistants should be appropriate and constantly reviewed dependent on the needs of the children. The SENCO should keep an up-to-date log of training received by staff in order to utilise skills efficiently.

Review
Teachers and support staff will be continually reviewing all pupils' progress in order to inform their teaching through assessment for learning, this includes pupils with SEND. However, the SEND Code of Practice states: Where a pupil is receiving SEN support, schools should talk to parents regularly to set clear outcomes and review progress towards them, discuss the activities and support that will help them achieve and identify the
responsibilities of the parent, the pupil and the school. Schools should meet parents at least three times each year. **Code of Practice 6.65**

The effectiveness of the provision and the impact on the pupil's progress should be reviewed with pupils and parents in line with the agreed date set during the planning phase. These review meetings should be timetabled and best practice suggests they should utilise time frames set for whole school approaches (i.e. pupil progress meetings).

The meeting should consider:

- Has the pupil achieved the agreed short term outcomes?
- Evidence from day-to-day intervention tracking
- Are pupils generalising the skills that they are taught during intervention back into class / home? Can they apply the skill independently?
- How the pupil has responded to the provision
- What are the views of the pupil, parents and school staff?
- How will the outcome of the review feed into the analysis of pupils’ needs? Are further specific assessments needed? Is there a need to refer to a specialist outside agency?
- What changes to support, provision and targets are needed?

The support and outcomes should be revised in light of the pupil’s progress and development and any changes made should be decided through consultation with the parent and pupil.
Identification of SEND

All schools should have a clear approach to identifying and responding to SEND. This approach should be included in schools SEN Information Report so that it is also clear to parents.

To determine whether or not a child has a special educational need schools should:

- Where a pupil is making less progress than expected, ensure that there is high quality teaching targeted at the areas of learning in need of development. (The Code of Practice states that class teachers are responsible and accountable for the progress and development of all pupils in their class. The Code emphasises the expectation that high-quality teaching, differentiated for individual pupils, is the first step in responding to pupils who have or may have SEN.)
- The impact of this targeted support should be reviewed and where progress continues to be less than expected, the class or subject teacher, working with the SENCo, should assess holistically what factors may be influencing the child or young person’s lack of progress.
- Ensure that staff assess the child using the, ‘Factors influencing underachievement’ (see below) or the ‘Vulnerability Matrix’ which is part of the Transition Plus Pathways materials on the SEND Virtual office. This should be alongside a detailed assessment of learning.
- Ensure the process considers the impact of teaching; ‘When a child or young person is underachieving, the school or setting should begin by analysing the effectiveness of its generic teaching and systems of support before deciding a child or young person has SEN,’ (The SEN & Disability Review, Ofsted 2010).
- Remind staff that, low attainment and relatively slow progress are not, of themselves, enough to indicate that a child has a special educational need. Children can be developing and learning but at a slower rate than some of their peers; appropriate intervention may help to accelerate their rate of progress.
- Seek the views of parents and children when gathering evidence. Parents know their children best and it is important that all professionals listen and understand when parents’ express concerns about their child’s development. Children may have insight into why they are not making progress in school.
- Ensure that once an assessment is completed, that the planned provision addresses all the identified factors, environmental, social and learning and that the expected outcomes are clear.
- Ensure that all staff have high aspirations for the impact of the planned provision.
• When planning provision refer to the tables within the “Categories of Need” chapter which describe the kinds of adaptations and targeted support that should be available to all pupils within the universal level.
• **Rigorously monitor the impact of provision reviewing all the factors identified as having an impact on the child’s progress; next steps may include further assessment and provision.** Ofsted 2010, reported, ‘What consistently worked well was rigorous monitoring of the progress of individual children, speedy intervention and thorough evaluation of its impact.’

**Factors influencing underachievement**
Inclusion Support reviewed the factors which distinguish between SEN and underachievement: the factors that may influence children and young peoples’ learning: and, teachers’ decision making.

<table>
<thead>
<tr>
<th>Underachieving Risk factors</th>
<th>SEN Risk factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Low attendance</td>
<td>• Diagnosis of developmental delay</td>
</tr>
<tr>
<td>• Lack of engagement -home/school</td>
<td>• Genetic/medical difficulties</td>
</tr>
<tr>
<td>• Neglect/abuse</td>
<td>• Complex needs</td>
</tr>
<tr>
<td>• EAL</td>
<td>• Sensory issues</td>
</tr>
<tr>
<td>• Cultural barriers</td>
<td>• Mental health needs</td>
</tr>
<tr>
<td>• Failure to thrive</td>
<td></td>
</tr>
<tr>
<td>• Poverty</td>
<td></td>
</tr>
<tr>
<td>• Poor health</td>
<td></td>
</tr>
<tr>
<td>• Children who are young carers</td>
<td></td>
</tr>
<tr>
<td>• Frequent changes of school</td>
<td></td>
</tr>
<tr>
<td>• Social issues-poor housing/changes in home life</td>
<td></td>
</tr>
<tr>
<td>• Bullying</td>
<td></td>
</tr>
<tr>
<td>• Low self-esteem</td>
<td></td>
</tr>
</tbody>
</table>
- Child Looked After
- Basic speech and language difficulty (e.g. amber -WELLCOM)
- Universal and Plus 1 on Transition Plus Vulnerability Matrix
- Summer born or premature

<table>
<thead>
<tr>
<th>Systems factors</th>
<th>Systems factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>- How success is viewed in education-focus on academic achievement</td>
<td>- Training for staff in meeting the range of SEN within the school population.</td>
</tr>
<tr>
<td>- Long term teaching that is not differentiated to the pupils' individual learning needs/many supply teachers</td>
<td>Graduated training – awareness raising, intervention and specialist.</td>
</tr>
<tr>
<td>- Inaccurate assessment</td>
<td>- School identification processes including role and responsibility of teachers.</td>
</tr>
<tr>
<td>- Budget issues in schools leading to a lack of intervention</td>
<td>- Whole school systems include SEND student focus such as quality assurance of teaching and learning, Senior management role for SENCO, subject leaders including SEND pupils in curriculum planning.</td>
</tr>
</tbody>
</table>

- Whole school systems include SEND student focus such as quality assurance of teaching and learning, Senior management role for SENCO, subject leaders including SEND pupils in curriculum planning.
- Clear communication and holistic planning between SENCo, Pupil Premium Lead, Pastoral Lead, Literacy and Numeracy Lead
- Whole school provision map – Wave 2 and Wave 3
**SEN Support**
Class teachers should seek to identify pupils making less than expected progress given their age and individual circumstances. Most children will experience difficulties in learning at some time in their school life, for a child to have a special educational need, some, or all, of the factors below are likely to apply:

- Lack of progress despite good health and good attendance
- Lack of progress despite high quality teaching
- Lack of progress in response to the use of specific, targeted, recognised (tested and published) teaching interventions
- Short/long term memory difficulty
- Child has a pattern of barriers to learning experienced across the curriculum and over time
- Short attention span despite utilising visual and kinaesthetic teaching and learning
- Child does make small steps of progress when an individually assessed and planned programme, delivered individually, is in place
- There are a range of professionals involved in assessing and supporting the child’s needs
- The child’s needs would be the same regardless of the setting
- Transition Plus Pathway 2/3

Additionally, the Code of Practice refers to:

- **significantly** slower than that of their peers starting from the same baseline;
- failing to match or better the child’s previous rate of progress;
- failing to close the attainment gap between the child and their peers; or
- widening the attainment gap
Sandwell SENCos identified the following elements of good practice for identifying pupils with SEND during cluster group meetings:

SENCOs being part of pupil progress meetings with class teachers and senior leadership team. This enables a cohesive whole school approach to identifying pupils where the gap between peers is widening and providing targeted support before a student is identified as SEN.

Use of a whole school provision mapping tool that tracks intervention and impact at Wave 2 as well as provision for pupils with SEND. Highlighting different vulnerable groups i.e. pupil premium, LAC and the progress that they make ensures best use of resources.

SENCOs being part of the quality assurance cycle for teaching and learning in school to ensure that pupils are receiving good quality first teaching before identifying them as having a special educational need

Use of SENCo consultation meetings where teachers discuss pupils they have concerns about, providing evidence of additional assessment and support that has already been implemented.

SENCO observation of the pupil that is causing concern especially for those pupils who have social, emotional and interaction needs and physical needs as this might not show in teacher assessment data. SENCO provides support and advice to class teacher.

Whole school training on identification of pupils with SEND which is then embedded throughout the school year through pupil progress meetings/SENCo consultation meetings.

SENCO trained in interventions so that they can quality assure and cascade knowledge to other members of staff.

Use of pupil conferencing to discuss with pupils how they feel about their progress and the support that they need.

Use of separate parent / teacher conference meetings to discuss possible SEN support in order to allow time to fully discuss issues and methods of support.
Please note that:

- Parents must be formally notified when moving a child to SEN Support and it is advised that school log this correspondence so that it is clear to all parties.

- Evidence is key to identifying needs and ensuring that appropriate provision is provided.

- SENCos should establish an agreed structure and approach of recording this information within school so that it is consistent.

- Evidence should be gathered by class / subject teacher include key concerns, observations, assessment data, parent views and the additional strategies / adaptations that have already been implemented. The class teacher’s evidence should include action related to holistic assessment and provision as described above.

- SENCos may choose to use the “Cause for Concern” sheet provided in Appendix 1, or their own school version, to collate this evidence.

SENCOs’ will need to provide additional support to newly qualified teachers (NQTs) when identifying whether a pupil has a special educational need and discussing this with their parents.
**Provision Management**

Provision maps are an efficient way of showing all the provision that the school makes which is additional to and different from that which is offered through the school’s curriculum. The use of provision maps can help SENCOs to maintain an overview of programmes and interventions used with different groups of pupils and provide a basis for monitoring the levels of intervention. *Code of Practice 6.76*

SENCOs can also use provision maps to identify particular patterns of need and potential areas for development and training within school. It can help schools develop the use of interventions that are effective and remove those that are not.

In Sandwell, we ask SENCOs to use a costed provision map, so that they can evaluate how their notional SEN budget is being spent and judge if they are receiving value for money.

Sandwell Inclusion Support provide training on provision management and have developed a provision management tool that is free to Sandwell schools. For information about courses on provision management and the provision management tool, please contact chris_oconnor@sandwell.gov.uk or www.inclusion_support@sandwell.gov.uk for more details.
Specialist Services

Educational settings are advised to engage with specialist services where pupils continue to make less than expected progress, despite evidence of support and interventions delivered by appropriately trained staff, which is matched to the pupil’s area of need.

Schools may involve specialists at any point to advise them on early identification of SEN and effective support and interventions.

The pupil’s parents must always be involved in any decision to involve specialists and their consent given before any work with or about the pupil is carried out.

The SENCO and class teacher, together with the specialists, and involving the pupil’s parents, should consider a range of evidence-based and effective teaching approaches, appropriate equipment, strategies and interventions in order to support the child’s progress. They should agree outcomes to be achieved through the support, including a date by which progress will be reviewed.

Specialist Services that are available to all Sandwell Schools are:

- Education and child psychologists
- Specialist teachers (Learning, Behaviour, Specific Learning Difficulties, Complex Communication and Autism)
- Specialist teachers of pupils with Hearing or Visual Impairment
- Child and Adolescent Mental Health Services (CAMHS)
- Therapists (including speech and language therapists, occupational therapists and physiotherapists)
- Early Help
• Looked After Children Team
• School Nursing Team

Schools can buy additional time to top up their ‘universal’ support allocation from Inclusion Support and Therapies

Schools may also wish to purchase additional services through their SEN Notional budget such as

• Play therapists
• Specialist Counselling
• Interpreting Services (from Birmingham Hospital)

For contacts with Specialist Services see:

Sandwell Local Offer www.sandwell.gov.uk/send
Inclusion Support www.inclusion_support@sandwell.gov.uk
Education, Health and Care Plans (EHC Plan)

What is an Education, Health and Care Plan?

An EHC Plan looks at all the needs that a child or young person has within education, health and care. Professionals and the family together consider what outcomes they would like to see for the child or young person. This plan identifies what is needed to achieve those outcomes.

An EHC Plan must have an educational spine. A child or young person who has health or social care issues but is making good educational progress will be supported through these agencies without an EHC Plan. For example, toileting and mobility around school are not reasons for requesting an EHC Plan if the child is making expected academic progress and school can make adaptations within their own SEN Notional Budget.

Who may need an Education Health and Care Plan?

The Code of Practice states:

The majority of children and young people will have their needs met within local mainstream early years setting, schools or colleges. Code of Practice 9.1

The EHC Plan needs assessment, should not normally be the first step in the process, rather it should follow on from planning already undertaken with parents and young people in conjunction with an early years provider, post-16 institution or other provider. Code of Practice 9.3

An EHC Plan needs assessment will not always lead to an EHC plan. The information gathered during an EHC Plan needs assessment may indicate ways in which the school, college or other provider can meet the child or young person's needs without an EHC Plan. Code of Practice 9.6
Only children who have severe levels of physical, learning, communication or social / emotional difficulty, that are lifelong and complex, may need an Education, Health and Care Plan. It is expected that school have received and acted on the advice of Specialist Services as part of their graduated response to the pupils needs, before requesting an EHC Plan assessment.

**For guidance on the criteria for EHC assessment please refer to the tables within the Categories of Need section.**

*Who may request an EHC Plan?*

The following people have a specific right to ask a local authority to conduct an Education, Health and Care Needs Assessment for a child or young person aged between 0 and 25:

- the child’s parent
- a young person over the age of 16 but under the age of 25, and
- a person acting on behalf of a school or post-16 institution

Additionally, those that have a professional interest in the child or young person and young people themselves between the ages of 10-18 in youth custody may also request an assessment.

- In order to make a request, the SENCO arranges a Community Assessment Meeting or CAM. This is a person centred multi-agency meeting with parents and the young person. For further information on how to hold a CAM please refer to [Requesting an EHC Assessment p106](#)

- If the LA agrees to begin the process at Assessment and Moderation Panel; an EHC Plan takes 20 weeks to complete. The child will continue to be supported from the school's SEN resource while the Education, Health and Care Plan is being completed. *(Please see Appendix 9 for timelines)*

- Staff in the school will need to access additional professional development in order to ensure that they
have the skills to teach the pupil

- Children with an EHC Plan will also have access to all the provision detailed on the school’s provision map, in the Universal Offer and SEN Support which are appropriate to their learning needs
- Many children who need an EHC Plan will be educated in mainstream schools but some children may benefit from a special school placement or focus provision placement. The options will be discussed with pupils and their parents as the EHC Plan is developed
- The school will continue to keep parents informed about the progress their child is making through assessment, termly review and the Annual Review of the EHC Plan
- If the pupil with an EHC Plan is not making expected progress, then the school should request additional advice from outside agency staff or special school outreach staff who have additional expertise in respect of the child’s difficulty

For information about making a request for an EHC Plan needs assessment please see the chapter on Process and Procedures p104 and Appendix 3 for paperwork
Early Years Guidance

These descriptions are intended as guidance rather than as absolute criteria. The child may show needs in one area of development only or in more than one of the areas indicated.

Regard must be given to the Early Years Foundation Stage (EYFS) Guidance recommended adult: child ratios, expected as part of Quality First provision. Some small group and individual support would be expected as part of provision for all children in the Early Years Foundation Stage.

Reference should be made to the Statutory Framework for the EYFS (DfE 2012) and the Early Years Development Journal (DfE 2013). The Early Years Development Journal closely links with Development Matters in the Early Years Foundation Stage. There are specific Development Journals for; deaf babies and children; babies and children with Down syndrome; and, babies and children with a visual impairment. Practitioners can also use the non-statutory Early Years Outcomes Guidance (DfE 2013).

Special Educational Needs and Disability code of practice: 0 to 25 (DfE 2014) states that the statutory progress checks at age 2 ‘must identify the child’s strengths and any areas where the child’s progress is slower than expected. If there are significant emerging concerns practitioners should develop a targeted plan to support the child involving other professionals e.g. SENCO or Area SENCO’.

As a general principle, when planning provision for children in the Early Years Foundation Stage, it is important to take into account the extent to which the child:

- Needs additional prompts and cues to support their play and learning e.g. gestures, eye-pointing, verbal prompts, visual cues
- Shows behaviour and actions that are spontaneous, or relies on adult direction and individual cueing
- Is able to learn from watching and imitating others
• Needs assistance to manage his/her own needs and the learning environment
• Needs to use alternative means and adult support to communicate and express themselves
• Impacts on the learning and health and safety of others

Moving a pupil to SEN Support

• The decision to provide a pupil to SEN support is one which will be made by the school / setting, in discussion with parents. A setting can be: pre-school playgroup, child minder, day care or stay and play sessions.
• Parents must be formally notified
• When evaluating whether a pupil needs a more intensive level of intervention i.e. a move to SEN support schools / settings should consider:
  • Is there a group of pupils in this class/year group who are experiencing this difficulty?
  • Have teachers had the CPD they need to teach this cohort of pupils?
  • Does the pupil need improved quality first teaching or is a specific intervention required?
• Recognising that a pupil needs intervention at a more intensive level does not mean that the resource will be immediately available. A school / setting may be running intervention programmes and 1:1 support, which utilises all the existing resource.
• Schools / setting will need to use active provision management to ensure that they can meet a range of pupil needs within a reasonable time frame i.e. support pupils via timed interventions with clear outcomes which are reappraised termly, rather than lifetime programmes. New pupils may then be brought into interventions.
• If the school / setting chooses to use funding for in class support, it should be purposeful, targeted and built upon good quality teaching. The school / setting should be confident about how any ‘in class support’ is accelerating the pupil’s progress.

Pupils

• Pupils should be involved in the discussions around their progress, where possible, visual representations of progress should be used

• A pupil is entitled to a child friendly, individualised programme with outcomes that they can understand and have been involved in developing. School may choose to use the ‘All About Me’ document as a record

• Even very young children or those with serious communication difficulties should be offered choices using photographs, objects etc.

Parents

• Parents will be involved in a discussion with the class teacher / early years practitioner and SENCO to develop a shared understanding of the pupil’s strengths and difficulties, agree outcomes for the child and the next steps to meeting these outcomes (intervention). This discussion may be recorded on the “All About Me” document and subsequent action plan

• Class teacher / early years practitioner and/or SENCO should explain fully to the parents the additional and different provision that will be put in place

• Parent’s views should be sought before interventions are put in place and they should be kept informed about progress (three reviews per year)
Monitoring

- The head teacher / setting manager is responsible for ensuring that pupils with SEN receive good Wave 1 Quality First teaching as detailed above and ensuring staff have the necessary professional development to meet the needs of all the children that they teach. Monitoring may include scrutiny of pupil’s learning journeys, planning and lesson delivery and could be conducted with the SENCo.

- The SENCO, in partnership with the class teacher / early years practitioner is responsible for ensuring the delivery of individualised programmes / approaches by identified staff and monitoring the quality and impact of those interventions.

- The SENCO and the class teacher / early years practitioner will need to be fully aware of the programme content and teaching approaches in order to be able to monitor delivery.

Early Years Block Funding

What is it?

**Early Years High Needs Block Funding** is a discretionary short-term grant from Inclusion Support Early Years (ISEY). This funding has been set up to assist children aged 0 to school age with significant additional needs to access inclusive childcare and school nursery provision for **up to 15 hours per week**.

Children entering reception class are not eligible for funding as their needs will be met through schools own delegated budget or through an Educational Health Care Plan.

Children’s needs are identified through the Early Years Transition Plus Pathway (TPP). Please refer to the chart at the end of this chapter for a summarised version. For further information on how to use the Early Years TPP please contact Alice Berry Inclusion Support Early Years (ISEY) Manager Coneygre Centre on 0845 352 8581 or at alice_berry@sandwell.gov.uk.
Children with significant additional needs will be in need of a TPP 3 comprehensive package of support going through the statutory assessment process to gain an Education, Health and Care Plan.

Children identified at TPP 3 who are Looked After by the local authority will also be considered. In the case for schools, children identified at TPP 2 may be considered for up to 7.5 hours per week taking into account the Safeguarding and Welfare requirements (section 3 EYFS) adult to child ratios.

Criteria for applications

- Funding is considered on an individual child basis. Each application will usually be reviewed every 12 weeks dependent upon need or individual circumstances
- Settings can apply for up to a **maximum of 15 hours funding per week** for a child which will be dependent upon their level of need
- The child must have significant additional needs that require an individual programme of intervention at TPP3 which can not be delivered within the ratio of the group and/or an additional need which could cause a barrier to inclusion
- The child must be resident in Sandwell
- The setting must evidence the need for additional funding - all applications must include one individual provision plan with outcomes completed, a current plan and any appropriate outside agency reports or advice
- The child is accessing additional services provided by health or local authority (e.g. Speech and Language Therapy, ISEY and Child Development Centre (CDC) Physiotherapy, Educational Psychologist etc.)
- Statutory assessment of the child’s SEN has been initiated
- Initial consultation has taken place with the Area SENCO or ISEY Manager and, where appropriate, a multi agency meeting involving parents and all agencies has been held or views sort to determine the needs of the child
ISEY can only fund applications from the date agreed with the panel. Retrospective funding is not allowed. Therefore, please ensure your application is with us BEFORE you wish the funding to start as failure to do so may result in a delay to the child’s accessing their nursery place if dependent on 1:1 support.

Early Years Panel

- All applications for Early Years block funding are considered by the Early Years Panel
- This is a multi-agency panel consisting of professionals from Early Years Inclusion Support, Educational Psychologists, Health, Therapy (i.e. Speech and Language Therapist) and SEN Service Unit
- Each application is considered by the panel and recommendations will be made i.e. allocation of funding, identification of additional training needs, individual provision and outcomes
- Parents are informed of the panel’s decisions and the date for review
- Where applications are declined, parents and Setting managers / Head Teachers will be given an explanation and offered support around the future inclusion of the named child
- All funding will be put in place for no more than 12 weeks. It will be at the discretion of the panel to reduce the timeframes for review of funding as necessary

Please see Appendix 7 for Early Years High Needs Block Funding – Application Paperwork
## Early Years Guidance (using the Early Years Transition Plus Pathway)

<table>
<thead>
<tr>
<th>Area of Development</th>
<th>Early Years SEN support TPP 1</th>
<th>Early Years SEN support (with outside agency) TPP 2</th>
<th>Education Health and Care Plan TPP 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication and Interaction</td>
<td>• Requires understanding and occasional interventions • Within school resources, including Total Communication environment • Speech and Language Programme and advice</td>
<td>• Augmented communication (Makaton / PECS • 1:1 support for curriculum access. • Planning for daily routines</td>
<td>• 1:1 support for curriculum access • Sensory room • Specialist teaching programmes including intensive interaction • Behaviour plan, including risk assessment for challenging behaviour as a form of communication.</td>
</tr>
<tr>
<td>Cognition and Learning</td>
<td>• Personalised learning • Planning for daily routines</td>
<td>• Differentiation plus additional resourcing • Small step teaching programme • Planning for daily routines • 1:1 support for curriculum access</td>
<td>• 1:1 support – intensive • Specialist teaching programmes • Individual support for personal needs</td>
</tr>
<tr>
<td>Area of Development</td>
<td>Early Years SEN support (TPP 1)</td>
<td>Early Years SEN support (with outside agency) (TPP 2)</td>
<td>Education Health and Care Plan (TPP 3)</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>------------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| Social, Emotional and Mental Health Needs | • Behaviour managed through prevention and early intervention from staff                         | • High levels of family support needed  
• Requires an active intervention / individual plan  
• TAC may exist                                                                                           | • 1:1 support for social activities  
• Individual plan including risk e.g. physical intervention programme, reward systems  
• Nurture group / principles  
• Play therapy (specialist training)                                                                 |
| Sensory Needs                           | • Minor modifications needed in terms of equipment / classroom organisation                   | • Assistive technology required  
• Support for curriculum access  
• Resource adaptation  
• On-going advice re: specialist interventions                                                           | • 1:1 support for curriculum access  
• Requires major use of assistive technology  
• Resource adaptation  
• Augmented communication systems e.g. BSL, Braille  
• Specialist teaching programmes                                                                  |
<table>
<thead>
<tr>
<th>Area of Development</th>
<th>Early Years SEN support</th>
<th>Early Years SEN support (with outside agency)</th>
<th>Education Health and Care Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>TPP 1</td>
<td>TPP 2</td>
<td>TPP 3</td>
</tr>
</tbody>
</table>
| Physical            | • Care plan for medical needs e.g. diabetes, epilepsy, asthma  
                      • Therapy programme  
                      • Mild physical disability requiring minor school management e.g. access arrangements | • Care required which is well managed between home and school  
                      • Support for toilet and changing facilities  
                      • Curriculum access / adaptations | • Accessibility – ramps, toilets, moving and handling  
                      • Specialist equipment and training  
                      • Care plan, including risk assessment  
                      • High dependency on medical interventions throughout the day e.g. tube feeding, ventilated |

### Education, Health and Care Plans (EHC Plan)

When evaluating whether a greater level of resource is needed to meet the pupil’s needs, i.e. to request an EHC Plan. Schools / settings need to consider whether the interventions they are using are:

- Intervention/Strategies that have an evidence base of effectiveness
- Evidence based / nationally recognised Wave 3 intervention
- Being delivered by staff who have been appropriately trained
- Closing the attainment gap between the child and their peer group
- Enabling the child to make progress at the expected rate

[IL0: UNCLASSIFIED]
When requesting an Education Health and Care Plan, schools are required to evidence the use of their SEN Notional Budget or High Needs Block funding in supporting the pupil and clarity about how additional funding will accelerate progress.

**Community Assessment Meeting (CAM)**

**What is it?**

It is a meeting of child, parents / carers, school / setting and the professionals who have been working with a child.

The purpose of the meeting is for the school / setting and professionals to explore child and parental views, to set agreed outcomes and plan how provision should be adapted or replaced in order to achieve these outcomes.

The meeting will usually be informal, the child / parent should be asked about how and where the meeting will be set up by the SENCO or SEN Officer.

It can take place in a venue chosen by the parent, in the school, in a children’s centre, at home as long as the chosen place can accommodate the number of people you wish to invite.

In order to prepare for the meeting, parents will be given a form by school / setting that they can complete at home or at school in discussion with a member of staff.

Professionals at the meeting who have been working with the child should provide a report which should be no more than 6 months old. Where the child attends a school early years provision, reports should be delivered to school 2 weeks before the CAM, so that the SENCo can distribute them to parents / those attending the meeting 3 working days before the meeting takes place. Where a child attends a different setting, reports should be delivered to the Inclusion Support Early Years key worker, who is responsible for working with the child and their family.
The meeting

The people at the meeting will consider what is happening now for the child, what is good about it and what is not going so well through a series of questions.

Who is here? Who else was invited? Who else is important to.....?
What do we like and admire about ...?
What are our hopes and dreams for....?
What is important for...?
What is important to...?
What is working well?
What do we need to develop?
What are our short-term outcomes?
What are our long-term outcomes?
What are our next actions?

The meeting will start with the child’s views.

How views should be presented at the meeting will be discussed with the child, if they are old enough/able to have an opinion, and their parents.

If the child is very young their views could be presented by their parent and/or a support worker telling the people at the meeting what they are like, what they find difficult and what is important to them. It could be written down before the meeting for people to read.

A set of outcomes will be formulated in discussion with the child, parents and colleagues at the meeting, together with the support and programmes needed to order to achieve them.

At the meeting, it will be decided if those outcomes can be achieved with the existing Local Offer and school
resources, or whether an Education Health and Care plan should be requested to access additional funding.

If an EHC Plan is to be requested a date will be set for any additional assessments to be completed. This will be no more than 6 weeks from the CAM.

If the decision is not to request an Education Health and Care plan and the child is in school, a plan of support using resources from the Local Offer / school’s notional SEN budget is agreed upon. If the child is in another early years setting, then a plan of support may be resourced through early years block funding.

If there are additional assessments required, then the SENCO / Inclusion Support Early Years key worker will ask the professionals/agencies to conduct them and provide reports.

If a plan using resources from the SEN Notional Budget has been developed, then the CAM should set a date to review the plan at the end of the meeting.

If parents are not happy that the SEN Notional Budget plan will meet their child’s needs at the end of the meeting, they can still choose to request an Education, Health and Care Plan. However, the SENCO will need to ask the parent for their reasons and include these in their paperwork requesting an EHC.

If requesting an EHC Plan the school will gather the information and reports into the LA set format and send it into SEN at the Local Authority (LA) within 6 weeks of the CAM.

The LA will consider the evidence sent to SEN at an Assessment and Moderation Panel and parents will be informed if the decision is to assess for an EHC Plan or not within 2/4 weeks.
Transition

SEN Support should include planning and preparing for transition, before a child moves into another setting or school. It is recommended that settings / schools use the Transition Plus Pathway (TPP) for Early Years and share information with the receiving setting or school. The current setting should agree with parents the information to be shared as part of the planning process.
School Support - Areas of Need

Special Educational provision should be matched to the child’s identified SEN. There are four broad areas of need:

- Cognition and learning
- Communication and interaction
- Social, emotional and mental health
- Sensory and/or physical needs

These areas give a broad overview of what educational establishments should plan for. In practice, individual children / young people often have needs that cut across the different areas and their needs change overtime. A detailed assessment of need should ensure that the full range of an individual’s needs are identified, not just the primary need. For instance, pupils whose primary area of need is Cognition and Learning, may also have Communication needs which also need to be addressed.
Cognition and Learning

Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation. Learning difficulties cover a wide range of needs (see below) and 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.

Mild and Moderate Learning Difficulties (MLD)

A child or young person’s difficulties may be described as MLD if their learning at the end of key stage 1 or above, is assessed as being below the 2nd centile/below 70 in standardised tests in at least 3 key areas of learning, and that learning difficulty co-exists with other difficulties, such as speech and/or language developmental delay, poor social skills and/or emotional and mental health difficulties.

• The child or young person is also likely to experience:
  • Significant barriers to learning across much of the curriculum.
  • Making progress but academic attainment that is significantly below that of their peers and that the gap widens over time
  • Difficulties with short/long term memory
  • Progress being made in very small steps when taught through specific, targeted and individualised intervention
  • Short attention span despite engaging learning activities

Severe or Profound Learning Difficulties (SLD / PMLD)

Children with severe or profound and multiple learning difficulties are almost always identified before they reach statutory school age. Children with Severe Learning Difficulties (SLD) will be most likely to work at P level to National Curriculum Yr. 1 expectations up to school leaving age. A child with Profound and Multiple Learning Difficulties (PMLD) will be most likely to work at early P levels, P1i to P4 until school leaving age. In most cases
Specific learning difficulties (SpLD)

Specific learning difficulties affect one or more specific aspects of learning. This encompasses a range of conditions such as dyslexia, dyscalculia and dyspraxia / developmental coordination disorder.

Dyslexia is a specific learning difficulty which mainly affects the development of literacy and language related skills. It is likely to be present at birth and to be lifelong in its effects. It is characterised by difficulties with phonological processing, rapid naming, working memory, processing speed, and the automatic development of skills that may not match up to an individual’s other cognitive abilities.

It tends to be resistant to conventional teaching methods, but its effects can be mitigated by appropriately specific intervention, including the application of information technology and supportive counselling.

(Singleton, 2008)

Schools are expected to promote equality of opportunity and to anticipate and remove or minimise barriers for learners with disabilities.’ (Progression Guidance DCSF 2009)

- Children with learning difficulties which are mild and moderate will be educated within mainstream schools, without the need for an Education Health and Care Plan
- These children may require help at the school-based SEN Support level funded through schools SEN Notional budget
- Whilst making optimal progress in their own right this may be 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
- 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 pupils are supported in-class, the focus should be promoting thinking skills and strategy use rather than task completion

Universal Offer – Element 1

• The class / subject teacher in takes the lead in assessment of progress, factors that influence underachievement and identifying gaps in learning an.
• Pupil’s rates of progress are compared to previous rates and expected rates
• Progression and factors influencing underachievement are discussed during pupil progress meetings with Senior Leadership Team
• Pupil progress and areas of difficulty are discussed with parents
• Teacher targets teaching to address relevant gaps in understanding through high quality differentiation and targeted support
• Pupil is based in the classroom but may be withdrawn for targeted support / Wave 2 intervention if appropriate
• Adult support and intervention as available from within school resources of AWPU/Pupil Premium/ Literacy and Numeracy Catch up.
• Parental reinforcement at home (e.g. reading daily)
• Possible out-of-hours learning opportunities (e.g. booster groups, tutoring, revision groups, homework clubs, after school clubs etc.)
• Give access to specialist equipment and ICT as necessary

**SEN Support – Element 2**

In addition to universal provision children require some of the following specific assessment, planning and support approaches.

**Descriptor of Need**

• Evaluation of factors influencing underachievement has been completed, targeted support provided and evaluated.
• Pupil has not made expected progress despite targeted differentiation / intervention organised by class / subject teacher.
• Pupil is working more than 2 years below age related expectations in primary school
• From school specific standardised assessment: pupil is scoring around mid to low 70s on standardised reading / spelling / maths / language assessments.
• Specific assessments for SpLD indicate poor phonological processing, working memory, processing skills, rapid naming speed
• End of Key Stage 1 - working at high p scale (P7 or P8) or Interim Pre-key stage 1 standard ‘Foundations for the expected standard”
• End of Key Stage 2 – working towards lower key stage 2 expectations (Yr 3)
• End of Key Stage 3 – working at lower key stage 2 expectations (Yr 3)

**Assessment and Planning**

• The class or subject teacher, working with the SENCO establishes a clear analysis of the pupil's needs. Fine-tuned assessments such as standardised tests, profiling tools, and criterion referenced checklists are used in conjunction with progress against national curriculum descriptors

[IL0: UNCLASSIFIED]
• Pupil’s views on their difficulties and approaches to support are gathered and recorded (All About Me / One Page Profile)
• Parents discuss their concerns with class / subject teacher and SENCO and a focussed programme of support is planned to address areas of difficulty and specific outcomes set are recorded
• If the pupil continues to make limited progress against baseline after 2 cycles of assess, plan, do review then external services should be asked to undertake specialist assessments, discuss progress and give advice (such as SENAT L or SENAT SpLD). School must seek parental consent and support for the decision to involve external services

Intervention and Support

• Pupils are in class for the vast majority of day following an increasingly individualised curriculum linking content of whole class work and learning outcomes that are appropriate to the child
• Class / subject teacher supports the pupil on a regular basis as part of a small group, within the class, or 1:1, while the TA works with other pupils
• Class teachers plan with support staff so that questioning supports the pupil in their learning and helps to develop their independence
• Opportunities for repetition, over-learning and consolidation of skills are planned for within their timetable
• Teaching Assistants are trained to deliver specific interventions / strategies and develop independent learning in the pupils they support
• Regular, targeted, individual or small group tuition e.g. groups of 4 or fewer for a minimum of 3 x 30 mins a week following a recognised Wave 3 intervention i.e. one which has been evaluated and shown to accelerate progress (likely to be a published programme)
• Specific programme of work devised by outside agency (SENAT SpLD, SENAT L, EP) delivered 1:1 or within a small group
• Parents encouraged to be involved in supporting outcomes in the home (e.g. practising new skills, providing reinforcement for efforts at school etc.)
• Some pupils might be given specific equipment (ICT, writing slopes, coloured overlays) and training in order to remove barriers to learning.
• Additional support is funded through SEN notional budget

**Education, Health and Care Plans – Element 3**

In addition to SEN support provision children require some of the following specific assessment, planning and support approaches

**Descriptor of Need**

• Unable to access the full Foundation or National Curriculum because of skill levels
• Pupil working at P6 or below at the end of KS1
• Pupil working at “early development of the expected standard” on Pre Key Stage 2 interim teacher assessment framework (Pre-ITAF) or towards Yr 1 curriculum objectives at the end of KS2
• Pupil is working at national standard for KS1 or below at the end of KS3
• Levels of attainment measured on at least three different standardised tests fall below 1st percentile

Pupils may also have difficulties with some of the following

- Self-organisation, following routines, managing equipment
- Immature behaviour and social skills
- Fine or gross motor control
- Self-confidence and independence
- Attention, concentration
- Expressive and receptive language

**Assessment and Planning**
Outside agency regularly involved and provide specialist assessment and advice overtime, which leads to more specifically focussed planning of provision

Teachers who are accessing the child have necessary skills to accurately assess pupils working at P level / early basic skills. Assessment is regularly moderated.

Very close home-school links, so that school are aware of changes in home that may impact on learning

Clear individual provision plans for the use of support which relates to expected long term and short term outcomes

**Intervention and Support**

- A high level of differentiation and support is needed throughout the day to access the curriculum
- Individual learning programmes / Wave 3 intervention used to support learning throughout the school day, providing opportunities for repetition and over-learning
- 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
- Visual supports are embedded to aid language understanding across all aspects of the environment to help access to the curriculum (e.g. pictures, symbols, objects of reference, signing, gestures)
- Use of specific IT programmes and specialist equipment to enhance recording and presentation of work

**Banding descriptors for Cognition and Learning**

The descriptors below describe the special educational needs and disabilities children may experience and the provision which helps to support those needs and remove barriers to learning.
<table>
<thead>
<tr>
<th><strong>Cognition and Learning</strong></th>
<th><strong>SEN Support</strong></th>
<th><strong>EHC Plan</strong></th>
<th><strong>EHC Plan</strong></th>
<th><strong>EHC Plan</strong></th>
<th><strong>EHC Plan</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Universal Element 1</td>
<td></td>
<td>Element 3</td>
<td>Element 3</td>
<td>Element 3</td>
<td>Element 3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Band 1</td>
<td>Band 2</td>
<td>Band 3</td>
<td>Band 4</td>
</tr>
<tr>
<td>Access to a differentiated curriculum</td>
<td>In the Early Years, adult prompting and cueing is required to support much of the child’s play.</td>
<td>In the Early Years, child needs personalised learning planning for daily routines; some 1:1 support for curriculum access; small step teaching programme.</td>
<td>May need special provision with smaller class group size.</td>
<td>At the end of KS1 the pupil is &lt;P3i.</td>
<td>Profound and multiple learning difficulties.</td>
</tr>
<tr>
<td>Child may be working below Foundation Stage or below national standard at end of key stage or working below age-related expectations</td>
<td>Pupil is working more than 2 years below age-related expectations in primary school.</td>
<td>Pupil is scoring in the mid to low 70s on schools specific standardised assessments.</td>
<td>In the Early Years, may need 1:1 intensive support; specialist teaching programmes.</td>
<td>The pupil will be working at P6 or below at the end of KS2 in reading, writing and maths.</td>
<td>Pupil works P3ii or below for the whole of their school career and often makes lateral rather than linear progress.</td>
</tr>
<tr>
<td>Access to Wave 2 intervention / targeted teaching to address under-achievement factors</td>
<td>Pupil is working at high p scale (P7 or P8) or Interim Pre-key stage 1.</td>
<td>Working at “early development of the expected standard” (Pre-ITAF) or towards Yr 1 curriculum objectives at the end of KS2.</td>
<td>A high level of adult support is needed to model tasks, lead learning with appropriate level questioning within a withdrawal group.</td>
<td>Pupil needs 1:1 teaching opportunities throughout the day in order to make progress.</td>
<td>The level of learning achieved is not sustained over time.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Requires intensive 1:1 throughout the day in order to make progress.</td>
</tr>
<tr>
<td>Standard</td>
<td>Pupil is working at national standard for KS1 or below at the end of KS3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------</td>
<td>---------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>A high level of differentiation is needed throughout the day to access the curriculum</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Literacy/numeracy Wave 3 programmes delivered 1:1 to make progress and in class support is needed to embed skills, together with opportunities for over learning.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>P4-P8 at the end of KS2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Class teachers and support staff need time to plan an individualised programme for the pupil.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pupil requires an increased level of differentiation that supports the teaching and learning of basic skills.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>In need of Wave 3 literacy/numeracy interventions delivered at least 3 x weekly or daily basis. Delivered 1:1 or in small groups.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>In need of Wave 3 literacy/numeracy programmes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Active casework with support services in mainstream settings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Physical</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>An individualised curriculum is needed with advice from special school staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Staff to spend at least 2.5 hours planning and differentiating the learning programme each week</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Time is needed for regular multi-agency meetings to plan next steps in learning.
SpLD assessment and programme delivered according to advice from support services
In class support, if needed, to embed skills from CT/TA
Time for CT/TA to plan, record and evaluate progress
Time to liaise with outside agencies to evaluate/plan programmes

Assessment – the use of standardised tests

Standardised tests may be used by school staff during the “Assess” stage of the graduated response to identify specific needs and to measure progress. The following is brief guidance on their use.

- Caution should be applied when using standardised reading tests – this is a one-off assessment and the result is dependent on the performance of the pupil at a specific moment of time
- Use up-to-date versions of the test; older tests, where the standard scores are based on a sample of pupils
from a long time ago will give misleading results

- Different reading assessments test specific areas of reading and therefore it is not recommended to compare the results from different assessments – i.e. single word reading tests testing phonic ability and sight recognition compared with text based comprehension tests where different contextual reading strategies can be deployed

- Standardised reading assessments do not give the whole picture. It is recommended that other criterion based checks should also be used to identify areas of difficulty i.e. a reading running record, phonic checklists, high frequency words

- When using standardised tests ALWAYS read the handbook to ensure consistent delivery of the test (i.e. the age range that the test is suitable for, how much help can be given, when to stop the test, how to score the test)

- For local authority paperwork, an age equivalent, percentile and/or standard score are required. Where appropriate we would like schools to include scores using the New Salford Sentence Reading Test by McCarty and Lallaway (2012) so that a direct comparison between pupils can be made.
Social, Emotional and Mental Health difficulties

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, p87)

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 pupils 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.

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.

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 to children 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 pupil 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 pupils are managed makes a substantial difference to the behaviour of pupils and can make a substantial difference to the emotional development of vulnerable children
- If the ethos of the school is welcoming to all pupils, 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 pupils with social, emotional and mental health difficulties is key to establishing effective interventions
- Schools that monitor trends in incidents, exclusions and vulnerable pupil 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

[IL0: UNCLASSIFIED]
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 pupils 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 behaviour.

Involvement of parents/carers and pupils will be sought to support the pupil in a proactive approach.

**Universal - Element 1**

All additional provision must be based on high quality Wave 1 inclusive teaching. Teachers need to have the appropriate CPD and school leaders should have evidence that they have provided staff with good quality training in classroom management and strategies for children experiencing social emotional and mental health difficulties to ensure that additional provision is built upon the most effective foundation. Schools should actively promote well-being and emotional resilience through the whole school PSHE curriculum.

Pastoral support should be set within a positive school ethos with access to positive support for staff.

**SEN Support Element 2**

**Descriptors of Need**

The child / young person:

- does not comply with staff requests
often destroys own work
appears depressed
lacks confidence to attempt tasks
communicates aggressively preventing the class functioning
is silent or speaks selectively
shows obsessive behaviours and/or irrational anxieties
displays extreme mood swings
engages in disruptive behaviour in class
is subject to bullying or signs of stress affecting school performance;
persistent disruptive behaviour occurs in a variety of contexts and impedes the learning of the child and/or other pupils despite interventions detailed in individual programme
difficulty sustaining peer relationships
fluctuations in mood and unpredictable attitude to learning tasks – periods of uncooperative behaviour and withdrawal

Assessment and Planning
In addition to universal provision children require some of the following specific assessment, planning and support approaches

- The class or subject teacher, working with the SENCo, establishes a clear analysis of the pupil’s needs. Fine-tuned assessments / profiling tools like the Boxall Profile and Strength and Difficulties Questionnaire could be used
- Pupil’s views on their difficulties and approaches to support are gathered and recorded (All About Me /
One Page Profile

- Parents discuss their concerns with class / subject 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 may plan to review specific outcomes on a half termly basis
- If the pupil continues to make limited progress against baseline after 2 cycles of assess, plan, do review then external services such as Behaviour Support Teachers / EP, should be asked to undertake specialist assessments, discuss progress and give advice. School must seek parental consent and support for the decision to involve external services
- Other external agencies such as Early Help may become involved to support the family

**Intervention and Support**

- Regular targeted small group or individual intervention to develop social skills
- Regular time with a trained member of staff for pastoral or therapeutic mentoring
- Schools may choose to use delegated resources to run a full nurture group / 100-minute model nurture group to support a small group of pupils with attachment difficulties
- Schools may choose to use delegated resources to commission additional counselling / therapeutic support
- An individual programme of support devised by Behaviour Support Teacher / EP. Programme could include use of solution focussed therapeutic approaches, cognitive behaviour therapies
- If the pupil does not make expected progress following BST / EP advice, involvement of the Preventing Primary Exclusions maybe discussed with parents and school staff
- Parents involved so that they can support outcomes at home
- Additional support from other agencies such as Early Help, mental health services and social care to support the pupil and their family
Education, Health and Care Plans – Element 3

Descriptors of Need

A pupil who may need an Education, Health and Care Plan should already be receiving individualised, planned programmes funded from schools SEN notational budget. Guidance for consideration for Education, Health and Care Plan are below:

- Pupil requires constant supervision to ensure their own safety and that of peers and/or adults
- Positive, restrictive physical intervention strategies employed on a regular basis (once a week or more)
- Pupil’s ability to learn significantly impaired over prolonged periods, even with dedicated daily support and targeted intervention programmes
- The pupil has a medical diagnosis that impacts on their ability to regulate their own behaviour thus requiring significant regular additional adult support to access the majority of learning activities and sustain concentration within a teaching learning situation
- Medication required/taken but not effectively controlling behaviour in school
- Frequent (daily) interventions from an adult are required to sustain peer relationships
- Extreme unhappiness/stress with possible lengthy periods of disengagement
- Teaching and learning disrupted on a daily basis due to difficulties in remaining on task
- Experiencing additional difficulties in the area of cognition and learning/communication/physical/sensory that influence the pupils’ ability to reason and regulate their own behaviour
- High level of rejection and social isolation
Behaviours are associated with severe and complex additional learning difficulties in the areas emotional/learning/cognition/communication/physical/sensory needs

**Assessment and Planning**
In addition to SEN Support provision children require some of the following specific assessment, planning and support approaches

- Regular review (at least half-termly) and multi-agency working is needed to problem solve with family/carers and established consistent approaches
- Active regular casework with support services (EP, BST) / external agencies (CAMHs)
- Pupil may have had a high number of fixed term exclusions and PPE Team involvement to support their needs

**Intervention and Support**

- Pupil needs a high level of support throughout the day in order to support behaviour management and focus on learning
- Daily interventions from an adult are required to sustain peer relationships. The range of interventions are more intensely focussed and have a well-founded evidence base
- Pupil requires supervision particularly in unstructured situations or alternative activity at break/lunch times
- Staff needed at times to supervise pupil if he/she needs to be withdrawn or withdraws self from the classroom / small group work
- A social skills/ nurturing programme/creative therapy programme is needed, delivered in small group or 1:1
- Staff trained and skilled in supporting children with exceptionally challenging behaviour
# Banding descriptors for Social, Emotional and Mental Health

The descriptors below describe the special educational needs and disabilities children may experience and the provision which helps to support those needs and remove barriers to learning.

<table>
<thead>
<tr>
<th>Social, emotional and mental health</th>
<th>Social, emotional and mental health</th>
<th>Social, emotional and mental health</th>
<th>Social, emotional and mental health</th>
<th>Social, emotional and mental health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universal Element 1</td>
<td>SEN Support Element 2</td>
<td>EHC Plan Element 3 Band 1</td>
<td>EHC Plan Element 3 Band 2</td>
<td>EHC Plan Element 3 Band 3</td>
</tr>
<tr>
<td>Positive ethos where the curriculum promotes children’s social and emotional development.</td>
<td>In need of nurture group/nurturing programmes. Some challenging behaviour is evident and staff have additional CPD if necessary to deliver the curriculum.</td>
<td>Active casework with support services. Pupil requires supervision particularly in unstructured situations or alternative activity at break/lunch times.</td>
<td>Pupil needs to be withdrawn frequently even when working in small groups 1:1 staffing required at times. Learning needs extensive differentiation to engage the pupil.</td>
<td>Pupil requires constant supervision in a small group 2:1 staffing required at times. Learning needs extensive differentiation to engage the pupil.</td>
</tr>
<tr>
<td>Behaviour policy consistently applied</td>
<td>Staff have appropriate CPD.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive ethos where the curriculum promotes children’s social and emotional development.</td>
<td>In need of nurture group/nurturing programmes. Some challenging behaviour is evident and staff have additional CPD if necessary to deliver the curriculum.</td>
<td>Active casework with support services. Pupil requires supervision particularly in unstructured situations or alternative activity at break/lunch times.</td>
<td>Pupil needs to be withdrawn frequently even when working in small groups 1:1 staffing required at times. Learning needs extensive differentiation to engage the pupil.</td>
<td>Pupil requires constant supervision in a small group 2:1 staffing required at times. Learning needs extensive differentiation to engage the pupil.</td>
</tr>
<tr>
<td>Behaviour policy consistently applied</td>
<td>Staff have appropriate CPD.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive ethos where the curriculum promotes children’s social and emotional development.</td>
<td>In need of nurture group/nurturing programmes. Some challenging behaviour is evident and staff have additional CPD if necessary to deliver the curriculum.</td>
<td>Active casework with support services. Pupil requires supervision particularly in unstructured situations or alternative activity at break/lunch times.</td>
<td>Pupil needs to be withdrawn frequently even when working in small groups 1:1 staffing required at times. Learning needs extensive differentiation to engage the pupil.</td>
<td>Pupil requires constant supervision in a small group 2:1 staffing required at times. Learning needs extensive differentiation to engage the pupil.</td>
</tr>
<tr>
<td>Behaviour policy consistently applied</td>
<td>Staff have appropriate CPD.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

[IL0: UNCLASSIFIED]
<table>
<thead>
<tr>
<th>to manage children’s behaviour</th>
<th>Needs small group social skill/self-esteem work 3 x weekly or more /1:1 mentoring daily</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to Wave 2 intervention / targeted support to address factors influencing under-achievement</td>
<td>A behaviour management programme devised in discussion with support services is implemented consistently.</td>
</tr>
<tr>
<td></td>
<td>Time for staff to evaluate/plan programmes with outside agencies</td>
</tr>
<tr>
<td>Daily interventions from an adult are required to sustain peer relationships</td>
<td>Staff needed at times to supervise pupil if he/she needs to be withdrawn or withdraws self from the classroom</td>
</tr>
<tr>
<td></td>
<td>Pupil may have had a high number of fixed term exclusions and PPE Team involvement to support their needs.</td>
</tr>
<tr>
<td></td>
<td>Regular review (at least half-termly) and multi-agency</td>
</tr>
<tr>
<td>learning for example through a nurture group approach</td>
<td>As in Band 1 staff need time to engage with a variety of professionals and agencies to address all aspects which contribute to pupil’s difficulty</td>
</tr>
<tr>
<td></td>
<td>Pupil needs support for most of the day in order to support behaviour management and focus on learning</td>
</tr>
<tr>
<td>for high levels of planning and liaison to deliver the curriculum</td>
<td>CAMHS may be involved to address mental needs for high levels of planning and liaison to deliver the curriculum</td>
</tr>
<tr>
<td></td>
<td>Time is needed for staff to work in collaboration with other schools or alternative providers to meet needs</td>
</tr>
<tr>
<td></td>
<td>Pupil may have a severe attachment disorder or other mental health need and active casework from CAMHS is needed</td>
</tr>
<tr>
<td></td>
<td>Engagement with Targeted Youth Services may be needed</td>
</tr>
<tr>
<td></td>
<td>Pupil has a detailed individual behaviour management plan to manage a number of aggressive behaviours which can include restrictive physical intervention.</td>
</tr>
<tr>
<td></td>
<td>A member of staff is needed to supervise 1:1 calming after an incident, at times, 1:2</td>
</tr>
<tr>
<td></td>
<td>Pupil is in need of therapy/counselling</td>
</tr>
</tbody>
</table>

[IL0: UNCLASSIFIED]
<table>
<thead>
<tr>
<th>working is needed to problem solve with family/carers and established consistent approaches</th>
<th>health needs/time for staff to liaise as necessary</th>
<th>at least weekly</th>
</tr>
</thead>
<tbody>
<tr>
<td>A social skills/nurturing programme is needed, delivered in small group 1:1 mentoring at times each day</td>
<td></td>
<td>Needs small group or 1:1 teaching throughout the day via a highly differentiated curriculum to engage the pupil in learning</td>
</tr>
</tbody>
</table>

For the full Banding Document please see Appendix 8
Communication and Interaction

Speech and Language Difficulties

Early language difficulties often lead to difficulties with literacy skills, social communication, and emotional development. Children with severe speech and language difficulties can only be identified by a detailed assessment of their speech, language and overall communication, cognitive processing and emotional functioning.

This section sets out thresholds and guidance in respect of children who appear to be developing normally in all other aspects of development but who have specific language impairment. Speech and language difficulties are often a feature of other Special Educational Needs, and are also considered in Sections on:

- Complex Communication Disorders
- Social, Emotional and Mental Health Difficulties
- Sensory and or Physical Needs

The definitions below are for broad guidance to teachers:

**Language** refers to the ability to understand and use vocabulary, sentence structures and grammar. This can include spoken, signed or pictorial [symbol supported] language.

**Receptive Language/Language Comprehension**
Language comprehension refers to the child’s understanding of the language, signed, written or spoken, and includes the ability to understand vocabulary, obtain meaning from the way that sentences are structured (the grammar of the language).
Expressive Language
Expressive language refers to the ability to use appropriate vocabulary, sentence structures and grammar. This can be signed, written or spoken language.

Developmental Language Delay
This describes language, which is following the normal pattern of development but at a slower rate. Language delay can affect expressive language alone or both receptive and expressive language.

Developmental Language Disorder
This describes language which is following an atypical pattern of development i.e. the child is not acquiring language skills in the typical developmental order. This can co-occur with features of language delay. A disorder can affect one or more of the following: word finding, word order, concept knowledge, questions, word endings, non-literal understanding, and inference.

Social Communication/Interaction
This describes the range of functions language can be used to perform, such as: initiating communication, requesting, responding, greeting, protesting, seeking clarification, rejecting, commenting, questioning, and protesting. This also includes other aspects of communication, such as: use of eye contact, facial expressions, proximity, volume, intonation, gesture, turn-taking, topic maintenance, awareness of listener needs. These functions are used to make and maintain appropriate relationships.

Speech Sound Difficulties
‘Speech sounds’ refers to the articulation and use of sounds in spoken words. These describe a range of difficulties affecting intelligibility of speech, such as: speech sound substitutions/omissions, inaccurate articulation, sound sequencing or blending (‘articulation’ refers to the accurate production of speech sounds). A child may have one or more speech sound difficulties. ‘Speech Dyspraxia’ is a type of articulatory difficulty in planning and co-ordinating oral movements for speech. Speech sound difficulties often lead to problems with the acquisition of literacy skills.
Universal Support - Element 1

- Assessment includes reference to academic attainments (see Cognition and learning) and routine screening using the WELLCOMM tool for children in the Early Years Foundation Stage
- Scoring red or amber on the WELLCOMM should lead to intervention
- Use of the ‘Big Book of Ideas’ activities to follow up pupils scoring amber or red on the WELLCOMM. (The activities can also be used for pupils who score green to boost their skills to the next level)
- Classroom and whole school environment modified to take account of communication and interaction needs
- Curriculum access facilitated by modification of task presentation
- Flexible use of staffing and resources to support access to teaching
- Staff model appropriate social behaviour, interaction and language use
- Appropriate differentiation of spoken and written language, activities and materials in class

SEN Support – Element 2
In addition to universal provision children require some of the following specific assessment, planning and support approaches

Assessment and Planning

- The class or subject teacher, working with the SENCO establishes, a clear analysis of the pupil’s needs
- Fine-tuned assessments such as standardised tests, profiling tools, and criterion referenced checklists are used in conjunction with progress against national curriculum descriptors. Routine use of WELLCOMM screening tool for children in Early Years Foundation Stage / KS1 is advised
- Pupil’s views on their difficulties and approaches to support are gathered and recorded (All About Me / One Page Profile)
- Parents discuss their concerns with class / subject teacher and SENCO and a focussed programme of support is planned to address areas of difficulty and specific outcomes set are recorded
- Pupil may be referred to Speech and Language Therapist (parent referral using FASTA line)
• Language is given priority in planning to facilitate effective curriculum access
• Staff are appropriately trained to implement support strategies and approaches

Intervention and Support
• Structured teaching approach and visual strategies to support curriculum and pupil’s understanding
• Verbal explanations require simplification with visual / concrete support
• Clear, simple instructions with visual support e.g. task board
• Special arrangements and teaching methods needed to accommodate difficulties with speech and language (e.g. Makaton, symbols etc.)
• Small group or 1:1 language intervention in place (3 x weekly)
• Delivery of daily Speech and Language programme (1:1)
• Pre-teaching / consolidation of new vocabulary / concepts taught in lessons

Education, Health and Care Plans Element 3
In addition to SEN Support provision children require some of the following specific assessment, planning and support approaches

Assessment and Planning
• Pupil has severe articulation difficulties / specific speech and language disorder and is regularly assessed and reviewed by a Speech and Language Therapist (termly)
• Pupil may receive additional Speech and Language Therapy input through SLCN Focus Provision outreach programme
• Speech and Language Therapy advise school on programme of support and adaptations necessary for pupil to access the curriculum
• Pupils’ articulation difficulties impact significantly on acquiring Literacy skills: please refer to other areas of need as appropriate
• Very close home-school links to ensure consistency of approaches

[IL0: UNCLASSIFIED]
• Clear individual provision plans for the use of support which relates to expected long term and short term outcomes

**Intervention and Support**

• Pupil requires a high level of language support to access the curriculum
• Special arrangements and teaching methods need to accommodate difficulties with speech and language
• Significant adaptation to materials and delivery of curriculum necessitating extra daily provision and training
• Routine use of specialist communication systems across the curriculum
• Key staff can use/teach Makaton if required
• Speech and Language programme delivered daily by trained TA under close supervision of Speech and Language Therapist

**Autism Spectrum Disorder**

Validated concern about indicators of an Autism Spectrum Disorder will trigger comprehensive multidisciplinary assessment through the Sandwell Multi-Agency Assessment (MAA) process. Children and young people with Autism Spectrum Disorders can only be identified by a detailed assessment of their social awareness and communication; expressive and receptive language skills; flexibility of thought and behaviour; cognitive processing and emotional functioning. [National Autism Plan for Children 2002]

A child or young person with an Autism Spectrum Disorder may have other special educational needs or conditions, including some degree of learning difficulty. The definitions below are for broad guidance to teachers.

**Autism Spectrum Disorders** including autism, high functioning autism and Asperger's Syndrome are pervasive developmental disorders affecting at least 4 in every 10,000 members of the population. As with other developmental disorders, the child or young person may have other Special Educational Needs. Autism
Spectrum Disorders are defined by patterns of behaviour across three core areas, known as ‘the Triad’. These three areas are social interaction, social communication and flexibility of thought and behaviour. There are usually associated differences with sensory integration and processing. The impact of these difficulties can vary dependent on cognitive ability and how the triad areas are manifested and interrelate. An autism spectrum disorder will not necessarily indicate the presence of learning difficulties. All children and young people with an autism spectrum disorder will show deficits in:

- Social understanding, impacting on social interaction
- Social communication
- Social imagination and flexibility of thought and behaviour

Implications of the Triad

Social understanding impacting on social interaction

- Difficulty making and maintaining peer relationships, interactions generally lack reciprocity
- Difficulty understanding and responding to social conventions and rules
- Lack of adaptability in social situations with a tendency to follow own agenda
- Lack of, or heightened awareness of, danger or perceived danger
- Difficulty sharing a joint focus of attention or accepting adult-directed lead
- Difficulty understanding the emotional states of self and others
- Restricted play skills

Social Communication

- Difficulty understanding and using verbal and non-verbal language to communicate, including eye contact as a social signal, gesture, body language, facial expression and intonation
• Poor topic maintenance or turn-taking during conversation
• Poor awareness and account of listener needs. Social communication skills may deteriorate in new or social situations
• Literal, pedantic, perserverative or echolalic language use or understanding
• Inappropriate behaviours or responses due to the inability to communicate thoughts, feelings or ideas
• Expressive language skills may range from limited use to superficial eloquence. Language use may be characterised by unrelated responses, a restricted range of topics or a lack of to-fro exchanges in conversation
• Difficulty understanding and using abstract aspects of language or linguistic concepts

Social Imagination and flexibility of thought and behaviour
• Does not seek out creative, representational or shared play experiences
• Restricted symbolic play; may excel with constructional play, puzzles, patterns
• Restricted range of interests or fascinations pursued in a repetitive manner
• Resistance to change with a need for routine, repetition and sameness
• Motor stereotypes, e.g. twirling, running, tiptoe walking, hand flapping
• ‘Channelled’ learning style impacting on ability to generalise skills across different situations and activities
UNIVERSAL - Element 1

Difficulties with communication and interaction may mean that children need some short term support but it should not be assumed that they have Special Educational Needs.

All children will require access to the following intervention and support:

- Classroom and whole school environment modified to take account of communication and interaction needs
- Curriculum access facilitated by modification of task presentation
- Specific use of visual communication systems e.g. visual timetable, visual prompts
- Appropriate differentiation of spoken and written language, activities and materials in class
- Whole staff awareness of the implications of communication and interaction difficulties and training in providing a good communication learning environment
- Structured approach for tasks and activities with a clear beginning and end
- Flexible grouping, seating arrangements within classroom
- Differentiated teaching to address gaps in learning, understanding and social skills

SEN Support – Element 2
Descriptor of Need

- Has restricted play and interaction skills which are not improving or are improving at a rate which gives concern
- Social awareness programmes needed
- Inflexibility of thought and behaviour impacts on access to learning and social experiences
- Has clear difficulty responding to social situations and adult direction
• Needs specific programmes to develop social skills, with support from an adult to mediate peer interactions
• Has difficulty in peer interaction and using language for social communication
• Has an over-literal response to verbal communication
• Needs interpretation and adaptation of communication by adults
• Has difficulty demonstrating appropriate empathy, or to predict the emotional response of others
• Needs adult assistance several times a day to assist in conforming to essential school routines
• See Cognition and Learning attainment guidance
• See Social, Emotional and Mental Health attainment guidance
• Inflexibility of thought and behaviour is a significant barrier to accessing learning and social experiences

Assessment and Planning
In addition to universal provision children require some of the following specific assessment, planning and support approaches

• The class or subject teacher, working with the SENCO establishes a clear analysis of the pupil’s needs. Assessment includes reference to the areas of the triad and academic attainments (see Cognition and Learning)
• Pupil’s views on their difficulties and approaches to support are gathered and recorded (All About Me / One Page Profile)
• Parents discuss their concerns with class / subject teacher and SENCO and a focussed programme of support is planned to address areas of difficulty and specific outcomes set are recorded
• Pupil may be referred to the Complex Communication and Autism Team or Speech and Language Therapist for more specialist assessment and advice
• Social interaction and communication skills are given priority in planning to facilitate effective curriculum access
• Staff appropriately trained to implement support strategies and approaches
• A Multi-Agency Assessment may be considered if the pupil has significant needs and need an
individualised curriculum. The Complex Communication and Autism Team (CCAT) will advise if this is appropriate

**Intervention and Provision**

- Teaching of specific social interaction skills and social use of language (SULP) with opportunities to generalise the skills used on a daily basis through individual and small group work
- Some adult monitoring / support to promote social skills and interactions with peers including at unstructured times
- Close home/school liaison to ensure reinforcement of strategies and the generalisation of skills
- Regular time with a key member of staff for preparation and review of routine and any changes
- Adult support used to prepare specific resources including use of ICT to support language and communication (e.g. symbol support)
- School staff use augmentative / alternative means of communication.
- Specific approaches to build understanding of abstract and figurative language
- Modifications to the teaching environment to take account of sensory sensitivities
- Visual approaches to develop social understanding (social stories, comic strip conservations)

**Education, Health and Care Plan - Element 3**

**Descriptor of Need**

- There may be a diagnosis of ASD confirmed through the Multi-Agency Assessment (MAA) of ASD
- Severely impaired social communication skills, requiring intensive and specific programmes relating to the development of social communication and interaction skills
- Unable to participate fully in the curriculum without significant adaptations of activity and delivery
- Has a profound inability to use language appropriately requiring an adult to adapt with cues, such as visual prompts and signalled routines
• Has a profound impairment of ability to show empathy or predict the emotional response of others
• Inflexibility of thought and behaviour is a significant barrier to accessing learning and social experiences and may threaten the child or young person’s safety in everyday situations
• Needs access to a low stimulus environment
• A highly individualised curriculum is required
• Pupil needs intensive programmes and strategies to develop social communication and interaction skills
• See Cognition and Learning attainment guidance
• See Social, Emotional and Mental Health attainment guidance

Assessment and Planning
In addition to SEN Support provision children require some of the following specific assessment, planning and support approaches

• Regular review and multi-agency working is needed to problem solve with family/carers and established consistent approaches
• Active and on-going assessment and support from outside agencies (e.g. SENAT CCAT, SALT, OT, EP)
• Pupil has undergone or is undergoing a Multi-Agency Assessment and has diagnosis of ASD.
• Use of specific assessments to record progress towards mastering communication and interaction skills and to plan provision (e.g. Towards Independence Hierarchy)
• Pupil may require an assessment of their sensory processing needs if in specialist provision.

Intervention and Provision
• Pupil requires a highly individualised curriculum and support throughout the day
• Pupil requires specific small group / 1:1 intervention or approaches from trained staff (e.g. Intensive Interaction strategies, TEACCH, SULP)

[IL0: UNCLASSIFIED]
• A highly structured and personalised language and interaction programme that is embedded throughout the day
• Access to reduced stimulus workstation within the classroom
• Access to low stimulus, calm area at times of stress
• A consistent approach to multi-sensory communication. Needs a Total Communication environment
• Individual programme used to manage emotional and behavioural needs throughout the day
• Individual programme used to manage sensory integration and processing needs
• Staff trained and skilled in responding to challenging behaviours
• A high level of care and supervision needed to keep the pupil, and those around them, safe
Banding descriptors for Speech, Language and Communication

The descriptors below describe the special educational needs and disabilities children may experience and the provision which helps to support those needs and remove barriers to learning.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Mild language delay&lt;br&gt;WELLCOM&lt;br&gt;Amber level 'Catch up intervention'&lt;br&gt;Pupil’s speaking and listening skills are slightly delayed in comparison to the majority of peers but is able to function in a class group&lt;br&gt;Needs a progress review at least termly from S&amp;LT&lt;br&gt;Severe articulation difficulties which impact significantly on literacy levels&lt;br&gt;Key staff can use/teach Makaton if required&lt;br&gt;Severe language impairment&lt;br&gt;3/4 word level of understanding at KS2&lt;br&gt;Needs a high level of language support to access the curriculum&lt;br&gt;Pre-teaching of the curriculum at times across the school day&lt;br&gt;PECS or equivalent communication system is used</td>
<td>WELLCOMM&lt;br&gt;Red level language impairment/S&amp;LT programme in place&lt;br&gt;Daily delivery of S &amp; L programme 1:1&lt;br&gt;In need of social skill support /development&lt;br&gt;Needs a progress review at least termly from S&amp;LT&lt;br&gt;Severe articulation difficulties which impact significantly on literacy levels&lt;br&gt;Key staff can use/teach Makaton if required&lt;br&gt;Diagnosis of ASD with some challenging behaviour despite an appropriately structured framework</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teaching staff have an awareness level/CPD re: language development; ASD</td>
<td>via a social interaction and communication skills, 3 x weekly programme group of 6/8 with 2 adults working on social communication targets</td>
<td>A language programme is delivered daily by S&amp;LT trained TA, under close supervision of S&amp;LT</td>
<td>Intensive S&amp;L intervention/access to S&amp;LT at least termly</td>
<td>engage with peers and intolerant of the proximity of others</td>
<td></td>
</tr>
<tr>
<td>Access to Wave 2 intervention / targeted teaching to address factors influencing under – achievement</td>
<td>Time for CT/TA to plan, record and evaluate progress</td>
<td>Pupil needs a Total Communication Environment to access learning effectively</td>
<td>May have a diagnosis of ASD</td>
<td>Pupil may have some difficulties and differences with sensory integration and processing affecting tolerance levels, attention and access to learning which staff have to be aware of and plan for</td>
<td></td>
</tr>
<tr>
<td>Flexible support to change/manage transitions</td>
<td>Needs support from a TA to access the curriculum in the classroom and to embed skills</td>
<td>A structured language programme is needed, for example the Social Use of Language Programme to support the development of a language of emotions</td>
<td>Pupil needs some access to small group teaching and individual support for learning</td>
<td>Pupil needs access to small group teaching and 1:1 support for learning in order to progress</td>
<td></td>
</tr>
<tr>
<td>Structured teaching approach and visual strategies needed to support the curriculum and the pupil’s</td>
<td>Needs support to promote social skills and interactions with peers particularly at</td>
<td>Pupil needs access to small group teaching and 1:6 support for learning in order to progress</td>
<td>individualised curriculum and workspace throughout the day</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pupil may have some difficulties and differences with sensory integration and processing affecting tolerance levels, attention and access to learning which staff have to be aware of and plan for</td>
<td>Pupil may be non-verbal or language use is not generally communicative</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pupil lacks shared attention and is intolerant of adult direction</td>
<td>Pupil may have difficulties and differences with sensory integration and processing affecting tolerance levels, attention and access to learning</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understanding of routines /expectations</td>
<td>Unstructured times</td>
<td>Access to withdrawal area for calming.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------------------------</td>
<td>--------------------</td>
<td>----------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff have time to liaise with outside agencies to evaluate/plan programmes</td>
<td>May need augmentative communication strategies e.g. PECs</td>
<td>Support needed to prepare for change between and within activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to support services including IS and S&amp;LT for advice and monitoring</td>
<td>Close home/school liaison needed to ensure consistency of approach</td>
<td>School staff have an awareness of the implications for ASD on learning.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Pupil needs access to reduced stimulus workstation within and outside the classroom.**

School staff have an awareness of the implications for ASD on learning. The environment is planned so that the needs of children and young people with ASD can be met.

Key staff have had additional training to support pupils with ASD.

Staff are able to deliver appropriate programmes to meet ASD needs.

Needs some teaching and support staff to have additional qualification in ASD.

Environment is adapted to reflect best practice in ASD provision.

Staff are trained in application of TEACCH and the delivery of learning programmes through this approach.

Multi-agency approach to family support.
Communication and specific speech and language disorder needs in cooperation with the LA CCD Team.

<table>
<thead>
<tr>
<th>Needs</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Speech</td>
<td>Below 3 year old age equivalent at end of KS1</td>
</tr>
<tr>
<td>Language</td>
<td>At KS2 or above language is at 1st centile but learning is 1 standard deviation higher</td>
</tr>
</tbody>
</table>

Communication skills are not functional despite Band 2 support. Severe speech and language disorder at KS2 or above.
<table>
<thead>
<tr>
<th>1/2 word level/P4 for speaking and listening</th>
</tr>
</thead>
<tbody>
<tr>
<td>School staff and SLT need to work collaboratively more than half-termly</td>
</tr>
<tr>
<td>School staff need experience and training in delivering SLT support to complex children</td>
</tr>
<tr>
<td>Pupil needs to see SLT more than half-termly in school and blocks of clinic therapy</td>
</tr>
<tr>
<td>Interventions such as SULP,</td>
</tr>
</tbody>
</table>
COSST &/or Communication Books need to be highly individualised and regularly revised
Sensory and/or Physical Need (including Medical Needs)

Physical Disabilities

The SEN Code of Practice (7:62) states, “There is a wide spectrum of sensory, multi-sensory and physical difficulties. Physical impairments may arise from physical, neurological or metabolic causes that only require appropriate access to educational facilities and equipment; others may lead to more complex learning and social needs; a few children will have multi-sensory difficulties some with associated physical difficulties. For some children, the inability to take part fully in school life causes significant emotional stress or physical fatigue. Many of these children and young people will require some of the following:

- flexible teaching arrangements
- appropriate seating, acoustic conditioning and lighting
- adaptations to the physical environment of the school
- adaptations to school policies and procedures
- access to alternative or augmented forms of communication
- provision of tactile and kinesthetic materials
- access in all areas of the curriculum through specialist aids, equipment or furniture
- regular and frequent access to specialist support
Meeting the needs of children with physical/medical difficulties

Most children with significant physical disabilities are identified, assessed and begin to receive special educational provision before they reach statutory school age. There will be some children who have a deteriorating condition, or who become disabled through illness or injury.

A very small number of children are first identified in school. These children may have difficulties dealing with the curriculum because of problems with fine and gross motor skills.

Where the physical disability is mild, but part of a complex picture of special educational needs, criteria for cognition and learning, communication and interaction, visual or hearing difficulties should be applied, as appropriate. Where a child has several areas of ‘mild’ special educational need, the interaction of these difficulties and the effect on the child’s learning must be considered.

Universal Provision – Element 1

Staff in school will need to be fully aware of the implications for learning of a child’s physical disability/medical condition. The head teacher should ensure that staff have 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.

Health care at the Universal Level is that which is provided routinely through the school or self medication, following Local Authority guidelines as presented in ‘The Management of Children with Medical Needs in Schools’ handbook and the DfE Statutory Guidance on Supporting Pupils at Schools with Medical Conditions 2014.

- Has some difficulty with social integration
- Will require specific social skills training
- May be independently mobile but needs adaptations to equipment and/or classroom
• Needs 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
• Intermittent absence for short periods
• See Cognition and Learning guidance
• See Social, Emotional and Mental Health guidance

**SEN Support – Element 2**  
**Descriptor of Need**

It may be that some children with mild physical/medical needs have a requirement for therapy that means adult support is needed from the start; for others, despite more than one term of specific SEN approaches the child with a mild degree of physical/medical needs has a need for more intervention because he/she:

• Has programmes monitored by therapists
• There is a need for planned care in the environment
• Needs weekly support from school staff and/or weekly direct therapy
• Needs support to take a full part at school
• Risk assessment shows a high level of concern
• Needs specialist equipment and/or adaptation to seating and other furniture
• Needs support to move around school and the environment
• Needs planned support 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
• Has a Health Care Plan (Refer to Management of Children with Medical Needs in Schools)
• Prolonged absence with difficulty sustaining work when returning to school
• See Cognition and Learning attainment guidance.
• See SEMH attainment guidance
• See HI and VI attainment guidance

Assessment and Planning
In addition to Universal provision children require some of the following specific assessment, planning and support approaches

• The class or subject teacher, working with the SENCO establishes a clear analysis of the pupil’s needs
• Assessment /observation by school staff indicates how child’s physical disabilities affect access to the curriculum and plan for successful modification
• Where there are suspicions of undiagnosed physical or medical difficulties, school should advise parents to seek medical advice (e.g. GP, School Nurse)
• Close liaison and consultation with external professionals such as assessment and advice from Occupational Therapy / Physiotherapy
• Pupil’s views on their difficulties and approaches to support are gathered and recorded (All About Me / One Page Profile)
• Parents discuss their concerns with class / subject teacher and SENCO and a focussed programme of support is planned together in order address areas of difficulty and specific outcomes set are recorded
• Close home-school links, so school is aware of changes in circumstances / medical condition that may impact on progress in learning

Intervention and Support

• Classroom management which responds to the pupil’s medical / physical needs
• 1:1 Physio / Occupational therapy programme.
• Adult supervision when taking medication (if appropriate)

[IL0: UNCLASSIFIED]
• Grouping strategies which are used flexibly to promote independent learning
• Classroom management which takes account of social relationships
• 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
• An appropriate programme of support to develop self-help skills such as toileting and dressing
• Measures which allow the child to negotiate the school environment safely and as independently as possible
• Intervention programme to develop social relationships (e.g. buddying, Circle of Friends)
• Appropriate use of alternative equipment to meet physical and medical needs (e.g. writing slopes, specialist scissors)
• Adult support in some areas of the curriculum (e.g. swimming, cutting, cooking)
• Support to attend educational trips and school visits

Education, Health and Care Plans – Element 3

Descriptor of need
As above with the addition of a multi-disciplinary review following a period of joint work over at least 6 months which identifies statutory assessment as a key component of the overall future plan for the child:

• Complex physical/medical conditions that need addressing through a number of agencies
• Counselling needed for social, communication and behaviour development
• Daily access to medical treatment
• Frequent prolonged absence and difficulties sustaining work when returning to school
• A highly individualised curriculum is required

[IL0: UNCLASSIFIED]
• Pupil needs intensive programmes using specialist provision
• The routine use of specialist communication systems
• See Cognition and Learning attainment guidance
• See Social, Emotional and Mental Health difficulties attainment guidance
• See HI and VI attainment guidance

Assessment and Planning
In addition to SEN Support provision children require some of the following specific assessment, planning and support approaches

In addition to universal and SEN Support a few children will also require

• Multi-agency approach taken to specialist assessment with advice leading to a more specifically focussed plan
• Rigorous qualitative and quantitative measures used as a baseline from which progress is judged
• Risk assessment shows a high level of concern
• Planned transition back to school after prolonged periods of absence due to medical condition

Intervention and Support

• Time for staff to plan/co-ordinate work of a variety of agencies
• Daily therapy programme (hydro/physio/OT/S&LT)
• Pupil needs intensive programmes using specialist provision
• Significant adult support needed for personal care / feeding/medical treatment
• A highly-individualised curriculum required
• Frequent specialist teaching and/or support at regular intervals required
• Routine use of specialist equipment (including communication systems) across the curriculum
**Banding descriptors for Physical and Medical Needs**

The descriptors below describe the special educational needs and disabilities children may experience and the provision which helps to support those needs and remove barriers to learning.

<table>
<thead>
<tr>
<th>Physical/medical</th>
<th>Physical/medical</th>
<th>Physical/medical</th>
<th>Physical/medical</th>
<th>Physical/medical</th>
<th>Physical/medical</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Universal Element 1</strong></td>
<td><strong>SEN Support Element 2</strong></td>
<td><strong>EHC Plan Element 3 Band 1</strong></td>
<td><strong>EHC Plan Element 3 Band 2</strong></td>
<td><strong>EHC Plan Element 3 Band 3</strong></td>
<td><strong>EHC Plan Element 3 Band 4</strong></td>
</tr>
<tr>
<td>Mild physical difficulties – ambulant</td>
<td>PD ambulant may have personal care needs throughout the day</td>
<td>PD ambulant/non-ambulant</td>
<td>PD –non-ambulant Needs support throughout the day with seating/positioning</td>
<td>In need of daily therapy-hydro/physio/OT/S&amp;LT</td>
<td>Severe, complex physical/medical needs</td>
</tr>
<tr>
<td>No additional learning needs</td>
<td>Medical needs e.g. supervision of insulin dosage</td>
<td>Personal care needs</td>
<td>In need of support with feeding and personal care</td>
<td>Pupil may have sensory processing difficulties related to their physical/medical needs</td>
<td>Degenerative condition in need of possible end of life care</td>
</tr>
<tr>
<td>Staff awareness of any possible impact on learning</td>
<td>Physiotherapy programme is delivered daily under supervision of therapist</td>
<td>Daily physio programme</td>
<td>Support needed for learning needs associated with physical/medical needs</td>
<td>Complex physical/medical conditions that need addressing through a number of agencies</td>
<td>In need of 1:1 at times 1:2 care to meet physical/medical/learning needs</td>
</tr>
<tr>
<td>Administration of routine medicines</td>
<td>Access to Wave 2 intervention / targeted teaching to address factors influencing under – achievement</td>
<td>Support needed to access the curriculum at times throughout the day because of physical difficulties-in need of scribe/support with use of IT</td>
<td>Support needed for learning needs associated with physical/medical needs</td>
<td>Needs small teaching group of 6 or fewer with access to 1:1 support for learning for much of the day</td>
<td>Needs small teaching group of 6 or fewer with access to 1:1 support for learning for much of the day</td>
</tr>
</tbody>
</table>
| Daily access to medical treatment | May have:  
ental feeding needs  
tracheotomy  
require oxygen/stops breathing, at times  
Frequent multi-agency meetings are required to maintain an optimum care/learning plan. |
---|---|
Frequent prolonged absence and difficulties sustaining achievement level when returning to school |
Pupil at KS 2 and above needs 1:1 support for much of the day for scribing and curriculum access. |
Hearing Impairment

Pupils with hearing difficulties range from those with mild short-term hearing impairment, to those who have permanent and profound hearing loss. Pupils with significant levels of permanent hearing impairment will normally be identified shortly after birth. The SEN Code of Practice stresses the importance of early identification, assessment and intervention; close interagency cooperation is essential. Early hearing difficulties often lead to difficulties with language development, literacy skills, social communication and emotional development.

Audiological information alone will not determine a child’s special educational needs. A wide range of difficulties are covered by the term ‘hearing impairment’; it can be difficult for non-specialists to understand the diagnostic labels and information provided, and their relevance to the teaching situation. The definitions below are for broad guidance. They are not intended to be any sort of guide as to which level of the SEN Code of Practice would be appropriate for a given pupil.

**Degrees of hearing loss (average across the five main speech frequencies in the better ear) and other descriptors**

<table>
<thead>
<tr>
<th>Description</th>
<th>dB Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mild</td>
<td>20 - 40</td>
</tr>
<tr>
<td>Moderate</td>
<td>41 - 70</td>
</tr>
<tr>
<td>Severe</td>
<td>71 - 95</td>
</tr>
<tr>
<td>Profound</td>
<td>95 +</td>
</tr>
<tr>
<td>Progressive</td>
<td>Deteriorating</td>
</tr>
<tr>
<td>Bilateral</td>
<td>both ears</td>
</tr>
<tr>
<td>Unilateral</td>
<td>one side</td>
</tr>
<tr>
<td>Asymmetrical</td>
<td>ears differ</td>
</tr>
</tbody>
</table>
Conductive Hearing Loss

This is not usually a permanent loss, but results from a block in the transmission of sound. One of the most common forms of conductive loss is ‘glue ear’. It has been estimated that as many as 20% of children have a mild conductive hearing loss at some point in their school life. The vast majority of conductive losses will resolve spontaneously. A small minority can become chronic and will have the potential to have a significant impact on a pupil’s progress.

Sensori-neural Hearing Loss

This refers to a permanent hearing impairment arising from damage to the inner ear or to the auditory nerve. It can vary from mild to profound. Most cases of sensori-neural deafness occur before birth but some can arise later in life as the result of trauma (e.g. noise) or disease (e.g. meningitis or mumps). The vast majority of children with a severe or profound sensori-neural hearing loss will have been identified and assessed audiologically before they reach school age. Some children have a conductive loss in addition.

Universal Level - Element 1

All children should have access to:
- Curriculum differentiated appropriately to meet their needs
- Personalised learning targets
- Appropriate classroom and whole school listening environment (good classroom acoustics and lighting, seating so that they can see and hear the teacher)
- All adults and children encouraged to talk at the appropriate volume and pitch for learning to take place.
- Flexible grouping arrangements

If a member of the school staff or a parent raises concerns about a pupil’s hearing it is important that medical opinion is sought in the first instance.

[IL0: UNCLASSIFIED]
If hearing difficulties are consistently observed, please meet with the parents and encourage them to take their child to the GP for a referral to audiology.

In the meantime, please call the Sensory Support Team for advice on appropriate interim teaching strategies and classroom management.

If the pupil’s difficulties appear acute or severe please contact the Sensory Support Team immediately for advice.

Once a referral has been made to, and accepted by, the Sensory Support Team the pupil will be assessed within four working weeks. The assessment will be undertaken by a qualified teacher of the deaf (TOD).

Following the assessment if the pupil is taken onto caseload they will move to use School Based SEN Funding.

**SEN Support – Element 2**

In addition to Universal provision children require some of the following specific assessment, planning and support approaches.

**Assessment and Planning**

- The class or subject teacher, working with the SENCO establishes a clear analysis of the pupil’s needs
- Assessment /observation by school staff indicates how child’s hearing difficulties affect access to the curriculum and plan for successful strategies to help them engage and make progress
- Where there are suspicions of on-going hearing difficulties school should advise parents to seek medical advice
- Teacher of the deaf undertakes specialist assessments, discusses progress and gives advice
- Relevant information about child’s hearing difficulties is shared with all relevant staff
- Staff receive training on awareness and effective strategies
• Close liaison and consultation with external professionals such as assessment and advice from Speech and Language Therapy
• Pupil’s views on their difficulties and approaches to support are gathered and recorded (All About Me / One Page Profile)
• Parents discuss their concerns with class / subject teacher and SENCO and a focussed programme of support is planned together in order address areas of difficulty and specific outcomes set are recorded
• Close home-school links, so school is aware of changes in circumstances / hearing that may impact on progress in learning

**Intervention and Support**

• Critical that the pupil is grouped according to ability regardless of sensory loss
• Class / subject teacher should take account of identified barriers to learning, which relate to the pupil’s hearing impairment (both environmental and curricular). These will have been discussed with the TOD
• Named person responsible for upkeep and safe keeping of audiological equipment
• Access to additional targeted teaching in small groups, or 1:1 on a daily basis if appropriate
• Language programme implemented with advice from Teacher of Deaf or SALT
• Specific pre-tutoring of subject based concepts and vocabulary
• Help in acquiring, comprehending and using speech and language in structured and unstructured settings
• Opportunities to improve social skills, interaction, communication skills and self esteem
• Literacy strategies devised and implemented with advice from the Teacher of Deaf to compensate for reduced linguistic experience due to language delay
• Help to develop language and literacy skills through appropriate differentiation of oral and written language, activities and materials
• Adjustments to ensure the listening environment takes account of individual needs
• Specialist equipment to improve listening skills (e.g. radio aids, sound-field systems
• Access to ICT as necessary (e.g. appropriate software including Co-writer, Kidspiration, Clicker)
• Regular home/school liaison to enable vocabulary/language development and maintain audiological equipment
Education, Health and Care Plan – Element 3

Descriptor of Need
A multi-disciplinary review following a period of joint work over at least six months which identifies statutory assessment as a key component of the overall future plan for the child:

- Profound and severe impairment requiring intensive input from services
- Additional learning difficulties in the areas of learning/cognition/communication/physical/behavioural needs
- A highly individualised curriculum is required
- Expressive language may not be intelligible to an unfamiliar listener
- The routine use of specialist communication systems and languages (e.g. Sign Supported English or BSL)

Provision outside that which is normally delivered in a mainstream school will be considered. This could be a Resource Base or a School for the Deaf to take account of specialist expertise and specially adapted environment. Please see Banding.

Assessment and Planning
In addition to SEN Support provision children require some of the following specific assessment, planning and support approaches

- Outside agencies regularly contribute to assessment and planning leading to a more specifically focused plan
- Close home-school links, so school are aware of changes in circumstances that may impact on hearing
- Rigorous qualitative and quantitative measures should be used as a baseline from which progress is judged
- Specialist assessments may include Early Support Monitoring Protocol, Ski-Hi, TELD, ACE, TROG, BPVS
- For some children, a co-ordinated multi-agency approach is necessary

[IL0: UNCLASSIFIED]
**Intervention and Support**

- Access to more highly focussed specialist programmes of support
- Highly structured and individualised learning programme
- Individual programmes used to support learning throughout the day
- A greater emphasis on language development, auditory training and communication skills
- Additional language and communication systems may be used (e.g. Makaton / BSL)
Visual Impairment

Children with visual impairment range from those with mild visual difficulties to those who are born blind or lose sight through illness or trauma. Children with severe visual impairment will normally be identified in the first year of life but there are some conditions that do not typically present until adolescence.

Early difficulties affect emotional development, social adjustment, communication, curiosity, motivation, exploratory learning, listening skills, language development, and movement. Figures from the Royal National Institute of the Blind (RNIB) suggest that up to 65% of visually impaired children have significant additional difficulties, of which physical difficulties are the most common.

Where visual impairment is mild, but part of a complex picture of special educational needs, criteria for cognition and learning, physical, language or hearing difficulties should be applied, as appropriate. Where a child has several areas of “mild” special educational need, the interaction of these difficulties and the effect on the child's learning must be considered.

A wide range of difficulties is covered by the term ‘visual impairment’. It can be difficult for non-specialists to understand the diagnostic labels, the nature of the condition, and their relevance to the teaching situation. The definitions below are only for broad guidance.

Children with a severe visual loss may be registered as sight impaired or severely sight impaired. A consultant ophthalmologist certifies the child and Social care enter the child on the register. Registration is optional but generally has some wider benefits for the child and family.

Sight Impaired

This term is generally used to describe pupils who have vision useful for school tasks, but who require some adaptations to teaching approaches and some modifications to curriculum materials. Children may have a
moderate to severe loss of vision. The degree to which differentiation is needed will vary according to both the
degree of vision loss and the interrelationship between vision loss and any additional learning difficulty.

Severely Sight Impaired

This term relates to those children with a severe loss of vision, some of whom will be blind. Only a few blind
children will have total vision loss. A significant number of teaching approaches and all curriculum materials will
require modification.

Educationally Blind

This is an educational term referring to children who need to be educated primarily by non-sighted methods,
using tactile and auditory means. A child who is educationally blind will generally use a tactile code such as
Braille. All teaching approaches and curriculum materials will require modification.
There are a small group of children who may use both large print and Braille. A child may for example be able to
manage to read large print at an early stage but may have a poor visual prognosis necessitating that Braille is
taught as a back-up strategy. Similarly, a few children manage to access maths through very large print/numbers
but are unable to cope with subjects such as English in print due to the volume of print needed.

Range of Visual Impairments

There are wide ranges of conditions that can affect a child's vision. Many children with a visual impairment have
more than one condition affecting their eyesight. Conditions can be stable, deteriorating, or occasionally,
improving.

Visual loss can affect acuity (ability to see detail both near and far); field of vision (the amount seen in the left,
right, upper, lower, central and peripheral fields); colour vision, contrast sensitivity and light sensitivity.
Universal - Element 1

All children should have access to:
- Curriculum differentiated appropriately to meet their needs
- Personalised learning targets
- Appropriate classroom and whole school listening environment (lighting, seating so that they can see and hear the teacher)
- All adults and children encouraged to talk at the appropriate volume and pitch for learning to take place.
- Flexible grouping arrangements

If a member of the school staff or parent raises concerns about a pupil's vision it is important that medical opinion is sought in the first instance.

If visual difficulties are consistently observed, please meet with the parents and encourage them to take their child either to the GP for a referral to the hospital or to their local opticians.

In the meantime, please call the Sensory Support Team for advice on appropriate interim teaching strategies and classroom management.

If the pupil's difficulties appear acute or severe please contact the Sensory Support Team immediately for advice.

Once a referral has been made to, and accepted by, the Sensory Support Team the pupil will be assessed within four working weeks. The assessment will be undertaken by a qualified teacher of the visually impaired (QTVI). Following the assessment if the pupil is taken onto caseload they will move to the School Based SEN Funding Level.
SEN Support – Element 2

In addition to universal provision children require some of the following specific assessment, planning and support approaches.

Assessment and Planning
- Pupil likely to have a moderate visual impairment
- The class or subject teacher, working with the SENCO establishes a clear analysis of the pupil’s needs
- Assessment /observation by school staff indicates how child’s visual impairment affects access to the curriculum and plan for successful strategies to help them engage and make progress
- Qualified Teacher of the Visually Impaired (QTVI) undertakes specialist assessments, discusses progress and gives advice
- Further specialist assessment of child’s access to ICT, mobility and independence needs by QTVI
- Relevant information about child’s visual impairment is shared with all relevant staff
- Staff receive training on awareness and effective strategies
- Time for staff, e.g. termly to monitor, plan record and evaluate progress with the Sensory Support Teacher
- Pupil’s views on their difficulties and approaches to support are gathered and recorded (All About Me / One Page Profile)
- Parents discuss their concerns with class / subject teacher and SENCO and a focussed programme of support is planned together in order address areas of difficulty and specific outcomes set are recorded
- Close home-school links, so school is aware of changes in circumstances / vision that may impact on progress in learning

Intervention and Support
- Support needed to differentiate aspects of the curriculum e.g. some enlargements of texts, positioning within classroom
- Pupil may need low level specialist resources e.g. raised table top, hand held magnifier, IAB monitor
- Access to specialist ICT equipment
- Use of auditory reinforcement
- Appropriate seating arrangements with adjustments made to ensure pupil has a good listening environment
- Pupils may experience additional behavioural/ learning needs which may compound moderate VI
- Small group work/mentoring to address learning needs and to support social and emotional needs in developing peer relationships
- Grouping strategies used flexibly to promote independence
- Classroom management which is responsive to the pupil’s visual impairment
- Equal access to the curriculum and out-of-hours learning opportunities
- Preview and review of lesson content so VI pupil can access the lesson
- Alternative PE and sports programme to be in place where appropriate

**Education, Health and Care Plan – Element 3**

**Descriptor of Need**

School, in consultation with parents and Sensory Support Team, decide that despite the additional interventions and modified curriculum access the pupil's levels of attainment are continuing to be impaired by their Sensory loss.

- Attainment levels below expectation despite significant intervention and good practice
- Pupil suffers deterioration of sensory loss impacting on attainment/or safety
- Pupil suffers sudden and severe sensory loss. School and Sensory Support Team gather portfolio of evidence to request Education, Health and Care Plan
- Severe or profound impairment requiring intensive input from services

[IL0: UNCLASSIFIED]
- Visual impairment with complex difficulties in the areas of learning/cognition/communication/physical/behavioural/emotional
- A highly individualised curriculum is required
- The routine use of specialist communication systems, e.g. Braille across the curriculum

Provision outside that which is normally delivered in a mainstream school will be considered. This could be a school for visually impaired pupils to take account of specialist expertise, a specially adapted environment, a modified curriculum, small teaching groups or a combination of all these.

Assessment and Planning
In addition to SEN Support provision children require some of the following specific assessment, planning and support approaches

- Outside agencies regularly contribute to assessment and planning leading to a more specifically focused plan
- Close home-school links, so school are aware of changes in circumstances that may impact on vision
- Rigorous qualitative and quantitative measures should be used as a baseline from which progress is judged
- For some children, a co-ordinated multi-agency approach is necessary

Intervention and Support

- Access to more highly focussed specialist programmes of support
- Highly structured and individualised learning programme
- Individual programmes used to support learning throughout the day
- High level of adult support to ensure safety and mobility
- Pupil will need all curriculum materials modifying into accessible formats
- Time for school & VI staff to jointly modify planning and curriculum access (weekly sessions)
Banding descriptors for Sensory Needs

The descriptors below describe the special educational needs and disabilities children may experience and the provision which helps to support those needs and remove barriers to learning.

<table>
<thead>
<tr>
<th>Sensory</th>
<th>Sensory</th>
<th>Sensory</th>
<th>Sensory</th>
<th>Sensory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Element 1</td>
<td>Element 2</td>
<td>Element 3 Band 1</td>
<td>Element 3 Band 2</td>
<td>Element 3 Band 3</td>
</tr>
<tr>
<td>Likely to present with suspected mild or unilateral hearing loss or mild to moderate visual loss</td>
<td>Moderate HI Likely to present with moderate hearing loss (between 40 and 70dB) and to be issued with hearing aids and possibly other supportive technology which are used effectively</td>
<td>Moderate to Severe VI Likely to present with visual acuity of 6/24 to 6/48 and /or have a very significant field loss e.g. hemianopia</td>
<td>Severe VI Likely to present with visual acuity of 6/48 to 3/60 and /or have a very significant field loss e.g. hemianopia</td>
<td>Educationally Blind Pupil will be accessing the curriculum primarily through non-sighted methods egg Braille.</td>
</tr>
<tr>
<td>GP referral to audiology/ophthalmology must be sought if hearing/visual difficulty is suspected</td>
<td>HI child may need pre and post tutoring to address</td>
<td>Pupil will need all curriculum materials modifying into accessible formats</td>
<td>Pupil will need weekly specialist</td>
<td>Pupil needs 1:1 support to access the curriculum plus MSA to ensure safe inclusion at lunchtime</td>
</tr>
<tr>
<td>Assessment by sensory support team in 4 weeks following referral to a ToD or QTVI</td>
<td></td>
<td>Pupil will need numeracy,</td>
<td></td>
<td>Pupil will need school</td>
</tr>
<tr>
<td>Sensory team give interim advice on strategies</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

[IL0: UNCLASSIFIED]
<table>
<thead>
<tr>
<th>Access to Wave 2 intervention / targeted teaching to address factors influencing under-achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Moderate VI</strong> Support needed to differentiate aspects of the curriculum e.g. some enlargements of texts, positioning within classroom. Able to work independently for much of the time with appropriate materials. Pupil may need low level specialist resources e.g. literacy &amp; ICT at primary, science/DT/ICT at secondary. Pupil will need significant level of resources modifying. Pupil will need ongoing, periodical specialist Mobility &amp; Independence support. Pupil will need a range of specialist resources, e.g. laptop with accessibility software, electronic magnifier. Pupil will need high level of 1:1 support for access to learning and resource modification. Likely to present with severe hearing loss (70 – 95)**</td>
</tr>
<tr>
<td><strong>Mobility &amp; Independence support &amp; weekly specialist ICT input</strong> Pupil will need a range of specialist resources, e.g. laptop with accessibility software, electronic magnifier. Pupil will need significant level of resources modifying. Pupil will need ongoing, periodical specialist Mobility &amp; Independence support. Pupil will need a range of specialist resources, e.g. laptop with accessibility software, electronic magnifier. Pupil will need high level of 1:1 support for access to learning and resource modification. Likely to present with severe hearing loss (70 – 95)**</td>
</tr>
<tr>
<td><strong>High levels of specialist equipment for example, brailler, Braille Note, speech software</strong> Pupil will need weekly plus support from a QTVI (e.g. 3 teaching sessions per week) and weekly sessions from specialist VI ICT and Mobility &amp; Independence support. Time for school &amp; VI staff to jointly modify planning and curriculum access (weekly session). Profound hearing loss (&gt;95 dB) / Blind/MSI</td>
</tr>
</tbody>
</table>

*IL0: UNCLASSIFIED*
<table>
<thead>
<tr>
<th>Raised table top, hand held magnifier, IAB monitor</th>
<th>Pupils may experience additional behavioural/learning needs which may compound moderate VI.</th>
<th>Magnifier, IAB monitor</th>
<th>Pupils may experience additional behavioural/learning needs which may compound moderate VI.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time for staff, e.g. termly to monitor, plan record and evaluate progress with the Sensory Support Teacher</td>
<td>Severe delay in language and communication skills (as measured by appropriate assessments*). Speech is largely intelligible to familiar listeners but may contain some articulation errors which could impact on intelligibility for unfamiliar listeners.</td>
<td>Severe HI</td>
<td>Likely to present with severe to profound hearing loss (75 - &gt;95dB). Will have high output hearing aids or may be fitted with cochlear implant. Other assistive technology will be needed (e.g. personal FM systems).</td>
</tr>
<tr>
<td>Small group work/mentoring to address learning needs and to support social and emotional development</td>
<td>Hearing loss causes significant delay in language and communication.</td>
<td>Severe delay in language and communication skills (as measured by appropriate assessments*). Speech is unintelligible to most listeners</td>
<td>Hearing aids or cochlear implant fitted. Other assistive technology (e.g. personal FM systems in use).</td>
</tr>
<tr>
<td></td>
<td>Language and communication delay may be compounded by inconsistent use of hearing</td>
<td></td>
<td>Will have additional complex needs in terms of learning and behaviour.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Very severe delay in expressive and receptive language and communication skills (as measured by appropriate assessments*). Speech is unintelligible to most listeners.</td>
<td></td>
</tr>
</tbody>
</table>
| emotional needs in developing peer relationships | skills (as measured by appropriate assessments*) but speech is largely intelligible to all listeners. Regular support to access the curriculum is needed at times throughout the day. Pupils may experience additional behavioural/learning/communication needs and will need according to assessments according to age. | aids and other assistive technology. Regular 1:1 support required throughout the week for pre and post tutoring and to ensure that the curriculum is suitably differentiated in terms of language and cognitive level. May have additional learning or physical difficulty. * According to age assessments include Early Years assessments and coupled with significant deficits in expressive language skills making speech difficult to understand for all listeners. Poor use of hearing aids and assistive technology may negatively impact initiatives to close language and communication gap. Additional language and communication systems may be used (e.g. Makaton / BSL) according to age assessments. | Additional language and communication systems in use. If not in specialist provision will need full-time 1:1 support throughout the day for pre and post tutoring and to ensure that curriculum is suitably differentiated in terms of language and cognitive level. Additional mobility problems. According to age assessments.
| Assessments include Early Support Monitoring Protocol, Ski-Hi, TELD, ACE, TROG, BPVS | Support Monitoring Protocol, Ski-Hi, TELD, ACE, TROG, BPVS | Is likely to need 1:1 support for much of the day for pre and post tutoring and to ensure that curriculum is suitably differentiated in terms of language and cognitive level. | Include Early Support Monitoring Protocol, Ski-Hi, TELD, ACE, TROG, BPVS |

* According to age assessments include Early Support Monitoring Protocol, Ski-Hi, TELD, ACE, TROG, BPVS.
Process and Procedures

Moving a pupil to SEN Support

- The decision to provide a pupil to SEN support is one which will be made by the school, in discussion with parents and the pupil.
- Parents must be formally notified.
- When evaluating whether a pupil needs a more intensive level of intervention i.e. a move to SEN support schools should consider:
  - Is there a group of pupils in this class/year group who are experiencing this difficulty?
  - Have teachers had the continued professional development (CPD) they need to teach this cohort of pupils?
  - Does the pupil need improved quality first teaching or is an intervention at Wave 3 required?
  - Are there other factors that might be causing underachievement and have they been addressed through Wave 2 intervention / targeted teaching (see chapter on identification)?
- Recognising that a pupil needs intervention at a more intensive level does not mean that the resource will be immediately available. A school may be running intervention programmes and 1:1 support, which utilises all the existing resource.
- Schools will need to use active provision management to ensure that they can meet a range of pupil needs within a reasonable time frame i.e. support pupils via timed interventions with clear outcomes which are reappraised termly, rather than lifetime programmes. New pupils may then be brought into interventions.
- If the school chooses to use funding for in class support, it should be purposeful, targeted and built upon good quality teaching. Support should not be used to facilitate task completion but focus on the student’s learning. The school should be confident about how any in class support is accelerating the pupil’s progress.
Pupils

- Pupils should be involved in the discussions around their progress, where possible, visual representations of progress should be used.

- A pupil is entitled to a child friendly, individualised programme with outcomes that they can understand and have been involved in developing. School must record outcomes and action and may choose to use the ‘All About Me’ document and subsequent action plan provided. See appendix 3.

- Even very young children or those with serious communication difficulties should be offered choices using photographs, objects etc.

Parents

- Parents should be involved in a discussion with the class / subject teacher supported by the SENCO to develop a shared understanding of the pupil’s strengths and difficulties, agree outcomes for the child and the next steps to meeting these outcomes (intervention). This discussion may be recorded on the “All About Me” document and subsequent action / provision plan.

- Class teacher and/or SENCO should explain fully to the parents the additional and different provision that will be put in place.

- Parent’s views should be sought before interventions are put in place and they should be kept informed about progress (three reviews per year).
**Requesting an Education, Health and Care Assessment**

When evaluating whether a greater level of resource is needed to meet the pupil’s needs, i.e. to request an EHC Plan Assessment. Schools need to consider whether the interventions they are using are:

- Evidence based / nationally recognised Wave 3 interventions
- Being delivered by staff who have been appropriately trained
- Being consistently delivered by staff
- Closing the attainment gap between the child and their peer group
- Enabling the child to make progress at the expected rate

Schools are also required to evidence the use of their Notional SEN Budget funding in supporting the pupil and clarify how any additional funding will accelerate progress.

Schools also need to evidence the use of external agencies (e.g. ECP, Special Advisory Teachers, Therapists) in providing specialist assessment of needs and the implementation of the resulting recommended strategies, approaches and programmes.

Before a request for an Education, Health and Care assessment can be made, the school must organise a Community Assessment meeting, so that pupils, parents and professionals working with the child can discuss the best ways to support the pupil.
Community Assessment Meeting (CAM)

What is it?

It is a meeting of pupil, parents / carers, school and the professionals who have been working with a pupil.

The purpose of the meeting is for the school and professionals to explore pupil and parental views, to set agreed outcomes and plan how provision should be adapted or replaced in order to achieve these outcomes.

The meeting will usually be informal, the pupil / parent should be asked about how and where the meeting will be set up by the SENCO.

It can take place in a venue chosen by the parent, in the school, in a community centre, at home as long as the chosen place can accommodate the number of people you wish to invite. Please see appendix 2 for an example of an invitation letter.

In order to prepare for the meeting, parents will be given a form by school that they can complete at home or at school in discussion with a member of staff. Pupils will also need to be prepared.

Professionals at the meeting who have been working with the child should provide a report which should be no more than 6 months old. Reports should be delivered to school 2 weeks before the CAM, so that the SENCO can distribute them to parents / those attending the meeting 3 working days before the meeting takes place.

Arranging a CAM Meeting

It is the SENCO’s responsibility to invite parents, professionals and pupils to the CAM meeting. This includes
CAM meetings that are initiated as a response to a parental request to the local authority for an EHC needs assessment.

Where possible, SENCOs should identify and discuss those pupils who may require an EHC Plan needs assessment to members of Inclusion Support at the Autumn SAP meeting so that necessary work can be planned and carried out before the CAM meeting.

If school is initiating a CAM meeting, SENCO’s need to be mindful of providing all parties with at least 6 weeks notice of the date.

School staff should explain the purpose and structure of the meeting to parents. They should also offer support to parents in completing paperwork for the meeting (parent views and medical questionnaire).

School should support pupils to complete the “All About Me” or One Page Profile.

SENCO’s will also need time to gather school evidence.

**The meeting**

The people at the meeting will consider what is happening now for the pupil, what is good about it and what is not going so well through a series of questions.

**Who is here? Who else was invited? Who else is important to......?**  
**What do we like and admire about …?**  
**What are our hopes and dreams for….?**  
**What is important for…?**  
**What is important to…?**  
**What is working well?**  
**What do we need to develop?**  
**What are our short-term outcomes?**
What are our long-term outcomes?
What are our next actions?

The meeting will start with the child’s or young person’s views.

How views should be presented at the meeting will be discussed with the child, if they are old enough/able to have an opinion, and their parents.

If the pupil is very young their views could be presented by their parent and/or a support worker telling the people at the meeting what they are like, what they find difficult and what is important to them. It could be written down before the meeting for people to read.

For an older pupil, this might be face to face with a preferred adult accompanying them such as a member of support staff, via a video or presentation or presenting a written view.

A set of outcomes will be formulated in discussion with the pupil, parents and colleagues at the meeting, together with the support and programmes needed to order to achieve them.

At the meeting, it will be decided if those outcomes can be achieved with the existing SEN Notional Budget resources, or whether an Education Health and Care plan should be requested to access additional funding.

If an EHC Plan is to be requested a date will be set for any additional assessments to be completed. This will be no more than 6 weeks from the CAM.

If the decision is not to request an Education Health and Care Plan, a plan of support using resources from the school’s notional SEN budget and any other resources from the wider Local Offer that are relevant to needs, is agreed upon. If there are additional assessments required, then the SENCO will ask the professionals/agencies to conduct them and provide reports. A date to review the plan should be set at the end of the CAM.
If parents/child are not happy with a plan from the SEN Notional Budget, they can still choose to request an Education, Health and Care Plan. However, the SENCO will need to ask the parent for their reasons and include these in their paperwork for requesting an EHC Plan.

If requesting an EHC Plan the school will gather the information and reports into the LA set format (evidence file) and send it into SEN at the LA within 6 weeks of the CAM. See appendix 3 for evidence file paperwork.

The LA will consider the evidence sent to SEN at an Assessment and Moderation Panel and parents will be informed if the decision is to assess for an EHC Plan or not within 2/4 weeks. See appendix 4 for information about the Assessment and Moderation Panel.
Transfer Reviews 2017

The local authority has until April 2018 to transfer existing Statements of SEN to Education and Health Care Plans. Until then Statements of SEN will provide the same legal protection as now.

In order to meet this Dfe deadline, the local authority has changed some of the processes and procedures around deadlines. Please refer to the separate leaflet: Transfer Reviews 2017: Information for schools for details on process amendments and deadlines.

Process for Transfer Reviews

1. Schedule of pupils who need a Transfer Annual Review
   - The schedule of which pupils will have a Transfer Review will be discussed at the school SAP meeting at the start of the academic year 2017.
   - The pupils due to transfer will be graded for ECP / SENAT input by the SENCo and staff at school
   - The SENCO and member of Inclusion Support (IS) staff will set a proposed date for the Transfer Review within the academic year.

2. Agree dates for the Transfer Annual Review
School will contact child/young person, their parents/carers and representatives from the school/setting, health service, social care to agree the proposed date and confirm (or make alternative date) with named member of IS staff.

Those professionals actively involved in supporting or monitoring the child/young person should be
asked to supply a report which is less than 6 months old.

3. Engage with parents/carers and child/young person
Schools should meet with parents/carers to talk through the Transfer Annual Review process using transfer guidance leaflet or information within the Parents Guide on the Local Offer. Additional support is available from the Transfer Team in the SEN Service.

4. Support for parents/carers and child/young person
Parents/carers should be supported to complete the ‘Transfer Annual Review – Parent’s Views’ document if required.

5. Completion of one page profile
Schools should work with the child/young person to complete/update their one page profile / All About Me document.

7. Transfer Annual Review Meeting
The Transfer Annual Review meeting considers the child or young person’s progress towards achieving the previous objectives in the statement; the positives and any concerns. The meeting will be chaired by a designated member of Inclusion Support. A Transfer Review officer from the SEN service will provide an outline Education Health and Care plan, based upon the information provided before the review, for the participants to discuss and amend. The meeting should focus upon and agree the outcomes for the child/young person until the end of the next phase of education and consider whether any changes need to be made to the child’s/young person’s provision detailed.
If a change of placement is recommended or requested by the parent or young person then the preference of school should be recorded, however decisions around placement are not made at this meeting. Discussions around the personal budget and/or direct payments should take place and should be recorded. N.B.
For Year 9 onwards the EHC Transfer Annual Review meeting must consider what provision is required to prepare the young person for adulthood, including employment, independent living, friends and community and

[IL0: UNCLASSIFIED]
good health. This will need to be included within the appropriate parts of the EHC Plan. At the meeting the focus is on considering the range of options and support available to them.

9. Education Health and Care decision-making
Within 4 weeks of the Transfer Annual Review meeting the SEN Service will decide whether to transfer the statement to an EHC Plan, or cease to maintain the statement, and notify the child’s parent, young person and school/setting.

If the decision is not to transfer the statement to an EHC Plan and to cease the statement, the draft plan will be issued as an SEN Support Plan; any discussion of the content of the plan should then be between parents, the young person and the school, college or other educational establishment. The SEN Service will cease to be involved.

If the EHC Plan is converted, the SEN Service will consider all the information in relation to the allocation of resources, including consideration of possible personal budgets, and transport. The Education Health and Care Plan will be considered at the EHCP resource meeting and/or Provision Panel if appropriate, in order to agree provision, funding and placement.

The SEN Service will send a copy of the existing statement with the draft EHC Plan, including copies of any reports, to the parent or young person, the school and all those involved. If a change of placement is considered necessary, then this will include details of schools being consulted.

The parent/carer of the child/young person (and the young person if aged over 16) will be informed that they can request a meeting with an SEN Officer to discuss the draft EHC Plan. Parents or young person will be given 15 days to comment and make representations.

The SEN Service will consult with the governing body of the school or setting to be named on the plan and school will be given 15 days to respond.
The SEN Service must issue a final EHC Plan within 20 weeks from the start of the transfer process. This will confirm placement, provision or personal budget (if applicable). A copy of the final EHC Plan will be sent to parents and school. The SEN Service will notify parent or young person of their right of appeal and time limits as well as the requirement to consider mediation.

The EHC Plan, once issued, will be reviewed annually.

For Transfer Review paperwork, see Appendix 5
Annual review of an Education, Health and Care Plan

Guidance Notes for Writing and Running Annual Reviews of Education Health and Care Plans

The Aims of Annual Review of Education, Health and Care Plans

- To make sure that at least once a year the parents, the pupil, the LA, the school and all the professionals involved monitor and evaluate the continued effectiveness and relevance of the outcomes and provision set out in the Education, Health and Care Plan.
- To assess the pupil’s progress towards meeting the objectives specified in the Education, Health and Care Plan and progress towards meeting the targets agreed and recorded in the pupil’s interim plan.
- To collate and record information which the school and other professionals can use in supporting the pupil.
- To review the special provision made for the pupil (including the appropriateness of any resources provided) in the context of his/her access to the National Curriculum and associated assessment and reporting arrangements.
- To review the nature of the provision made available to the pupil with reference to the skills and qualifications required from any support staff.
- To review the pupil’s need for transport to and from school and provide a clear rationale for any such provision and record that Independent Travel Training is considered at reviews post 12 years of age.
- To consider the continuing appropriateness of the Education, Health and Care Plan in the light of the pupil’s performance during the previous year and any additional special needs which may have become apparent in that time. This would include consideration whether to cease to maintain the Education, Health and Care Plan or whether to make amendments, including any further modifications or disapplication of the National Curriculum; and
- To set new interim targets for the coming year – if the Education, Health and Care Plan is to be
maintained; progress towards those targets will be considered at the next Annual Review. The continued relevance of the outcomes of the plan should be considered.

Summary of Procedures and Regulations

Before the Annual Review

- The LA must write to all Head teachers no less than two weeks before the start of each term with a list of all pupils on roll at their school who will require an Annual Review that term. The LA also sends similar lists to the CCG (Clinical Commissioning Group) and LA officers responsible for social care for children with SEN and disabilities and Inclusion Support.

- The Head teacher or delegated teacher (SENCo) initiates the review process upon receipt of the termly list of Annual Reviews from the LA. People invited to contribute to and attend the review should be given at least 4 weeks’ notice.

- To prepare the review report the Head teacher / SENCo must convene a meeting and request written advice from:
  - the pupil;
  - the pupil’s parents, (if the pupil is looked after by the local authority, under a care order, the pupil’s social worker and the residential care worker or foster parents, should be invited as appropriate);
  - a relevant teacher, who may be the pupil’s class teacher or form/year tutor;
  - the SENCO, or some other person responsible for the provision of education for the pupil, the choice resting with the Head teacher;
  - a representative of the placing LA, if appropriate;
  - any person who the LA considers appropriate and specifies in a notice;
  - any other person the Head teacher considers appropriate;
• Forms SEN/AR/P (parents) and SEN/AR/C (pupils) should be used, but schools should choose to use their own means of encouraging contributions from pupils and parents.

• Where a parent does not respond to invitations to contribute in writing to the review, or to attend a review meeting, that information should be recorded in the review report with any reasons given.

• For pupils who are the subject of a care order, the Local Authority will have parental responsibility. The extent of the contribution to be made by the pupil’s parents and the pupil’s carers should be determined in consultation with LA Social Care officers. Where the LA is aware of the existence of a care order a copy of the initial letter will be sent to the Director of Children’s Services (as the person with parental responsibility). In all cases of pupils who are the subject of care orders, the LA will expect the Head teacher/SENCo to seek a written contribution to the review from the pupil’s social worker or key worker.

• For pupils who are “looked after” by the Local Authority (ie placed with foster parents or in a children’s home), or for whom the Local Authority have “shared” parental responsibility, the extent of the contribution to be made by the pupil’s parents, foster parents, key worker, should be determined in consultation with those responsible for social care. As above, the LA will expect the Head teacher / SENCo to seek a written contribution from the pupil’s social worker.

• Form SEN/AR/School is the school’s contribution to the Annual Review. This must be completed before the meeting. Additional documents such as data summary sheets and travel assistance review should also be included where appropriate.

• For pupils in special schools or when the EHC Plan involves modification or disapplication from the National Curriculum, form SEN/AR/School should be used so far as is relevant. A school’s own format may be appended for Section 6 (Attainment/Achievement/Progress) when this is more appropriate to the needs of an individual pupil.
• All advice should relate to the pupil’s progress towards meeting the outcomes stated in the Education, Health and Care Plan and any interim targets established at the last Annual Review to help meet the outcomes.

Medical Reports
The Consultant Community Paediatrician has established the following procedure for medical reports (other than for paramedical services). On the medical report for Education, Health and Care Plans the Senior Clinical Medical Officer (SCMO) will record in the recommendations section which category, for Annual Review purposes, the pupil falls into:

- No medical input required to Annual Review unless new problem develops. School Health Nurse to review with school staff annually.
- Medical report required for Annual Review. SCMO to review notes and discuss with school/school nurse annually to determine whether attendance at annual medical examination/review necessary.
- Medical attendance at Annual Review necessary.

• On receipt of the Education, Health and Care Plan, its issue date and the pupil’s medical review category should be recorded on the Child Health System together with the review date and a reminder to review notes 2 months before the date of the Annual Review.

• At least 2 weeks before the date of the review meeting the Head teacher / SENCo must circulate a copy of all the advice received to all those invited to the review meeting.
The Review Meeting

- The review meeting will normally take place in the pupil’s school and should be chaired by the Head teacher / SENCo.

- Using all the information gathered and the current EHC Plan, the review meeting should consider the following:
  - the parents’ views of the past year’s progress and their aspirations for the future;
  - how the pupil thinks they have progressed and how they feel;
  - the pupil’s overall progress over the past year, especially in relation to each special educational need and how support has been deployed;
  - the pupil’s progress towards meeting the overall outcomes set out in the Education, Health and Care Plan;
  - the successes the pupil has achieved in meeting the interim targets and comments upon effective strategies/learning style etc.;
  - for Year 9 and subsequent reviews, is the EHC plan ensuring progress towards employment, friendship, good health and independent living.
  - current levels of attainment in the National Curriculum in literacy and mathematics, science and ICT;
  - comments upon any continuing difficulties, noting successful strategies;
  - any significant changes in the pupil’s circumstances;
  - any changes in the pupil’s special educational needs;
  - any changes to requirements for equipment, aids and access;
  - transport provision should be considered with reference to SEN transport policy.

- The following issues should also be considered and discussed, and consequent recommendations should be recorded with reasons:
any new interim targets to be set to meet the long term outcomes of the Education, Health and Care Plan;
any changes in strategies to support the pupil;
the level of inclusion of the pupil within their school community and strategies for further development;
if the pupil is currently in specialist provision – is the pupil ready to be included in a mainstream environment? This could be a gradual move to full integration or part-time as appropriate.
is the Education, Health and Care Plan still needed to achieve inclusion, either within the current school community or in mainstream and if it is, does it need amendment. Please be clear about the reasons for any amendment.
does the Education, Health and Care Plan remain appropriate?
should the LA continue to maintain the Education, Health and Care Plan?
should the LA be recommended to cease to maintain the Education, Health and Care Plan, as the pupil’s needs can be met appropriately through the SEN Delegated Budget?
should the LA be recommended to amend the Education, Health and Care Plan?
are the current transport arrangements (if any) still appropriate and if so, why?
is any further action required and if so, by whom?
are there any other significant recommendations?

Amendments to an Education, Health and Care Plan are likely to be recommended if:

- significant needs which are recorded on the Education, Health and Care Plan are no longer present;
- it is considered that the provision should be amended to meet the pupil’s **changing** needs and the targets specified at the review meeting;
- the pupil’s needs would more appropriately be met in a different school.

Any recommendations for amendments should be fully discussed at the meeting and recorded on the current EHC Plan electronically using track changes in Word.
• Where there is likely to be a suggestion of a change in the pupil’s needs and therefore a possible change in provision following the Annual Review the LA requires **written advice** to the Annual Review from a member of the Inclusion/Sensory Support Service, and preferably attendance at the review meeting.

• Representatives from the LA will aim to attend Annual Reviews on the following basis:
  - Sandwell Special Schools
  - at key stage transition points
  - where a change of provision is likely to be requested

Extra District Schools
  (i) Residential - annually
  (ii) HI/VI provision - annual by Sensory Support team
  (iii) Other provision - when major change is anticipated

• Where a change of school is in prospect, either by type or phase, then it is desirable for the receiving school to be invited to the review meeting if the direction is clear. Otherwise a specific meeting may be necessary at a later date to ensure full discussion between the receiving school, parents, pupil (as far as possible) and all the agencies involved to facilitate a smooth transfer, ongoing provision and support as necessary.

• The review meeting and the review report may also recommend that the LA should cease to maintain the Education, Health and Care Plan if the pupil’s needs can be met within the SEN notional budget.
Following the Review Meeting

- Following the Annual Review meeting the Head teacher /SENCo must prepare a report (form SEN/AR/S&R) which summarises the outcomes of the review meeting and sets out targets for the coming year. This report must be circulated to all concerned in the review, including the LA, parents, pupils and any relevant professionals. When sending the review report electronically to the LA, all other written advice should be included (School contribution, pupil views, parent’s views, outside agency reports).

- Regulations state that the review meeting report must be submitted to the LA no later than 10 school days after the review meeting or the end of the school term in which the report was requested, whichever is the earlier.

- The EHC Plan produced for the Annual Review in Year 9 and updated in subsequent years should ensure that adequate arrangements for post-16 and ongoing school provision are made.

- The LA concludes the review process by considering the report of the review meeting and the recommendations prepared by the Head teacher / SENCo. The LA must review the Education, Health and Care Plan, in the light of the review report and of any other information they consider relevant. The LA then make their own recommendations and convey these to the pupil’s school, parents and agencies invited to the review meeting, before the statutory deadline for review. Please see Appendix 10 for the Annual Review Timeline.

[IL0: UNCLASSIFIED]
Early or Interim Annual Review

Parents and schools can ask for an annual review meeting to be brought forward, if the child / young person’s EHCP is more than 6 months old. This is called an early or interim annual review. The reasons for calling an early or interim annual review are as follows:

- The child/young person is at risk of exclusion or permanent exclusion.
- There has been a sudden or rapid change in the child/young person’s health, developmental needs or social care needs and their special educational needs are no longer accurately described in their EHC plan.
- The education, health or social care provision in the EHC plan no longer meets the child/young person’s changing needs.
- There was a recommendation from the previous annual review to increase monitoring of the child/young person’s needs and provision.
- Parents have expressed a wish to educate their child at home.

The process and paperwork for an emergency annual review remains the same, in most respects, as a typical annual review. However, it is important to note the following factors:

- School will initiate the interim annual review in discussion with parents.
- Statutory SEN Services must be informed of interim annual review meeting, the reasons why the meeting has been brought forward and be invited to attend.
- Timelines for preparation before the interim annual review may be shorter as they may be dictated by the child’s needs or situation e.g. if the child / young person is at risk of permanent exclusion or had a sudden
deterioration in health. School should liaise closely with parents and external agencies to set a date for the interim annual review meeting and appointments prior to the meeting to gain additional evidence.

- External agencies involved with the child / young person must be invited to the meeting and provide a written report if the health or social care needs of the pupil has changed.
- The caseworker from Inclusion Support (ECP / SENAT) must attend the meeting and contribute a written report. It is desirable that the IS member of staff is actively involved with the pupil prior to the emergency review meeting to assess their current needs and school’s use of additional support
- If a change of provision or placement is being sought, school’s contribution paperwork must show in detail, how the element 2 and element 3 funding is being used in order to implement the provision set out in the current EHCP and the progress towards outcomes

Students at Risk of Exclusion

Where a school has concerns about the behaviour, or risk of exclusion, of a child with additional needs, a pupil with an EHC plan or a looked after child, it should, in partnership with others (including the local authority as necessary), consider what additional support or alternative placement may be required. This should involve assessing the suitability of provision for a pupil’s SEN. Where a pupil has an EHC plan, schools should consider requesting an early annual review or interim/emergency review.

Exclusion from maintained schools, academies and pupil referral units in England, DfE, 2017

If school has a student with an EHCP who is at risk of permanent exclusion, then they should:
- Contact the education child psychologist / SENAT SEMH to review schools current provision and child / young person’s needs and provide further advice.
- If the pupil is in primary school, there should be Preventing Permanent Exclusion Promoting Social Inclusion (PPEPSI) meeting to discuss strategies and support to prevent the exclusion
- Call an early/interim annual review inviting parents, pupil, SEN Service, Education and Child Psychologist /
Students where parents wish to educate their child at home

Parents have a duty to ensure their child, receives a full-time education from the age of five. Most parents choose to send their child to school; however, they can choose to take full responsibility and home educate.

Parents must ensure that their child receives education that is suitable to their age, ability, aptitude and any other special needs they have.

The right to home educate applies equally to children with an Education Health and Care Plan (EHCP) as with all children. However, if the child is on the roll of a special school the child’s name may not be removed from the register of that school without Local Authority consent. Consent may not unreasonably be withheld.

If parents of a child / young person with an EHCP expresses a wish to educate their child at home, then school should contact SEN Service and the elective home education teacher and call an interim annual review. School should invite: parents, child, SEN Service, Education and Child Psychologist, the elective home education teacher and other external agencies to the interim annual review. Please see Appendix 12 the elective home education flow chart.

Please contact home_education@sandwell.gov.uk or call 0121 569 8147 for further advice and support.
Initial Concerns Record

Appendix 1
Initial Concern Record Form
(To be completed by class teacher)

Teacher Name ………………………..Year Group ………………

Pupil Name: __________________________  D.O.B: __________________________

Attendance: __________________________  Home Language: __________________________

Achievement Data over Time

<table>
<thead>
<tr>
<th>Autumn 1</th>
<th>Autumn 2</th>
<th>Spring 1</th>
<th>Spring 2</th>
<th>Summer 1</th>
<th>Summer 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>R</td>
<td>W</td>
<td>M</td>
<td>R</td>
<td>W</td>
<td>M</td>
</tr>
<tr>
<td>R</td>
<td>W</td>
<td>M</td>
<td>R</td>
<td>W</td>
<td>M</td>
</tr>
<tr>
<td>R</td>
<td>W</td>
<td>M</td>
<td>R</td>
<td>W</td>
<td>M</td>
</tr>
</tbody>
</table>

Emerging Difficulties

Additional formative assessment to identify gaps in learning

Targeted teaching / learning strategies that have been implemented
Impact of targeted teaching / learning strategies

Parents Views

Pupils Views

Outcome of meeting to consider placement on school’s SEN record
(to be completed by SENCo)

Agreed by

Parent:  Teacher:
SENCo:  Date:
SEN Handbook 2017
Revised September 2017

Community Assessment Meeting Invitations

Appendix 2
Part 1 The Community Assessment Meeting

A key part of the new process is a Community Assessment Meeting which is intended to gather parents and professionals to share their knowledge and understanding of and with the child or young person and decide the outcomes they will strive for in terms of employment, friends and living in the community and independence.

You must hold a CAM before requesting an Education Health and Care Plan.

Documents to explain the CAM to parents and letters to invite professionals to a meeting are included.
Dear Parent

This letter explains the Community Assessment Meeting to you. As we have discussed we think it will help us to decide together the next steps in supporting…………………………… (child’s name)

Community Assessment Meeting
It is a meeting of parents, school and the professionals who have been working with your child.

The purpose of the meeting is for the school and professionals to listen to what you and your child’s hopes for the future are and what you feel about what is happening now.

Where will the meeting be held?
The meeting will usually be informal, the SENCO or SEN Officer will ask you how you would like it to be set up; it can be more formal if you prefer.

It can take place in a venue chosen by you, in the school, in a community centre, at home as long as the chosen place can accommodate the number of people you wish to invite.

What do I need to do to prepare?
You will be given a form to record your views by school. You can complete this form at home or at school in discussion with a member of staff.
You will also be given a medical questionnaire to complete in order to determine whether or not your child’s progress at school is affected by a medical condition

What reports can I expect to have for the meeting?
Professionals at the meeting who have been working with your child will have written a report, which should be no more than 6 months old. You should have a chance to read any new reports before the meeting. They should be given to you or sent to you a few days before.

The meeting
The people at the meeting will consider, with you, what is happening now for your child, what is good about it and what is not going so well through a series of questions.
The child or young person’s views
The meeting will start with the child’s or young person’s views. This will be prepared before the meeting and may be read or shown via a video or presentation. The way their views are presented will be discussed with the child or young person and yourself to ensure the best way is chosen. You should be comfortable with how this will be done at the meeting.

If the child is very young their views could be presented by you and/or a support worker telling the people at the meeting what they are like, what they find difficult and what is important to them. It could be written down before the meeting for people to read.

For an older child, this might be face to face with a preferred adult accompanying them such as a member of support staff, via a video or presentation or presenting a written view.

There are then a series of questions, which everyone in the group will discuss

What do we like and admire about …….? What’s important for….?

What’s important to…….? What’s working well? What are the issues and questions that need to be addressed? Actions?

Developing a plan
A plan to achieve the hopes you and your child have will be developed. There will be a set of outcomes chosen by you and your child in discussion with the colleagues at the meeting, together with the support and programmes needed to achieve them.

At the meeting, it will be decided if those outcomes can be achieved with the existing Local Offer resources, or whether an Education Health and Care plan should be requested to access additional funding.

Decision about an EHC Plan request
If an EHC Plan is to be requested a date will be set for any additional assessments to be completed. This will be no more than 6 weeks from the CAM.
If the decision is not to request an Education Health and Care plan, you should be happy that the action plan developed as an alternative can be delivered by the people in the group. If you are not happy at the end of the meeting, you can still choose to request an Education, Health and Care Plan.

If there are additional assessments required for the plan, then the SENCo will ask the professionals/agencies to supply reports.

**When will the EHC request be sent to the LA by the school?**
If requesting an EHC plan the school will gather the information and reports into the LA set format and send it into SEN at the LA within 6 weeks of the CAM.

**What happens when the request for an EHC reaches the LA?**
The LA will consider the evidence sent to SEN at an Assessment and Moderation Panel and you will be informed if the decision is to assess for an EHC or not within 6 weeks.

The next step is for you to let us know where you would like the CAM to be and then we can decide on a date together. Please ring ............ or e-mail.........as soon as possible.

Best wishes
You may wish to work with the child and their family to personalise this invitation.

Invitation to a Community Assessment Meeting

Community Assessment Meeting for …Name …. DoB

Dear Colleague,

You are invited to (child’s name) Community Assessment Meeting at which the key outcomes for (child’s name) will be discussed and decided upon with (child’s name) and their parents, (names of parents or those with parental responsibility).

……………….. (child’s name) meeting is on ………………… (date) at…………………..(time)
……………… (child’s name) has chosen to have their meeting at……………………. (location)

This is a person-centred meeting so that it is important that any report for the meeting is submitted by ……………….. (date 2 weeks before the date of the CAM) as reports will be shared prior to the meeting. Please return them to (SENCO name) at (School address)

If you have made an assessment and written a report which is less than six months old at the time of the CAM, then there is no need to complete a new report for the meeting, otherwise you are requested to update the information so that it is relevant to (child’s name)’s current needs

We will get reports out to you to read at least 3 working days before the CAM, please read them before you come as there is no opportunity to read reports once the meeting starts.

At the meeting, we will decide whether ……… (child’s name)’s needs and desirable outcomes can be met from the Local Offer resource including the SEN Notional Budget, or whether a request for an EHC Plan will be made.

This meeting is really important to……….. (child’s name) and they have requested that you are there; please make every effort to attend.
Best wishes
Requesting an Education, Health and Care Plan
Paperwork Pack

Appendix 3
**Paperwork for Education, Health and Care Plans**

SEN devolved funding is up to £6,000 per pupil (Element 2 funding) and is intended to be used for those who have needs which cannot be met from AWPU (Element 1 funding which is currently around £4,000).

The total amount of devolved funding each school receives is determined by a formula. The elements of the formula, which the LA applies, are set out by the DfE. Schools have been consulted on the exact way in which the formula is applied.

Before requesting an EHC schools should be able to demonstrate the processes and interventions put in place to support the child in order that he/she can make progress; costs of support will be in excess of £6,000. This SEN Handbook contains a wealth of advice and the Assessment and Moderation Panel will expect to see evidence that it has been utilised prior to requests for EHC being made.

A key part of the new process is a Community Assessment Meeting which is intended to gather parents and professionals to share their knowledge and understanding of and with the child or young person and decide the outcomes they will strive for in terms of employment, friends and living in the community and independence.

You must hold a CAM before requesting an Education Health and Care Plan.

Documents to explain the CAM to parents and letters to invite professionals are in **Appendix 2**
1. Checklist

Name of Child: 

Date of Birth: 

UPN: 

Yr Group: 

Ethnicity: 

Religion: 

Address: 

School: 

Parent/Carer name: 

Parent phone no: 

Is this pupil looked after? 

Please use this form as a checklist to ensure that vital evidence is not overlooked. It may help you to refer to the SEN Handbook.

<table>
<thead>
<tr>
<th>Category of Need</th>
<th>SpLD</th>
<th>MLD</th>
<th>SLD</th>
<th>PMLD</th>
<th>ASD</th>
<th>SLCN</th>
<th>SEMH</th>
<th>VI</th>
<th>HI</th>
<th>PD</th>
<th>MSI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary SEND</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional SEND</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The following must be included:

Please indicate whether included or being sent at a later date: 

YES | To be sent

2. All About Me – one page profile developed by/with the child and pupil view (must be completed by Yr.9 pupils and older)

3. Parent views:
<table>
<thead>
<tr>
<th></th>
<th>Included</th>
<th>Yes</th>
<th>To be sent</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.</td>
<td>School views:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Medical questionnaire</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Community Assessment Meeting - summary documents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Attendance – Please include a print out of attendance. If pupil’s attendance is below national, please include a brief description of actions taken by school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Interventions – Evidence of interventions used, their outcomes and impact. Evidence required from the last 3 terms. Evidence should include IEP/Individual provision plans or equivalent and school reviews with parent and pupil. Schools must include a costed provision map to show how school funded is being used</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Data Summary Sheet – Schools can choose to use their own data formats or the one provided by the Local authority. School may need to explain their teacher assessment system i.e. D2 = pupil on track to achieve D Grade at GCSE. ID = pupil working towards Yr. 1 age related expectations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>Professional Development Record This relates to staff training that is specific to the pupils needs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>Outside agency support/ service reports Please show who is involved and details of any reports. This includes reports from Health and Social Care. It is expected that support services will have been actively involved and that their advice has been put in place. Reports included must be recent, written within the last 6 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support Services</td>
<td>Involved</td>
<td>Date of Report</td>
<td>Enclosed</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>----------</td>
<td>----------------</td>
<td>----------</td>
</tr>
<tr>
<td>(a) Educational Psychologist</td>
<td></td>
<td></td>
<td>YES</td>
</tr>
<tr>
<td>(b) Learning Support SENAT L</td>
<td></td>
<td></td>
<td>NO</td>
</tr>
<tr>
<td>(c) Behaviour Support Team</td>
<td></td>
<td></td>
<td>YES</td>
</tr>
<tr>
<td>(d) Specific Learning Difficulties Team</td>
<td></td>
<td></td>
<td>NO</td>
</tr>
<tr>
<td>(e) Complex Communication Disorder Team</td>
<td></td>
<td></td>
<td>YES</td>
</tr>
<tr>
<td>(f) Sensory Support (HI or VI)</td>
<td></td>
<td></td>
<td>NO</td>
</tr>
<tr>
<td>(g) Medical/Health (hospital consultant etc)</td>
<td></td>
<td></td>
<td>YES</td>
</tr>
<tr>
<td>(h) CAMHS</td>
<td></td>
<td></td>
<td>NO</td>
</tr>
<tr>
<td>(i) SALT</td>
<td></td>
<td></td>
<td>YES</td>
</tr>
<tr>
<td>(j) Occupational Therapy</td>
<td></td>
<td></td>
<td>NO</td>
</tr>
<tr>
<td>(k) Physiotherapy</td>
<td></td>
<td></td>
<td>YES</td>
</tr>
<tr>
<td>(l) Looked After Children’s Team</td>
<td></td>
<td></td>
<td>NO</td>
</tr>
<tr>
<td>(m) Children Social Care Team</td>
<td></td>
<td></td>
<td>YES</td>
</tr>
<tr>
<td>(n) Early Help</td>
<td></td>
<td></td>
<td>NO</td>
</tr>
<tr>
<td>(o) Others – Please give details</td>
<td></td>
<td></td>
<td>YES</td>
</tr>
</tbody>
</table>

Please indicate whether included: YES NO

12. Family Support from school
13. Any other relevant information

Please return electronically to SEN Statutory Service via WebXchange ref no 3333332 as a Word Document

Signed: [Name]  Designation: [Designation]
Date: [Date]
2. All about me

- Insert picture here
- My name is:
- I was born on:
- Today’s date:

- What do people like and admire about me……..

- What are my hopes and dreams
What is **important to** know about me........... (what I like and enjoy; what I have difficulty with)

What is **important for** me or what are the best ways to help me?
2. Pupil View

Learning and Employment
What job do I want to do?
What do I want or need to learn next at school?

Being independent
What would I like to be able to do by myself when I am older?
Where would I like live?

Making friends
What do you like doing with your friends outside of school?
What would help you have more fun in school and outside of school?
Do you belong to any clubs? Do you go to any after school activities?

Signed: ____________________  Date: ____________________
3. Parent views

Parent/Carer name: 
Parent/Carer name: 
Childs name

Child’s DOB: ___________  Date: ___________

Tell us about your child
Every child is unique; so, you may not have much to say about some of the questions below. You do not have to answer all the questions and there is a box at the end for you to add anything else you think is important.

1. **General health** what is your child’s SEN or disability and how does it affect you and the family at home, eating and sleeping habits, any health difficulties?

2. **Is your child able to be active at home?** Walking, running, climbing - riding a bike, football etc.;
3. **What is your child able to do by him or herself?** The nature of your child’s difficulties may mean he/she needs constant support; if they are able to do things for themselves – what can they do; dressing, eating, activities, playing?

4. **How well does your child make themselves understood and understand others at home?** Level of speech, can explain, describe events, people, is able to share information, follow instructions

5. **How does your child like to spend time at home?** Watching TV, helping, reading, playing on the I-Pad/computer, belonging to clubs, walking the dog, sporting activities
6. How does your child behave at home?

7. What are your hopes and dreams for your child?

8. Is there anything else we should know about the best ways to support your child?

Signed: 

Date:
4. School’s view of the pupil
Please complete the following

Background history of the pupil (e.g. entry to school, how many schools attended, medical history if known)

Current level of attainment and gap between peers e.g. XXXXX is in Yr 7 and is working at Yr 1 curriculum level for reading, Yr 2 for writing

Brief Description of Needs (pupils difficulties and how this impacts on their education)

Cognition and learning:

Speech, language and communication:
Social and emotional wellbeing:

Self-care and independence skills:

Physical development and sensory needs:

Expected outcomes by the end of the pupil’s next phase of education (if the pupil receives additional funding).
Outcomes should focus on specific areas of need. For Yr 9 pupils onward focus should also be place on learning and employment, independent skills/ independent living, health and having friends/living in the community (where appropriate)
5. Medical Questionnaire

To inform an Education, Health and Care Assessment

As part of the Education, Health and Care Assessment process, the Local Authority is required to seek medical advice. This is because we need to determine whether or not your child’s progress at school is affected by a medical condition. The medical advice for this purpose is co-ordinated by the Community Paediatrician (School Doctor). This can be done by using the information you provide on this questionnaire and liaison with relevant medical professionals.

In most cases completion of the questionnaire provides all the information we require, which means a medical appointment will not be necessary unless you specifically request one. It would therefore be helpful if you would complete and return this form to school as soon as possible, or to sen_team@sandwell.gov.uk

If, having considered the medical information you provide, the School Doctor concludes that a medical examination is recommended, the school health service will contact you directly to offer an appointment.

Personal Details:

Child’s name: ________________________ DoB ______________

Childs NHS Number: ________________________

Parents/Carers Name: ________________________

Parents/Carers: ________________________

Address: ________________________

Email address: ________________________

Parent/Carer to sign (I also give permission to use my email address)

Signed: ________________________  Signed: ________________________

Date: ________________________
**Medical History:**

<table>
<thead>
<tr>
<th>Question</th>
<th>Space for Input</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does your child have any existing diagnoses?</td>
<td></td>
</tr>
<tr>
<td>Do you have any concerns regarding your child’s health?</td>
<td></td>
</tr>
<tr>
<td>Is he/she under a consultant?</td>
<td></td>
</tr>
<tr>
<td>If so, please give the consultant’s name and the name of the hospital/clinic</td>
<td></td>
</tr>
</tbody>
</table>

*Please send any reports you would like the Doctor to see when you return this questionnaire*

<table>
<thead>
<tr>
<th>Question</th>
<th>Space for Input</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is your child on any medical treatment? Please give details:</td>
<td></td>
</tr>
<tr>
<td>Does your child’s health pose any risk to them or to others in the school environment? If so, what?</td>
<td></td>
</tr>
<tr>
<td>Is there any family medical history you would like to share?</td>
<td></td>
</tr>
</tbody>
</table>
Is there anything else you think we should know?

Parental Responsibility Declaration

Please tick as appropriate:
We are/I am satisfied that the information we/I have provided identifies my/our child’s current health/medical needs.  

Please list health professionals involved and attach any medical reports, letters etc. from the last 2 years

<table>
<thead>
<tr>
<th>Medical Professionals Name</th>
<th>Title</th>
<th>Medical Department</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

We are/I am concerned that my/our child may have additional medical needs that have not been identified and would like an appointment for my/our child to see a Paediatrician as part of their assessment.
**Declaration and consent to share information**

The information provided in this application will be used to ensure that the council’s records are correct. It may also be shared with other agencies and service providers to ensure that your child receives an appropriate service. Further medical information may be sought if appropriate.

I confirm that I have read and understood all the information included in this request. I certify that the information, which I have provided, is correct.

<table>
<thead>
<tr>
<th>Signed</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(parent/guardian):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Signed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(parent/guardian):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please return this completed form to the school before the Community Assessment Meeting.
Please include the following:

6. Community Assessment Meeting – summary document from Inclusion Support

7. Attendance – Please include a print out of attendance. If pupil attendance is below national, please include a brief description of actions taken by school

8. School Funded Intervention / Provision and its impact for the last 12 months.

   This must include:

   - costed provision map for the last 12 months
   - specific outcomes for interventions listed including in-class support
   - impact of the interventions listed (entry / exit data)
   - notes from termly provision review meetings with parents

9. Data Summary Sheet - School can either use the data summary sheet in appendix 11 or use their own. The panel will be looking for progress over time. The following information must be included:

   - Results for statutory end of key stage assessments (includes early years)
   - Current teacher assessment data (for the last 12 months)
   - Any specific specialised assessment carried out by school as part of the graduated approach (standardised reading assessment, criterion based assessment e.g. phonic skills, observation based assessments e.g. Boxall Profile, The Framework for Independence

10. External Agency Reports

    - Must include a recent GAM from a member of Inclusion Support
    - Any reports from therapies, health or social care
    - Reports should be no more than 6 months old
11. Professional Development Record

This form details the recent training staff have had which is relevant to the needs of the pupil who is the subject of this request

<table>
<thead>
<tr>
<th>Training date</th>
<th>Personnel</th>
<th>Training event</th>
<th>Training provider</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
12. Family Support Record

<table>
<thead>
<tr>
<th>Pupil’s Name:</th>
<th>DoB</th>
<th>Class</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date and time spent</th>
<th>Issue</th>
<th>Advice/action to be taken</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
13. **Other relevant information**

There is no need to submit information in this section or to justify not adding further information.
Submitting your request for an Education, Health and Care Plan

Before sending in your evidence file check that elements 1-13 are included in the correct order and, if you are not submitting evidence in any section, the reasons are clearly stated. The evidence file will be returned to you if there are elements missing and no reason is included. The evidence should be titled, dated, and ordered according to the checklist so that colleagues checking your submission can find the information easily.

Your completed paperwork should be returned to SEN via WebXchange using reference no 3333332

Glossary Categories of need

**SpLD - Specific Learning Difficulties**
Use this category if the child has a diagnosis of dyslexia, dyspraxia, dyscalculia etc

**MLD - Moderate Learning Difficulties** - a child is working at a significantly lower cognitive level than their peers

**SLD - Severe Learning Difficulties** - a child is likely to be working at upper P levels or just above at the end of KS4

**PMLD - Profound and Multiple Learning Difficulties** - a child who will work P3ii/P4 or below by the end of KS4

**ASD - Autism Spectrum Disorder** - use this category if the child has had an Multi Agency Assessment and had a diagnosis-if not then use SLCN

**SLCN - Speech, Language and Communication Needs** - articulation difficulties, specific language disorders, autism spectrum difficulties prior to diagnosis.

**SEMH, Social, Emotional and Mental Health** - Attention, Deficit Hyperactivity Disorder (ADHD), attachment disorder, pupils receiving support from CAMHS

**VI - Visual Impairment**

**HI - Hearing Impairment**

**PD - Physical Disability** – children with physical disabilities and/or medical needs

**MSI - Multi Sensory Impairment** – child has severe visual and hearing impairment-deaf/blind
SEN Handbook 2017
Revised September 2017

Principles for decision making in Assessment and Moderation Panel

Appendix 4
Principles for decision making in statutory process-the Assessment and Moderation Panel

- The process should ensure that children have the support that they need to access the curriculum and to make progress.
- The process should ensure that there is a fair distribution of resources for children with additional needs.
- The panels must be representative of a range of professionals who are prepared to acquire the necessary knowledge through attending training, to contribute effectively.
- Panels must be representative to take place and panel members must find a trained substitute if they are unable to attend because this is a statutory process which must adhere to set timelines.
- Parent representatives, who are suggested by Parent Partnership and trained, are included in the panels.
- It is expected that schools will release staff for the agreed number of panels.
- Panels will be chaired by the Local Authority and the LA has the final decision if the panel cannot reach a consensus.
- The LA provides a training session for participants.
- Evidence and paperwork needs to be clear, concise, consistent and of high quality following a set model.
- Paperwork will be checked by SEN prior to the panel meeting and returned to the school if elements are missing.
- The decisions will be impartial and advocacy will not be permitted.
• Panels are confidential and discussions must not be disclosed to third parties; all participants will be reminded of this at the start of the proceedings.

• Panel decisions will be sampled and moderated termly.

• Panels will meet throughout the year every 2/3 weeks to meet statutory timelines.

• All participants in panels must agree to keep the discussions and decisions confidential.

• Panels will consist of:
  – Parent(s) x 2
  – School representatives x 4 at head teacher and senior manager attendance is encouraged
  – Educational Psychologist
  – SEN Advisory Teacher for Learning and/or Behaviour, Sensory
  – Health
  – LA Chair from SEN

• We will strive to ensure that there are at least 5 attendees for the panel to take place and schools must be represented other than when panels have to run in the summer holidays due to statutory timelines.
SEN Handbook 2017
Revised September 2017

EHC Transfer Review Pack

Appendix 5

1. Checklist of Information for EHC Plan Transfer Review
2. Pupil views (One Page Profile + Pupil View)
3. Parent views
4. School Preparation of EHC Transfer
5. Data Summary

Please send this information to the Transfer Review Team. If you have not received all the reports, ask for them to be sent directly to the Transfer Review Team at SEN Service, Connor Education Centre, Connor Road, West Bromwich B71 3DJ

Please send completed Appendix 5 via WebXchange, as a word document, using ref T3333332
# Checklist of Information for EHC Plan Transfer Review

People invited to attend the Transfer Review Meeting

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Checklist

Please attach the following paperwork: (tick or n/a)

1. One page profile + pupil view
2. Parent comments
3. School Preparation to EHC Plan Transfer Review (including individual provision plans, reviews and data summary information since the last Annual Review)
4. Education Support Service advice that has been received since the last review
5. Medical reports that have been written since the last review
6. Social Care reports that have been written since the last review
7. Travel Assistance Review (if applicable)
8. Any other relevant information

Name of person completing paperwork:

Signature of Head Teacher: ___________________________ Date Signed: ____________

**Data Protection:** The information you provide on this form is subject to the provisions of the Data Protection Act 1998. Where applicable information entered will be forwarded to the relevant officer for action or for a reply to be given.
2. All about me

All About Me!

My name is:

I was born on:

Today's date:

What do people like and admire about me.......

What are my hopes and dreams
What is important to know about me .......... (what I like and enjoy; what I have difficulty with)

What is important for me or what are the best ways to help me?
2. Pupil View

Learning and Employment
What job do I want to do?
What do I want or need to learn next at school?

Being independent
What would I like to be able to do by myself?

Making friends
Outside school I ...........
I would have more fun if.........
I like to do ......with my friends......
My EHC plan needs to help me make friends so that I can ...........
3. Parent View

Parent Name: ___________________________  Date: ___________________________
Child’s Name: ___________________________  Child’s DOB: _______________________

Tell us about your child

Every child is unique; so, you may not have much to say about some of the questions below. You do not have to answer all the questions and there is a box at the end for you to add anything else you think is important.

General health; How does your child’s SEN or disability affect you and the family at home, eating and sleeping habits, any health difficulties…….

Is your child able to be active at home and in the community? Walking, running, climbing, riding a bike, football etc
What is your child able to do by him or herself? The nature of your child’s difficulties may mean he/she needs constant support in: dressing, eating, activities, playing etc.

How well does your child make themselves understood and understand others at home? Level of speech, can explain, describe events, people, is able to share information, follow instructions….

How does your child like to spend time at home? Watching television, reading, playing on the I-Pad/computer, belonging to clubs, walking the dog, sporting activities….
**How does your child behave at home?** Co-operates, shares, listens to and carries out requests, helps in the house. Relationships with parents, brothers and sisters; with friends; with other adults (friends and relations) at home. How are they when you take them out?

**How is your child progressing in school?** What is working well? What are your concerns?

**What are your hopes for the future?** What do you want for the next phase of your child’s education?
Is there anything else that you think we should know? Do you have any concerns?

Signed: 

Date: 
4. Please note: This form must be completed electronically in ‘Microsoft Word’– we can no longer accept handwritten documents.

1. The teacher who knows the pupil best should complete this report. This is likely to be the class teacher or SENCO. Contributions from other school staff involved with the pupil may be appended.

2. Information entered on the form should be that which is applicable to the period since the last review, or the date of the Statement if this is the first review.

3. Please comment on the pupil’s progress towards the objectives set out in the statement and the effectiveness of the provision.

### 1. Basic Details

<table>
<thead>
<tr>
<th>Surname of Pupil:</th>
<th>Date of Birth:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Forenames:</th>
<th>Male/Female:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>UPN:</th>
<th>Tel No:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Present School:</th>
<th>Year Group:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Parent(s)/Guardian(s) Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address (if different from above):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Legal Status of Child:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ethnic Origin:</th>
<th>Religion:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Language Spoken at Home:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

### 2. SEN Details

2.1 Date of Statement:

<table>
<thead>
<tr>
<th>Date of last review:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of this transfer review meeting:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>
2.2 Evaluative comments on pupils current SEN needs (their difficulties and how this impacts on their education).

Cognition and learning:

Speech, language and communication:

Social and emotional wellbeing:

Self-care and independence skills:

Physical development and sensory needs:

2.3 What progress has been made towards achieving the objectives in their Statement of SEN?

2.4 What interventions are in place in school from the SEN delegated budget and the LA ‘top up’ funding?

Please include the cost and impact of each intervention and whether the intervention needs to continue. For example:
<table>
<thead>
<tr>
<th>Intervention/Provision</th>
<th>Impact/Progress</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>e.g. social skills programme targeting the need to develop 2 or 3 friends</td>
<td>Programme has run twice i.e. 20 weeks.</td>
<td>Group of 6 2x LSP 2x 30 mins per week + 30 mins planning £82.25</td>
</tr>
<tr>
<td></td>
<td>• Incidents in playground reduced from 10 per week to one or two</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Pupil is regularly playing with one other child</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Need to continue this programme</td>
<td></td>
</tr>
</tbody>
</table>

### Identified outcome / area of need:

<table>
<thead>
<tr>
<th>Intervention/Provision</th>
<th>Impact/Progress</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Identified outcome / area of need:

<table>
<thead>
<tr>
<th>Intervention/Provision</th>
<th>Impact/Progress</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2.5 **Level and type of support provided by school and LA (SEN notional budget, additional top up funding, MSA)**
2.6 Transport arrangements (if any)

Is transport provided? Yes... No....
If secondary age and yes, please detail plans towards independent travel

Attendance

2.7 Actual [_________] Possible [_________] % [_________]
If attendance is/was below 90% please state reason and action taken

3. Other agencies involved and/or contributing to review

<table>
<thead>
<tr>
<th>Agency</th>
<th>Name</th>
<th>Report required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational Psychologist</td>
<td></td>
<td>Yes  No</td>
</tr>
<tr>
<td>SENAT (L or SpLD)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SENAT (SEMH)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sensory Support Service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complex Communication and Autism Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exclusions Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Attendance officer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children in Need Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children with Disabilities Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Transitions Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Early Help</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LACE Team</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Speech and Language Therapist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CAMHS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occupational Therapist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physiotherapist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Connexions Service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Others (please list)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4. Attainment/Achievement/Progress

4.1 Data Summary Sheet
Please attach a data summary sheet that shows a direct comparison of pupil attainment and progress for the last 12 months. The data summary sheet should include the use of school’s own specific assessments for pupil such as standardised tests for reading / spelling and criterion based assessments (phonic skills / HFW) where appropriate.

For pupils who are in the Early Years please provide data on the different areas of learning and baseline assessment score (where appropriate)

4.2 Current level of attainment and gap between peers
Please describe how the pupil is performing in relation to national expectations e.g. John is in Yr. 7 and is working at Yr. 1 curriculum level for writing and Yr. 2 for writing and Maths.

5. Outcomes
From your knowledge of the young person, what could he/she achieve by the end of the next phase of education?

Please consider the child / young person’s own aspirations as well as how their progress over the next phase contributes to their lifelong outcomes in gaining employment, making friendships and being part of the community, independent living and good health. Put in at least one outcome in each area if appropriate.

Outcomes should be written as an achievable objective i.e. By the end of Year 2, John will be able to understand and use 20 words supported by Makaton.

Cognition and Learning
<table>
<thead>
<tr>
<th>Category</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Speech, language and communication needs</td>
<td></td>
</tr>
<tr>
<td>Social and emotional wellbeing</td>
<td></td>
</tr>
<tr>
<td>Self-care and independence skills</td>
<td></td>
</tr>
<tr>
<td>Physical development and sensory needs</td>
<td></td>
</tr>
</tbody>
</table>

Signed: ______________________  Date: ________________

Designation: ______________________
If you are a Sandwell School, please send this information to the SEN Team via WebXchange, as a word document, using ref T3333332. If you are sending any additional documents that are PDFs, use reference 3333332

If you are an out of borough Sandwell school, please post this information to SEN Service, Education Directorate, Connor Education Centre, Connor Rd, West Bromwich, B71 3DJ or via secure email (agreeing any passwords with the SEN service beforehand 0121 569 8240 / sen_team@sandwell.gov.uk
1. **Basic Details**

Surname of Pupil: ___________________________ Date of Birth: ____________

Forenames: ___________________________ Male/Female: ___________________________

Address: ___________________________

UPN: ___________________________ Tel No: ___________________________

Present School: ___________________________ Year Group: ___________________________

Parent(s)/Guardian(s) Name: ___________________________

Address (if different from above): ___________________________

Legal Status of Child: ___________________________

Is the pupil subject to a care order?  
Yes [ ] No [ ]

Are these basic details different from those on the EHC Plan?  
Yes [ ] No [ ]

Please detail any differences: ___________________________

2. **SEN Details**

2.1 Date of EHC Plan: ___________________________

Date of last review: ___________________________

Date of this review meeting: ___________________________
2.2 Description of pupils main SEN:
Primary Need:

Secondary Need:

2.3 Level and type of provision funded by school and LA (i.e. SEN notional budget, banding and amount of top up funding, placement in Focus Provision or Special school)

2.4 Transport arrangements (if any)  
(Please delete as necessary)

Is transport provided?  
Yes  
No

If yes, please complete Travel Assistance Review for Annual Review of a Statement/EHCP

3. Attendance

<table>
<thead>
<tr>
<th>Actual</th>
<th>Possible</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If attendance is/was below 85% please state reason and action taken.

4. Other agencies involved

<table>
<thead>
<tr>
<th>Agency</th>
<th>Name</th>
<th>Report required (Please indicate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational Psychologist</td>
<td></td>
<td>Yes  No</td>
</tr>
<tr>
<td>SENAT (L or SpLD)</td>
<td></td>
<td>Yes  No</td>
</tr>
<tr>
<td>Behaviour Support Teacher</td>
<td></td>
<td>Yes  No</td>
</tr>
<tr>
<td>Sensory Support Service</td>
<td></td>
<td>Yes  No</td>
</tr>
<tr>
<td>Complex Communication and Autism Team</td>
<td></td>
<td>Yes  No</td>
</tr>
<tr>
<td>Exclusions Team</td>
<td></td>
<td>Yes  No</td>
</tr>
</tbody>
</table>

[IL0: UNCLASSIFIED]
5. Attainment/Achievement/Progress

Please attach a data summary sheet that shows pupil progress for the last 3 terms since initial EHC assessment or last annual review. The data summary sheet should include teacher assessment data and the use of standardised tests for reading / spelling and criterion based assessments (phonic skills / HFW) where appropriate.

For pupils who are in the Early Years please provide data on the different areas of learning and baseline assessment score (where appropriate).

For pupils who are in Post 16 Education, please comment on progress towards achieving their qualification on their designated course.

6. Use of Additional Funding

Please include a costed provision map to demonstrate how additional funding is being used to support outcomes in all areas.

7. Progress made towards end of key stage outcomes on EHC Plan

- Only complete the sections that are relevant to the child / young person’s EHC Plan
- The Annual Review in Year 9, and any subsequent reviews, must focus on preparing for adulthood, including employment, independent living and participation in society. This should be done within the different category of need boxes below. Please see the Annual Review guidance in the SEND handbook for further details.
- The sections that are highlighted should be completed within the review meeting through discussion with child / young person, parents and external agencies.
Cognition and Learning

<table>
<thead>
<tr>
<th>This year's interim targets to achieve long term outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support / Provision provided to achieve interim targets throughout year</td>
</tr>
<tr>
<td>Progress made against interim targets (note successful strategies)</td>
</tr>
<tr>
<td>Suggested next actions / interim targets to discuss at review meeting</td>
</tr>
<tr>
<td>Agreed next actions / interim targets and provision discussed at annual review meeting</td>
</tr>
</tbody>
</table>
Speech, Language and Communication

<table>
<thead>
<tr>
<th>This year’s interim targets to achieve long term outcome</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Support / Provision provided to achieve interim targets throughout year</td>
<td></td>
</tr>
<tr>
<td>Progress made against interim targets (note successful strategies)</td>
<td></td>
</tr>
<tr>
<td>Suggested next actions / interim targets to discuss at review meeting</td>
<td></td>
</tr>
<tr>
<td>Agreed next actions / interim targets and provision discussed at annual review meeting</td>
<td></td>
</tr>
<tr>
<td>Social and Emotional Well-being</td>
<td></td>
</tr>
<tr>
<td>--------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>This year’s interim targets to achieve long term outcome</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Support / Provision provided to achieve interim targets throughout year</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Progress made against interim targets (note successful strategies)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Suggested next actions / interim targets to discuss at review meeting</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Agreed next actions / interim targets and provision discussed at annual review meeting</strong></td>
<td></td>
</tr>
</tbody>
</table>
### Physical and Sensory Needs

<table>
<thead>
<tr>
<th>This year’s interim targets to achieve long term outcome</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Support / Provision provided to achieve interim targets throughout year</td>
<td></td>
</tr>
<tr>
<td>Progress made against interim targets (note successful strategies)</td>
<td></td>
</tr>
<tr>
<td>Suggested next actions / interim targets to discuss at review meeting</td>
<td></td>
</tr>
<tr>
<td>Agreed next actions / interim targets and provision discussed at annual review meeting</td>
<td></td>
</tr>
<tr>
<td>This year's interim targets to achieve long term outcome</td>
<td></td>
</tr>
<tr>
<td>--------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Support / Provision provided to achieve interim targets throughout year</td>
<td></td>
</tr>
<tr>
<td>Progress made against interim targets (note successful strategies)</td>
<td></td>
</tr>
<tr>
<td>Suggested next actions / interim targets to discuss at review meeting</td>
<td></td>
</tr>
<tr>
<td>Agreed next actions / interim targets and provision discussed at annual review meeting</td>
<td></td>
</tr>
</tbody>
</table>
Health Provision

<table>
<thead>
<tr>
<th>This year’s interim targets to achieve long term outcome</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Support / Provision provided to achieve interim targets throughout year</td>
<td></td>
</tr>
<tr>
<td>Progress made against interim targets (note successful strategies)</td>
<td></td>
</tr>
<tr>
<td>Suggested next actions / interim targets to discuss at review meeting</td>
<td></td>
</tr>
<tr>
<td>Agreed next actions / interim targets and provision discussed at annual review meeting</td>
<td></td>
</tr>
</tbody>
</table>

Please specify if the pupil has received a new diagnosis or a change of diagnosis in the last year. Please attach a consultant’s letter / report confirming the diagnosis.
**Social Care**

<table>
<thead>
<tr>
<th>This year’s interim targets to achieve long term outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support / Provision provided to achieve interim targets throughout year</td>
</tr>
<tr>
<td>Progress made against interim targets (note successful strategies)</td>
</tr>
<tr>
<td>Suggested next actions / interim targets to discuss at review meeting</td>
</tr>
<tr>
<td>Agreed next actions / interim targets and provision discussed at annual review meeting</td>
</tr>
</tbody>
</table>
8. **Additional Factors influencing progress** (include any changes in pupil’s circumstances / special educational needs / health)

<table>
<thead>
<tr>
<th>School/College</th>
</tr>
</thead>
</table>

| Out of School/College |
9. **Forward Plan** – preparing for discussion about the key actions that need to happen in the next year e.g. start planning transition into new school / college, independent travel training, access arrangements for examinations or additional assessments to clarify difficulties.

<table>
<thead>
<tr>
<th>Key outcomes for next year (if not already discussed)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>What support is needed to support these outcomes?</td>
<td></td>
</tr>
<tr>
<td>Who is responsible for this support (could be a number of people)</td>
<td></td>
</tr>
<tr>
<td>When will this happen?</td>
<td></td>
</tr>
</tbody>
</table>

Signed:  
Date:  
Designation:  

Child and Young Person’s Views - review of EHC Plan

Guidance Notes

There will be a meeting to review your EHC Plan.

Please tell us how you feel you have been getting on in school/college for the last year and what progress you have made.

Does the help and support you have in school make a difference to the progress you make?

Is there anything that is not working?

What do you want to do in the future?

Tell us what you think is important and will be discussed at the meeting.
# Summary of Information for Annual Review of an EHC Plan

**Name of Pupil:**

**Date of Birth:**    **Age:**    **Year Group:**

**School:**

**Date of review meeting:**

**Persons invited to attend the Review**

(Please indicate those who attended)

1.  
2.  
3.  
4.  
5.  
6.  
7.  
8.  
9.  
10.  

**Please attach the following paperwork and indicate in box if included:**

1. School Contribution to Annual Review document all individual provision plans and their reviews, costed provision map and data summary information since the last Annual Review
2. External Support Service advice that has been received since the last review
3. Medical reports that have been written since the last review
4. Social Services reports that have been written since the last review
5. Pupil views – About Me Now
6. Parent views
7. The minutes of the Annual Review Meeting
8. Travel Assistance Review Form (if applicable)

**Name of person completing paperwork:**

**Signature of Head Teacher:**    **Date Signed:**

---

[IL0: UNCLASSIFIED]
Review of outcomes (EHCP Section E)
Please include any details of amendments on an annotated EHCP using track changes in Microsoft Word

<table>
<thead>
<tr>
<th>Title</th>
<th>Interim targets (smaller targets that build towards long term outcomes)</th>
<th>Comment/Ammendments</th>
<th>Long term outcome (e.g. end of phase outcomes End of KS2)</th>
<th>Comment/amendments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Cognition and learning</td>
<td>Some progress made</td>
<td></td>
<td>Some progress made</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fully achieved</td>
<td></td>
<td>Fully achieved</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not achieved</td>
<td></td>
<td>Not achieved</td>
<td></td>
</tr>
<tr>
<td>2. Communication and interaction</td>
<td>Some progress made</td>
<td></td>
<td>Some progress made</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fully achieved</td>
<td></td>
<td>Fully achieved</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not achieved</td>
<td></td>
<td>Not achieved</td>
<td></td>
</tr>
<tr>
<td>3. Social emotional and mental health difficulties</td>
<td>Some progress made</td>
<td></td>
<td>Some progress made</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fully achieved</td>
<td></td>
<td>Fully achieved</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not achieved</td>
<td></td>
<td>Not achieved</td>
<td></td>
</tr>
<tr>
<td>4. Sensory and physical (including medical)</td>
<td>Some progress made</td>
<td></td>
<td>Some progress made</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fully achieved</td>
<td></td>
<td>Fully achieved</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not achieved</td>
<td></td>
<td>Not achieved</td>
<td></td>
</tr>
<tr>
<td>5. Independence</td>
<td>Some progress made</td>
<td></td>
<td>Some progress made</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fully achieved</td>
<td></td>
<td>Fully achieved</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not achieved</td>
<td></td>
<td>Not achieved</td>
<td></td>
</tr>
</tbody>
</table>

Interim targets
With reference to the SEND Code of Practice 2015, paragraph 9.167, please confirm that interim targets have been reviewed and new targets set for the coming year.

Confirmed:  

[IL0: UNCLASSIFIED]
## Recommendations of the Annual Review Meeting

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Yes or No (please tick as appropriate)</th>
<th>Reasons</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Should the EHC Plan be:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Maintained (tick yes if plan does not need to be amended or ceased)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>• Amended (tick yes if there has been a significant change to the pupils SEN that requires their EHC plan to be changed and attached annotated EHCP)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>• Ceased (tick yes if the pupil’s needs can now be met within the school’s notional budget)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Have the pupil's needs changed significantly?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Are the outcomes of the EHC Plan still appropriate?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Is the provision still suitable to meet the pupil's needs?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Are there any other significant recommendations of the meeting e.g. transport, updated medical review, advocate for young person?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Do parents / young person agree with any suggested amendments?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Do parents or young person wish to have a personal budget?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
Record of Consultation

Please send a copy of the Annual Review paperwork and accompanying documents to the SEN Team, via webXchange, within 10 days of the review date or by the end of term (whichever is closer).

It is school’s responsibility to ensure that parents and other professionals attending the annual receive a copy of the Annual Review paperwork including this summary document.

Please confirm that this information has been shared with:

<table>
<thead>
<tr>
<th></th>
<th>Yes (please tick as appropriate)</th>
<th>No</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Head Teacher</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parents/Carers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child/Young Person (where appropriate)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Data Protection: The information you provide on this form is subject to the provisions of the Data Protection Act 1998. Where applicable information entered will be forwarded to the relevant officer for action or for a reply to be given.
People who have been important to me this year:

The people who help me a lot:

Other people who help me:

My name is:

I was born on:

I am in Year

My school is called:

My teacher is called:

Today’s date:

Things I have done and LIKED this year:

At school

Out of school
Things that have HELPED me this year:
At school

Out of school

Things I have found HARD this year:
At school

Out of school

Things I would like to ACHIEVE next year:
At school

Out of school
Introduction

Each year your child’s Education Health and Care Plan (EHC Plan) is reviewed in order to look at their progress against the outcomes stated in their EHC Plan, any continuing needs and the key teaching areas for the coming year.

To achieve this EHC Plan parents/carers, [together with others who work closely with your child], are asked to make a written contribution which will be considered at your child’s Annual Review meeting.

All of the written contributions (including yours) are circulated before the meeting to the people invited to attend your child’s Annual Review.

Date of Planned Review Meeting

Your child

Name: ___________________________ Date of birth: ___________________________

School: __________________________

Parents/Guardians

Please print your name: ___________________________

Signed: ___________________________ Date: ___________________________

Please print your name: ___________________________

Contact phone number: ___________________________

The things we would like to know are set out on the following pages. You may find it helpful to complete this form. If you wish to write your views separately, please feel free to do so and you may attach this cover sheet to them.

Thank you.
We need to know your views about: -

- Your child’s progress towards meeting the long-term outcomes set out in their EHC Plan.
- Your child’s progress towards any short-term targets set for them in school this past year.
- Your child’s progress in their learning.
- Progress your child has made in their behaviour and attitude to learning?
- Your child’s progress towards becoming more independent.
- Your child’s EHC Plan - is it still appropriate? Or does it need changing? Can your child’s needs be met without an EHC Plan?
- If your child is in year 9 (or above) we would also like to know how you think their Transition Plan is developing.

We would also like to know:

- In what ways, your child has made progress at home.
- Any other information about your child that you think is important to tell us.

If you need any help

If you need any help completing any part of this form, or writing down your views, you can contact the Sandwell SEND Information, Advice and Support Service (0121 555 1821), or your Independent Personal Supporter, if you have one, should be able to help you.

You may also ask your child’s SENCo or someone from school for help

- Has your child made progress towards meeting the end of key stage outcomes set out in their EHC Plan?
• What progress has your child made towards achieving short-term targets set for them in school this past year?

• Do you think your child is making progress in their learning?

• Has your child made any progress in their behaviour and attitude to learning?
• Has your child made progress towards becoming more independent?

• Does your child have opportunities to access social/educational activities outside the normal school day? If yes, please specify, if no, what would you like to see?

• What areas still cause difficulties for your child in school? How do you think the school could help to overcome these difficulties?

• In what ways has your child made progress at home over the last 12 months? What things still cause difficulties for your child at home?
• Is your child’s EHC Plan still appropriate or does it need changing? Could your child’s needs still be met without an EHC Plan?

• Do you feel that your child’s special educational needs are being met at their current school? (Please give reasons)

• Is there anything else that you think is important to tell us?

Data Protection Act, 1998
The information that you supply on this form will be used by the Special Educational Needs Service for the purpose of decision making and data collection. All information is regarded as confidential and any data collected via this form will be processed or disclosed only within the limits of the data protection notification. Data may be shared within the theme and or relevant agencies.

The system lists contact details for all children in England up to their 18th birthday, their parents / guardians, carers and services working with a child. For further information visit:

Please return to the Head Teacher of your child’s school - Thank you
This form should be filled in at every Annual Review for a child who currently receives Travel Assistance via the Local Authority. Travel Assistance may take the form of Independent Travel Training, reimbursement of mileage costs, provision of a bus pass or provision of a taxi/mini bus.

This Travel Assistance review helps the Local Authority to decide if Travel Assistance is still required, if it needs to be modified or if there is any new information that we need to know.

Not all sections will be appropriate for every young person, but the more information that is included helps us to make the appropriate provision.

Failure to fill in this form accurately and with up to date information may result in a withdrawal of Travel Assistance.

<table>
<thead>
<tr>
<th>Young Person’s Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current School and Year Group:</td>
</tr>
<tr>
<td>How is Travel Assistance currently provided?</td>
</tr>
<tr>
<td>Have there been any changes to address for this child since the last Annual Review?</td>
</tr>
<tr>
<td>Is it felt that Travel Assistance is still required for this young person?</td>
</tr>
<tr>
<td>Why is Travel Assistance still required? Please give details.</td>
</tr>
<tr>
<td>Does the Young Person take part in any social activities away from home (clubs, visiting friends etc.)? If yes, how do they travel there?</td>
</tr>
<tr>
<td>Question</td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Does the Young person travel alone or are you always accompanied? If accompanied, why?</td>
</tr>
<tr>
<td>Has the Young Person now or in the past attended any work placements, work experience, part time work, volunteering? If so how did you get there?</td>
</tr>
<tr>
<td>Has the Young Person taken part in any independent travel training with parents/carer, school, college or any other person? If not, why not? If yes, then when was this and what was the outcome? (remember travel training is about improving independence not just becoming totally independent – for example moving from travelling with an escort to travelling without one or undertaking the TITAN in school)</td>
</tr>
<tr>
<td>Does the Young Person ever use public transport (alone or accompanied)? If not, why not.</td>
</tr>
<tr>
<td>Are there any types of transport /vehicle that the Young Person cannot use and why?</td>
</tr>
<tr>
<td>Does the Young Person have to travel with a wheelchair or any other equipment e.g. oxygen, walking frame, crutches – if yes please detail.</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>Are there any special consideration/medical details/additional information with reference to travel? (e.g. medical needs certain toy or music)</td>
</tr>
<tr>
<td>Form completed by:</td>
</tr>
<tr>
<td>Date:</td>
</tr>
</tbody>
</table>
Early Years High Needs Block Funding
Process of application and funding

Appendix 7
Early Years High Needs Block Funding (HNBF1)

Guidance for Childcare Providers, Schools and Parents

This guidance tells you how to apply for the Early Years High Needs Block Funding from Inclusion Support Early Years (ISEY). This is a discretionary short term grant.

Parents and Settings and schools should read this BEFORE filling in a funding application form. Completed application forms should be signed by both parent and Manager of the setting/Headteacher of the school to confirm you agree with the terms and conditions of the funding process. If you would like advice in completing this application, please contact your Inclusion Support Early Years, Area Special Educational Needs Co-ordinator (SENCO) Team.

This funding has been set up to assist children aged 0-5 yrs with significant additional needs to access inclusive childcare and school nursery provision for up to 15 hours per week. Children entering reception class are not eligible for funding as their needs will be met through schools own delegated budget or through an Educational Health Care Plan.

Children’s needs will be identified through the Transition Plus Pathway (TPP). *Please refer to the Transition Plus Pathway document produced by Inclusion Support for further guidance. Children with significant additional needs will be in need of a TPP 3 comprehensive package of support going through the Statutory Assessment process. Children identified at TPP3 who are Looked After by the local authority will also be considered. In the case for schools, children identified at TPP2 may be considered for up to 7.5 hours per week taking into account the Safeguarding and Welfare requirements (section 3 EYFS) adult to child ratios.

The Early Years High Needs panel will meet to consider each application so please ensure you provide us with all relevant information. Should you wish to appeal against a decision, this must be done in writing to us within 2 weeks of the panel meeting.

Where applications are agreed the Business Support Team at ISEY will complete a funding agreement form (attached to this guidance) detailing the times/hours being worked by the 1:1 support worker and the total amount of money allocated. The funding agreement will be sent to the Manager of the setting so that an invoice can be prepared for payment (applicable to PVI settings only)

In the case For PVI settings each application is reviewed by the named Area SENCO, ISEY Manager and where appropriate, the views of other specialist agencies. It is advised that when school options are being discussed this is raised at the review meeting so that all views are heard and appropriate advice and support can be offered. The 1:1 support is monitored by reviewing the child’s progress. This can be done in conjunction with feedback from the development worker, however it
is expected that at least one reviewing visit is completed by the named Area SENCO (PVI settings only)

In the case for schools the Business Support team at ISEY will complete a funding agreement form detailing the times/hours being worked by the 1:1 support worker and the total amount of money allocated. The funding agreement will be sent to the Headteacher of school and a copy will be sent to the SEN Service for processing.

WHAT WE MAY FUND

- **Additional Staff** – to support the setting to include a child with significant additional needs. Increase staff: child ratios to enable small group work to take place.
- **Specific Training** – If it can be clearly demonstrated that it is necessary to enable the child to access the setting. For example: a medical procedure, home visit or specialist training.
- **Individual Childminders** who are accredited to receive Nursery Education Funding (NEF) can apply if they are unable to look after the maximum number of children for whom they are registered because of the child’s significant additional need.
- Up to 38 weeks of 1:1 funding during the academic year.
- Where both or lone parents are in employment during the agreed funding hours who have children with SEN accessing private day-care settings may be able to claim an additional 7 weeks per year, taken flexibly during any financial year from April 1st to March 31st. Evidence of employment will be required. Funding will be reviewed every 12 weeks, a plan will be drawn up to take into account a child who may exit the scheme early and no longer be eligible for the full 7 weeks additional funding e.g. transitioning into school in September or is no longer eligible, funding will cease. If a child becomes ineligible during the course of the 12-month period and, as such, no longer meets the criteria for discretionary financial support funding will cease at the next review point. Where hours are accrued and not taken during the current financial year, hours may be carried over at the discretion of the panel.

CRITERIA FOR APPLICATIONS

- Funding is considered on an individual child basis. Each application will usually be reviewed every 12 weeks dependent upon need or individual circumstances.
- Settings can apply for up to a **maximum of 15 hours funding per week** for a child which will be dependent upon their level of need.
- The child must have significant additional needs that require an individual programme of intervention at TPP3 which cannot be delivered within the ratio of the group and/or an additional need which could cause a barrier to inclusion.
- The child must be resident in Sandwell.
- The setting must evidence the need for additional funding - all applications must include one Individual Education Plan (IEP) with outcomes completed, a current plan and any appropriate outside agency reports or advice.
The child is accessing additional services provided by health or local authority (e.g. Speech and Language Therapy, ISEY and Child Development Centre (CDC) Physiotherapy, Educational Psychologist etc.).

Statutory Assessment of the child’s SEN has been initiated.

Initial consultation has taken place with the Area SENCO or ISEY Manager and, where appropriate, a multi-agency meeting involving all agencies has been held or views sort to determine the needs of the child.

ISEY can only fund applications from the date agreed with the panel. Retrospective funding is not allowed. Therefore please ensure your application is with us BEFORE you wish the funding to start as failure to do so may result in a delay to the child’s accessing their nursery place if dependent on 1:1 support.

FURTHER GUIDANCE for SETTINGS

The Setting Manager (including nursery leads in schools where indicated) is responsible for:

- Contacting their named Area SENCO for advice whereupon the Area SENCO may offer advice/visit on how to support the child within normal ratios or request that they complete a High Needs Block Application form with supporting evidence (or both). In the case of schools please contact the ISEY Manager.
- Completing the application form and marking the front of the application with IL3 Protected. Failure to do so will result in a breach of current data protection legislation for which you will be responsible.
- Sending invoices in promptly, addressed to the Business Support Team at ISEY to ensure they are receipted within 28 days. No further funding will be allocated until outstanding invoices are accounted for. (PVI only)
- Correctly calculating any added VAT, showing it as a separate calculation to the hourly rate to ensure that invoices are receipted appropriately. If you are unclear about how to do this please contact the Business Support Team. (PVI settings only)
- Considering who the 1:1 support worker will be. It is strongly advised that this role is taken up by an experienced permanent member of the team and the additional staff member (agency worker) is used to back fill their duties wherever possible, so that continuity is maintained for the child. If you think there may be difficulties with this arrangement then you must discuss it with your named Area SENCO/ISEY manager who will support you with finding a solution.
- Sourcing agency staff who will be able to meet the needs of the child. You will need to keep a record of their attendance and absences.
- If for any reason there is a change in agency provider you must inform the Business Support Team at ISEY immediately so we can update our records. (PVI settings only)
- Completing an invoice on headed paper for the period shown on the funding agreement form. (PVI settings only)
• Discussing any proposed changes to funding costs after panel outcome with the ISEY Manager only so decisions can be made about value for money and before any further funding is released.

• Funding for schools will be dealt with in the usual way through high cost delegation and processed by the SEN Department.

The ISEY Team and the wider Inclusion Support Service are here to support the inclusion of all children in your care. Please take advantage of this support by ensuring you liaise closely with them during the whole process. If you feel you have specific training needs to further support the promotion of SEN and Inclusion, please do not hesitate to contact us. This will help you build your own capacity for the future in providing the best possible care, education and learning experiences for all children. We are always here to help you.

**PROCESS OF APPLICATION AND FUNDING**

1. Initial discussion and/or observation of child with Area SENCO or in the case of schools, the ISEY Manager in liaison with the named Educational Psychologist.

2. Setting/nursery completes application form with the parents/carers and submits it with all relevant IEP’s/reports to:

   Alice Berry  
   Inclusion Support Early Years Manager  
   Inclusion Support Early Years and Child Development Centre  
   Coneygre  
   Sedgley Road East  
   Tipton  
   DY4 8UH

3. Each application will be considered by the panel and recommendations will be made i.e. allocation of hours, identification of additional training needs, care/IEP plan in place, measurable targets set etc.

4. Where applications are declined, Managers/Headteachers will be given an explanation and offered support around the future inclusion of the named child.

5. Where ELT is being claimed panel outcomes will be relayed to the Early Learning for Two’s Co-ordinator for their records.
6. All funding will be put in place for no more than 12 weeks. It will be at the discretion of the panel to reduce the timeframes for review of funding as necessary.

7. The Area SENCO will contact the setting/nursery to arrange a meeting to discuss the child’s needs which will involve Parent/Carer, Setting/nursery Staff, Development Worker, and where appropriate reports from other relevant agencies for the child. (PVI setting only)

8. Setting appoints a new member of staff and identifies an appropriate person to work specifically with the child concerned.

9. (PVI Settings) completes an invoice on headed paper and sends it along with the Funding Application Agreement and a copy of the child’s attendance register for the claim period to:

   Gail Hardwick  
   Business Support Manager  
   Inclusion Support Early Years and Child Development Centre  
   Coneygre  
   Sedgley Road East  
   Tipton  
   DY4 8UH

   Payment will take up to a minimum of 30 days following receipt of invoice. (PVI settings only)

10. Funding for schools will be dealt with in the usual way through high cost delegation and should refer to the SEN Department for processing funding costs. At the end of the funding period please complete a review sheet (attached to this document) together with current IEP review to the ISEY Manager. Please note no further funding will be released until paperwork has been received.

11. If further funding is required then the setting should request this at the review meeting chaired by the Area SENCO which must be held at least two or ideally three weeks before funding ceases. The Area SENCO ascertains how the funding has been used to meet the child’s needs and completes the review of funding form with the parents and setting staff present. It is important that parents/carers fully engage with the process. Only in exceptional circumstances will funding be agreed without the parents being present. Of course there may be rare occasions when appointments need to be changed and this is sometimes unavoidable. (PVI settings only)

12. Schools will follow their own procedures for reviewing progress.

13. When the review is completed and it has been agreed funding will continue, the times and dates are recorded on the new agreement application for the next period of funding.

14. If evidence clearly shows the child has made adequate progress and no longer requires funding then this is communicated to the setting/school and parents so that the appeal process can be implemented if they disagree with the decision.
15 Appeals should be made in writing clearly stating the reasons for the Early Years High Needs Block funding to be awarded. The panel will meet again to look at the evidence presented and undertake further observations and assessments as appropriate.

16 The Area SENCO completes the final review and states clearly on the feedback sheet that funding has ceased including reasons why (PVI settings only).

17 An Exit Questionnaire is completed with the setting and parents. A standard letter will be sent out to parents and setting stating that funding has ceased.
Early Years High Needs Block Funding Application Form

**Section A** – **B** should be completed by the provider, **Section C** – **E** should be completed by the setting/nursery/in consultation with the parent/carer, **Section F** should be completed by the parent, **Section G-H** should be completed by the setting/nursery. **Section H** must be signed by provider and parent/carer to show they fully understand and accept the terms and conditions of the funding application and any subsequent funding agreements.

**SECTION A** – Setting/nursery contact details

Name of setting/nursery/provider: ____________________________________________________________

Name of Contact person at setting/nursery: ________________________________

Position: ______________________________________________________________________________

Setting/ nursery address: ________________________________________________________________

_________________________________________________________________ Postcode: __________

Setting/ nursery telephone number: _________________________________________________

Setting/ nursery email address: ______________________________________________________

**SECTION B** – About the setting

**Type of setting**

Please tick

- Private
- Independent
- Children’s Centre
- Voluntary
- Childminder (NEF registered)
- School

**Type of childcare**

Please tick the care appropriate to the child in question

- Full Day Care
- Childminder (NEF accredited)
- Other (please state)
SECTION C – About the child

Name of child:__________________________________________

Date of birth:________________________________________

Address of child:_______________________________________

________________________________________ Postcode:________

Name of future school:____________________ Date to begin:____

Please describe the nature of the child's additional need:

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Difficulties</th>
<th>Emerging skills</th>
</tr>
</thead>
</table>

Please give reasons why the setting requires extra funding to meet the child’s additional needs:

How will the funding be used if it is awarded for this application?

Additional training/support for staff required with approximate timescales:

Agencies involved:

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Contact No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
SECTION D – Attendance

Please use the table below to show us when the child attends the setting/ nursery
- Please include the time that the child attends for each day (start and finish).
- In the rows below this, please total how many hours are being claimed for each day for the child.

<table>
<thead>
<tr>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start</td>
<td>Finish</td>
<td>Start</td>
<td>Finish</td>
<td>Start</td>
</tr>
<tr>
<td>Total attendance time</td>
<td>Total attendance time</td>
<td>Total attendance time</td>
<td>Total attendance time</td>
<td>Total attendance time</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>Start</td>
<td>Finish</td>
<td>Start</td>
<td>Finish</td>
<td>Start</td>
</tr>
<tr>
<td>Total hrs funded by ELT or NEF</td>
<td>Total hrs funded by ELT or NEF</td>
<td>Total hrs funded by ELT or NEF</td>
<td>Total hrs funded by ELT or NEF</td>
<td>Total hrs funded by ELT or NEF</td>
</tr>
<tr>
<td>Total hrs to be funded by HNBF</td>
<td>Total hrs to be funded by HNBF</td>
<td>Total hrs to be funded by HNBF</td>
<td>Total hrs to be funded by HNBF</td>
<td>Total hrs to be funded by HNBF</td>
</tr>
</tbody>
</table>

Please tell us if you are claiming Early Learning for Two’s
NEF

If yes, please tell us how many sessions per week ______________________

Please tell us the date you would like the funding to start on:________________
(the first funded session)

Please tell us the date you would like the funding to end on:________________
(the last funded session)

Please tell us the hourly rate of any additional staff member required: £____.____

Please fill in Adult: Child ratios prior to funding application:

<table>
<thead>
<tr>
<th>No of children in setting room</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>AM</td>
<td>AM</td>
<td>AM</td>
<td>AM</td>
<td>AM</td>
<td>AM</td>
</tr>
<tr>
<td>No of adults in setting room</td>
<td>AM</td>
<td>AM</td>
<td>AM</td>
<td>AM</td>
<td>AM</td>
</tr>
<tr>
<td>No of children in setting room</td>
<td>PM</td>
<td>PM</td>
<td>PM</td>
<td>PM</td>
<td>PM</td>
</tr>
<tr>
<td>No of adults in setting room</td>
<td>PM</td>
<td>PM</td>
<td>PM</td>
<td>PM</td>
<td>PM</td>
</tr>
</tbody>
</table>
SECTION E – Further Training

Further training for the practitioner may be identified as part of the package of support. Please use the section below only if you are claiming for funding towards a training course.

<table>
<thead>
<tr>
<th>Training course</th>
<th>Cost</th>
<th>Reason for need</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td></td>
</tr>
<tr>
<td></td>
<td>£</td>
<td></td>
</tr>
<tr>
<td></td>
<td>£</td>
<td></td>
</tr>
</tbody>
</table>

SECTION F – Ethnicity (please tick which applies)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>WHB</td>
<td>White British</td>
</tr>
<tr>
<td>WHR</td>
<td>White Irish</td>
</tr>
<tr>
<td>WHT</td>
<td>Traveller</td>
</tr>
<tr>
<td>WRO</td>
<td>White Gypsy / Roma</td>
</tr>
<tr>
<td>WHA</td>
<td>Any other White background</td>
</tr>
<tr>
<td>MWB</td>
<td>White and Black Caribbean</td>
</tr>
<tr>
<td>MBA</td>
<td>White and Black African</td>
</tr>
<tr>
<td>MWA</td>
<td>White and Asian</td>
</tr>
<tr>
<td>CHE</td>
<td>Chinese</td>
</tr>
<tr>
<td>NOT</td>
<td>Information not obtained</td>
</tr>
<tr>
<td>CO</td>
<td>Other (please specify)</td>
</tr>
<tr>
<td>MOT</td>
<td>Any other Mixed Background</td>
</tr>
<tr>
<td>AIN</td>
<td>Indian</td>
</tr>
<tr>
<td>APK</td>
<td>Pakistani</td>
</tr>
<tr>
<td>ABA</td>
<td>Bangladeshi</td>
</tr>
<tr>
<td>AAO</td>
<td>Any other Asian background</td>
</tr>
<tr>
<td>BLB</td>
<td>Caribbean</td>
</tr>
<tr>
<td>BLF</td>
<td>African</td>
</tr>
<tr>
<td>BLG</td>
<td>Any other Black background</td>
</tr>
<tr>
<td>OEO</td>
<td>Any other ethnic background</td>
</tr>
<tr>
<td>REF</td>
<td>Refused</td>
</tr>
</tbody>
</table>

SECTION G – Documentation

All applications must include one Individual Education Plan (IEP) with outcomes completed, a current plan and any appropriate outside agency reports or advice.

Copy of IEP included with this application? **Yes**  **No** Please tick

If you have not submitted an IEP, please explain why below:

[Blank space for explanation]
SECTION H – Declaration

I confirm that the information I have provided is complete and accurate and that:

1. I understand that the High needs Block Funding will not automatically be repeated beyond the date agreed by the panel (although you are welcome to reapply). 2. I understand that I will be required to provide evidence of the expenditure funded by the grant, and the inclusion of the child, including time sheets if applicable to the Inclusion Support Early Years (ISEY) at the end of the funding period. 3. Financial/attendance records will be open to inspection by ISEY if required and this can be done without notice. 4. As part of the monitoring process, a member of the ISEY team may make an unannounced visit during the funded period to confirm the child and support are present at the setting.

Signature of applicant, Manager of the setting/Headteacher of the school):_______________________________

Name:________________________________________

Signature of parent/carer:____________________  Name:________________________

Date:__________________________________________

Data Protection - ISEY is registered under the 1998 Data Protection Act in respect of personal data that it holds. Any data held by ISEY will be for the sole purposes of the Service and will not be disclosed to any other body or organisation.

Submitting Your Application

We aim to process your application within 15 working days from date of receipt after which you will be notified of a decision in writing.

PLEASE REMEMBER! – ISEY can only fund applications for the High Needs Block Funding from the date agreed by the Panel/ISEY Manager. Retrospective funding is not allowed. Therefore please ensure your application is with us BEFORE you wish the funding to start.

If successful, payment will be made to the setting in full within 30 days of receipt of the invoice.

All applications require the signature of the parent/carer as well as the Manager of the setting /Headteacher of the school to be present before they can be accepted. Applications without signatures will be returned.
Banding pupils for the support level needed to meet their special educational needs and disabilities

The descriptors below describe the special educational needs and disabilities children may experience and the provision which helps to support those needs and remove barriers to learning.

Needs are divided into:
- Speech, language and communication which includes autism spectrum disorders
- Cognition and learning
- Social, emotional and mental health
- Sensory needs specifically visual impairment and hearing impairment
- Physical needs which includes medical needs.

The funding bandings are divided into:
- Element 1 funding which is the basic funding that schools receive for every pupil on the school roll on census day and is currently slightly above, or below, £4,000
- Element 2 is the SEN Notional budget which is a formula funded amount delegated to schools and from which they are expected to spend up to £6,000 on any individual pupil.
- Element 3 is the ‘top up’ for pupils who need a higher level of resource to meet their needs which can only be accessed through an Education, Health and Care Plan.
- Element 3 is divided into 5 sub levels; when an EHC Plan has been written then LA SEN, Health and Social Care Officers will decide the appropriate level of funding dependent on matching the ‘best fit’ of descriptors to the child’s needs.
- Schools are always expected to put in place the provision in Elements 1 and 2 before requesting a ‘top up’; any LA ‘top up’ funding in an EHC Plan is granted on the basis that the school continues to provide the first £6,000 from Elements 1 and 2.
Applying the bandings

- Begin with the pupil’s primary/main need and read down the descriptors to the Element which gives a ‘best fit’ to the pupil’s needs and provision.
- Element 1 and 2 are banded at ‘0’ i.e. no LA top up is needed
- Element 3 is divided into 5 levels and each band is allocated the same points value i.e.
  - Band 1 = 1
  - Band 2 = 2
  - Band 3 = 3
  - Band 4 = 4
  - Band 5 = 5

Once you have determined the categories which describe the pupil’s main and additional special educational needs then use the document to find the best fit from the descriptors.

For example:

A pupil may be Element 3 Band 3 for SLCN (3), Band 2 for C&L (2) and Element 1/2 for SEMH (0), Sensory (0) and Physical (0)

The pupil’s ‘Band’ is determined by the area of their primary/main need so the pupil above would be Band 3, because of their SLCN needs.

The Banding level, once agreed, by parents and school will be on the EHC Plan and can only be changed via a formal Annual Review process. (A review can be held early if there is a significant change of need).
<table>
<thead>
<tr>
<th>Band</th>
<th>Speech, Language and Communication</th>
<th>Cognition and Learning</th>
<th>Social, emotional and mental health</th>
<th>Sensory</th>
<th>Physical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Element 1</td>
<td>Mild language delay WELLCOMM Amber level ‘Catch up intervention'</td>
<td>Access to a differentiated curriculum</td>
<td>Positive ethos where the curriculum promotes children’s social and emotional development.</td>
<td>Likely to present with suspected mild or unilateral hearing loss or mild to moderate visual loss</td>
<td>Mild physical difficulties – ambulant</td>
</tr>
<tr>
<td></td>
<td>Pupil’s speaking and listening skills are slightly delayed in comparison to the majority of peers but is able to function in a class group</td>
<td>Child may be working below Foundation Stage or below national standard at end of key stage or working below age related expectations</td>
<td>Behaviour policy consistently applied</td>
<td>GP referral to audiology/ophthalmology must be sought if hearing/visual difficulty is suspected</td>
<td>No additional learning needs</td>
</tr>
<tr>
<td></td>
<td>Teaching staff have an awareness level/CPD re: language development; ASD</td>
<td>Access to Wave 2 intervention / targeted teaching to address under – achievement factors</td>
<td>Staff have appropriate CPD to manage children’s behaviour</td>
<td>Assessment by sensory support team in 4 weeks following referral to a ToD or QTVI</td>
<td>Staff awareness of any possible impact on learning</td>
</tr>
<tr>
<td></td>
<td>Access to Wave 2 intervention / targeted teaching to address factors influencing under – achievement</td>
<td>Access to Wave 2 intervention / targeted support to address factors influencing under – achievement.</td>
<td>Access to Wave 2 intervention / targeted support to address factors influencing under – achievement.</td>
<td>Sensory team give interim advice on strategies</td>
<td>Administration of routine medicines</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Access to Wave 2 intervention / targeted support to address factors influencing under – achievement.</td>
<td>Access to Wave 2 intervention / targeted support to address factors influencing under – achievement.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Element 2</td>
<td>WELLCOMM Red level language impairment/S&amp;LT programme in place</td>
<td>In the Early Years adult prompting and cueing is required to support much of the child’s play.</td>
<td>In need of nurture group/ nurturing programmes</td>
<td>Moderate HI</td>
<td>PD ambulant may have personal care needs throughout the day</td>
</tr>
<tr>
<td></td>
<td>Daily delivery of S &amp; L programme 1:1</td>
<td>Pupil is working more than 2 years below age related expectations in primary school</td>
<td>Some challenging behaviour is evident and staff have additional CPD if necessary to deliver the curriculum</td>
<td>Likely to present with moderate hearing loss (between 40 and 70dB) and to be issued with hearing aids and possibly other supportive technology which are used effectively</td>
<td>Medical needs e.g. supervision of insulin dosage</td>
</tr>
<tr>
<td></td>
<td>In need of social skill support/development</td>
<td>Needs small group social skill/self-esteem work 3 x weekly or more /1:1</td>
<td>HI child may need pre and post tutoring to address differentiation of language</td>
<td>Physiotherapy programme is delivered daily under supervision of therapist</td>
<td>Physiotherapy programme is delivered daily under supervision of therapist</td>
</tr>
<tr>
<td><strong>Social interaction and communication skills 3 x weekly programme, group of 6/8, with 2 adults working on social communication targets</strong></td>
<td><strong>Pupil is scoring in the mid to low 70s on schools specific standardised assessments</strong></td>
<td><strong>content within curriculum</strong></td>
<td><strong>Time for CT/TA/Physio/OT to meet to evaluate progress and plan programmes</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time for CT/TA to plan, record and evaluate progress</td>
<td><strong>Pupil is working at high p scale (P7 or P8) or Interim Pre-key stage 1 standard “Foundations for the expected standard” (Pre-ITAF) by the end of KS1</strong></td>
<td><strong>Moderate VI</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Flexible support to change/manage transitions</td>
<td><strong>Pupil is working at or below lower key stage 2 curriculum objectives (Yr 3) at the end of KS2</strong></td>
<td>Support needed to differentiate aspects of the curriculum e.g. some enlargements of texts, positioning within classroom</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Structured teaching approach and visual strategies needed to support the curriculum and the pupil’s understanding of routines/expectations</td>
<td><strong>Pupil requires an increased level of differentiation that supports the teaching and learning of basic skills.</strong></td>
<td>Able to work independently for much of the time with appropriate materials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff have time to liaise with outside agencies to evaluate/plan programmes</td>
<td>In need of Wave 3 literacy/numeracy interventions delivered at least 3 x weekly or daily basis. Delivered 1:1 or in small groups. SpLD assessment and programme delivered according to advice from support services</td>
<td>Pupils may experience additional behavioural/learning needs which may compound moderate VI</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to support services including IS and S&amp;LT for advice and monitoring</td>
<td>In class support, if needed, to embed mentoring daily</td>
<td>Time for staff, e.g. termly to monitor, plan record and evaluate progress with the Sensory Support Teacher</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Small group work/mentoring to address learning needs and to support social and emotional needs in developing peer relationships</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Band</td>
<td>Speech, Language and Communication</td>
<td>Cognition and Learning</td>
<td>SEMH</td>
<td>Sensory</td>
<td>Physical</td>
</tr>
<tr>
<td>------------</td>
<td>-----------------------------------</td>
<td>-----------------------</td>
<td>-----------------------</td>
<td>-----------------------</td>
<td>------------------------</td>
</tr>
</tbody>
</table>
| **Element 3**<br>**Band 1** | Needs a progress review at least termly from S&LT  
Severe articulation difficulties which impact significantly on literacy levels  
Key staff can use/teach Makaton if required  
A language programme is delivered daily by S&LT trained TA, under close supervision of S&LT  
Needs support from TA to access the curriculum in the classroom and to embed skills  
Pupil needs a Total Communication Environment to access learning effectively. | In the Early Years child needs personalised learning planning for daily routines; some 1:1 support for curriculum access; small step teaching programme  
May be P6 or below at the end of KS1  
Working at “early development of the expected standard” on pre-teacher assessment framework for KS2 SATS or Year 1 curriculum objectives at the end of KS2  
Pupil is working at national standard for KS1 (Year 2 national curriculum expectations) or below at the end of KS3 | Active casework with support services  
Pupil requires supervision particularly in unstructured situations or alternative activity at break/lunch times  
Daily interventions from an adult are required to sustain peer relationships  
Staff needed at times to supervise pupil if he/she needs to be withdrawn or withdraws self from the classroom  
Pupil may have had a high number of fixed term exclusions and PPE Team involvement to support their needs.  
Regular review(at least half-termly) and multi-agency working is needed to problem solve with family/carers and established consistent | **Moderate to Severe VI**  
Likely to present with visual acuity of 6/24 to 6/48 and/or have a very significant field loss e.g. hemianopia  
Pupil will need regular, daily support to access the curriculum at key times throughout the day (e.g. numeracy, literacy & ICT at primary, science/DT/ICT at secondary  
Pupil will need significant level of resources modifying  
Pupil will need ongoing, periodical specialist Mobility & Independence support  
Pupil will need a range of specialist resources, e.g. laptop with accessibility software, electronic magnifier | PD ambulant/non-ambulant  
Personal care needs  
Daily physio programme  
Support needed to access the curriculum at times throughout the day because of physical difficulties—in need of scribe/support with use of IT  
No learning needs associated with physical/medical need |
| Particularly at unstructured times | A high level of differentiation is needed throughout the day to access the curriculum. Literacy/numeracy Wave 3 programmes delivered 1:1 to make progress and in class support is needed to embed skills, together with opportunities for over learning. Active casework with support services in mainstream settings. | Approaches | Pupils may experience additional behavioural/ learning needs which may compound VI. Likely to present with moderate to severe hearing loss (40 - >70dB) which will be aided and which will need other assistive technology. This is largely used effectively and independently. Hearing loss causes significant delay in language and communication skills (as measured by appropriate assessments*) but speech is largely intelligible to all listeners. Regular support to access the curriculum is needed at times throughout the day. Pupils may experience additional behavioural/ learning/ communication needs and will need according to age assessments include Early Support Monitoring Protocol, Ski-Hi, TELD, ACE, TROG, BPVS. |
| May need augmentative communication strategies e.g. PECs | | | |
| Close home/school liaison needed to ensure consistency of approach | | | |

[*]: Appropriate assessments include Early Support Monitoring Protocol, Ski-Hi, TELD, ACE, TROG, BPVS.
<table>
<thead>
<tr>
<th>Band</th>
<th>Speech, Language and Communication</th>
<th>Cognition and Learning</th>
<th>SEMH</th>
<th>Sensory</th>
<th>Physical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Element 3 Band 2</td>
<td>Severe language impairment 3/4 word level of understanding at KS2 Needs a high level of language support to access the curriculum Pre-teaching of the curriculum at times across the school day Intensive S&amp;L intervention/access to S&amp;LT at least termly May have a diagnosis of ASD A structured language programme is needed, for example the Social Use of Language Programme to support the development of a language of emotions Pupil needs some access to small group teaching and individual support for learning Access to reduced stimulus workstation within the classroom</td>
<td>May need special provision with smaller class group size In the Early Years may need 1:1 intensive support; specialist teaching programmes A high level of adult support is needed to model tasks, lead learning with appropriate level questioning within a withdrawal group P4-P8 at the end of KS2 Class teachers and support staff need time to plan an individualised programme for the pupil.</td>
<td>Pupil needs to be withdrawn frequently even when working in small groups 1:1 staffing required at times Pupil needs access to small group work to build social and emotional skills and access learning for example through a nurture group approach As in Band 1 staff need time to engage with a variety of professionals and agencies to address all aspects which contribute to pupil’s difficulty Pupil needs 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 liaise as necessary.</td>
<td>Severe VI Likely to present with visual acuity of 6/48 to 3/60 and/or have a very significant field loss e.g. hemianopia Pupil will need all curriculum materials modifying into accessible formats Pupil will need weekly specialist Mobility &amp; Independence support &amp; weekly specialist ICT input Pupil will need a range of specialist resources, e.g. laptop with accessibility software, electronic magnifier Pupil will need a high level of 1:1 support for access to learning and resource modification Likely to present with severe hearing loss (70 – 95 dB) Severe delay in language and communication skills (as measured by appropriate assessments*). Speech is largely intelligible to familiar listeners but may contain some articulation errors</td>
<td>PD – non-ambulant Needs support throughout the day with seating/positioning In need of support with feeding and personal care Support needed for learning needs associated with physical /medical needs</td>
</tr>
</tbody>
</table>
Support needed to prepare for change between and within activities.

School staff have an awareness of the implications for ASD on learning.

which could impact on intelligibility for unfamiliar listeners.

Language and communication delay may be compounded by inconsistent use of hearing aids and other assistive technology.

Regular 1:1 support required throughout the week for pre and post tutoring and to ensure that the curriculum is suitably differentiated in terms of language and cognitive level.

May have additional learning or physical difficulty.

* According to age assessments include Early Support Monitoring Protocol, Ski-Hi, TELD, ACE, TROG, BPVS.
<table>
<thead>
<tr>
<th>Band</th>
<th>Speech, Language and Communication</th>
<th>Cognition and Learning</th>
<th>SEMH</th>
<th>Sensory</th>
<th>Physical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Element 3</td>
<td>Diagnosis of ASD with some challenging behaviour despite an appropriately structured framework</td>
<td>At the end of KS1 the pupil is &lt;P3i</td>
<td>Pupil requires constant supervision in a small group 2:1 staffing required at times</td>
<td>Educationally Blind</td>
<td>In need of daily therapy-hydro/physio/OT/S&amp;LT</td>
</tr>
<tr>
<td>Band 3</td>
<td>PECS or equivalent communication system is used</td>
<td>The pupil will be working at P6 or below at the end of KS2 in reading, writing and maths</td>
<td>Learning needs extensive differentiation to engage the pupil.</td>
<td>Pupil will be accessing the curriculum primarily through non-sighted methods e.g. Braille.</td>
<td>Pupil may have sensory processing difficulties related to their physical/medical needs</td>
</tr>
<tr>
<td></td>
<td>Pupil may be unwilling to engage with peers and intolerant of the proximity of others</td>
<td>Pupil needs 1:1 teaching opportunities throughout the day in order to make progress</td>
<td>Staff need time for high levels of planning and liaison to deliver the curriculum</td>
<td>Pupil needs 1:1 support to access the curriculum plus MSA to ensure safe inclusion at lunchtime</td>
<td>Complex physical/medical conditions that need addressing through a number of agencies</td>
</tr>
<tr>
<td></td>
<td>Pupil may have some difficulties and differences with sensory integration and processing affecting tolerance levels, attention and access to learning which staff have to be aware of and plan for.</td>
<td>In order to access learning a high level of prompting is required i.e. visual and physical</td>
<td>Time is needed for staff to work in collaboration with other schools or alternative providers to meet needs</td>
<td>Pupil will need high levels of specialist equipment for example, brailer, Braille Note, speech software</td>
<td>Time for staff to plan/coordinate work of a variety of agencies</td>
</tr>
<tr>
<td></td>
<td>Pupil needs access to small group teaching and 1:1 support for learning in order to progress</td>
<td>An individualised curriculum is needed with advice from special school staff</td>
<td>Pupil may have a severe attachment disorder or other mental health need and active casework from CAMHS is needed</td>
<td>Pupil will need weekly plus support from a QTVI (e.g. 3 teaching sessions per week) and weekly sessions from specialist VI ICT and Mobility &amp; Independence</td>
<td>Daily access to medical treatment</td>
</tr>
<tr>
<td></td>
<td>Pupil needs access to reduced stimulus workstation within and outside the classroom</td>
<td>Staff spend at least 2.5 hours planning and differentiating, the learning programme, each week.</td>
<td>Engagement with Targeted Youth Services may be needed</td>
<td>Time for school &amp; VI staff to jointly modify planning and curriculum access (weekly session)</td>
<td>Frequent prolonged absence and difficulties sustaining achievement level when returning to school</td>
</tr>
<tr>
<td></td>
<td>The environment is planned so that the needs of children and young people with ASD can be met.</td>
<td></td>
<td></td>
<td><strong>Severe HI</strong></td>
<td>Pupil at KS 2 and above needs 1:1 support for much of the day for scribing and curriculum access.</td>
</tr>
</tbody>
</table>
Key staff have had additional training to support pupils with ASD.

Staff are able to deliver appropriate programmes to meet ASD needs in cooperation with the LA CCD Team.

Communication skills are not functional despite Band 2 support. Severe and specific speech and/or language disorder.

Language 1st centile but learning 1 standard deviation higher. Speech is below 3yr old age equivalent at the end of KS1

At KS 2 or above 1/2-word level/ P4 for speaking and listening

School staff and SLT need to work collaboratively more than half-termly

School staff need experience and training in delivering SLT support to complex children

Pupil needs to see SLT more than half-termly in school and blocks of clinic therapy

---

Severe delay in language and communication skills (as measured by appropriate assessments*) coupled with significant deficits in expressive language skills making speech difficult to understand for all listeners. Poor use of hearing aids and assistive technology may negatively impact initiatives to close language and communication gap.

Additional language and communication systems may be used (e.g. Makaton / BSL)

Is likely to need 1:1 support for much of the day for pre and post tutoring and to ensure that curriculum is suitably differentiated in terms of language and cognitive level.

* According to age assessments include Early Support Monitoring Protocol, Ski-Hi, TELD, ACE, TROG, BPVS.
Interventions such as SULP, COSST &/or Communication Books need to be highly individualised and regularly revised
<table>
<thead>
<tr>
<th>Band</th>
<th>Speech, Language and Communication</th>
<th>Cognition and Learning</th>
<th>SEMH</th>
<th>Sensory</th>
<th>Physical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Element 3 Band 4</td>
<td>Early stages of communication at upper KS2 and above needs to be supported via tactile signing, objects of reference etc; 1:1 at times 1:2 support needed to meet the pupil’s needs</td>
<td>Profound and multiple learning difficulties  Pupil works P3ii or below for the whole of their school career and often makes lateral rather than linear progress  The level of learning achieved is not sustained over time  Requires intensive 1:1 throughout the day in order to make progress.  Time is needed for regular multi-agency meetings to plan next steps in learning.</td>
<td>Behaviours can be extreme and unpredictable so that 2 staff may need to be deployed at times for pupil’s safety and the safety of others  Pupil may have an Anti-Social Behaviour Order and require a high level of engagement with agencies such as housing/other therapeutic services/probation etc;  Pupil has a detailed individual behaviour management plan to manage a number of aggressive behaviours which can include restrictive physical intervention.  A member of staff is needed to supervise 1:1 calming after an incident, at times, 1:2</td>
<td>Severe VI plus  Pupil will have a severe visual impairment or be educationally blind and/or have a significant additional area of special educational need, e.g. learning, hearing (MSI) and/or physical.  Pupil will need school placement in either  - Out of borough VI special school  - LA special school with additional, specialist, daily input to meet the severe visual impairment needs (e.g. Braille &amp; mobility)</td>
<td>Severe, complex physical/medical needs  Degenerative condition in need of possible end of life care  In need of 1:1 at times 1:2 care to meet physical/medical/learning needs  Needs small teaching group of 6 or fewer with access to 1:1 support for learning for much of the day  May have: enteral feeding needs  tracheotomy  require oxygen/stops breathing, at times  Frequent multi-agency meetings are required to maintain an optimum care/learning plan.</td>
</tr>
<tr>
<td></td>
<td>Needs individualised curriculum and workspace throughout the day  Pupil may be non-verbal or language use is not generally communicative  Pupil lacks shared attention and is intolerant of adult direction  Pupil may have severe difficulties and differences with sensory integration and processing affecting tolerance levels, attention and access to learning and requiring frequent ‘sensory breaks, in the school day  Needs some teaching and support staff to have additional qualification in ASD  Environment is adapted to</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

[IL0: UNCLASSIFIED]
reflect best practice in ASD provision

Staff are trained in application of TEACCH and the delivery of learning programmes through this approach

Multi-agency approach to family support

communication skills (as measured by appropriate assessments*). Speech is unintelligible to most listeners

Additional language and communication systems in use

If not in specialist provision will need full-time 1:1 support throughout the day for pre and post tutoring and to ensure that curriculum is suitably differentiated in terms of language and cognitive level.

Additional mobility problems

- According to age assessments include Early Support Monitoring Protocol, Ski-Hi, TELD, ACE, TROG, BPVS
<table>
<thead>
<tr>
<th>Band</th>
<th>Speech, Language and Communication</th>
<th>Cognition and Learning</th>
<th>SEMH</th>
<th>Sensory</th>
<th>Physical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Element 3</td>
<td></td>
<td></td>
<td>Pupil has extremely challenging and unpredictable behaviour despite a consistent and well planned programme of support.</td>
<td></td>
<td>Pupil has a medical condition which is not yet well controlled and often leads to challenging behaviours which needs highly specialist residential care</td>
</tr>
<tr>
<td>Band 5</td>
<td></td>
<td></td>
<td>Pupil is frequently at risk of harming self and others and de-escalation can take several hours. Pupil needs constant supervision.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Parents/carers cannot manage behaviour at home and both adults and pupil are at risk.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Pupil is in need of residential care or equivalent home/school small group 1:1/1:2 support to bring about improvement in emotional well-being and behaviour</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

10 October 2017
Timelines for completing an Education, Health and Care Plan

Appendix 9
Education Health & Care Plan – Development

**Parental Request not known**

Request is made directly to SEN by parent
LA decision to conduct EHC Assessment needed within 6 weeks of this date

Phone call, letter, explaining process to parents: CAM, at venue of parent choice is offered. **School to coordinate**

Parent agrees - call CAM meeting to include: parents, pupils, health, social care, housing etc. as relevant to pupils needs. EHC Yes / No

Yes

Meeting participants decide any additional info needed for request for EHC Plan. Include schools who parent has made a preference for

SENCo gathers information and send in request for assessment within 4 weeks of request

Continuation of 20-week process to complete EHC Assessment and Plan

School / IS notified of request. CAM to be held within 4 weeks of parental request

No EHC Plan

CAM to plan provision from Local Offer, to support pupil progress

Review progress if no progress in 6 months call CAM

No

AMP

Yes
SEN Handbook 2017
Revised September 2017

EHCP Annual Review Timeline

Appendix 10
**EHCP Annual Review Timeline**

**Preparation**
- The annual review meeting must take place within 12 months of issuing the plan or the previous review.
- Schools should agree dates with parents, child or young person and external professionals (if appropriate) as early as possible. It is recommended that external professionals required at annual review meetings are given at least 4 weeks notice.
- School prepares "school contribution" document and collects reports / information from the child / young person, parents and external professionals ready for distribution.

**2 weeks before the meeting**
- School circulates all reports and "school contribution" document to all those invited to the annual review meeting at least 2 weeks before the meeting.

**The annual review meeting**
- The annual review meeting should be person centred
- The meeting involves all participants, with the parent and child or young person's views as central to the meeting. It focuses on the Education, Health and Care Plan:
  - The child or young person's strengths and needs
  - What is working well and progress towards outcomes
  - What else needs to be done to achieve the discussed outcomes
  - Identifies new interim targets and support for the coming year
- School records agreed interim targets and support in the highlighted section of School Contribution Form.

**Within 10 school days after the meeting**
- School completes the "Summary of Information for Annual Review" document and circulates it to all people invited to the annual review
- School sends all information to the LA. This includes:
  - School contribution to Annual Review + and if recommending any amendments a copy of annotated EHCP with new proposals
  - Pupil views (About Me Now)
  - Parents views
  - External professionals reports
  - Summary of information for Annual

**Within 4 weeks of the review meeting**
- Within 4 weeks of the annual review meeting the LA must respond to parents and school as to whether it proposes to maintain, amend or cease the EHC Plan
- If the LA proposes to amend the plan the LA has a total of **12 weeks** from the annual review to do this.
## Wellcomm Language Screening

<table>
<thead>
<tr>
<th>Date</th>
<th>Section 1</th>
<th>Section 2</th>
<th>Section 3</th>
<th>Section 4</th>
<th>Section 5</th>
<th>Section 6</th>
<th>Section 7</th>
<th>Section 8</th>
<th>Section 9</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Early Years Foundation Stage

<table>
<thead>
<tr>
<th>Areas of Learning and development</th>
<th>Aspect</th>
<th>2 Year Old Check</th>
<th>Current EYFS level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prime Areas</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal, Social and Emotional Development</td>
<td>Making Relationships</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Self-Confidence and Self Awareness</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Managing Feelings and Behaviour</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Development</td>
<td>Moving &amp; Handling</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Health &amp; Self Care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Areas of Learning and development</td>
<td>Aspect</td>
<td>2 Year Old Check</td>
<td>Current EYFS level</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>-----------------------</td>
<td>------------------</td>
<td>--------------------</td>
</tr>
<tr>
<td>Communication and Language</td>
<td>Listening &amp; Attention</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Understanding</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Speaking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Specific Areas</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Literacy</td>
<td>Reading</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Writing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mathematics</td>
<td>Numbers</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Shape, Space and Measure</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Reception Baseline Assessment (if used)**

<table>
<thead>
<tr>
<th>Date</th>
<th>Assessment used</th>
<th>Mathematics</th>
<th>Literacy</th>
<th>Overall Score / Readiness</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Phonics Screening Check**

<table>
<thead>
<tr>
<th>Year 1 Screening Check</th>
<th>Year 2 Screening Check</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td></td>
</tr>
<tr>
<td>Score:</td>
<td></td>
</tr>
<tr>
<td>Pass:</td>
<td></td>
</tr>
</tbody>
</table>
Specific Phonic Assessment
(if below is not appropriate please attach school’s own phonic assessment)

<table>
<thead>
<tr>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Read:</td>
<td>Write:</td>
<td>Read:</td>
<td>Write:</td>
<td>Read:</td>
</tr>
<tr>
<td>Single letter phoneme / grapheme correspondence</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Simple CVC words</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consonant digraphs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Simple CVCC / CCVC words</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Common vowel phonemes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CVC / CCVC / CVCC words using common vowel digraphs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 syllable words</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Reading**

| Date: | | | | |
|-------| | | | |
| School Assessment/ P level | | | | |
| HFW: | | | | |
| **Standardised Reading Test**  
| (Please specify)  |

| **Decoding:**  |
|  |

| **Standardised Score**  |
|  |

| **Percentile**  |
|  |

| **Age Equivalent**  |
|  |

| **Comprehension:**  |
|  |

| **Standardised Score**  |
|  |

| **Percentile**  |
|  |

| **Age Equivalent**  |
|  |

| **Writing**  |
|  |

| **Date:**  |
|  |

<p>| <strong>School Assessment/ P level</strong>  |
|  |</p>
<table>
<thead>
<tr>
<th><strong>Spelling</strong></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Standardised Spelling Test</strong> (Please specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standardised Score</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentile</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age Equivalent</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Maths</strong></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>School Assessment/P Level</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Standardised Maths Test.</strong> (please specify)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standard Score:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentile:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age Equivalent:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
KS1 and KS2 Data Summary Sheets

School: [ ]  Pupil: [ ]  DOB: [ ]

End of Foundation Stage Profile

<table>
<thead>
<tr>
<th>Date</th>
<th>Communication and Language</th>
<th>Physical</th>
<th>Personal Social and emotional</th>
<th>Literacy</th>
<th>Mathematics</th>
</tr>
</thead>
</table>

Reception Baseline Assessment (if used)

<table>
<thead>
<tr>
<th>Date</th>
<th>Assessment used</th>
<th>Mathematics</th>
<th>Literacy</th>
<th>Overall Score / Readiness</th>
</tr>
</thead>
</table>

End of KS1 National Curriculum

<table>
<thead>
<tr>
<th>Date</th>
<th>Reading</th>
<th>Writing (Teacher Assessment)</th>
<th>Spelling</th>
<th>Maths</th>
</tr>
</thead>
<tbody>
<tr>
<td>KS1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Reading

<table>
<thead>
<tr>
<th>Date:</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>School Assessment:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>P Level:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HFW:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standardised Reading Test:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(please specify)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Decoding:

| Standardised Score |                                               |                                               |                                               |
| Percentile         |                                               |                                               |                                               |
| Age Equivalent     |                                               |                                               |                                               |

#### Comprehension:

| Standardised Score |                                               |                                               |                                               |
| Percentile         |                                               |                                               |                                               |
| Age Equivalent     |                                               |                                               |                                               |

### Spelling

<table>
<thead>
<tr>
<th>Date:</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Standardised Spelling Test (Please specify)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Standardised Score |                                               |                                               |                                               |
### Specific Phonic Assessment
(If below is not appropriate please attach school’s own phonic assessment)

<table>
<thead>
<tr>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Read</td>
<td>Write</td>
<td>Read</td>
<td>Write</td>
<td>Read</td>
</tr>
</tbody>
</table>

- Single letter phoneme / grapheme correspondence
- Simple CVC words
- Consonant digraphs
- Simple CVCC / CCVC words
- Common vowel phonemes
- CVC / CCVC / CVCC words using common vowel digraphs
- 2 syllable words

### Writing

<table>
<thead>
<tr>
<th>Date:</th>
<th>School Assessment:</th>
<th>P Level:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Maths

<table>
<thead>
<tr>
<th>Date:</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>School Assessment / P level</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Standardised Maths Test (please specify)**

<table>
<thead>
<tr>
<th>Standardised Score</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentile</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age Equivalent</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Language, Speaking and Listening

<table>
<thead>
<tr>
<th>Date:</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>School Assessment / P level</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Standardised Language Test (please specify)**

<table>
<thead>
<tr>
<th>Standardised Score</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentile</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age Equivalent</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**KS3 and KS4 Data Summary Sheet**

<table>
<thead>
<tr>
<th>School:</th>
<th>Pupil:</th>
<th>DOB:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>KS2</th>
<th>English</th>
<th>Maths</th>
<th>Science (sample if appropriate)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

School Assessment – termly tracking

| Date: | | | |
|-------| | | |

| English: | | | |
|---------| | | |

| Maths: | | | |
|--------| | | |

| Science: | | | |
|----------| | | |
Specific Phonic Assessment
(Please change order of progression to match your school’s phonics programme)

<table>
<thead>
<tr>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single letter phoneme / grapheme correspondence</td>
<td>Read</td>
<td>Write</td>
<td>Read</td>
<td>Write</td>
</tr>
<tr>
<td>Simple CVC words</td>
<td>Read</td>
<td>Write</td>
<td>Read</td>
<td>Write</td>
</tr>
<tr>
<td>Consonant digraphs</td>
<td>Read</td>
<td>Write</td>
<td>Read</td>
<td>Write</td>
</tr>
<tr>
<td>Simple CVCC / CCVC words</td>
<td>Read</td>
<td>Write</td>
<td>Read</td>
<td>Write</td>
</tr>
<tr>
<td>Common vowel phonemes</td>
<td>Read</td>
<td>Write</td>
<td>Read</td>
<td>Write</td>
</tr>
<tr>
<td>CVC / CCVC / CVCC words using common vowel digraphs</td>
<td>Read</td>
<td>Write</td>
<td>Read</td>
<td>Write</td>
</tr>
<tr>
<td>2 syllable words</td>
<td>Read</td>
<td>Write</td>
<td>Read</td>
<td>Write</td>
</tr>
</tbody>
</table>

Reading

<table>
<thead>
<tr>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Assessment/ P Level</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HFW:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standardised Reading Test: (please specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Decoding</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------------------------</td>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Standardised Score</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentile</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age Equivalent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Comprehension</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Standardised Score</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentile</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age Equivalent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Spelling</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standardised Spelling Test (Please specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standardised Score</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentile</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age Equivalent</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Maths</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standardised Maths Test (please specify)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Standard Score</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentile</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age Equivalent</td>
<td>Date:</td>
<td>Date:</td>
<td>Date:</td>
<td>Date:</td>
</tr>
<tr>
<td>----------------</td>
<td>-------</td>
<td>-------</td>
<td>-------</td>
<td>-------</td>
</tr>
<tr>
<td><strong>Alternative Curriculum</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Progress/Title of Award</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date:</td>
<td>Date:</td>
<td>Date:</td>
<td>Date:</td>
<td>Date:</td>
</tr>
</tbody>
</table>
SEN Handbook
2017
Revised September 2017

Elective Home Education – Flow chart for students with EHCP

Appendix 12
Alert to possible EHE from School. School liaise with EHE teacher and SEN.
School call Early Annual Review (EAR).

EAR attended by Parents, School, SEN Officer, ECP, EHE Teacher.
EHE Teacher submits graduated assessment report.

Young Person remains on school roll.
Attendance procedures followed.

Parents continue to request Elective Home Education.

Visit by EHE Teacher, up-dated statutory report and consultation with ECP.

Case submitted to, and considered by Provision Panel.

Parents no- longer considering Elective Home Education. Recommendations made at EAR to support school placement.

Discuss proposed Home Education programme linked to EHCP outcomes.
Co-produce draft short term outcomes and areas for development with parents.
EHE Officer completes agency checklist.

Parents no longer considering Elective Home Education.

Case submitted to, and considered by Provision Panel.

EHE not agreed.

EHE agreed.

Within 2 Weeks

Parents, School, ECP, SEN Officer plan for return to school.

Parents have option for SENDIST appeal.

Revised EHCP issued by SEN.
Agreed to remove child off roll.
EHE Teacher assist parent on delivery of Programme.
EHE Teacher monitor outcomes and report at Annual Review.

Within 4 Weeks

Parents continue to request Elective Home Education.

Visit by EHE Teacher, up-dated statutory report and consultation with ECP.

Case submitted to, and considered by Provision Panel.

Parents no- longer considering Elective Home Education. Recommendations made at EAR to support school placement.

Discuss proposed Home Education programme linked to EHCP outcomes.
Co-produce draft short term outcomes and areas for development with parents.
EHE Officer completes agency checklist.

Parents no longer considering Elective Home Education.

Case submitted to, and considered by Provision Panel.

EHE not agreed.

EHE agreed.