

**SEND**

**THE GRADUATED  
APPROACH<sup>TO</sup>  
SEND PROVISION  
IN KNOWSLEY**



Knowsley  
**CHILDREN &  
FAMILIES**  
Board







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# INTRODUCTION

The purpose of this document is to outline the provision and support that Knowsley Council expects to be in place in all educational settings which support Knowsley children and young people with SEND. It provides detailed guidance on how educational settings can identify children and young people with different **types** and **levels** of need, along with information on appropriate steps and strategies to support them. It also provides clear information about when a request for an Education, Health and Care Plan, or specialist services may be required. This document should be read alongside the document, *Planning Provision for Special Educational Needs and Disability* produced in 2017.

The current national school funding reforms introduced in April 2013 resulted in changes to funding for mainstream schools to support their educational provision for pupils with SEND. Schools no longer get additional funding from the Local Authority (LA) to support the majority of pupils with SEND. Funding previously held by the LA for this purpose is now devolved to schools' in their annual budget and forms part of the school's notional SEN budget. Mainstream schools will be required to fund the additional support to all their SEND pupils from this budget (for pupils at Band 2 and 3). Pupils identified as qualifying for funding for more complex high cost need will be eligible for further funding from the LA through provision of an Education, Health and Care Plan (EHCP) as shown on page 6.

\*\*\* For PVI Settings and maintained School Nurseries refer to EY SEND Inclusion Fund criteria.





**Communication and Interaction**

**Cognition and Learning**

**Social, Emotional and Mental Health**

**Physical Sensory**

(The band descriptors are written in such a way that it is an expectation that the assessments, curriculum, groupings and resources from the previous band will be taken into consideration when considering higher bands.)

1

**Age Weighted Pupil Unit (AWPU)  
Universal Offer**

2

**AWPU (element 1) plus element 2 SEN  
Notional Funding**

3

**SEN Notional Funding plus additional  
funding through EHCP (element 3)**

4

**High Needs Block (element 3)**

5

**High Needs Block (element 3)**





# ENTITLEMENT <sup>TO</sup> QUALITY FIRST TEACHING

All pupils are funded through the Basic Entitlement (AWPU) - funding allocated to the PVI setting/ school for each pupil according to age.

All pupils are entitled to be included through Quality First Teaching and other supportive provision. This includes pupils at SEN Support and those with EHC Plans.

Additional provision for all low cost, high incidence special educational needs pupils will be met from the school's delegated budget (The Notional SEN Budget).

All children should have access to **Quality First Teaching** which is characterised by:

- highly focused lesson design with sharp objectives
- appropriate demands of pupil involvement and engagement with their learning
- appropriate levels of interaction for all pupils
- appropriate use of practitioner/teacher questioning, modelling and explaining





- an emphasis on learning through dialogue, with regular opportunities for pupils to talk both individually and in groups
- an expectation that pupils will accept responsibility for their own learning and work independently
- regular use of encouragement and meaningful praise to engage and motivate pupils
- practitioner's/teacher's planning should include evidence of differentiation for pupils with SEND

Effective inclusive teaching occurs when:

- **pupils are clear what they will be learning**, what they need to do and what the criteria are to judge when the learning has been achieved
- **links are made to learning elsewhere** in the curriculum, helping pupils transfer their knowledge and understanding in different contexts
- **lessons make links** with prior knowledge and understanding, are active and enjoyable and create success
- **there are frequent opportunities for purposeful talk**, for learning through use of talk partners or structured small-group tasks with supportive peers
- **pupils are encouraged to ask questions** to clarify understanding
- **pupils have personal targets** which they own and are working towards in the lesson
- **the teacher models the process**, explaining what they are doing, thinking and questioning aloud
- **homework or pre-learning is referred to and used** to move pupils forward within the lesson
- **parental involvement** to consolidate learning and bridge gaps
- **strategies for active engagement** through a range of different styles are used at various points throughout lessons
- **lessons support pupils** to reflect openly on what they've learned and how this fits with what is coming next













# COMMUNICATION AND INTERACTION

PLEASE REFER TO KNOWSLEY GUIDANCE - 'PLANNING PROVISION FOR SEN'

## DEFINITION / CHECKLIST OF COMMON CHARACTERISTICS

### Speech, Language and Communication

Many children with Special Educational Needs have strengths and difficulties in one, some, or all areas of speech, language and communication.

The range of difficulties will encompass children and young people with speech and language delay or disorders. They may also experience learning difficulties or have an Autistic Spectrum Condition (ASC).

These may be exhibited through:

- Difficulties in understanding the meaning of language
- Difficulties in articulation and phonology
- Difficulties with expressive language, putting words into meaningful sentences and/or forming structured sentences appropriate to the child's age and development
- Difficulty with vocabulary acquisition
- Difficulties with listening and attention skills
- Consequential difficulties of social interaction with peers, pragmatic skills and social communication
- May have problems with establishing curriculum concepts e.g. in mathematics and science
- May have difficulty with understanding some texts due to poor auditory and comprehension/prediction skills
- The pupil may rely on visual prompts or following peers rather than verbal instructions
- May only process part of instructions, e.g. the last sentence
- The pupil's progress is affected by their speech and language difficulties



**Autistic Spectrum Condition (ASC)** are characterised by differences with social communication and interaction as well as restricted or repetitive patterns of interest or behaviour.

They may show themselves in the following ways:

- difficulties in attuning to social situations and responding to normal environmental cues, evidence of emerging personal agendas which are increasingly not amenable to adult direction
- a tendency to withdraw from social situations and an increasing passivity and absence of initiative
- repressed, reduced or inappropriate social interactions extending to some egocentric behaviour with an absence of awareness of the needs or emotions of others impaired use of language, either expressive or receptive; this may include odd intonation, literal interpretations and idiosyncratic phrases and may extend to more bizarre expressive forms and limited expression, reducing the potential for two-way communication
- limitation in expressive or creative peer activity extending to obsessive interests or repetitive activities
- interests that are unusual in focus or intensity and topic
- differences in the processing of sensory information that can lead to heightened states of arousal or agitation
- reliance on structure or routines and/or distress at small/non-functional changes in the environment.

Pupils with autistic spectrum conditions can also experience difficulties with fine and gross motor skills, concentration and planning of activities.

Some children and young people with autistic spectrum conditions also experience learning difficulties, but many do not, and autism spectrum conditions can affect individuals at all levels of learning and cognitive development.

Individuals with autism may typically present with an uneven profile of abilities.

Challenging behaviour (socially inappropriate response) is not a core feature of autistic spectrum condition. However, children and young people with autistic spectrum conditions can experience heightened states of anxiety, agitation, distress or physiological arousal in response to challenging situations e.g. due to difficulties understanding communication, sensory over/under-stimulation or unexpected changes in routines. Where children and young people experience such situations and when they lack strategies and resources to cope, this can lead to behaviour that is “challenging”.

The degree of challenging behaviour that a child or young person shows is not a measure of the severity of their autistic spectrum condition; rather, it is an indication of the mismatch between the pupil, the demands of the environment or situation, and their coping skills. We may expect pupils with autism spectrum conditions at all levels to display some challenging behaviour if appropriate provision is not made to meet their needs.



## Early Years

### Communication

- Child's expressive and/or receptive language is showing some delay (age to be taken into account) and child requires some additional input to facilitate progress
- Speech and Language Therapy (SALT) may be involved and a SALT care plan may be in place
- Immature speech sounds
- Requires repetition, slow pace of language and use of key words
- Speech is intelligible to familiar adult

### Social Interaction

- Some difficulties following social norms, for example, eye contact, conversation, sharing and turn taking
- Some difficulties speaking with adults outside of the family
- Some withdrawal from the company of others
- Limited ability to tolerate social interaction (age to be taken into account)
- Higher than usual levels of anxiety at times of change or transition (routine/environment/people)
- Some difficulties following adult directed activities
- Some restricted play interests and/or child sticks to preferred activities e.g. vehicles, computer etc.
- Child may engage in solitary play

- Child enjoys and responds better to visual information rather than auditory/language based
- Child may have some preferences in foods, clothing and become anxious when encouraged to try new experiences
- If upset, child may take longer to settle and reassure than peers





## BAND 1 - COMMUNICATION AND INTERACTION FUNDING - AGE WEIGHTED PUPIL UNIT (AWPU) UNIVERSAL OFFER

Assessments, targets, review	Curriculum Access	Groupings and Pastoral Care	Equipment and Resources
SLCN	SLCN	SLCN	SLCN
<p>Language checklists to be completed to set targets.</p> <p>Some pupils with poor communication will respond quickly given a rich and well-targeted language curriculum.</p> <p>Some pupils will have longer term difficulties with articulation and/or language development.</p> <p>PVI settings/Schools should consult with parents and suggest/request a referral to a speech and language therapist if necessary.</p> <p>SALT may need to provide an assessment, report and recommend targets.</p> <p>PVI setting/Schools would need a communication plan in place with clear targets and liaise with parents</p>	<p>The teacher may need to check that instructions are understood.</p> <p>Attention skills will need to be taught.</p> <p>Place yourself where children can see your face clearly and you can see them.</p> <p>Keep all distractions to a minimum.</p> <p>Allow for frequent practice through recall and repetition.</p> <p>Give a warning when an activity is coming to an end and to support the transition (this may need to be a visual warning, e.g. Traffic Light System).</p> <p>Introduce new activities and experiences sensitively and in smaller amounts, e.g. small tray of</p>	<p>The PVI setting/school will need to liaise closely with the SALT and the parents/carers.</p> <p>The pupil will require a regular programme of small group/1-1 support to implement the programme provided by the SALT.</p> <p>May need small group support in some areas of the curriculum particularly CLD/literacy.</p> <p>Parents continue programme at home.</p> <p>Allow extra time for processing information, answering and completing tasks.</p> <p>Support development of sharing and turn taking in small groups and on individual basis if required.</p>	<p>Regular time slot to implement a programme provided by the SALT(1:1 or Small Group).</p> <p>PVI setting/Schools should implement a language appropriate programme with a pre/post assessment to measure impact.</p> <p>May need more access to visual aids, and concrete operations to enable understanding.</p> <p>Possible need for enhanced pastoral and break/lunchtime support to improve social interaction.</p> <p>Visual supports to aid language understanding (e.g. symbols, pictures, objects of reference, signs/gestures).</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>
<p>every 12 weeks.</p> <p>Early Years Children would need a play plan with SLCN targets and liaise with parents every three weeks.</p> <p>Parents should continue to support CL programme at home.</p>	<p>sand presented individually.</p> <p>Encourage child or young person to use gestures to support speech.</p> <p>Create a predictable and consistent environment, ensuring routines are followed.</p> <p>Keep language clear, concise and unambiguous.</p>	<p>Encourage the child or young person to tell you if they have not understood something.</p>	<p>Access to and use of individualised visual timetable.</p> <p>Possible planned and consistent position of seating in class to minimise difficulties linked to sensory and social interaction difficulties.</p>
<b>ASC</b>	<b>ASC</b>	<b>ASC</b>	<b>ASC</b>
<p>Careful observation and assessment in order to establish the true underlying difficulties.</p> <p>Pupils may have accompanying difficulties including:</p> <ul style="list-style-type: none"> <li>• movement, motor co-ordination, clumsiness</li> <li>• sensory sensitivity</li> <li>• sequencing, planning and/or organisational difficulties</li> </ul> <p>Environmental check to identify</p>	<p>Consistent, structures and predictable setting/classroom routines with preparation in advance for changes and transitions.</p> <p>Concrete language with an avoidance of figurative speech, idioms, sarcasm etc.</p> <p>Attention to the pupil's areas of special interest or skills in order to promote learning.</p> <p>Visual supports to aid language</p>	<p>Access to small group activities to help to develop:</p> <ul style="list-style-type: none"> <li>• Social interaction</li> <li>• Communication skills.</li> <li>• Concentration</li> <li>• Extension of activities</li> <li>• Diffusing anxieties</li> <li>• Development of motor skills</li> <li>• promote/support sensory differences (e.g. sensory diet)</li> </ul>	<p>Access should be given to:</p> <ul style="list-style-type: none"> <li>• use of setting/class/group or individual visual timetable</li> <li>• use of charts, lists, symbols, pictures</li> <li>• may need planned and consistent seating to reduce negative consequences of sensory or social interaction difficulties</li> <li>• to simple resources to aid concentration in response to</li> </ul>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>ASC</b>	<b>ASC</b>	<b>ASC</b>	<b>ASC</b>
<p>aspects of the environment that might lead to increased anxiety, arousal or sensory sensitivity.</p> <p>Parents and PVI setting/school to complete the social and interaction checklist.</p>	<p>understanding (e.g. pictures, symbols, objects of reference, gestures, and checklists) to help access to the curriculum.</p> <p>Learning tasks are differentiated to account for the pupil's strengths and weaknesses. Small steps approach.</p> <p>May benefit from additional support for planning and structuring written/verbal tasks.</p> <p>Provision of clear, explicit targets for completion of tasks (e.g. using timers, targets for quantity).</p>	<p>Careful application of rules (to avoid rigidity or literal interpretation).</p> <p>The pupil may need individual support for some learning activities or at other times of the day (e.g. to assist with transitions).</p> <p>Development of individualised social stories to aid social understanding and plan for new/unusual events.</p>	<p>sensory modulation difficulties (e.g. objects to fiddle, chew)</p> <p>Pupil may need considerable preparation for changes in routine.</p> <p>Possible need for enhanced pastoral and break/lunchtime support to improve social interaction.</p> <p>There should be a designated practitioner/member of school staff (e.g. SENCO) who has received specific training on understanding the needs of pupils with autistic spectrum conditions.</p>



## **BAND 2 - COMMUNICATION AND INTERACTION FUNDING - AWP (ELEMENT 1) PLUS ELEMENT 2 SEN NOTIONAL FUNDING**

### **Speech, Language and Communication**

Ongoing difficulties with **some** of the following:

- Diagnosed Developmental Language Disorder or Speech Sound Disorder
- Persistent speech/language difficulties which are impacting on ability to access curriculum
- Mild- Moderate difficulties with receptive language or expressive language
- Free spontaneous speech can be unintelligible
- Good use of consonants and vowels at a single word level but poor transfer of skills within conversations
- Can be intelligible to familiar and some unfamiliar listeners
- Can follow some routine-based setting/class instructions in context, with visual supports provided
- Some difficulties with social interaction due to difficulties being understood by peers

### **Autistic Spectrum Condition (ASC) / Social Communication Difficulties**

Pupils may or may not have a diagnosis of ASC however they will have difficulties with the following areas:

- Ongoing sensory difficulties that require additional input from an adult (e.g. sensory circuit/sensory diet)
- Limited functional language/communication skills within school
- Child requires clear instructions with visual reinforcement to complete work tasks/learning within the setting/classroom. With this support, child can access some work tasks independently
- Restricted or repetitive patterns of behaviour that occasionally limit access to EYFS provision/class-based learning
- Can use self-regulation strategies with some support/adult direction
- Limited communication skills can occasionally cause distress/upset
- Preparation is required (warnings and visuals) for any changes to regular routine
- Child can cope with small environmental changes when visuals, key language/explanation is given
- Child needs constant reinforcing of classroom rules/boundaries
- Child may have social communication difficulties/ASC diagnosis alongside other learning difficulties or medical conditions
- May show difficulties with social interaction, inflexibility of thinking and sensory processing can lead to the child being distressed



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>
<p>SALT will need to provide an assessment, report and recommend targets.</p> <p>Regular review by SALT.</p> <p>May need IEP/Play plan/CSP to focus on SLC targets.</p> <p>Close liaison and involvement of parents.</p> <p>Place child or young person on register as SEN Support (code k).</p> <p>Implementation of any programme should be supported by regular consultation with parents/carers and professionals, as appropriate.</p>	<p>Depends heavily on context, cues and example of peers.</p> <p>Will have difficulties in accessing and participating in some aspects of the curriculum.</p> <p>Will need abstract concepts to be presented through practical demonstration.</p> <p>Specialist input and/or additional resources required to access the curriculum.</p> <p>Strong emphasis on, and consistent use of, visual support which is appropriate to the child's level of language abilities and cognitive development e.g. objects of reference/photographs/symbols.</p> <p>Model correct pronunciation for the child - avoid correcting their efforts.</p>	<p>Planning sessions to implement S&amp;L targets.</p> <p>Will need some support in the PVI setting/classroom in areas where particular difficulties are experienced.</p> <p>There will need to be planned and monitored opportunities for social interaction with peers to develop language.</p> <p>Ensure close partnership working with parents. This includes sharing play plans/SEN support plans, and strategies and interventions to use in the setting and at home.</p> <p>Key person Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis - minimum of 3 meetings with parents within a 12 month period. Playplans reviewed every 6 weeks.</p>	<p>1-1 speech and language programme planned by SALT and implemented by practitioners/staff.</p> <p>Requires additional time from adults in order to facilitate effective communication.</p> <p>Targeted provision/setting/classroom support.</p> <p>Requires regular advice from SALT with specific programmes to be carried out by the school.</p> <p>Additional support required to teach and manage alternative communication systems which may involve support from outside agencies.</p> <p>Continue with language intervention with pre/post data.</p> <p>Implement strategies (including targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>
			<p>up to a maximum of £6,000 (this is equivalent to approximately 12 hours of additional support).</p> <p>Ensure that preferred methods of communication (as well as level of eye-contact) known by all practitioners/staff within setting/school.</p>
<b>ASC</b>	<b>ASC</b>	<b>ASC</b>	<b>ASC</b>
<p>SALT assessment, advice, and review.</p> <p>Possible IEP, Play plan with consideration given to root causes of behaviour.</p> <p>Close liaison with parents. Advice may be needed on targets and monitoring from an external agency (e.g. SALT, OT, EP, and Specialist Teacher).</p> <p>Social stories may be needed to alleviate anxieties and frustrations.</p>	<p>The pupil is likely to require very structured approaches to teaching.</p> <p>The use of personalised rewards (linked to the pupil's interests) can be used to promote motivation.</p> <p>There should be planned and consistent use of language by all staff working with the pupil to assist with understanding. May need visual cues.</p> <p>May need support to develop self-help, independence skills and independent learning.</p>	<p>The pupils may require individual adult support to access learning tasks or at other times (e.g. transitions, unstructured times). This should be planned and predictable.</p> <p>Planned and monitored opportunities for social interaction with peers and help in learning to adapt to new situations.</p> <p>Adult support for activities aimed at developing social skills, or understanding and managing emotions.</p>	<p>Continue with any relevant strategies from Band 1, plus:</p> <p>“Now and next” symbols, task boxes, resources to support structured teaching.</p> <p>Use social stories to aid understanding of social situations.</p> <p>Withdrawal facilities provided for times of stress or anxiety e.g. sensory room.</p> <p>Specific small group interventions.</p> <p>Adult help may be required to assist</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>ASC</b>	<b>ASC</b>	<b>ASC</b>	<b>ASC</b>
	<p>Strong emphasis on, and consistent use of, visual support which is appropriate to the child's level of language abilities and cognitive development e.g. objects of reference/photographs/symbols.</p>	<p>Access to structured activities (e.g. adult led/workstation extracurricular clubs) during unstructured times of day and/or occasional access to a safe place.</p> <p>Ensure all practitioners/staff involved in the teaching of the individual child are aware of their speech, language, social and communication difficulties.</p>	<p>cognitive development, distract the pupils from repetitive activity and develop their attention skills.</p> <p>Provide access to a quiet, distraction free work station if needed.</p> <p>Create an individualised timetable which is predictable and consistent, and includes unstructured times e.g. lunch/child initiated play.</p>



## **BAND 3 - COMMUNICATION AND INTERACTION FUNDING - SEN NOTIONAL FUNDING PLUS ADDITIONAL FUNDING THROUGH EHCP**

### **Speech, Language and Communication**

Persistent and moderate difficulties with **some** of the following:

- May have a reduced range of speech sounds
- Occasionally intelligible to unfamiliar listeners but reliant on environmental/social cues
- Unable to follow simple instructions without visual cues or models
- Diagnosed Developmental Language Disorder or Speech Sound Disorder
- Persistent speech/language difficulties which are causing barriers to learning, social relationships and self-esteem
- Self-Confidence and social integration is limited by communication difficulties
- Moderate Language Disorder in both Receptive and Expressive areas
- Good use of consonants and vowels at a single word level but poor transfer of skills within phrases and sentences

### **Autistic Spectrum Condition (ASC) / Social Communication Difficulties**

Pupils may or may not have a diagnosis of ASC however they will have difficulties with the following areas:

- Sensory needs that are impacting on learning/access the curriculum
- Limited functional communication skills in all settings
- Child requires clear visual structure to complete tasks and transition around school
- Restricted or repetitive patterns of behaviour that regularly limit access to work and other activities
- Can sometimes use self-regulation strategies with adult support
- Limited communication skills can cause anxiety and/or challenging behaviours
- Child requires time to process changes to usual routine using warnings and visual support
- Child requires preparation for environmental changes using visual support and key language
- Needs some adult support to follow classroom rules and understand routines and boundaries
- Child will generally have social communication difficulties/ASC diagnosis alongside other learning difficulties or medical conditions
- The child will have difficulties with social interaction, inflexibility of thinking and sensory processing can lead to heightened anxiety levels and/or challenging behaviour



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>
<p>Place young person on the SEND register having an EHCP.</p> <p>SALT assessment, programme, regular review and targets.</p> <p>Regular review by SALT.</p> <p>Further assessment to identify additional components of pupil's difficulties and clarifications as to how these may impact on learning.</p> <p>Close liaison and involvement of parents Playplan/IEP/Communication Support Plans (CSP) reviewed regularly by S&amp;L/professional.</p> <p>Screening for functional coordination skills.</p>	<p>The curriculum is likely to require differentiation, adaption, individualisation, and overlearning to account for the pupil's difficulties in accessing learning tasks.</p> <p>Pupils will require a curriculum that nurtures independence and develops fine motor skills.</p> <p>They may need teaching sessions that are broken down into short chunks with regular planned breaks for rewarding learning activities in order to address the sensory issues and promote self-regulation.</p> <p>Depends heavily on context, cues and example of peers.</p> <p>Will have significant difficulties in accessing and participating in some aspects of the curriculum.</p> <p>Will need abstract concepts to be presented through practical demonstration.</p>	<p>Planned sessions to implement S&amp;L targets.</p> <p>May need some 1:1/small group sessions with S&amp;L professional.</p> <p>Will need some support in the provision/classroom in areas where particular difficulties are experienced.</p> <p>Some may require a significant amount of time being taught in small groups.</p> <p>May require additional adult assistance for sensory strategies.</p> <p>There will be a need for planned and monitored opportunities for social interaction with peers to develop language.</p> <p>Makaton and S&amp;L sessions in small group or Resource Base.</p> <p>Have a key person/teaching assistant who has good knowledge of the pupils learning style to enable</p>	<p>1-1 speech and language programme planned by SLT and implemented by practitioners/staff.</p> <p>Targeted provision/classroom support. Requires regular advice from speech and language specialist with specific programmes to be carried out by the setting/school.</p> <p>Will need significant support in some areas of the curriculum, in order to apply Playplan/Communication Support Plan (CSP)/IEP targets from speech and language therapists in an integrated setting.</p> <p>Staff will need training in the use of signing/PECs etc.</p> <p>Requires significant additional time from expert and/or augmentative specialist adults in order to facilitate effective communication.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>
	<p>Specialist input and/or additional resources required to access the curriculum.</p> <p>May need to use signing to aid communication and access to the curriculum e.g. Makaton.</p> <p>The pupil will need to be given positive feedback on all achievements to enhance self-esteem and motivation.</p> <p>The pupil will need to have instructions checked regularly to ensure understanding.</p>	<p>optimum learning to take place.</p>	<p>Strategies to address pupils' spatial awareness and personal space.</p>
<b>ASC</b>	<b>ASC</b>	<b>ASC</b>	<b>ASC</b>
<p>SALT assessment, programme and regular review and targets.</p> <p>Completion of a personalised sensory profile.</p> <p>Functional assessment of behaviour to identify specific factors that might lead to heightened anxiety, arousal or challenging behaviour.</p>	<p>The curriculum is likely to require differentiation, adaptation and individualisation to account for difficulties that the pupil encounters in accessing learning tasks.</p> <p>Requires highly structured approaches to teaching, e.g. task followed by chosen activity/reward.</p>	<p>May require significant amount of teaching within a small group to address communication, social understanding or behavioural needs.</p> <p>Additional adult help in school/setting would be required for supporting changes in the routines</p>	<p>Visual support to aid language understanding and development (e.g. Makaton, PECs).</p> <p>Available alternative for communication (e.g. 'lite writers' and iPads).</p> <p>Provision of a workstation.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>ASC</b>	<b>ASC</b>	<b>ASC</b>	<b>ASC</b>
<p>Consideration of the communicative functions of behaviour.</p> <p>Development of a Playplan/IEP with specific strategies to minimise triggers for anxiety/heightened arousal, and clear strategies for responding consistently to incidents where behaviour can be a challenge.</p> <p>Will required multiagency review of targets to ensure a coordinated approach (involvement of parents).</p> <p>Communication profile/passport, Play plans, IEPs, EHCP reviews, which identifies the pupil's communication needs and how they might use their behaviour to communicate.</p>	<p>Curriculum includes specific activities aimed at teaching skills in relation to:</p> <ul style="list-style-type: none"> <li>• social interaction and communication</li> <li>• managing anxiety/emotions</li> </ul> <p>Consistent use of familiar words/phrases to aid understanding.</p> <p>Most language used is supported visually.</p> <p>May require teaching sessions to be broken up into shortened chunks with regular, planned breaks for rewarding activities or activities to address sensory differences.</p>	<p>of the day or the environment.</p> <p>Trained adult support needed for groups activities around Social use of Language, social skills, development of the imagination, play and thinking skills.</p> <p>May require additional adult assistance for sensory activities.</p> <p>May need access to an appropriate safe place for "time out" to manage anxiety and ensure the safety of self, others and property.</p> <p>All key staff working with the pupil will have received training on understanding the needs of pupil with ASC and training in de-escalation techniques.</p>	<p>Personalised programme to suit individual needs.</p> <p>Teaching environment is adapted to address the needs of pupils with autism spectrum conditions.</p> <p>Access to resources/activities to address sensory issues.</p>



## **BAND 4 - COMMUNICATION AND INTERACTION FUNDING - HIGH NEEDS BLOCK**

### **Speech, Language and Communication**

Persistent and moderate difficulties with **most** of the following:

- Will have a reduced range of speech sounds and limited functional language
- Occasionally intelligible to unfamiliar listeners but highly reliant on environmental/social cues
- Unable to follow simple instructions without visual cues or models
- Diagnosed Developmental Language Disorder or Speech Sound Disorder
- Persistent speech/language difficulties which are causing barriers to learning, social relationships and self-esteem which can result in displaying challenging behaviours
- Significant difficulties with self-confidence and social integration may lead to periods of anxiety that cannot be reduced even with support and appropriate interventions
- Significant Language Disorder in both Receptive and Expressive areas
- Correct use of some consonants and vowels at a single word level but unable to transfer of skills within phrases and sentences

### **Autistic Spectrum Condition (ASC) / Social Communication Difficulties**

Pupils will have a diagnosis of ASC or be undergoing assessment and they will have difficulties with the following areas:

- Significant sensory needs that are impacting on all learning and access to the curriculum
- Significantly limited functional communication skills in all settings
- Child requires personalised motivators and reinforcers to engage in specific tasks they find challenging
- Restricted or repetitive patterns of behaviour that significantly limit access to work and other activities
- Dependant on adults to use strategies to support self-regulation
- Severe and persistent difficulties with communication that can cause severe anxiety and/or challenging behaviours
- Child requires lots of warning before changes to usual routine. Despite support, transitions can still be challenging and remain stressful for the child
- Small environmental changes cause distress to the child despite this having no direct impact on the child
- Unaware of setting/classroom rules/routine even when given direct adult support
- Child will have social communication difficulties/ASC diagnosis alongside other learning difficulties or medical conditions
- Child's ability to learn is impaired by communication and interaction difficulties, inflexibility of thought and sensory processing difficulties



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>
<p>SALT assessment, programme, regular review and targets.</p> <p>Regular review by SALT.</p> <p>Further assessment to identify additional components of pupil's difficulties and clarifications as to how these may impact on learning.</p> <p>Close liaison and involvement of parents play plans/IEP reviewed regularly by S&amp;L professional.</p> <p>Screening for functional coordination skills.</p>	<p>The curriculum is likely to require differentiation, adaption, individualisation, and overlearning to account for the pupil's difficulties in accessing learning tasks.</p> <p>Pupils will require a curriculum that nurtures independence and develops fine motor skills.</p> <p>They may need teaching sessions that are broken down into short chunks with regular planned breaks for rewarding learning activities in order to address the sensory issues and promote self-regulation.</p> <p>Depends heavily on context, cues and example of peers.</p> <p>Will have significant difficulties in accessing and participating in some aspects of the curriculum.</p> <p>Will need abstract concepts to be presented through practical demonstration.</p>	<p>Planned sessions to implement S&amp;L targets.</p> <p>May need some 1:1/small group sessions with S&amp;L professional.</p> <p>Will need some support in the setting/classroom areas where particular difficulties are experienced.</p> <p>Some may require a significant amount of time being taught in small groups.</p> <p>May require additional adult assistance for sensory strategies.</p> <p>There will need to be planned and monitored opportunities for social interaction with peers to develop language.</p> <p>Makaton and S&amp;L sessions in small group or Resource Base.</p> <p>Have a key person teaching assistant who has good knowledge of the pupils learning style to</p>	<p>1:1 speech and language programme planned by SLT and implemented by practitioners/staff.</p> <p>Targeted classroom support.</p> <p>Requires regular advice from speech and language specialist with specific programmes to be carried out by the setting/school.</p> <p>Will need significant support in some areas of the curriculum, in order to apply play plan/IEP targets from speech and language therapists in an integrated setting.</p> <p>Practitioners/Staff will need training in the use of signing/PECs etc.</p> <p>Requires significant additional time from expert and/or augmentative specialist adults in order to facilitate effective communication.</p> <p>Strategies to address pupils' spatial awareness and personal space.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>
	<p>Specialist input and/or additional resources required to access the curriculum.</p> <p>May need to use signing to aid communication and access to the curriculum e.g. Makaton.</p> <p>The pupil will need to be given positive feedback on all achievements to enhance self-esteem and motivation.</p> <p>The pupil will need to have instructions checked regularly to ensure understanding.</p>	<p>provide an interface task and the environment to provide optimum learning.</p>	
<b>ASC</b>	<b>ASC</b>	<b>ASC</b>	<b>ASC</b>
<p>Will require multi-agency review of targets to ensure a coordinated approach (involvement of parents).</p> <p>Communication profile/passport, which identifies the pupil's communication needs and how they might use their behaviour to communicate.</p>	<p>The curriculum is likely to require differentiation, adaptation and individualisation to account for difficulties that the pupil encounters in accessing learning tasks.</p> <p>Some teaching needs highly structured approaches to teaching, e.g. task followed by chosen</p>	<p>May require significant amount of teaching within a small group to address communication, social understanding or behavioural needs.</p> <p>Additional adult help in school would be required for supporting changes in the routines of the day</p>	<p>Visual supports to aid language understanding and development (e.g. Makaton, PECs). Available alternative for communication (e.g. 'lite writers' and iPads).</p> <p>Provision of a workstation/ personalised programme to suit individual needs.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>ASC</b>	<b>ASC</b>	<b>ASC</b>	<b>ASC</b>
	<p>activity/reward, use of TEACCH boxes, and use of direct instruction. Curriculum includes specific activities aimed at teaching skills in relation to:</p> <ul style="list-style-type: none"> <li>• social interaction and communication</li> <li>• managing anxiety/emotions</li> </ul> <p>Consistent use of familiar words/phrases to aid understanding. Most language used is supported visually.</p> <p>May required teaching sessions to be broken up into shortened chunks with regular, planned breaks for rewarding activities or activities to address sensory differences.</p>	<p>or the environment.</p> <p>Trained adult support needed for groups activities around Social use of Language, social skills, development of the imagination, play and thinking skills.</p> <p>May require additional adult assistance for sensory activities.</p> <p>May need access to an appropriate safe place for “time out” to manage anxiety and ensure the safety of self, others and property.</p> <p>All key staff working with the pupil will have received training on understanding the needs of pupil with autism spectrum conditions and training in de-escalation techniques.</p>	<p>Teaching environment is adapted to address the needs of pupils with autism spectrum conditions.</p> <p>Access to resources/activities to address sensory issues.</p>



## **BAND 5 - COMMUNICATION AND INTERACTION FUNDING - HIGH NEEDS BLOCK**

### **Speech, Language and Communication**

Pupils may have/display:

- Significantly limited functional language and communication across all settings
- Attempts to approach others (only to meet their own needs) paying little or no attention to their response
- Repetitive verbal and physical behaviours are frequent and preclude most engagement in learning. These can lead to severe anxiety, aggression or withdrawal
- Severe and persistent frustration with communication cause extreme levels of acute anxiety experienced on a regular basis and across different settings. This will lead to extreme behaviours that will challenge the norm
- Severe and persistent difficulties with social interaction, unpredictable, ongoing, extended periods of anxiety that cannot be reduced even with support and appropriate interventions
- Pupil's ability to learn is significantly and persistently impaired by communication and interaction difficulties over prolonged periods
- These pupils will have multiple difficulties, i.e. ADHD, uncontrolled epilepsy, mental health issues, selective mutism, dyspraxia, etc. and are likely to have additional formal diagnoses that require an individual plan and support for learning

### **Autistic Spectrum Condition (ASC) / Social Communication Difficulties**

- Significant ASC with contextually, inappropriate, social responses
- Pupils will have a professional diagnosis of an autism spectrum condition
- The pupil experiences significant, persistent and complex differences with social communication and interaction or understanding emotions. Such differences will significantly impact on their access to the curriculum and the general school offer. The pupil sees little purpose in peer relationships
- They will have associated anxieties and/or sensory difficulties which have a significant impact on their ability to function across a range of settings
- Significant difficulties with sensory processing and sensory modulation which lead to heightened anxiety levels. Passive/unsafe behaviours that challenge the norm and adversely affect the ability to engage with the world
- Signs of distress over small changes in the environment and are reliant on routine and the expected. Significant and persistent adherence to personal, specific or complex routines across all settings
- Highly dependent upon personal, routines and rituals leading to intense inappropriate reactions at times
- All transitions require personalised and consistent strategies to be successful

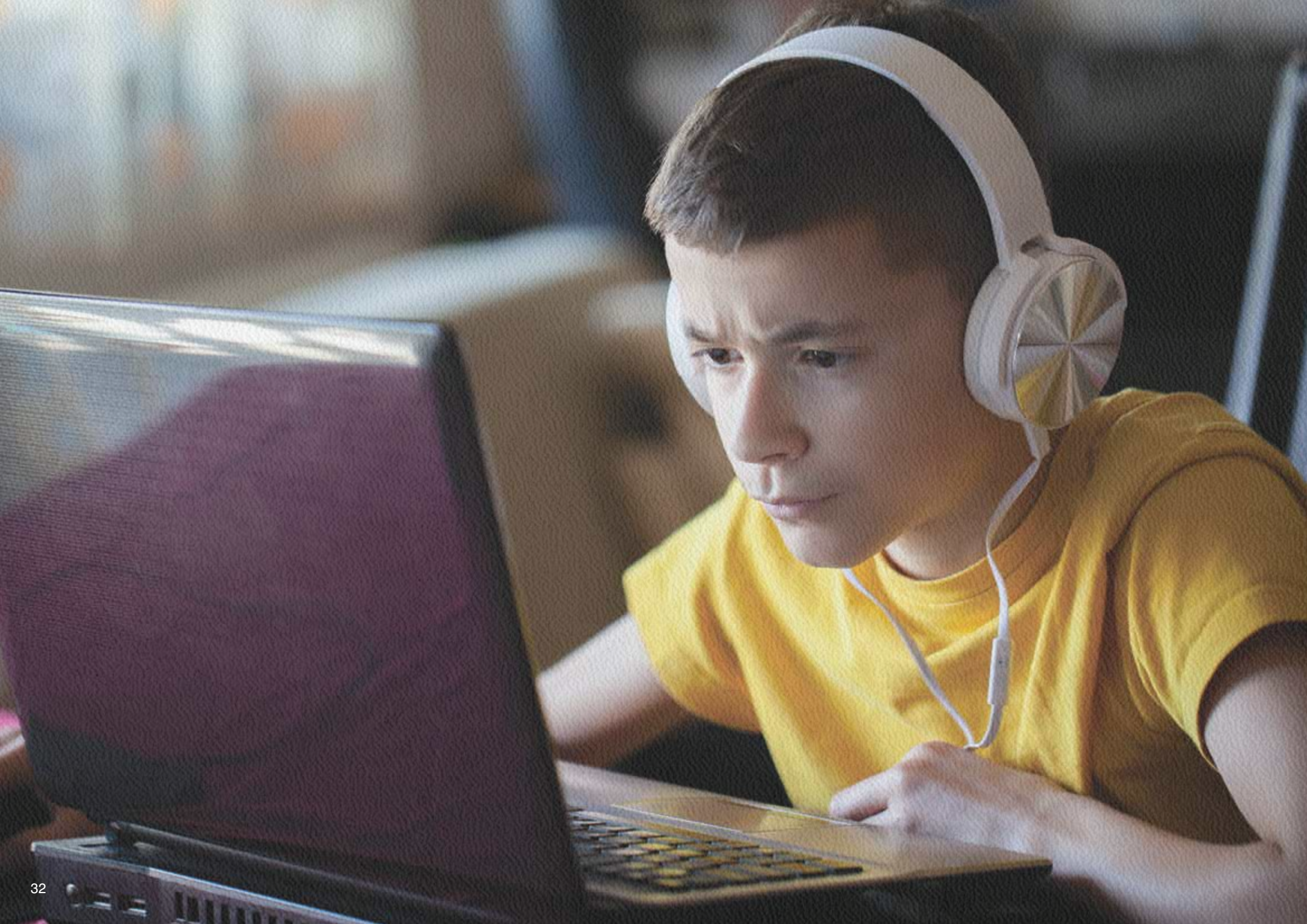


<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>ASC</b>	<b>ASC</b>	<b>ASC</b>	<b>ASC</b>
<p>SALT/other communication specialist assessment, programmes and regular review of targets.</p> <p>Sensory profile assessment by Occupational Therapist - with production of an individualised sensory programme, input, review.</p> <p>Functional assessment of behaviour completed by a psychologist/ASC specialist/PBSS to identify specific factors that might lead to heightened anxiety, arousal or challenging behaviour.</p> <p>Assessment of functional coordination skills.</p> <p>Development of personalised behaviour plan as above, and with specific strategies identified for de-escalation and physical intervention. On-going monitoring and review of strategies to include structured debriefing/reflective</p>	<p>The curriculum is likely to require very significant differentiation, adaptation and individualisation to account for difficulties that the pupil encounters in access learning tasks. The pupil may have significant learning difficulties (although not necessarily). The pupil may also have significant skills and areas of interest, which can be built upon to help the pupil to engage in learning.</p> <p>Most/all teaching takes place with consistent use of highly structured and evidence-based approaches (e.g. TEACCH, PECS, Intensive Interaction, and SCERTS).</p> <p>Individualised/simplified language used with consistent use of familiar words/phrases to aid understanding. All language used is supported visually.</p>	<p>All teaching takes place in small groups with regular opportunities for 1:1 support.</p> <p>Close supervision will be required for all transitions and unstructured times.</p> <p>Structured activities available and supported by adult at all unstructured times. Trained adult to address social skills, development of social use of language.</p> <p>Will require additional adult assistance for sensory activities (e.g. brushing, massage, sensory play).</p> <p>Will need regular access to an appropriate safe place for “time out” to manage anxiety and ensure the safety of self, others and property.</p> <p>All key staff working with the pupils will have received extensive training on understanding the needs</p>	<p>Almost always uses alternative communication aids, visual supports to aid language understanding (e.g. Makaton, Picture Exchange Communication System) - consistently used throughout setting or by all key staff.</p> <p>Where it is felt appropriate provision of a workstation or designated individualised work area to suit individual needs.</p> <p>Whole school environment is highly adapted to address the needs of pupils with autism spectrum conditions.</p> <p>Regular, on-going access to specialist resources to address sensory issues (e.g. low arousal area, sensory room/area, compression vest, weighted blanket/jacket).</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>
<p>practice following incidents of significant challenging behaviour. Close/regular liaison with parents and external agencies.</p> <p>Highly individualised and regularly reviewed communication passport to alleviate anxieties and frustrations.</p> <p>An interdisciplinary assessment that focuses managing the multiple factors affecting learning.</p>	<p>Will need frequent breaks for physical activities, chosen activities or sensory diet activities.</p> <p>Application of an alternative curriculum defined by a multi-disciplinary team to address multiple needs.</p>	<p>of pupil with autism spectrum conditions and training in de-escalation techniques.</p> <p>Constant support and monitoring to assist with sensory modulation for high achieving pupils.</p> <p>Active collaboration with outside agencies to integrate all the advice of the other professionals into the pupil's learning programme and pastoral care.</p> <p>Ensure that all the information about the individual pupil's needs, provision and equipment is passed on when pupils transition to a new class or school.</p> <p>Consistent approach to behaviour/ routines across all settings e.g. short breaks, respite.</p>	<p>Provide visual structure to all areas of life.</p> <p>Staff trained in Team Teach or similar to ensure appropriate strategies are followed.</p>







# COGNITION AND LEARNING

PLEASE REFER TO KNOWSLEY GUIDANCE - 'PLANNING PROVISION FOR SEN'

## DEFINITION

### **Moderate Learning Difficulties (MLD)**

Pupils with general learning difficulties experience significant problems across the majority of the curriculum. The general level of academic attainment of these learners will be significantly lower than that of their peers. Their cognitive ability and/or attainment levels will be at or below the second percentile. In many cases difficulties will include speech and/or language developmental delay. Some pupils may also have poor social skills and/or may show signs of emotional and behavioural difficulties.

### **Severe or Profound Learning Difficulties (SLD & PMLD)**

Pupils with severe or profound and multiple learning difficulties are almost always identified before they reach statutory school age. Pupils with SLD have very significant intellectual or cognitive impairments. Their cognitive

and/or attainment levels are normally at or below the 0.01 percentile. This has a major effect on their ability to participate in the school curriculum without support. A pupil with PMLD will have complex learning needs. In addition to their severe learning difficulties, they may have other significant difficulties, such as physical disabilities, sensory impairment or a severe medical condition. These learners require a high level of adult support for their learning needs and are likely to need sensory stimulation and a curriculum broken down into very small steps.

### **SpLD**

Pupils on the Dyslexia, Dyspraxia or Dyscalculia continuums.





## CHECKLIST OF COMMON CHARACTERISTICS

More general indicators of cognition and learning difficulties may include:

- Low general attainment and progress and/or gap beginning to widen
- Difficulty in understanding abstract concepts and applying prior learning
- Speech, language and communication difficulties
- Difficulties with attention and concentration
- Significantly below Age Related Expectations in basic skills despite QFT including differentiation
- Difficulties with fine and gross motor skills
- Discrepancy between oral and written work
- Difficulty following instructions
- Inordinate levels of tiredness due to excessive concentration levels needed
- Social and behavioural difficulties arising from low self-esteem and frustration
- Becoming socially isolated and/or withdrawn



## BAND 1 - COGNITION AND LEARNING FUNDING - AGE WEIGHTED PUPIL UNIT (AWPU) UNIVERSAL OFFER

Assessments, targets, review	Curriculum Access	Groupings and Pastoral Care	Equipment and Resources
<p>Practitioners/Staff are able to contribute to the early identification and support for pupils.</p> <p>Assessment of pupil's strengths and difficulties using up to date assessment tools.</p> <p>Possible consultation advice from external specialists to discuss progress and give advice.</p> <p>Clear expected outcomes/targets set for all at least twice yearly/six weekly play plans targets.</p> <p>Review of targets possibly with external specialist e.g. EP/SLT/ Learning Support in line with setting/school procedures.</p> <p>Ongoing monitoring of pupil's progress as a result of effective differentiation.</p>	<p>Curriculum should take account of identified barriers to learning and preferred learning styles; a clear analysis of tasks is needed to enable inclusion.</p> <p>Some specific skill development or reinforcement of targets.</p> <p>Appropriate intervention in CLD/ literacy and/or numeracy.</p> <p>Younger pupils may need help with developing self-help skills, e.g. dressing, toileting, social skills, language skills, early concepts.</p> <p>The pupil will need opportunities to articulate, clarify and organise ideas orally.</p> <p>Will need more time for consolidation and practice of skills being taught.</p>	<p>Pupils based in the setting/ classroom for the vast majority of the day accessing QFT in an inclusive classroom environment.</p> <p>Use of seating plans as appropriate.</p> <p>Setting/In-class support in small groups in targeted subject areas of need when required.</p> <p>Pupils may need targeted and regular adult support from a Teaching Assistant/Key person under Class Teacher and SENCo guidance.</p> <p>Access to setting/school pastoral systems as required e.g. Learning Mentor, Pastoral Team, Key person.</p>	<p>Pupils have access to a suitably qualified practitioners/member of staff/who is equipped to deliver QFT.</p> <p>Individual or very small group intervention with a trained practitioners/staff member.</p> <p>Parents and carers are regularly informed about their child's provision and progress.</p> <p>The provision a setting/school delivers must be planned to meet a pupil's individual needs and accelerate their progress to be broadly in line with ARE.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>Regular communication and information from parents/carers, young person and other sources as appropriate.</p> <p>The SENCO will need to be fully aware of the differentiation action plan/support programme and teaching approaches in order to be able to monitor delivery.</p>			



## BAND 2 - COGNITION AND LEARNING FUNDING - AWP (ELEMENT 1) PLUS ELEMENT 2 SEN NOTIONAL FUNDING

Observed **persistent** and **moderate** difficulties with the following:

- The gap between the child or young person and that of his/her peers may be significantly wider than would be expected for children or young people of his/her age
- May also be socially or emotionally immature and have limited interpersonal skills
- Attention and concentration span difficulties, leading to poor motivation and resistance to learning
- Difficulties with sequencing, visual and/or auditory perception, coordination, or short term working memory
- Difficulties in the acquisition of reading, writing, oral or number skills, which do not fit his/her general pattern of learning and performance
- Difficulties with other areas, e.g. motor skills, organisation skills, behaviour, social or emotional skills and multi-agency advice may be required
- Specific difficulties (e.g. diagnosis of dyspraxia or dyslexia etc.) affecting literacy skills, spatial and perceptual skills and fine and gross motor skill

Assessments, targets, review	Curriculum Access	Groupings and Pastoral Care	Equipment and Resources
<p>Pupil will be placed at SEN Support and progress will be reviewed on a regular basis (e.g. 6 weekly/at least termly).</p> <p>Individual assessment based mainly on developmental assessment tools. (e.g. EYFS Early Support Materials, Salford Reading</p>	<p>Access to curriculum will involve highly differentiated adapted learning activities.</p> <p>Regular, specific focused teaching which is increasingly individualised from Key person teacher or teaching assistant.</p>	<p>Will need to receive regular small group or a 1-1 programme to make progress on their Play Plan PPP/IEP.</p> <p>Needs occasional prompts and some additional supervision in maintaining social relationships.</p>	<p>Will need practitioners/staff skilled in adapting learning, checking understanding and progress.</p> <p>May need adapted or specialist resources. (E.g. I.T, coloured overlays, writing wedges).</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>Test, Single Word Spelling Test, Sandwell Maths).</p> <p>Children working well below ARE tracked using an appropriate small step assessment Early Support Materials and tracking tool e.g. PIVATS.</p> <p>Play Plan/PPP/IEP will contain SMARTER targets focusing on barriers to accessing the curriculum.</p> <p>Learning will be monitored mainly by observation and tracking, marking and moderating pupils' work.</p> <p>Targets will be reviewed to take account of progress against individual or group learning aims/ success criteria.</p> <p>Possible assessment and advice sought from appropriate educational agencies and health professionals.</p> <p>Regular reviews of progress to include children/young people, parents/carers and specialist support services (if involved).</p> <p>SENCo is responsible for monitoring and co-ordinating interventions.</p>	<p>The sequence of learning activities will include opportunities for reinforcement and consolidation of learning.</p> <p>Language of instruction will need to be adapted by chunking and emphasising key words.</p> <p>Access to more specialist interventions to develop basic skills.</p> <p>A nurturing environment/ approaches with opportunities for:</p> <ul style="list-style-type: none"> <li>• learning through play in the early years and primary phase</li> <li>• opportunities for small group experiences in a safe and secure space in the secondary phase</li> <li>• teaching and learning which is multi-sensory</li> </ul> <p>Using practical activities and working with visual materials and objects to establish and reinforce concepts and skills.</p> <p>Opportunities to transfer/generalise learning in different contexts.</p> <p>Individual support to track back, preview, rehearse texts/ vocabulary and/or tasks to increase understanding.</p>	<p>Access to Key person pastoral support/Learning Mentor to support as required.</p>	<p>Provide suitable tools to encourage pupils to learn independently (e.g. Individual word banks for high frequency and topic words with object/picture/symbol cues, writing frames, place value grids etc).</p> <p>Parents will benefit from family learning in consolidating their child's learning.</p>



## BAND 3 - COGNITION AND LEARNING FUNDING - SEN NOTIONAL FUNDING PLUS ADDITIONAL FUNDING THROUGH EHCP

Observed **persistent** and **significant** difficulties with the following:

- Will have low attainment reflected in levels/EYFS bands of learning, typical of two thirds of chronological age with the gap possibly continuing to widen
- Difficulties in the acquisition of basic skills, reading, writing, oral or number skills, which require high levels of tailored support
- Inability to concentrate even with targeted support or resources leading to poor motivation and resistance to learning
- Frustration in inability to access learning leading to complete disengagement with learning or problematic behaviours which are unmanageable in a mainstream setting even with high levels of support and tailored, individual and skilled interventions
- Limited social, emotional and interpersonal skills, requiring high level of tailored support
- Complex difficulties with sequencing, visual and/or auditory perception, coordination, organisation, concentration

Assessments, targets, review	Curriculum Access	Groupings and Pastoral Care	Equipment and Resources
<p>Individual assessment by appropriate specialists.</p> <p>Play plan/PPP/IEP will contain SMARTER targets which have been and continue to be regularly reviewed following an appropriate Assess, Plan, Do, Review cycle.</p>	<p>Create a personalised and relevant curriculum tailored to the pupil's needs (this may require consultation with all professionals involved with the pupil).</p> <p>Curriculum will need to include generalising learning to apply it in a</p>	<p>Will need to receive small group or a 1-1 programme daily to make progress in their PPP/IEP and develop independence.</p> <p>Pupils may need access to a provision such as a nurture-type base or inclusion suite in addition to</p>	<p>Will need practitioners/staff skilled in teaching pupils with complex needs and supporting individually differentiated learning.</p> <p>May need some personalised and/or specialist resources including a therapeutic approach.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>Implement strategies (including provision of targeted support and/or resources).</p> <p>Key person/Class teacher, SENCO, parents and pupil continue to liaise on a regular basis - recommended minimum of 3 meetings per year.</p> <p>If EHCP is not in place:</p> <ul style="list-style-type: none"> <li>• Review SEN Support Plan (recommended at least termly)</li> <li>• Consider a request for statutory assessment</li> </ul> <p>If an EHCP is in place:</p> <ul style="list-style-type: none"> <li>• Complete an EHCP Annual Review</li> <li>• Obtain and record updated parents' views</li> <li>• Obtain and record updated pupil's views</li> </ul> <p>Adapt provision appropriately to ensure EHCP outcomes can be achieved.</p> <p>Continue to plan, do, review against the specified outcomes and provision.</p>	<p>range of situations.</p> <p>Incorporate external advice in provision/teaching and learning activities.</p> <p>Liaise with Early Years Team/teaching team to ensure learning outcomes are facilitated and resources are readily available.</p> <p>Put behaviour management programme in place, if appropriate.</p>	<p>or in place of the above.</p> <p>Ensure pupil has appropriate network of support to enable them to flourish with the educational setting.</p>	<p>Parents will continue to support their child to achieve in partnership with school.</p> <p>Use a suitable assessment and tracking tool to monitor progress and attainment across the curriculum e.g. Early Support Materials PIVATS, SISRA.</p> <p>Ensure Key person Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD).</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>Continue to act on external advice from educational and health agencies as necessary.</p> <p>Carry out and review further assessments as advised by outside agencies.</p>			







## **BAND 4 - COGNITION AND LEARNING FUNDING - HIGH NEEDS BLOCK**

Pupils with severe learning difficulties may also have associated difficulties in mobility and coordination, communication and perception and the acquisition of self-help skills. Pupils with SLD will need support in all areas of the curriculum. They may also require teaching of self-help, independence and social skills. Most pupils may use sign and symbols but some will be able to hold simple conversations and gain some literacy skills.

May also have difficulties with:

- 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



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>May have an Individual functional communication assessment.</p> <p>Play plan/IEP/PPP will focus on relevant curriculum targets and EHCP outcomes.</p> <p>Learning will need to be monitored through appropriate assessment procedures/tools.</p> <p>Targets will be reviewed to take account of progress against individual need/starting points.</p>	<p>Access to curriculum through concrete learning activities.</p> <p>Will need a modified curriculum according to their need.</p> <p>May need alternative means of communication to access the curriculum.</p> <p>Curriculum will need to include generalising learning to apply it in a range of situations.</p>	<p>Will need to receive small group or a 1-1 programme daily to make progress on their Play plan/IEP/PPP.</p> <p>Will need support to develop relationships with familiar people and to show empathy, as they have limited understanding of social rules.</p> <p>Will need access to skilled practitioners/staff who can support independence/self help and life skills.</p>	<p>Will need staff who are skilled in differentiating all aspects of the curriculum.</p> <p>May need some personalised and/or specialist resources.</p> <p>May need a therapeutic programme provided by other professionals.</p> <p>Parents will need to support their child in generalising learning through a Play plan IEP/PPP designed in partnership with setting/school.</p>



## **BAND 5 - COGNITION AND LEARNING FUNDING - HIGH NEEDS BLOCK**

The pupil will have profound cognitive difficulties and developmental delay in a number of areas. May have additional medical and/or personal care needs.

In addition the pupil will have significant difficulties with one or more of the following:

- Sensory perception
- Social awareness
- Attention/concentration
- Expressive and/or receptive communication

Pupils with profound and multiple learning difficulties may have other significant difficulties such as physical disabilities or sensory impairment. Pupils require a high level of adult support, both for their learning needs and also for personal care. They are likely to need sensory stimulation and a curriculum broken down into very small steps. Some pupils communicate by gesture, eye pointing or symbols, others by very simple language.





<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>May need Individual sensory assessment/diet, SALT Assessment/programme, Educational Psychology advice/strategies.</p> <p>Play plan/IEP/PPP will focus on, developing learned responses, understanding situational cues and co-operating with personal care/self help.</p> <p>Learning will need to be monitored through the appropriate assessment process/tool.</p> <p>Targets will be reviewed to take account of retention and application of skills in specific situations as well as the learning of new ones.</p>	<p>Access to curriculum through experiential sensory learning activities.</p> <p>Appropriate environment that supports learning that provides consistent routines and structure.</p> <p>Likely to need objects of reference, visual support and situational cues to access the curriculum.</p> <p>Curriculum will need to include frequent opportunities to re-visit learning.</p>	<p>Will need to receive small group or a 1-1 programme frequently during each day to make progress on their Play plan/IEP/PPP.</p> <p>Needs close supervision at all times to ensure they are kept safe.</p> <p>Access to skilled practitioners/staff that will allow them to understand the community/world around them.</p>	<p>Staff skilled in observing and recording highly individual responses.</p> <p>Will need highly personalised or specialist resources.</p> <p>Is likely to need adaptations to their learning environment and access to specialist learning facilities.</p> <p>Is likely to need support from external agencies/professionals.</p>







# SOCIAL, EMOTIONAL, MENTAL HEALTH

PLEASE REFER TO KNOWSLEY GUIDANCE - 'PLANNING PROVISION FOR SEN'

## DEFINITION / CHECKLIST OF COMMON CHARACTERISTICS

The pupil presents with persistent behavioural/emotional difficulties that have not been ameliorated by:

- differentiated learning opportunities or by the whole-school behaviour management techniques
- underdeveloped skills in listening and attending to the teaching and learning process
- failure to make progress anticipated across areas of the curriculum accompanied by signs of mood swings, frustration, non-co-operation, withdrawal or isolation, disillusionment, or non-attendance
- difficulty with social relationships including peer/group relationships which affect classroom dynamics and require teacher intervention
- difficulty acquiring and applying basic social skills
- emotional immaturity; low self esteem
- lack of confidence in their ability to cope with new demands and change to their routines

Some examples of the behaviours and social and emotional difficulties that might be exhibited by a child or young person with SEMH:

- often destroys own work
- is unable to make/sustain friendships
- appears depressed
- lacks confidence to attempt tasks
- reluctant to engage in setting provision/classroom activities
- communicates aggressively preventing the class functioning
- is silent or speaks selectively
- shows obsessive behaviours and/or irrational anxieties
- displays extreme mood swings
- frequently engages in disruptive behaviour in class
- is subject to bullying or signs of stress affecting development/school performance



- exhibits attention seeking behaviours that restrict the good order of the learning that takes place
- persistent disruptive behaviour occurs in a variety of contexts and impedes the learning of the young person and/or other young people despite interventions detailed in play plans or individual education or behaviour improvement plans
- difficulty sustaining peer relationships
- fluctuations in mood and unpredictable attitude to learning tasks - periods of uncooperative behaviour and withdrawal
- progress is often below expectations in many areas - often associated with frustration and disaffection
- poor decision maker

This is not an exhaustive list.

Progress through EYFS/National Curriculum is affected by their emotional, social and/or behavioural difficulties due to:

- Lack of a range of social skills, e.g. taking turns, working co-operatively, accepting the ideas others
- Poor view of self and low self-confidence, difficulty in working independently
- Unsettled behaviour in class, limited concentration and organisation in relation to age expectations
- May avoid or become upset when faced with new and unfamiliar tasks or people
- May frequently challenge practitioners/teachers' requests but will back down
- Frequent attention seeking behaviour, often inappropriate or mildly challenging

- Seeks to gain and maintain frequent close physical contact with adults (generally early years and primary age children)
- Overreacts when disapproval is shown, attention is withdrawn or when thwarted
- Appears to lack motivation and requires frequent encouragement to stay on task
- Flits between activities and materials with little attention (younger children)
- No regular group of friends

Progress through EYFS/National Curriculum is **significantly** affected by their emotional, social and/or behavioural difficulties due to:

- Unsettled and disruptive behaviour in class which interrupts the progress of the lesson
- Loss of temper or tantrums
- Difficulty in maintaining relationships with members of staff, e.g. more than once daily refuses to complete work, challenge teachers' requests, but sometimes backs down
- Difficulty in maintaining relationships with pupils, e.g. minor scuffles in playground or provision areas/classroom
- Victim of bullying or intimidation or bullies or intimidates others
- Social isolation; usually appearing to be on the edge of activities
- High demand of adult attention
- Being easily rebuffed and sensitive to disapproval
- Sullen, resentful and unhappy attitude and mood
- High self-criticism; puts self-down; low self awareness and confidence



## BAND 1 - SOCIAL, EMOTIONAL AND MENTAL HEALTH FUNDING - AGE WEIGHTED PUPIL UNIT (AWPU) UNIVERSAL OFFER

Assessments, targets, review	Curriculum Access	Groupings and Pastoral Care	Equipment and Resources
<p>Young people should make progress when tracked using the appropriate behavioural/social/emotional scales e.g. EXE scales, Boxall Profile, SDQ, observational checklists, SNAPB etc.</p> <p>SENCO/teachers/keyperson/staff use range of assessment tools to assess children and young people with SEMH, taking account of relevant factors beyond the setting/classroom.</p> <p>At least termly review and preferably half termly of targets and progress - either through discussion or more formal in-depth review.</p>	<p>Should take account of identified barriers to learning and preferred learning styles.</p> <p>Negotiated targets and rewards, development of social skills, emotional wellbeing and self-esteem through targeted group work devised in conjunction with SENCo and/or other agencies.</p> <p>SENCO and Keyperson/CT responsible for planning and ensuring the delivery of an individualised programme.</p> <p>Evidence of clearly differentiated planning and curriculum delivery.</p> <p>Individualised arrangements for break, lunchtimes and other less supervised times e.g. Lunchtime, after school club, outdoor provision.</p>	<p>Regular targeted individual or small group tuition (e.g. circle of friends, SEAL, small group follow up).</p> <p>A young person at this stage may need intervention to develop social and emotional skills.</p> <p>Other interventions: Learning Mentor, Keyperson 1:1 time on a regular basis, small group SEAL activities, Social use of Language Programme, EXE action plan.</p> <p>Will require access to practitioners/staff with knowledge, skills and understanding of the emotional needs of challenging pupils.</p> <p>Strategies to facilitate transitions during the setting routine/school day (transition from one teacher to another/one subject class to another/from classrooms to outside areas/dining room/between</p>	<p>Targeted and regular adult support to teach, for example, appropriate behaviour, use of equipment, turn-taking skills, reinforce instructions etc.</p> <p>Dedicated space or particular activity for difficult times.</p> <p>Parents involved so that they can support targets in the home (e.g. checking that the young person has the necessary clothing/equipment for setting/school, providing reinforcement for efforts at setting/school, spending additional focused quality time with young person, etc.)</p> <p>Regular time with Keyperson/named member of staff for pastoral or mentoring support, specific praise or feedback about any improved behaviour.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
	<p>Regular monitoring and record keeping (at least weekly) of work undertaken and behaviour interventions etc.</p> <p>Opportunities identified and embedded across the curriculum for learning in social, emotional and behavioural development.</p> <p>Staff are aware of how the curriculum can be differentiated for children and young people with SEMH and differentiate appropriately to include:</p> <ul style="list-style-type: none"> <li>• Practical work with concrete/ visual materials to establish concepts and skills</li> <li>• Active learning approaches and additional opportunities for non desk based learning/activity</li> </ul> <p>The curriculum for PSHE is well developed and addresses the development of social skills, the management of emotions and an understanding of appropriate behaviour e.g. through use of Circle time, SEAL, SMSC and British Values.</p>	<p>buildings).</p> <p>Audit and monitoring of the learning environment, the teaching and learning strategies and delivery style to ensure appropriate adjustments to maximise engagement.</p>	<p>Additional support available for unstructured times- outside e.g. lunch time, after school clubs.</p> <p>Induction of new staff includes a specific introduction to the school's policy for promoting positive behaviour.</p> <p>CPD opportunities for all staff relating to the needs of children and young people with SEMH.</p> <p>Access to grouping that enables children and young people to work with positive role models for social interaction and appropriate behaviour such as Circle Time and/ or group work.</p> <p>A nurturing environment with opportunities for learning through play (in the early years and primary phase) and with opportunities for small group experiences in a safe and secure space (in the secondary phase).</p>

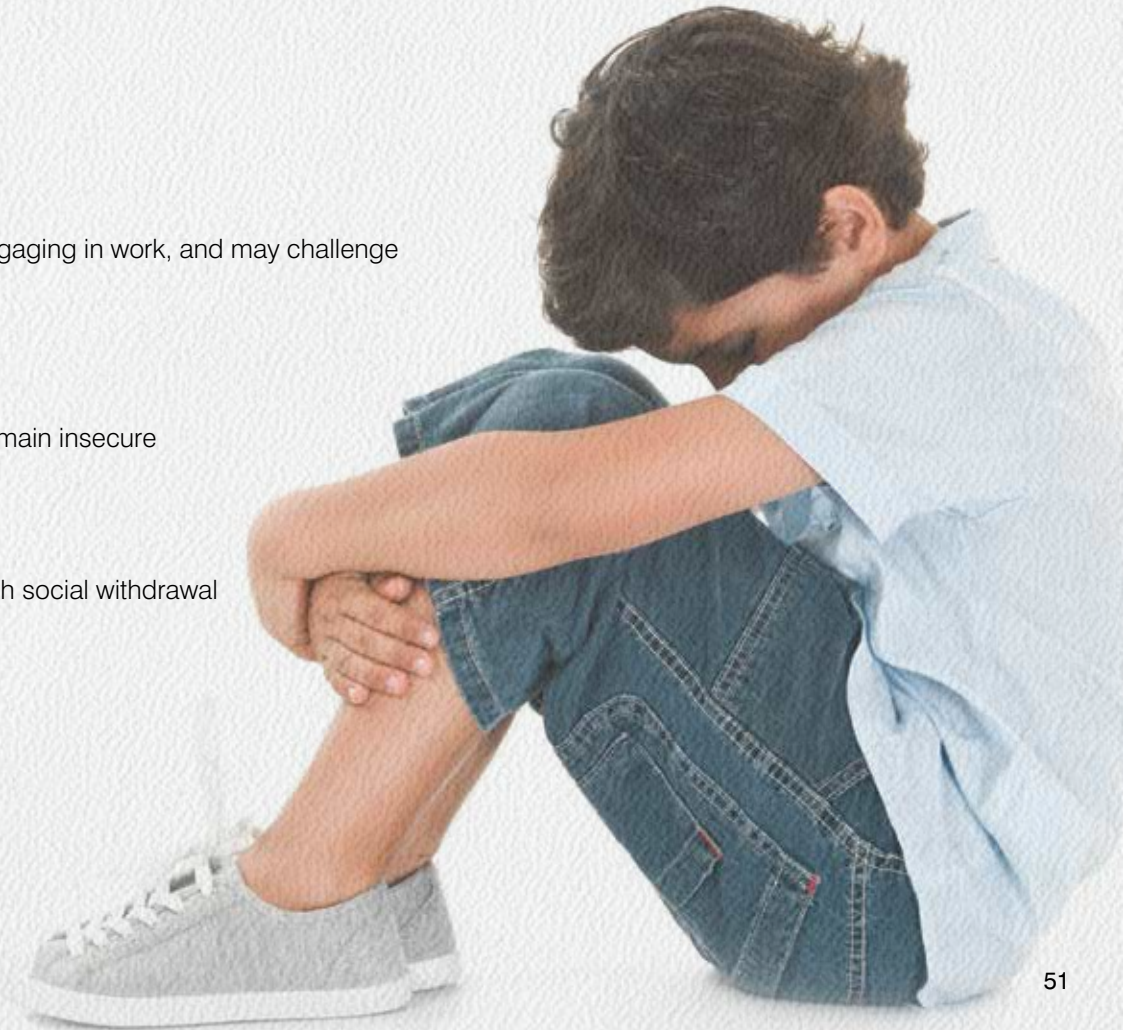


## **BAND 2 - SOCIAL, EMOTIONAL AND MENTAL HEALTH FUNDING - AWP (ELEMENT 1) PLUS ELEMENT 2 SEN NOTIONAL FUNDING**

This band covers a range of social, emotional and mental health difficulties identified through formal assessment and may include specific conditions requiring significant, regular additional adult support to access the majority of learning activities and to sustain concentration. Most areas of curriculum planning reflect the need to develop social, emotional and/or mental health well-being and resilience. These pupils are likely to be in a non-specialist SEMH environment. There will most likely be a behaviour support plan in place consistently implemented by all practitioners/staff.

There will be a history of:

- Progress being affected by emotional, social and mental health difficulties
- Unsettled and disruptive behaviour in the setting/class
- Frequently loses temper or has tantrums
- Difficulty in maintaining relationships with members of staff, e.g. avoids engaging in work, and may challenge practitioners/teachers in a verbally aggressive manner
- Frequent aggressive conflict with peers
- Remembering confrontations, 'bears a grudge' and seeks revenge
- Seeking affection, approval and reassurance repeatedly but appears to remain insecure
- Inappropriate actions in search of attention
- Destroying own work or hard won social achievements
- Demonstrating extremely low self-esteem and emotional neediness through social withdrawal
- Demonstrating anxiety; clings and is tearful
- Attendance that may need to be monitored
- Irregular attendance
- Evidence of putting themselves at risk





<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>PVI Setting/school undertakes detailed/focussed assessment to clarify the frequency, severity, duration and nature of any behaviours. To include:</p> <ul style="list-style-type: none"> <li>• Ongoing curriculum assessments</li> <li>• Diagnostic tests</li> <li>• Observing and recording responses in different environments</li> <li>• indentifying strengths and difficulties</li> <li>• revisiting learning rates and preferred learning styles</li> </ul> <p>Longer term planning with shorter term Play plans/IEPs ly fresh targets.</p> <p>Relevant staff (KP/CT/TA) to plan, record and evaluate progress on a weekly basis including children and young people, parents and carers.</p> <p>Audit of sensory needs to be able to provide appropriate resources, interventions and strategies.</p>	<p>Specifically focussed Play plan/PPP/IEP which includes programmes targeted at the young persons' area of difficulty.</p> <p>The pupil will need individual instructions for new or unfamiliar tasks.</p> <p>The pupil needs encouragement from an adult to participate in an activity.</p> <p>Guidance to practitioners/staff who work with the pupil facilitating the development of coherent and consistent approaches.</p> <p>Less structured activities will be closely monitored by familiar, skilled early years practitioners/staff.</p> <p>May need to be withdrawn for individual or small group work to address areas of difficulty or development.</p> <p>Need for closer consultation to inform curriculum content, planning and delivery which may involve other professionals.</p>	<p>Some limited periods of withdrawal with Keyperson, Learning Support, Learning Mentor and/or SENCO and/or specialist teacher etc.</p> <p>Possible out-of-hours provision.</p> <p>Settings/schools may choose to use resources to run a nurture group if this meets the needs of a group of young people within the school.</p> <p>Regular time, with identified staff, to monitor progress and reinforce success.</p> <p>Flexible adult response to be available at times of difficulty to prevent escalation of problems.</p> <p>Pupil requires modelling, support and intervention from an adult to conform to age appropriate conventions/developmental stage and make independent decisions.</p> <p>Pupil requires support and encouragement from an adult to recognise, manage and control how they feel and the impact their actions have on themselves, others</p>	<p>Identified practitioner/staff to plan and monitor structured behaviour programme and meet the pupil regularly.</p> <p>A place available in setting/school, monitored by practioners/staff, for the pupil to access in times of crisis.</p> <p>Referral to individual counselling or therapeutic support through setting/school or other agencies considered.</p> <p>Use of:</p> <ul style="list-style-type: none"> <li>• EXE well being and involvement scales</li> <li>• Therapeutic Stories</li> <li>• Circle of friends</li> <li>• Nurture Principles</li> <li>• Sensory Activities</li> <li>• Circle Time</li> <li>• Play Therapy</li> <li>• Lego Therapy</li> <li>• Restorative Practice</li> <li>• CBT</li> </ul>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>A multi-agency meeting, such as EHA or Team Around the Child, set up, as appropriate.</p> <p>Individual risk assessment and individual positive handling plan.</p> <p>The pupil usually responds positively to behaviour management which has been based on detailed analysis of antecedents and contextual factors which inform a regularly updated programme.</p> <p>After a crisis the pupil can usually discuss the incident with an adult. They can sometimes recognise the triggers and implement strategies to avoid a recurrence.</p> <p>Implementation of the programme should be supported by regular consultation with parents/carers and professionals, as appropriate.</p> <p>External services undertake specialist assessments discuss progress and give advice.</p>	<p>Sensory based therapies and workouts.</p> <p>Trauma and grief therapy.</p>	<p>&amp; property.</p> <p>Emotion coaching trained early years practitioners/staff.</p>	<p>Settings/schools will need to effectively manage their provision to ensure that they can meet a range of young people's needs within a reasonable time frame i.e. support young person via timed interventions with clear outcomes, including any 'setting/in class support'.</p>



## **BAND 3 - SOCIAL, EMOTIONAL AND MENTAL HEALTH FUNDING - SEN NOTIONAL FUNDING PLUS ADDITIONAL FUNDING THROUGH EHCP**

This band covers a range of significant social, emotional and mental health difficulties requiring planned positive/restrictive intervention which has significant resource implications for the school. All areas of curriculum planning reflect the need to develop social, emotional and/or mental health well-being and resilience. These pupils are usually placed in specialist settings. It would be expected the pupil would have a behaviour support plan in place consistently implemented by all staff. Pupils are developing an awareness of consequences to their actions.

There will be a history of a number of:

- Progress is seriously affected by emotional, social and mental health difficulties
- Frequent and significantly challenging and disruptive behaviour which includes refusal to accept consequences
- Behavioural outbursts, generally on a daily basis
- Significant difficulty in following basic setting/classroom routines
- Exceptional restlessness and inattentiveness for much of the setting/school day
- Aggressive confrontations with peers at least daily
- Few constructive relationships with peers and seems isolated
- Unpredictable emotional outbursts
- Withdrawn; relating to others at a minimal level tending to resist attempts to engage
- Inappropriate response to praise
- Evidence of very frequent need for reassurance but anxiety remains after this has been provided
- A high level of disaffection or anxiety which impacts on attendance
- Behaviours associated with mental health disorders demonstrated, e.g. anxiety/depression, deliberate self-harm, eating disorders that are having mild to moderate impact upon daily functioning but are able to be supported by school staff
- Evidence of feeling victimised
- Actions of putting themselves and others at risk



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>The pupil can sometimes respond positively to behaviour management which has been based on detailed analysis of antecedents and contextual factors which inform a regularly updated programme.</p> <p>After a crisis the pupil can sometimes discuss the incident with a familiar, experienced adult and may accept responsibility for their actions. They may recognise triggers and/or implement strategies to avoid a recurrence.</p> <p>Involvement of parents/carers in the implementation of the programme, though some parents/carers may be hard to reach and third party intervention may be necessary.</p> <p>Some additional external input.</p> <p>Monitor and encourage regular attendance.</p>	<p>Pupil will need individual support to engage in new or unfamiliar tasks.</p> <p>Pupil requires frequent encouragement and positive reinforcement to engage in activities.</p> <p>Adults frequently need to promote the pupil's ability to achieve and overcome setbacks or anxieties.</p> <p>Pupil requires prompting to ask for help to solve problems.</p> <p>Very detailed guidance to practitioner/staff who work with the pupil facilitating the development of coherent and consistent approaches.</p> <p>Familiar, skilled early years practitioner/staff required to engage the pupil in less structured activities.</p> <p>The pupil is likely to need to be withdrawn for individual or small group work to address individual learning needs.</p> <p>Sensory based therapies and workouts.</p> <p>Trauma and grief therapy.</p>	<p>Skilled adult support to develop and maintain consistent and on-task behaviour as soon as necessary.</p> <p>Adult support to be available at times of difficulty to prevent escalation of problems. Flexible deployment of practitioners/staff at moments of crisis will be necessary.</p> <p>Regular opportunities for individual or small group withdrawal sessions to address social, emotional and/or mental health needs.</p> <p>Carefully planned and targeted skilled adult interventions in and out of the classroom at times which the pupil finds most challenging.</p> <p>Setting/school seek to engage families in accessing support from other agencies.</p> <p>Utilise nurture group ethos and strategies.</p> <p>Specialist therapeutic interventions.</p> <p>Emotion coaching trained early years practitioners/staff.</p>	<p>Identified practitioner/staff to plan and monitor structured behaviour programme and meet the pupil daily.</p> <p>Access to an identified area/safe place/person to prevent harm to pupil/staff/other pupils/property. Closely monitored by practitioners/staff at all times.</p> <p>Weekly contact with the family.</p> <p>Teach good mental health strategies either through Social and Emotional Aspects of learning (SEAL), mindfulness or similar therapeutic activities.</p>



## **BAND 4 - SOCIAL, EMOTIONAL AND MENTAL HEALTH FUNDING - HIGH NEEDS BLOCK**

This band covers a range of significant social, emotional and mental health difficulties requiring planned positive/restrictive intervention which has significant resource implications for the school. All areas of curriculum planning reflect the need to develop social, emotional and/or mental health well-being and resilience. These pupils are usually placed in specialist settings. It would be expected the pupil would have a behaviour support plan in place consistently implemented by all staff.

There will be a history of a number of:

- Progress is seriously affected by emotional, social and mental health difficulties
- Frequent and significantly challenging and disruptive behaviour which includes refusal to accept consequences
- Regular behavioural outbursts
- Significant difficulty in following basic classroom routines
- Exceptional restlessness and inattentiveness for much of the school day
- Aggressive confrontations with peers/staff regularly
- Few constructive relationships with peers/staff and seems isolated
- Unpredictable emotional outbursts
- Withdrawn; relating to others at a minimal level tending to resist attempts to engage
- Inappropriate response to praise
- Evidence of very frequent need for reassurance but anxiety remains after this has been provided
- A high level of disaffection or anxiety which impacts on attendance
- Behaviours associated with mental health disorders demonstrated, e.g. anxiety/depression, deliberate self-harm, eating disorders that are having mild to moderate impact upon daily functioning but are able to be supported by appropriate professionals
- Evidence of feeling victimised
- Actions of putting themselves and others at risk
- Damage to property



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>The pupil can sometimes respond positively to behaviour management which has been based on detailed analysis of antecedents and contextual factors which inform a regularly updated programme.</p> <p>After a crisis the pupil can sometimes discuss the incident with a familiar, experienced adult and may accept responsibility for their actions. They may recognise triggers and/or implement strategies to avoid a recurrence.</p> <p>Involvement of parents/carers in the implementation of the programme, though some parents/carers may be hard to reach and third party intervention may be necessary.</p> <p>Some additional external specialist input.</p> <p>Monitor and support regular attendance.</p>	<p>Pupil may need individual support to engage in new or unfamiliar tasks.</p> <p>Pupil may require frequent encouragement and positive reinforcement to engage in activities.</p> <p>Adults frequently need to promote the pupil's ability to achieve and overcome setbacks or anxieties.</p> <p>Pupil may require prompting to ask for help to solve problems.</p> <p>Very detailed guidance to staff who work with the pupil facilitating the development of coherent and consistent approaches.</p> <p>Familiar, skilled staff required to engage the pupil in less structured activities.</p> <p>The pupil is likely to need to be withdrawn for individual or small group work to address individual needs.</p> <p>Therapeutic work may need to be considered.</p>	<p>Skilled adult support to develop and maintain consistent and on-task behaviour as soon as necessary.</p> <p>Adult support to be available at times of difficulty to prevent escalation of problems. Flexible deployment of staff at moments of crisis will be necessary.</p> <p>Regular opportunities for individual or small group withdrawal sessions to address social, emotional and/or mental health needs.</p> <p>Carefully planned and targeted skilled adult interventions both in and out of the classroom.</p> <p>School seek to engage families in accessing support from other agencies.</p> <p>Utilise nurture group ethos and strategies where appropriate.</p>	<p>Identified staff to plan and monitor structured behaviour programme.</p> <p>Access to an identified area/safe place/person to prevent harm to pupil/staff/other pupils/property. Closely monitored by staff at all times.</p> <p>Regular contact with parents.</p> <p>Teach good mental health and well being strategies.</p>



## **BAND 5 - SOCIAL, EMOTIONAL AND MENTAL HEALTH FUNDING - HIGH NEEDS BLOCK**

This band covers a range of severe social, emotional and mental health difficulties with resulting *significantly challenging* behaviour. Pupil requires constant supervision to ensure their own safety and that of peers and/or adults with positive, restrictive intervention strategies employed on a regular basis and requiring regular, one-to-one adult support to access the majority of learning activities and to remain on task. Planning will identify specific targeted individual opportunities to address development of social, emotional and/or mental health well-being and resilience. There is a clearly structured written intervention plan that identifies specific objectives and expected outcomes that are evaluated and reviewed frequently. This is likely to involve other agencies/professionals who can offer additional provision.

There will be a history of a number of:

- Progress is significantly affected by emotional, social and mental health difficulties
- Very provocative, aggressive and confrontational behaviour which can include verbal and physical aggression towards peers and staff
- Loses temper frequently during the day or has frequent outbursts
- Outbursts are prolonged and are difficult for staff to manage
- Has poor relationships with most staff, is disruptive in most lessons and unwilling to comply with teachers' requests which may result in physical assault
- Refuses to acknowledge responsibility for inappropriate behaviour despite objective evidence
- Has very few positive relationships with pupils, has frequent disputes and fights and is known to bully
- Lacks confidence and independence
- Very rarely volunteers a positive response in class
- Maybe withdrawn; social contact with other pupils is may be limited; appears isolated and has limited friendship groups in school
- Serious concerns around school non-attendance
- Shows extreme levels of anxiety in everyday situations
- Behaviours associated with mental health disorders demonstrated e.g. moderate/severe anxiety/depression, suicide ideation, deliberate self-harm, eating disorders, psychotic symptoms that are having a significant impact upon daily functioning and therefore require involvement from mental health professionals
- Actions often put themselves and others at serious risk
- Regular damage to property
- Adult support may need to be deployed flexibly



- Displays extreme sensory behaviours
- Regularly uses inappropriate sexual language and behaviours towards staff and peers

<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>Even with more complex analysis of problems, leading to tightly structured short term behavioural targets the pupil rarely responds consistently in a positive manner.</p> <p>After a crisis the pupil can rarely discuss the incident with an adult. They rarely recognise the triggers and/or strategies to avoid a recurrence.</p> <p>Involvement of parents/carers in the implementation of the programme; this is very likely to involve third party participation.</p> <p>Multi-Agency team approach will be required.</p>	<p>Even with targeted individual support the pupil will only occasionally engage in new or unfamiliar tasks.</p> <p>Pupil requires individual familiar, skilled adult support to engage in activities.</p> <p>Adults give targeted individual support to promote pupil's ability to achieve. Pupil will require help to address problems.</p> <p>Pupil requires individual targeted intervention from a skilled familiar adult to address problems.</p> <p>Very detailed plans, drawn up by a multi-agency team to maintain a coherent and highly consistent approach.</p> <p>Even with skilled, individual support the pupil is rarely able to engage in organised activities inside and outside of lesson times.</p>	<p>Pupil requires planned and structured intervention and opportunities to practice 1:1 with an adult, to develop age/stage appropriate conventions and make independent decisions.</p> <p>Adult support to be available at times of difficulty to prevent escalation of problems.</p> <p>Flexible deployment of staff, for extended periods of crisis will be necessary this may require a higher staff ratio than usual (more than 1:1).</p> <p>Pupil requires frequent structured intervention and opportunities to practice 1:1 with an adult to recognise, manage and control how they feel and the impact their actions have on themselves others and property.</p> <p>Access to a key member of staff throughout the school day who can monitor and support and be available in a crisis.</p> <p>Will require access to highly skilled staff with detailed knowledge, skills and understanding of the emotional needs of challenging pupils.</p>	<p>Access to an identified area/ safe place to prevent serious and significant harm to pupil/staff/other pupils/property with a very high level of staff support.</p> <p>The structured behaviour programme includes the need for frequent intervention by additional highly skilled staff.</p> <p>Planned programmes of intensive therapeutic intervention involving multi-agency approaches.</p> <p>Consideration is given to an environment that ensures the safe emotional well-being &amp; development of the individual.</p> <p>Regular access to appropriately trained support.</p> <p>Regular contact with parent/carers. May involve support from other agencies.</p> <p>Specialist therapeutic interventions.</p> <p>Specific skilled/specially trained staff to meet individual need.</p>







# PHYSICAL

PLEASE REFER TO KNOWSLEY GUIDANCE - 'PLANNING PROVISION FOR SEN'

## DEFINITION / CHECKLIST OF COMMON CHARACTERISTICS

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

**Physical disabilities** may commonly arise from some of the following:

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

**Physical disabilities arising from this wide spectrum of need** may present difficulties with accessing the following:

- physical environment of the PVI setting/school
- educational facilities and equipment
- setting provision/whole school and class activities, including assessments
- practical subjects such as Physical Education and Technology
- information and communication technology

As well as difficulty in:

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



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

Pupils will be able to achieve their mobility independently whether or not they are wheelchair users or require mobility aids. Building adaptations such as ramps and disabled toilet facilities may need to be in place.

Pupils will be independent in the majority of self-help skills.

**Pupils may:**

- have medical conditions which reduce their levels of independence
- have conditions which require monitoring, e.g. arthritis and diabetes
- tire more quickly than other pupils
- have physical abnormalities which may make them self-conscious, isolated, defensive or behave erratically
- require medication to stabilise condition

## BAND 1 - PHYSICAL FUNDING - AGE WEIGHTED PUPIL UNIT (AWPU) UNIVERSAL OFFER

Assessments, targets, review	Curriculum Access	Groupings and Pastoral Care	Equipment and Resources
<p>The pupil may require reasonable adjustments to be made to address areas of difficulty or to develop alternative strategies e.g. use of IT.</p> <p>Periods in hospital or sick at home may inhibit progress.</p> <p>External agencies may provide advice on adaptations and specialist equipment.</p> <p>A pupil may require regular monitoring of their medical condition.</p> <p>Pupil may require training to monitor own condition and know when to seek support.</p>	<p>The pupil's progress through the EYFS/National Curriculum and other subjects is affected by his/her physical and medical difficulties.</p> <p>The pupil's difficulties present him/her with some problems in participating in aspects of the curriculum, e.g. self help skills, handwriting, D.T.</p> <p>May need catch-up programmes after periods of absence from setting/school.</p> <p>Need support to set up equipment/ learning environment but works independently in a range of curriculum areas.</p>	<p>The pupil may need access to keyperson/staff to support simple procedures e.g. administering drugs.</p> <p>Good home-setting/school links to support work at home.</p> <p>Pupil may need access to keyperson/staff support to work on skill development in managing specialist equipment.</p> <p>May need support in coming to terms with their disability.</p>	<p>Pupil requires equipment adaptations to access the curriculum effectively, e.g. specialist tools, specialised seating etc.</p> <p>Pupil may require access to individual IT equipment.</p> <p>Access to support staff to implement short regular therapy programmes.</p>





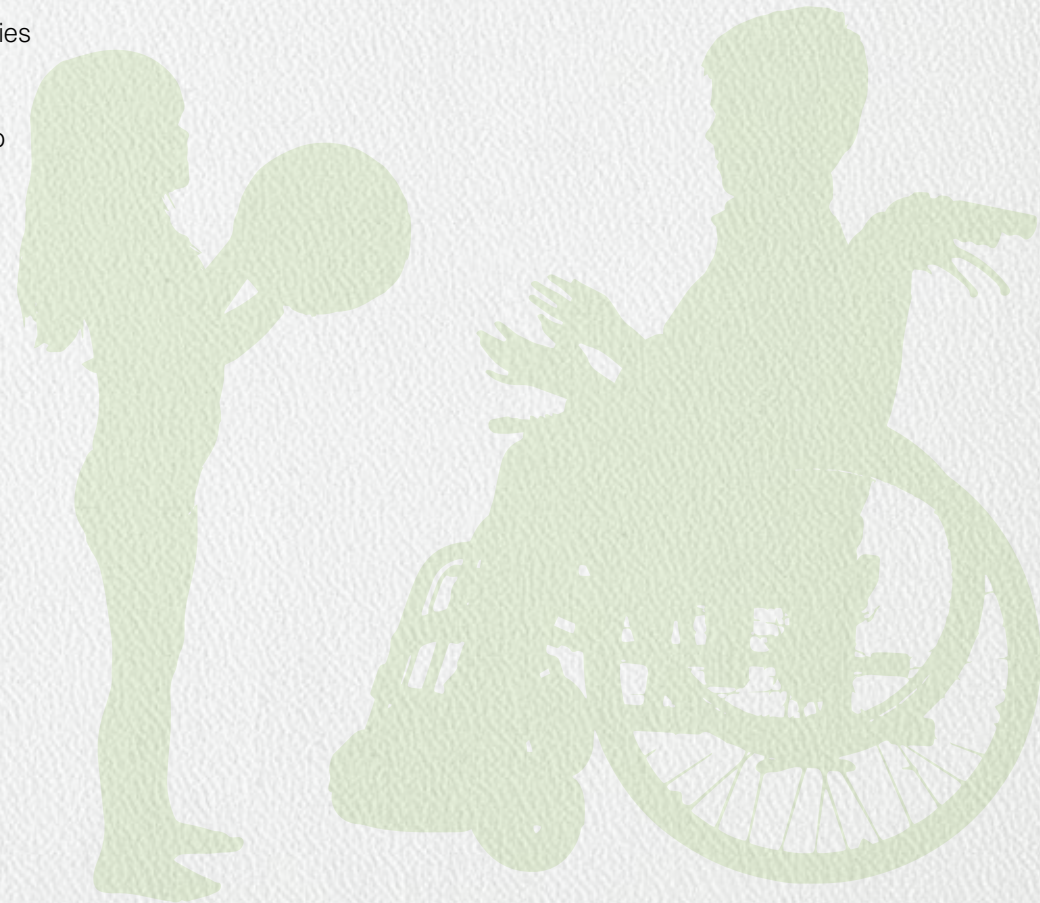


## **BAND 2 - PHYSICAL FUNDING - AWP (ELEMENT 1) PLUS ELEMENT 2 SEN NOTIONAL FUNDING**

Pupils will have reduced mobility, independence and/or self-help skills. They may be independent wheelchair users or use mobility aids. Building adaptations such as ramps and disabled toilet facilities will need to be in place. Their learning may be affected by reduced attendance as a result of their condition or medical needs.

Pupil will need some of the following:

- Access to a learning environment with specialist furniture, resources or technology but they may be able to work independently in some provision/curriculum areas
- A fine/gross motor programme
- Access to adult support on a regular basis to access the curriculum and activities
- Access to a specialist toilet with changing facility
- Support in the management of self-help e.g. toileting and other skills in order to develop independence skills
- Adult support in order to effectively manage their medical needs
- Close supervision with some aspects of mobility, as they may have impaired spatial awareness





<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>The pupil requires a detailed Play plan/IEP or equivalent to address areas of difficulty or to develop alternative strategies e.g. use of IT.</p> <p>Require assessments/specialist advice on: physiotherapy, tools and equipment for accessibility and adaptations to the building and environment.</p> <p>Speech and Language/ Communication Assessment may be needed.</p> <p>Pupil may have a care plan.</p>	<p>Requires more specialist equipment to access the curriculum, especially in practical areas such as outdoor provision in early years and P.E. ICT and D&amp;T in school.</p> <p>Will also need adaptations to tools and equipment for curriculum access in most subjects.</p> <p>Will need a modified or adapted curriculum.</p>	<p>Pupil may need targeted adult support in the school week to access specific activities. E.g. P.E. or swimming.</p> <p>May need access to practitioners/ staff to support them in coming to terms with their disability.</p> <p>Need for staff to help with 'catch up' and good home- setting/school links to support learning.</p>	<p>Access to practitioners/staff trained in the administration of medication and the undertaking of medical and emergency procedures.</p> <p>Support with personal care.</p> <p>Support to aid mobility at some points during the day.</p> <p>Help at mealtimes.</p> <p>Specialist ICT (hardware and software).</p>





## **BAND 3 - PHYSICAL FUNDING - SEN NOTIONAL FUNDING PLUS ADDITIONAL FUNDING THROUGH EHCP**

Pupils will have significantly reduced mobility, independence and/or self-help skills. In some cases they will be either motorised wheelchair users or use manual wheelchairs, but will frequently need adult assistance to move around the PVI setting/school. They may have a postural programme requiring additional equipment. A totally accessible building with specialist personal care facilities will be required. Their learning may be affected by reduced attendance as a result of the severity of their condition.

Pupil will need some of the following:

- Support with communication as a result of their physical difficulty/condition
- A detailed fine/gross motor programme
- Management of a medical condition requiring intervention and monitoring
- Significant support with self-help tasks, e.g. feeding
- Allowances to be made as they may tire easily or may be slow to complete physical activities or independent tasks
- A high level of adult support to access the curriculum and activities
- On-going review if they have a deteriorating condition



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>Assessments may need to include: Medical, Physiotherapy, Speech Language and Communication.</p> <p>Episodes of care may be required.</p> <p>Pupil will have a care plan and risk assessment for moving and handling.</p>	<p>May be exceptionally slow to complete physical activities.</p> <p>Will be slow to complete school work due to tiring, poor physical co-ordination and medication.</p> <p>Is likely to require a daily physiotherapy programme and regular response to physical needs during the session/school day.</p> <p>Will need adaptations to tools and equipment for curriculum access in most areas of learning/subjects.</p> <p>Will need a significantly modified or adapted curriculum/timetable.</p>	<p>In most activities small group support would be required.</p> <p>The pupil will require a higher level of supervision to ensure they are safe during the whole of the session/school day.</p> <p>May need access to staff to support them in coming to terms with their disability.</p> <p>Need for staff to help with 'catch up' and good home-school links to support learning.</p> <p>Significant support with personal care.</p>	<p>Increased adult support required to complete extensive therapy/mobility programmes.</p> <p>Increased adult support to achieve mobility at regular points in the session/school day.</p> <p>Access to medically trained staff that can carry out routine and/or emergency procedures.</p> <p>May require regular therapy treatments, e.g. hydrotherapy.</p> <p>Highly individualised equipment (e.g. Eyegaze) may be required.</p> <p>May require specialist seating.</p> <p>May require speech output technology to aid communication.</p>



## **BAND 4 - PHYSICAL FUNDING - HIGH NEEDS BLOCK**

Pupils will have significantly reduced mobility, independence and/or self-help skills, depending on adults for many aspects of their daily life. They may have a life-limited or deteriorating condition or critical medical needs. Pupils with medical conditions will usually need nursing care. In most cases they will be either motorised wheelchair users or use manual wheelchairs, but will need adult assistance to move around the PVI setting/school. They may have a postural programme requiring additional equipment. A totally accessible building with specialist personal care facilities will be required. Their learning may be affected by reduced attendance as a result of the severity of their condition or long term hospitalisation.

Pupil will need some of the following:

- Specialist support with communication
- A detailed fine/gross motor programme
- Regular management of a medical condition requiring intervention and monitoring
- Significant support with self-help tasks and personal care, e.g. feeding
- Allowances as they may tire easily or may be slow to complete physical activities or independent tasks
- A high level of adult support to access the curriculum and daily living activities
- On-going review if they have a deteriorating condition



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>Assessments may need to include: Medical, Physiotherapy, Occupational Therapy, Speech Language and Communication.</p> <p>Pupil will have a health care plan and risk assessment for moving and handling.</p> <p>Regular review of plans needed to ensure they are kept current in conjunction with the medical specialist.</p>	<p>May require extra time to complete physical activities and/or independence skills.</p> <p>Will require extra time complete school work due to tiring, poor physical co-ordination and medication.</p> <p>Is likely to require a daily physiotherapy programme and regular response to physical needs during the session/school day.</p> <p>Will need adaptations to tools and equipment for curriculum access in most areas of learning/subjects.</p> <p>Will need a modified or adapted curriculum/timetable. This may include regular therapy treatments.</p>	<p>In most activities small group support would be required.</p> <p>Will require a higher level of supervision to ensure they are safe during the whole of the school day.</p> <p>May need access to staff to support them in understanding their disability.</p> <p>Consider extra-curricular support to enhance any prior learning.</p>	<p>Increased adult support required to complete required therapy/mobility programmes set out by OT/Physio.</p> <p>Increased adult support to achieve mobility at regular points in the session/school day.</p> <p>Access to suitably trained staff that can carry out routine and/or emergency procedures. (supported by trained specialist medical staff).</p> <p>Support with personal care.</p> <p>Individualised equipment will be required.</p>





## **BAND 5 - PHYSICAL FUNDING - HIGH NEEDS BLOCK**

Pupils will have a very high dependency on adults for all aspects of their daily life. They may have a life-limited or deteriorating condition or critical medical needs. Pupils with medical conditions will usually need nursing care or require the constant support of Complex Care staff. They are likely to have a postural programme requiring additional equipment. Their learning may be affected by reduced attendance as a result of the severity of their condition or long term hospitalisation.

Pupil will need some of the following:

- Support for their physical management and personal care needs as their independence skills will be very limited or non-existent
- Specialist support with communication as they may be non-verbal
- Significant allowances as they will tire easily or may need high levels of support to complete physical activities or tasks
- Regular intervention and careful monitoring for a significant medical condition
- Support with complex medical issues e.g. needs oxygen, tube feeding or a tracheotomy
- A very high level of adult support to access all aspects of the curriculum and daily living



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>Will require specialist assessment to support provision of equipment to access the Curriculum.</p> <p>Assessments will need to include: Medical, Physiotherapy, Occupational therapy, Speech Language and Communication.</p> <p>Will need regular reviews from Specialist medical professionals.</p> <p>Pupil will have a health care plan and risk assessment for moving and handling.</p> <p>Will require multi-agency approach.</p>	<p>Curriculum access and response only achieved through a very high level of adult support.</p> <p>Curriculum and timetable may need to be highly modified to take account of medical conditions/ attendance.</p> <p>Time for specific therapies will reduce curriculum access time.</p>	<p>High level adult support required at all times.</p> <p>A need for a high level of home setting/school support.</p> <p>Will need adult support at mealtimes and may be tube-fed.</p> <p>Will require a high level of adult support to meet all of their needs.</p>	<p>Skilled adult support required to complete extensive therapy/mobility programmes.</p> <p>May require hoisting for care needs and changing and/or lifting and handling assessment.</p> <p>Will usually require on-site nursing and physiotherapy support.</p> <p>May require support of the Complex Care Team.</p> <p>Will usually require specialist seating or postural system assessed by Occupational Therapy/ Physiotherapy.</p>







# HEARING IMPAIRMENT (HI)

PLEASE REFER TO KNOWSLEY GUIDANCE - 'PLANNING PROVISION FOR SEN'

## DEFINITION

### Hearing Impairment (HI)

Deafness impacts upon the child's ability to acquire process and develop language and also upon their ability to learn effectively. It affects communication, interaction with others and social and emotional development.

**The degree of hearing loss** does **not** necessarily describe how the child will function, acquires language and learns. For instance, a child with a profound hearing loss and a cochlear implant may present as one with a moderate hearing loss. Equally a child with a moderate or severe hearing loss may present as one with a profound loss. Every deaf child is an individual and basing decisions regarding level of need based upon audiological information alone is **not sufficient**.

**Age of onset of deafness** may contribute to their ability to develop language. For example, prelingual deafness (i.e. deafness from birth) may have a greater impact upon all aspects of communication, language and cognition.

**Progressive Nature of a Hearing Loss.** Some children's hearing will deteriorate over time and this has to be taken into account, as it will impact significantly upon the progress in all areas. We have taken that into consideration within the banding.

**Use of Residual Hearing.** The level of a child's hearing loss, the way in which they use their hearing aid technology and how they process language will affect how they are able to understand and use spoken language. This will impact upon all areas of development.

**Linguistic ability and competence.** Age and onset of deafness and the degree of hearing loss, coupled with a child's innate cognitive abilities and other factors, such as family environment, all impact upon the level of linguistic delay upon the child.

Information about listening skills and language assessment are therefore very useful in determining the level of need for a child.



The greater the difference between the child's linguistic and chronological age, the greater the challenge for the child in terms of access to information, the curriculum and their social and emotional development. Provision identified for children with a significant language delay must address their language deficit and not be solely based upon their hearing loss or mode of communication.

## Levels of Hearing loss

Mild 21-40 dBHL (decibels of hearing loss)

Moderate 41-70 dBHL

Severe 71-90 dBHL

Profound 91-dBHL

## Terminology

**Prelingual HL** Hearing loss which occur before or very soon after birth

**Progressive HL** Hearing loss which is or will deteriorate over time

**Bilateral HL** Hearing loss in both ears

**Hearing Technologies** Hearing aids, cochlear implants, Bone Anchored Hearing Aids

## CHECKLIST OF COMMON CHARACTERISTICS

The pupil will have one of the following:

- Significant sensory/sensory integration difficulties (hearing impairment), which have some resource implications for the school
- In circumstances where a pupil has additional disabilities of equivalent severity e.g. visual impairment, physical/medical disability, cognition and learning etc. which compound the effect of their hearing loss, the pupil may need to be placed in the next band
- Have a diagnosis of Auditory Neuropathy (ANSD)
- Requires hearing technologies
- Information received via hearing aids may not result in significant improvements to speech perception
- Spoken language will generally be intelligible enabling pupils to make their needs known verbally

The pupil may have:

- delayed receptive and expressive language and immature functional use of language
- difficulties with comprehension, asking and answering questions, understanding basic concepts, hearing/retaining some speech sounds
- problems with some speech sounds, but will be intelligible and able to make needs known verbally
- some difficulties in expressing/understanding more abstract and complex ideas/information although they may be able to follow most conversations/instructions in context



- difficulty coming to terms with being deaf
- difficulty in physical management/organisation of amplification aids
- challenges behaviourally or emotionally because of their hearing impairment

Have a diagnosed permanent sensori neural moderate loss permanent hearing loss - unless their hearing impairment is also known to be progressive in which case the pupil needs to be placed in the next band.

## GLOSSARY

- QTVI** Qualified Teacher of the Visually Impaired
- QTMSI** Qualified Teacher for Children with Multi-sensory Impairment
- BSL** British Sign Language
- SSE** Sign Supported English
- TOD** Teacher of the Deaf
- ANSD** Auditory Neuropathy Spectrum Disorder





## BAND 1 - HEARING IMPAIRMENT (HI) FUNDING - AGE WEIGHTED PUPIL UNIT (AWPU) UNIVERSAL OFFER

Assessments, targets, review	Curriculum Access	Groupings and Pastoral Care	Equipment and Resources
<p>Audiological assessment would be ongoing at the local audiology clinic.</p> <p>Regular review of targets and progress needs to take place.</p> <p>Careful consideration and an assessment of the pupils needs relating to emergency procedures may need to be carried out (e.g. Personal Evacuation Plan, Identified staff member to support, ear defenders, social stories, visual evacuation procedure etc...).</p>	<p>The pupil's progress through the EYFS/National Curriculum and other subjects may be affected by their hearing impairment.</p> <p>The pupil may have difficulty in taking part in gathering times, classroom discussion or following class teaching, unless care is taken about positioning in class and reduction of ambient noise.</p> <p>The pupil's ability to concentrate on spoken language for prolonged periods of time will be limited and the pupil will become tired towards the end of the day.</p> <p>The pupil may be unable to fully follow class/group discussion without implementation of specific access strategies by the early years practitioner/teacher including pre and post tutoring occasionally.</p> <p>The teacher will need to develop specific strategies to ensure the pupil's access to the curriculum, class and group discussion.</p>	<p>The pupil may need to have some instructions personally checked.</p> <p>Class grouping with pupil's positioning in classroom/small group to take account of associated issues, such as:</p> <ul style="list-style-type: none"> <li>• Social and emotional development; promotion of confidence and understanding of disability and deafness</li> <li>• Development of language</li> <li>• Curriculum access</li> <li>• Inclusion</li> <li>• Seating position is appropriate</li> <li>• Close liaison with parents and carers</li> </ul>	<p>The pupil will need support to develop use of residual hearing, amplification, listening and attention skills.</p> <p>The pupil may need support to enhance social development, promotion of confidence and understanding of disability and deafness.</p> <p>Acoustic conditions - reducing ambient noise.</p> <p>Good lighting.</p> <p>Use of Frequency Modulation (FM) system.</p> <p>The pupil will need support to manage equipment and hearing loss.</p> <p>Practitioners/staff trained and aware of implications of diagnosis and moderate hearing impairment.</p> <p>May need regular access to qualified Teacher(s) of the Deaf who can advise on language and communication needs.</p>



## BAND 2 - HEARING IMPAIRMENT (HI) FUNDING - AWP (ELEMENT 1) PLUS ELEMENT 2 SEN NOTIONAL FUNDING

The pupil will have one of the following:

- Have a diagnosed severe permanent hearing loss - unless their hearing loss is known to be progressive in which case the pupil needs to be placed in the next band
- Ability to communicate through spoken language is moderately delayed
- The pupil might require sign support the development of their residual hearing
- Have a diagnosis of Auditory Neuropathy (ANSD)
- Requires hearing technologies
- In circumstances where a pupil has additional disabilities of equivalent severity e.g. physical/medical disability, cognition and learning, chronic conductive overlay etc. which compound the effect of their hearing loss, the pupil may need to be placed in the next band
- Complex difficulties with sequencing, visual and/or auditory perception, coordination, organisation, concentration

<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>Ongoing assessment of audiological needs by a qualified teacher of the deaf.</p> <p>Targets will be set based upon the hearing assessment and development of language.</p> <p>Assessment and target setting and review related to the development of the whole person including academic progress targets, to focus on language development</p>	<p>The pupil will only access the EYFS/ National Curriculum with in-class support and preparatory and follow-up work.</p> <p>The pupil is likely to have significant difficulty in English and other subjects heavily biased towards delivery in spoken English and may need to follow a structured curriculum in these areas, supported by sign.</p>	<p>The pupil will need daily access to a teacher of the deaf who is able to provide support and advice to classroom based staff on the needs of the child.</p> <p>The pupil will need support to understand their deaf identity.</p> <p>Class grouping with pupil's positioning in classroom/small group to take account of associated issues, such as:</p>	<p>The pupil will need specialist teaching from a teacher of the deaf for some parts of the sessionschool day for:</p> <ul style="list-style-type: none"> <li>• speech and development</li> <li>• auditory training/development of attention skills</li> <li>• to advise on optimum lighting, acoustic conditions, and a favourable listening environment</li> </ul>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>and communication.</p> <p>Annual review of needs.</p>	<p>The pupil will require a visual approach to support language development (written clues, symbols, diagrams, pictorial representation).</p> <p>The pupil will need to lip read at all times and will be unable to look at text or write notes simultaneously whilst the teacher is talking.</p> <p>Background noise will significantly affect pupil's ability to hear teacher.</p> <p>The high levels of concentration required to focus in class will cause extra fatigue.</p> <p>Lapses of concentration are inevitable and will result in gaps in curriculum reception.</p> <p>Pupil's written English will be affected directly by the hearing loss, such as omission of conjunctions, prepositions, word endings, plurals and confusion over sounding content words as they may not be heard. This list is not exhaustive.</p> <p>Pupil's development of reading will be affected by the former as well as difficulties with phonics and deprivation of access to language in all its forms.</p>	<p>Planned and monitored opportunities to support and develop all aspects of learning:</p> <ul style="list-style-type: none"> <li>• Social and emotional development; promotion of confidence and understanding of disability and deafness</li> <li>• Development of language</li> <li>• Curriculum access</li> <li>• Inclusion</li> <li>• Seating position is appropriate</li> <li>• Close liaison with parents and carers</li> </ul> <p>Access to a Deaf peer group enabling linguistic, cultural and social development may be appropriate.</p>	<ul style="list-style-type: none"> <li>• to advise on appropriate seating and grouping arrangements</li> </ul> <p>Access to quiet distraction free learning environment for small group and individual teaching.</p> <ul style="list-style-type: none"> <li>• preparatory and follow-up teaching to facilitate access to some areas of the curriculum</li> <li>• specific literacy support</li> </ul> <p>Additional support may be required from a qualified communication support worker (BSL) who works under the guidance of Teacher(s) of the Deaf who can advise on language and communication needs.</p> <p>Staff trained and aware of implications of a severe sensory impairment.</p>



## BAND 3 - HEARING IMPAIRMENT (HI) FUNDING - SEN NOTIONAL FUNDING PLUS ADDITIONAL FUNDING THROUGH EHCP

The pupil will have one or more of the following:

- Have a diagnosed severe/profound permanent hearing loss
- Have a diagnosis of Auditory Neuropathy (ANSD)
- Difficulties in achieving age-related expectations in line with the EYFS/National Curriculum because of their deafness
- The pupil's acquisition and use of language and literacy, both expressive, receptive and functional is significantly delayed
- The pupil will require use of sign language to support their learning. This may be a combination of British Sign Language and/or Sign Supported English depending on the needs and preferences of the pupil
- With the use of effective amplification, the perception of speech may still be significantly impaired and information perceived through hearing technologies may be barely intelligible or missing altogether

**Where, in addition to this level of hearing impairment, a pupil has additional disabilities of equivalent severity e.g. visual impairment, physical/medical disability, cognition and learning etc. which compounds the effect of their hearing loss, the pupil will need to be placed in the next band.**

Assessments, targets, review	Curriculum Access	Groupings and Pastoral Care	Equipment and Resources
<p>Ongoing assessment of audiological needs by a qualified teacher of the deaf.</p> <p>On-going targets to support the challenges in achieving age related curriculum expectations.</p> <p>Assessment and target setting and review related to the development of the whole person including</p>	<p>All aspects of language, cognition and learning will be affected directly by their deafness: executive function, problem solving, theory of mind and working memory.</p> <p>Teaching across all subjects will be heavily biased towards language acquisition and conceptual understanding.</p>	<p>Small group and individual teaching throughout the school day.</p> <p>Appropriate seating and grouping arrangements to support learning.</p> <p>The pupil will need support to understand their deaf identity.</p> <p>The pupil will require a linguistically rich and inclusive environment</p>	<p>Delivery of the curriculum by qualified Teachers of the Deaf.</p> <p>Staff skilled in the use of BSL/ Total Communication/Auditory Oral/multi-sensory approaches as appropriate.</p> <p>Staff providing full time individualised support, preparation of materials, and implementation of</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>academic progress targets, to focus on language development and communication.</p> <p>Annual review of needs.</p>	<p>Curriculum will be delivered through English, BSL, SSE.</p> <p>This may be within a bimodal bilingual environment.</p> <p>The pupil will require visual and multi-sensory approaches to support language development (written clues, symbols, diagrams, pictorial representation).</p> <p>An acoustically treated environment optimises pupils' auditory access to the curriculum.</p> <p>The pupil's ability to concentrate on spoken language and/or visual presentation through BSL for prolonged periods of time will be limited and the pupil will become tired towards the end of the day.</p> <p>Lapses of concentration are inevitable and will result in gaps in curriculum reception.</p> <p>Pupils' literacy skills will show significant immaturity in syntax, vocabulary and conceptual understanding.</p>	<p>to support the development of sign language skills to facilitate participation in both hearing and deaf cultures.</p> <p>The whole school environment is highly adapted to address the needs of pupils with severe/profound deafness.</p> <p>Access to Deaf adult role models and continuous access to a Deaf peer group enabling optimal linguistic, cultural and social development throughout the school day.</p>	<p>specific strategies.</p> <p>Special arrangements for internal and external exam, e.g. reader, amanuensis, extra time.</p> <p>Staff skilled in the effective use of listening technologies.</p>



## **BAND 4 AND 5 - HEARING IMPAIRMENT (HI) AND MULTISENSORY IMPAIRMENT (MSI) FUNDING - HIGH NEEDS BLOCK**

### **Complex Sensory / MSI**

The pupil will have one of the following:

- a severe/profound hearing loss plus a severe additional disability such as visual impairment, ASC, cognition and learning, SEMH, physical disability, medical etc., resulting in the need for a high level of individual support
- a very high level of deafness (pupil makes little or no use of auditory information)
- difficulties in achieving age-related expectations in line with the National Curriculum because of their deafness and additional need
- a Multi-Sensory Impairment (MSI) - combination of significant visual and hearing difficulties
- multiple difficulties and may have additional formal diagnoses that require an individual plan and support for learning
- a diagnosis of Auditory Neuropathy (ANSD), together with a high level of additional difficulties
- significant difficulties in perception, and in the acquisition and processing of language and information
- high anxiety and challenging behaviour as a result of the combination of their difficulties
- The pupil may have additional disabilities (complex) needs, which make it difficult to ascertain their intellectual abilities
- The pupil may have significant difficulty in accessing the curriculum and the environment
- The pupil requires specialist teaching/support in order to make good use of their residual hearing and vision, together with their other senses
- The pupil may need alternative means of communication
- The pupil may have significant long-term difficulties requiring specialist/and or additional support to access the curriculum, which have significant resource implications for the school



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>HI</b>	<b>HI</b>	<b>HI</b>	<b>HI</b>
<p>Ongoing assessment of the functional uses of language, where sufficient information is not provided by clinical observation.</p> <p>The compounding effect of deafness and additional difficulties should be taken into account when setting and reviewing targets.</p> <p>The pupil is likely to be prevented from achieving at an age-appropriate level by their deafness and additional difficulties.</p> <p>Continuing assessment of needs by a TOD.</p> <p>Targets specifically related to unique combination of needs.</p> <p>Close liaison should be maintained with health provision e.g. audiology, ophthalmology, to ensure optimal support for the pupil.</p> <p>Ongoing involvement with a wide range of professionals, which may include deaf CAMHS, SALT,</p>	<p>The pupil is likely to have significant developmental delay and deafness and other impairments will present barriers to learning.</p> <p>Pupil may have no established first language and require intense immersive practice and additional adult support.</p> <p>Pupil progress may be lateral rather than linear and will require a significant amount of repetition and consolidation.</p> <p>The pupil will have high levels of SEN in other areas (i.e. autism, physical difficulties).</p> <p>A specialist, differentiated curriculum will be required, designed to take account of the most effective way for each pupil to learn.</p> <p>Extensive adaptation will be required to the curriculum to include the provision of concrete,</p>	<p>Specialist intervention to address a high level of language and concept deficit.</p> <p>The teaching and learning take place in an environment that is acoustically treated with optimum lighting.</p> <p>The pupil will be provided with a specialised learning environment.</p> <p>The whole school environment is highly adapted to address the needs of pupils with a severe/ profound hearing loss.</p> <p>Highly personalised tuition and support will be required for acquisition and development of language skills.</p> <p>All teaching takes place in small groups with regular opportunities for 1:1 support.</p> <p>Direct support with developing self-help and independence skills will be required.</p>	<p>Adaptations may be required to the environment to ensure safe access and appropriate learning environment.</p> <p>A range of specialist and individualised resources will be needed, with adequate preparation time available.</p> <p>Assessment and environmental audit with regard to Health and Safety and curriculum access and delivery by TOD should take place to facilitate adaptations to the school environment and systems.</p> <p>The pupil will need specialist resources and teaching e.g. BSL, Widget, Clicker, visual curriculum, objects of reference etc.</p> <p>High tech as well as low tech equipment will be needed to support development of communication and independence skills.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>
<p>physiotherapists, specialist OTs (where sensory integration problems exist), nursing services &amp; complex carers.</p> <p>Mobility assessment, input and monitoring as appropriate to the needs of the pupil.</p>	<p>real experiences.</p> <p>The majority of learning will be through visual means, i.e. use of a Total Communication or bimodal bilingual approach.</p> <p>Special arrangements for assessments and examinations.</p>		<p>Specialised support and training will be required in use of specialist ICT, auditory and communication aids.</p> <p>Optimum lighting and a favourable listening environment.</p> <p>All key staff will have received training on the additional needs of the pupil.</p> <p>Staff skilled in the use of BSL/ Total Communication/Auditory Oral/multi-sensory approaches as appropriate.</p>
<b>MSI</b>	<b>MSI</b>	<b>MSI</b>	<b>MSI</b>
<p>Ongoing functional assessment of sensory needs should be carried out as clinical information may be difficult to obtain accurately.</p> <p>The compounding effect of vision and or hearing should be taken into account when setting and reviewing targets.</p>	<p>The pupil is likely to have significant developmental delay and his or her sensory impairments will present barriers to learning.</p> <p>Much of his/her progress will be lateral rather than linear and will require a significant amount of repetition and consolidation.</p>	<p>The pupil may have a high level of challenging behaviour, requiring specialist intervention and behavioural programmes.</p> <p>A highly supportive environment will be needed for both staff and pupils.</p> <p>He or she will need trained 1:1 support at all times.</p>	<p>A range of specialist and individualised resources is likely to be needed, with adequate preparation time available.</p> <p>High tech as well as low tech equipment will be needed to support development of communication and independence skills.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>MSI</b>	<b>MSI</b>	<b>MSI</b>	<b>MSI</b>
<p>Close liaison should be maintained with audiology and/or low vision centres to ensure optimal support for the pupil.</p> <p>Ongoing involvement with a wide range of professionals, which may include physiotherapists, specialist OTs (where sensory integration problems exist), SALT, nursing services &amp; complex carers.</p>	<p>The pupil will have high levels of SEN in other areas (i.e. physical, learning &amp; behavioural).</p> <p>A specialist curriculum will be required, designed to take account of the most effective way for each pupil to learn e.g. tactile, auditory, multisensory.</p> <p>All programmes will be set in conjunction with QTVI, QTMSI or TOD.</p>	<p>He or she will be provided with a specialised learning environment and will work in a group of not more than 5 pupils.</p>	











# VISUAL IMPAIRMENT (VI)

PLEASE REFER TO KNOWSLEY GUIDANCE - 'PLANNING PROVISION FOR SEN'

## DEFINITION

### Visual Impairment (VI)

Visual Impairment impacts upon the child's ability to learn as 80% of all learning takes place through the visual pathway from birth. Any interruption to this pathway will result in the ability to learn effectively, access the curriculum and acquire life skills. **A medical diagnosis of visual impairment does not necessarily imply SEN.**

Significant support and funding may be needed to facilitate the child's ability to use any residual vision they may have or develop tactile methods of learning and will be required even if the child is working at or above age related expectations. Early diagnosis and use of assistive technology can result in positive outcomes, however many children with visual loss have additional diagnoses and it should be clearly identified where the primary educational need lies.

**The degree of visual loss** does **not** necessarily describe how the child will function and be able to access the curriculum and learn.

Children with the same diagnoses can respond differently and their ability to use their residual vision will vary considerably and so use of visual acuity, field loss or having difficulties in interpreting images is insufficient to determine need.

Having a visual impairment is very 'individual', it is more likely to be a combination of factors and individuals may cross several categories and terminology levels.

**Age of onset** can contribute to the child's ability to use any residual vision and their ability to respond to the curriculum, develop relationships, acquire developmental milestones etc. Being visually impaired from birth and the degree of the loss and the response of the family can impact on all developmental aspects.

**Late diagnosis or deteriorating vision** can have huge implications on development overall and the ability to accept the disability on an older child with having to learn new ways of accessing everyday activities and tasks, as can having a deteriorating condition, as often this is either not



known or discussed until much later. This needs to be taken into account on the banding as stated later.

**Use of residual vision.** The level of the sight loss will impact considerably on the child's ability to use any residual vision effectively, even light/dark perception can be used if support and advice is provided from the outset but this will affect the child's ability to access any curriculum and will affect development overall and this has been taken into account in the banding.

**General ability and competence.** The degree of visual loss, the age of diagnosis, the way in which they use their residual vision, along with the child's innate cognitive abilities and other factors such as family response to the visual impairment will impact upon all areas of development .

An assessment of the functional vision of the child by a QTVI as specified in the Code of Practice are therefore useful in determining the level of need for the child.

**Visual acuity** is the acuteness or clearness of vision, which is dependent on the sharpness of the retinal focus within the eye and the sensitivity of the interpretative faculty of the brain.

Visual acuity refers to your ability to discern the shapes and details of the things you see. It's just one factor in your overall vision. Others include near vision, color vision, peripheral vision, and depth perception.

**Visual Acuity measurement.** Visual acuity is tested by an eye examination via an ophthalmologist/optician that checks how well a letter or symbol can be seen from a specific distance. These tests are often Snellen and more recently LogMAR. Visual acuity usually refers to distance vision though additional tests are made for near vision.

**Cerebral visual impairment (CVI)** is a deficiency in the functions of vision due to damage or malfunction of visual pathways and visual centres in the brain. CVI can lead to a reduction in visual acuity, a reduction in visual field and an impaired ability to make sense of visual images.

It may also be accentuated by associated disorders of the control of eye movements.

## Registration of sight Impairment or severe sight impairment

Registration is completed by the Ophthalmologist with parental consent if the child meets specific criteria. Many children are not registered which is due to the possibility of their sight changing and parents not wanting their children being categorised as having a visual impairment. If registration is completed then social care Habilitation officers also become involved.

## Terminology - levels of visual loss

Mild within visual acuity distance of 6/12 to 6/18 (Snellen) or 0.3 - 0.48 (LogMAR)

Near vision acuity would be point 14 - 16

Moderate within visual acuity distance 6/18 - 6/36 (Snellen) or 0.5 - 0.78 (LogMAR)

Moderate near acuity would be point 18 - 24

Severe within visual acuity distance 6/36 - 6/60 (Snellen) or 0.8 - 1.0 (LogMAR)

Severe near acuity would be point 24 - 36

Profound within visual acuity distance less than 3/60 (Snellen) or 1.3 (LogMAR)

Profound near acuity would be educationally blind and require point 48 and/or more likely to be a tactile learner with Braille or Moon



## CHECKLIST OF COMMON CHARACTERISTICS

The pupil will have one or more of the following:

- A clinically diagnosed visual loss, which may have some resource implications for the school. This will be an ongoing/intermittent mild/moderate visual loss, such as needing to be patched within the school situation, a diagnosed visual loss affecting the actual eye itself or the brain's ability to interpret the images received (CVI)
- Have a diagnosis of a progressive deteriorating condition
- Have field of loss difficulties
- Requires adaptations to curriculum delivery and materials in order to access it
- Requires assistive technologies
- Requires use of a Tactile medium
- In circumstances where a pupil has additional disabilities of equivalent severity, e.g. hearing impairment, physical/medical disability, cognition and learning etc which may compound their visual loss, this pupil may need to be placed in the next band

The pupil may have:

- Difficulties in tracking, scanning, depth and pace of work
- May have difficulties in spatial awareness
- Be unable to use standard text or process pictorial materials and be unable to see any materials presented at a distance e.g. on a board
- Have some difficulties in social interaction and show a reluctance to participate in group activities
- Have some gaps in their concept development due to lack of experiential opportunities
- Have some difficulties in expressing or understanding more abstract ideas/information
- Have difficulty coming to terms with the visual impairment
- Have difficulties in using/managing equipment
- Challenges behaviourally or emotional due to their visual impairment

## GLOSSARY

<b>QTVI</b>	Qualified Teacher of the Visually Impaired
<b>QTMSI</b>	Qualified Teacher for Children with Multi-sensory Impairment
<b>BSL</b>	British Sign Language
<b>SS</b>	Sign Supported English
<b>TOD</b>	Teacher of the Deaf
<b>ANSD</b>	Auditory Neuropathy Spectrum Disorder



## BAND 1 - VISUAL IMPAIRMENT (VI) FUNDING - AGE WEIGHTED PUPIL UNIT (AWPU) UNIVERSAL OFFER

Assessments, targets, review	Curriculum Access	Groupings and Pastoral Care	Equipment and Resources
<p>Ophthalmological assessment would be ongoing at the local hospital/clinic.</p> <p>Functional vision assessment will be carried out by the QTVI to ensure access to the curriculum and safety in school.</p> <p>Advice and support of QTVI will support assessment of Educational Needs and production of materials, adaptation to curriculum and methods of teaching.</p> <p>Environmental audit will need to be carried out by QTVI or Habilitation officer.</p> <p>May require a mobility assessment by the Habilitation officer.</p> <p>Careful consideration and an assessment of the pupils needs relating to emergency procedures may need to be carried out (e.g. Personal Evacuation Plan, Identified staff member to support, pupil accessible evacuation procedure etc...)</p>	<p>The pupil's progress through the EYFS/National Curriculum and other subjects may be affected by their visual impairment.</p> <p>The pupil may need to learn skills in addition to those required by sighted peers as part of an additional curriculum e.g. mobility, specialist ICT, ILS, touch-typing.</p> <p>The pupil's ability to remain on task and focussed may deteriorate during the day and rest periods may be required.</p> <p>Access to programmes of study will be provided through suitable differentiation and support on the advice of a QTVI e.g.</p> <ul style="list-style-type: none"> <li>• modified curriculum</li> <li>• use of adapted materials</li> <li>• magnification</li> <li>• specialist resources</li> <li>• large print books/materials</li> <li>• seating position</li> </ul>	<p>Pupil's physical location in classroom(s) will need to take account of visual difficulties.</p> <p>Class groupings with pupil position in a small group/pairing to take account of:</p> <ul style="list-style-type: none"> <li>• Seating position</li> <li>• use of equipment</li> <li>• social and emotional development</li> <li>• promotion of visual awareness</li> <li>• curriculum access</li> <li>• additional support in practical subjects may be required</li> <li>• specialist teaching in VI specific skills, e.g. use of specialist equipment, use of LVAs, touch-typing, use of specialist ICT and software programmes as assessed and advised by QTVI, mobility and independence skills etc.</li> <li>• access to VI peer group as</li> </ul>	<p>The pupil may require support to develop their use of residual vision.</p> <p>Pupil may need support to enhance social development and promotion of confidence and understanding of visual impairment.</p> <p>Pupil will have good lighting, highlighted stairs/steps as a result of an environmental audit.</p> <p>Pupils will have access to general equipment where required e.g. raised desks, individual ipad.</p> <p>Provision of appropriate materials in pupil's required medium e.g. enlarged print and some support with specific skills such as using and interpreting diagrams.</p> <p>May require some concrete learning reinforcement for 'hands on'.</p> <p>Pupil will have access to specialist equipment such as LVAs, CCTV, specialist ICT and software.</p>



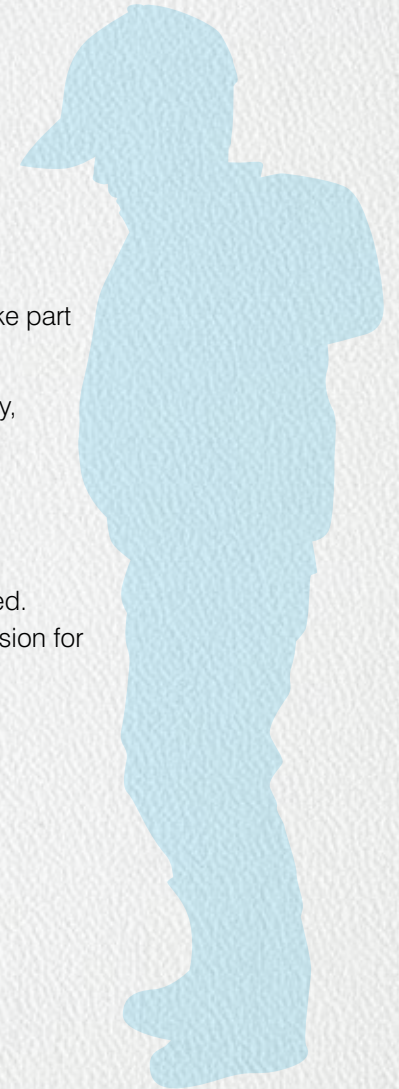
Assessments, targets, review	Curriculum Access	Groupings and Pastoral Care	Equipment and Resources
	<ul style="list-style-type: none"> <li>• consideration of lighting needs</li> <li>• individual copies of printed materials and media board work</li> <li>• adaptation of teaching methods e.g., describing processes aloud and in detail, reading what is written on the board etc.</li> </ul> <p>The pupil may require special arrangements for internal and external exams.</p> <p><b>Cortical Visual Impairment may require environmental and presentational modifications e.g. individualised presentational routines to engage vision for a task.</b></p>	<p>appropriate providing social opportunities, if available.</p>	<p>Staff trained and aware of implication of visual diagnosis and mild/moderate visual impairment.</p> <p>Access to the QTVI to advise on vision friendly strategies.</p>



## **BAND 2 - VISUAL IMPAIRMENT (VI) FUNDING - AWP (ELEMENT 1) PLUS ELEMENT 2 SEN NOTIONAL FUNDING**

The pupil will have one or more of the following:

- A diagnosed moderate or severe visual loss, a progressive loss or CVI
- A need for considerable support to ensure access to the curriculum and for skill development
- The pupil will need significant modification and adaptation to print
- The pupil will need additional time and reinforcement to consolidate understanding
- A need to access specific technologies
- The pupil's visual difficulty is likely to impair mobility, emotional and social development, access to the curriculum and ability to take part in school activities without adaptations
- In circumstances where a pupil has additional disabilities of equivalent severity e.g. hearing impairment, Physical/medical disability, Cognition and Learning etc. which compound the effect of their sight loss, the pupil may need to be placed in the next band
- The pupil may have a visual loss which could merit sight registration, though this may not be in place gaps in social development
- The pupil may exhibit difficulties in coming to terms with their visual impairment
- The pupil may have a high level of Cortical Visual Impairment which may merit registration as sight impaired/severely sight impaired. (This level of CVI will require environmental and presentational modifications e.g. individualised presentation routines to engage vision for a task, reduced distractions, clear background, colour contrast, size.)





<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>Pupil attends hospital/clinic for regular ophthalmological checks.</p> <p>Ongoing monitoring of visual needs by a QTVI.</p> <p>An annual functional vision assessment by QTVI.</p> <p>Consultation with QTVI on vision friendly teaching and access strategies and advice on planning and delivery of the curriculum.</p> <p>The pupil requires an environmental audit to facilitate adaptations to the school environment and systems as carried out by the Habilitation officer.</p> <p>Advice and support of QTVI will support assessment of Educational Needs and ongoing production of materials, adaptation to curriculum and methods of teaching.</p> <p>The pupil will have specific targets related to Visual Impairment.</p> <p>At least a termly review of needs between QTVI and class teacher.</p> <p>The pupil may need a mobility assessment some input and</p>	<p>The pupil will require support to access the EYFS/National Curriculum by any of the following:</p> <ul style="list-style-type: none"> <li>• Modified curriculum and teaching strategies to take account of reduced vision</li> <li>• Emphasis on first hand, concrete learning experiences, especially in Early Years</li> <li>• Some specialist teaching from a QTVI</li> </ul> <p>Adaptations to print and visual resources to include:</p> <ul style="list-style-type: none"> <li>• Modified print</li> <li>• Use of specialist magnification software to access ICT</li> <li>• Alternative presentation for most detailed distance vision tasks</li> <li>• On-going training in specialist skills and equipment e.g. touch typing, ILS, specialist ICT, use of LVAs</li> </ul> <p>Special arrangements for internal and external exams e.g. reader, amanuensis, extra time.</p>	<p>The pupil will need access to the QTVI who is able to provide support and advice to classroom based staff on the needs of the pupil.</p> <p>Appropriate seating and grouping arrangements will be required to support learning, such as *planned and monitored opportunities to support and develop all aspects of learning</p> <ul style="list-style-type: none"> <li>• Social and emotional development</li> <li>• Seating position is appropriate</li> </ul> <p>Teaching will be in small groups or individual sessions.</p> <p>Individual tuition for acquisition of specialist skills e.g. mobility, ILS, touch-typing, specialist ICT, perceptual development, use of LVAs.</p> <p>Additional adult support will be required for all practical subjects e.g. PE, Design/Food technology, science, geography.</p> <p>The high levels of concentration required to focus visually may</p>	<p>The pupil will require additional support from teaching assistants who have been trained to meet the needs of the VI.</p> <p>Access to periods of distraction free environments for individual tuition.</p> <p>Optimum lighting and a favourable listening environment.</p> <p>Provision of and tuition in the use of adapted specialist equipment e.g. large print, CCTV, specialist software programmes as assessed and advised by QTVI.</p> <p>Provision of appropriate materials in pupil's required medium e.g. enlarged print and concrete hands on activities, some support with specific skills such as using and interpreting diagrams.</p> <p>Low technology aids e.g. sloping desk-tops, magnification aids.</p> <p>Provision of an individual ipad.</p> <p>Significant support to develop Independent Living Skills.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>monitoring as devised by Habilitation officer.</p>	<p>Background noise may significantly affect the pupil's ability to use listening as a key learning mode.</p> <p>Lapses of concentration are inevitable due to difficulties in visual functioning and use of other sensory methods to access the curriculum.</p> <p><b>Cortical Visual Impairment will require environmental and presentational modifications e.g. individualised presentational routines to engage vision for a task.</b></p>	<p>cause extra fatigue.</p> <p>Access to a visually impaired peer group providing social opportunities as appropriate.</p>	



## **BAND 3 - VISUAL IMPAIRMENT (VI) (PROFOUNDLY SIGHT IMPAIRED) FUNDING - SEN NOTIONAL FUNDING PLUS ADDITIONAL FUNDING THROUGH EHCP (+ LEVEL 5 FUNDING MAY NEED TO BE CONSIDERED FOR EQUIPMENT AND PLACEMENT NEED)**

The Pupil will have one or more of the following:

- Have a diagnosed severe/profound visual loss
- Difficulties in achieving age related expectations in line with national Curriculum because of their visual loss
- The pupil may have a rapidly deteriorating visual condition
- Have significant field losses
- The pupil will need to use electronic aids and/or non-standard format e.g. Braille or Moon to read and record work
- Sight difficulties will place the pupil at considerable risk of injury with particular reference to practical subjects and activities
- Adaptations will be required to the environment to ensure safe access
- The pupil will need considerable additional time to carry out tasks using a mix of enlarged and tactile methods or non-sighted methods and extensive reinforcement to consolidate understanding
- The pupil's visual difficulty will impair mobility, access to the curriculum and ability to take part in all school activities without significant adaptations. It is highly likely to impact upon the pupil's emotional and social development
- Pupil is likely to require a specialist school for students with visual impairment
- The pupil's visual loss will merit registration as severely sight impaired, although this may not have been issued
- The pupil may have a high level of Cortical Visual Impairment which will merit registration as severely sight impaired. (see above) Level of Cortical Visual Impairment means that pupil makes little or no use of visual information
- **In addition the pupil may be using Braille as their first language and achieving at or above age related expectations, but requires considerable access to specialist teaching by QTVI and specialist support and a modified and additional curriculum to meet specific needs. In this case the pupil will need to be placed at band 5**
- In addition to this level of visual impairment, a pupil has additional disabilities of equivalent severity e.g. Hearing impairment, Physical/medical disability, Cognition and Learning etc. which greatly compound the effect of their sight loss, the pupil will need to be placed in the next band of complex sensory



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<p>Pupil attends regular ophthalmology appointments.</p> <p>Ongoing assessment by the QTVI.</p> <p>Ongoing targets to support the challenges in achieving age related curriculum expectations by QTVI and school staff.</p> <p>Assessment and target setting and review related to the development to the whole person including social and emotional and academic progress targets including a review of the EHCP.</p> <p>Environmental audit with regard to Health and Safety and curriculum access and delivery should take place to facilitate adaptations to the school environment and systems by the Habilitation officer and QTVI.</p> <p>QTVI undertakes continuous assessment, specialist teaching, advising on curriculum planning and delivery, targets and review.</p> <p>Mobility assessment, regular input and monitoring, including use of mobility aids e.g. long cane.</p>	<p>Advice on curriculum design and additional specialist curriculum delivered by QTVIs.</p> <p>On-going specialist teaching from QTVIs as appropriate.</p> <p>Additional time for planning, preparation of materials and resourcing the curriculum in an adapted manner.</p> <p>School staff trained awareness of the visual impairment and issues to be considered when planning.</p> <p>Specialist staff provide delivery of specialised programmes and the use of supportive technology. Staff skilled in the use of Braille/Moon.</p> <p>Pupil requires significant focus on learning through extreme large print and non-sighted methods.</p> <p>Most learning underpinned by direct experience.</p> <p>Individual tuition and ongoing training for acquisition of specialist skills e.g. Braille, ICT, Mobility, ILS, Moon, touch-typing, use of LVAs.</p>	<p>Individual support to supplement small group teaching throughout the school day.</p> <p>Appropriate seating and grouping arrangements to support learning.</p> <p>Pupil will need support to understand the visual impairment identity.</p> <p>Help in developing social interaction skills.</p> <p>The pupil will need regular and significant level of training to develop independence, mobility, self-help skills.</p> <p>High level of adaptation and support in practical subjects/ activities.</p> <p>Access to visual impairment role models as appropriate.</p>	<p>Delivery of curriculum supported by specialist support assistant.</p> <p>Staff providing significant individualised support, preparation of materials and implementation of specific strategies or interventions.</p> <p>Special arrangements for internal and external examinations, e.g. a reader, use of equipment, extra time.</p> <p>Environment fully adapted to needs of students with visual impairment, with optimum lighting and a favourable listening environment.</p> <p>Provision of specialist equipment and tuition e.g. large print, Ipad, CCTV, specialist software programmes, use of Brailier, BrailleNote etc.</p> <p>Provision of appropriate materials in pupil's required medium e.g. extreme large print and/or Braille, Moon and support with specific skills such as using and interpreting diagrams.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
	<p>Pupil may use combination of modified large print and Braille.</p> <p>Need for additional time to reinforce concepts and content and to complete tasks.</p> <p>Requires specialist magnification or translation software and use speech or tactile means to access ICT.</p> <p>Special arrangements for internal and external exam, e.g. reader, amanuensis, extra time, modified papers.</p> <p>Background noise will significantly affect the pupil's ability to use listening as a key learning mode.</p> <p>Level of Cortical Visual Impairment means that pupil makes little or no use of visual information.</p>		<p>School staff will require training in sighted guide techniques.</p>



## **BAND 4 AND 5 - VISUAL IMPAIRMENT (VI) AND MULTISENSORY IMPAIRMENT (MSI) FUNDING - HIGH NEEDS BLOCK**

### **Complex Sensory VI / MSI**

The pupil will have one of the following:

- A severe/profound visual loss plus a severe additional disability such as hearing impairment, ASC, cognition and learning, SEMH, Physical disability, medical etc resulting in the need for a high level of individual support
- Difficulties in achieving age related expectations in line with the National Curriculum because of their visual impairment and additional need
- A Multi Sensory Impairment (MSI) is when a child has a combination of visual and hearing difficulties. The term deaf-blind is sometimes used but the child may well have residual vision and/or hearing. Many may have additional disabilities but their complex needs mean it is difficult to ascertain their intellectual abilities
- Multiple difficulties and may have additional formal diagnoses that require an individual plan and support for learning
- High anxiety and challenging behaviour as a result of the combination of their difficulties
- The pupil may have significant difficulty in accessing the curriculum and the environment
- The pupil may require specialist teaching/support in order to make good use of their residual vision and hearing, together with their other senses
- The pupil may need alternative means of communication, such as 'on body signing' or use of tactile MOON or objects of reference
- The pupils may have significant long term difficulties requiring specialist/and or additional support to access the curriculum, which has significant resource implications for the school
- Pupils may have a very high level of Cortical Visual Impairment (pupil makes little or no use of visual information) together with a high level of additional difficulties
- Adaptations will be required to the environment to ensure safe access and an appropriate learning environment e.g. acoustically treated rooms, visually uncluttered, quiet environment



## Terminology

**Mild MSI** is dual impairment with mild loss in both modalities

**Moderate MSI** is dual impairment with a moderate loss in both or the most affected modality

**Severe MSI** is dual impairment with a severe loss in both or the most affected modality

**Profound MSI** is dual impairment with a profound loss on one modality and a mild/moderate loss in the other OR Educationally blind and a severe/profound hearing loss

Assessments, targets, review	Curriculum Access	Groupings and Pastoral Care	Equipment and Resources
VI	VI	VI	VI
<p>Continuing advice/assessment of needs by QTVI.</p> <p>Ongoing functional assessment of functional visual needs should be carried out as clinical information may be difficult to obtain accurately.</p> <p>The compounding effect of vision and additional difficulties should be taken into account when setting and reviewing targets.</p> <p>The pupil is likely to be prevented from achieving at an age-appropriate level by their visual impairment and additional difficulties.</p>	<p>The pupil is likely to have significant developmental delay and visual impairment and other impairments will present barriers to learning.</p> <p>Much of the pupil progress may be lateral rather than linear and will require a significant amount of repetition and consolidation.</p> <p>The pupil will have high levels of SEN in other areas (i.e. physical, learning &amp; behavioural).</p> <p>A specialist differentiated curriculum will be required, designed to take account of the most effective way for each pupil to learn.</p>	<p>Specialist intervention to address a high level of concept deficit and gaps in experiential learning.</p> <p>The pupil will be provided with a specialised learning environment.</p> <p>A quiet distraction free room for individual teaching and small group work will need to be available.</p> <p>The whole school environment is highly adapted to address the needs of pupils with a severe/profound sight loss.</p> <p>A highly supportive environment will be needed for both staff and pupils.</p>	<p>Adaptations may be required to the environment to ensure safe access and appropriate learning environment.</p> <p>A range of specialist and individualised resources will be needed, with adequate preparation time available.</p> <p>Assessment and environmental audit with regard to health and safety and curriculum access and delivery by QTVI and Habilitation Officer to facilitate adaptations to the school environment and systems.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>	<b>SLCN</b>
<p>Targets specifically related to unique combination of needs. Close liaison should be maintained with health provision, e.g. ophthalmology to ensure optimal support for the pupil.</p> <p>Ongoing involvement with a wide range of professionals which may include specialist vision services, social care, nursing and complex carers.</p> <p>Assessment and environmental audit with regard to Health and Safety and curriculum access and delivery by QTVI and Habilitation officer.</p>	<p>Extensive adaptation will be required to the curriculum to include the provision of concrete, real experiences.</p> <p>The majority of learning will be through non-visual means e.g. objects of reference, on body signing, tactile codes.</p> <p>Special arrangements for assessments and examinations.</p>	<p>Individual tuition will be required for acquisition of specialist skills.</p> <p>Individual tuition/support will be required in most group situations.</p> <p>Direct support with developing self help and independence skills will be required.</p>	<p>The pupil will need specialist resources and teaching e.g. Objects of reference , auditory curriculum, concrete reinforcement, tactile curriculum possibly Moon or Braille.</p> <p>A range of equipment will be needed to support the development of communication and independence skills.</p> <p>Specialised support and training will be required in use of specialist ICT, mobility and communication aids.</p> <p>Optimum lighting and a favourable listening environment.</p> <p>School staff will require training in sighted guide techniques including guide techniques for those using a wheelchair.</p>



<b>Assessments, targets, review</b>	<b>Curriculum Access</b>	<b>Groupings and Pastoral Care</b>	<b>Equipment and Resources</b>
<b>MSI</b>	<b>MSI</b>	<b>MSI</b>	<b>MSI</b>
<p>Ongoing functional assessment of sensory needs will be carried out alongside received clinical information by the QTMSI.</p> <p>Continuing assessment of needs by a QTVI/TOD/QTMSI. Targets specifically related to unique combination of needs.</p> <p>Ongoing involvement with a wide range of professionals, which may include physiotherapists, specialist OTs (where sensory integration problems exist), SALT, nursing services &amp; complex carers.</p> <p>Mobility assessment, input and monitoring as appropriate to the needs of the pupil.</p>	<p>The pupil is likely to have significant developmental delay and his/her sensory impairments will present barriers to learning.</p> <p>Much of their progress will be lateral rather than linear and will require a significant amount of repetition and consolidation.</p> <p>The pupil will have high levels of SEN in other areas (i.e physical, learning and behavioural).</p> <p>A specialist curriculum will be required designed to take account of the most effective way for each pupil to learn, e.g. Programmes will be set in conjunction with QTMSI and/or QTVI and TOD.</p> <p>The pupil will be dependent on close adult supervision when mobile.</p>	<p>The pupil will be provided with a specialised learning environment.</p> <p>A quiet distraction free room for individual teaching and small group work will need to be available.</p> <p>The whole school environment is highly adapted to address the needs of pupils with a severe/ profound sight loss.</p> <p>A highly supportive environment will be needed for both staff and pupils.</p> <p>Individual tuition will be required for acquisition of specialist skills.</p> <p>Individual tuition/support will be required in most group situations.</p> <p>Direct support with developing self help and independence skills will be required.</p> <p>Need to work in partnership with parents/carers who will require support and signposting to services.</p> <p>MSI pupils will require trained 1:1 support at all times.</p>	<p>A range of specialist and individualised resources is likely to be needed, with adequate preparation time available.</p> <p>High tech as well as low tech equipment will be needed to support development of communication and independence skills.</p>



