

SEND PROFILES OF NEED For Reception through to Year 11

(September 2019)

COGNITION AND LEARNING PROFILE OF NEED

Please use the following as a **guide** to exemplify the following terms:

Some – progress is slow in comparison to peers but there is potential for progress to accelerate with appropriate support. Standardised scores are just below average (84 or below / 14th percentile).

Moderate – progress is slow in comparison to peers, frequent support and interventions are necessary to enable the child to make progress at the same or an accelerated rate. Standardised scores are below average (78 or below / 7th percentile).

Significant – there is little or no progress. A high level of personalised support is necessary to enable the child to make small steps of progress and to adjust the learning path so that the child /young person can achieve. Standardised scores are well below average (67 or below / 1.5th percentile).

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>Standardised score guide: within the average range from 85 – 115 (16th – 84th percentile).</p> <p>Child is broadly working within the appropriate developmental learning phase.</p> <p>They may require support from time to time for specific areas of need but generally make the required progress as a result.</p> <p>Can remain on task with some additional prompts.</p> <p>Can work independently with appropriate differentiation and access to good quality first teaching.</p>	Attainment and Progress		
	Standardised score guide: 84 or below (14 th percentile or below)	Standardised score guide: 78 or below (7 th percentile or below)	Standardised score guide: 67 or below (1.5 percentile or below)
	Vulnerable pupils with ongoing or historical involvement from outside agencies (Social Care or Educational Welfare) which has impacted on their ability to engage or fully access learning over time.		
	Working below age related expectations, some structured support or group work may be required.	<p>Moderate general delay, working below age related expectations in core subject areas.</p> <ul style="list-style-type: none"> • More detailed approaches • More frequent review • More specialist expertise in matching intervention to the needs of the children • Having removed barriers to learning 	<p>Learning significantly below age related expectations with gap increasing.</p> <p>The attainment gap is widening despite robust evidence based intervention.</p>
	Progress is slower than that of their peers starting from the same baseline	Not making expected progress despite evidence based support and differentiated teaching targeted at areas of weakness.	Not making expected progress despite interventions from School and Specialist SEND Support,

	<ul style="list-style-type: none"> • fails to match or better the child's previous rate of progress • fails to close the attainment gap between the child and their peers 	significant needs that will require high levels of support to make discernible progress.
Learning Behaviour		
Needs some additional support and prompts to listen and attend compared to their peers.	Needs actively planned support and prompts to listen and attend and to maintain attention on a task	Needs significant support and delivery of information and learning to attend to a task.
Needs some additional support and prompts to start and work through an appropriately differentiated task e.g. task board	Needs actively planned support and prompts to start and work through an appropriately differentiated task e.g. specific scaffolding, sentence starters, paragraph plans,	Needs significant, individualised support to work independently.
Consistently needs some reminders / encouragement to persevere with a task that provides some element of challenge.	Consistently needs planned strategies to support resilience such as reward charts	Needs sustained intervention to attempt and manage an appropriate level of challenge.
Has some difficulty retaining and using learned skills independently in specific or general learning contexts that is impacting on progress?	Requires planned strategies and additional support to retain and use learned skills. Memory difficulties are having a moderate impact on progress.	Needs sustained and significant intervention to retain and use learned skills. Memory difficulties are having a significant impact on progress.
Cognitive skills		
Some difficulties with acquiring pre-requisite skills for literacy e.g. phonological awareness, visual memory/discrimination that are having some impact on learning.	Difficulties with acquiring pre-requisite skills for literacy e.g. phonological awareness, visual memory/discrimination that are having a moderate impact on learning.	Difficulties with acquiring pre-requisite skills for literacy e.g. phonological awareness, visual memory/discrimination that are having a significant impact on learning.
Some difficulty in using a range of age appropriate skills to read and understand text.	Moderate difficulties in using age appropriate skills to read and understand text is having some impact on other areas of learning,	Has significant and persistent difficulties in using appropriate skills to read and understand print is having a considerable impact on other areas of learning.

	Some difficulty in generating ideas.	Moderate difficulty in generating ideas, e.g. for story creation and requires additional planned support (visual prompts etc)	Has significant difficulty in generating ideas despite substantial and robust additional planned support.
	Has some difficulty in recording their thoughts and ideas accurately?	Needs additional support to record ideas which may include alternative ways of recording ideas	Consistently needs significant adaptations to record ideas in all areas of learning.
	Some difficulty in recalling arithmetic facts, understanding number and / or reasoning about number.	Moderate difficulty in recalling arithmetic facts, understanding number and / or reasoning about number.	Significant difficulty in recalling arithmetic facts, understanding number and / or reasoning about number.

Assessment and Planning

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children require: Systems in place for staff to routinely seek children's views about their progress with learning for example through One Page Profile.</p> <p>Systems in place for staff to regularly seek parents' views about their child's progress with learning.</p> <p>A whole school target setting, tracking and review process.</p> <p>Appropriate arrangements for assessment of the classroom and school environment, which are reviewed at least annually.</p> <p>Systems of self-assessment which are used to inform personalised learning targets.</p> <p>Encouragement for children and young people to evaluate their</p>	<p>In addition to universal approaches, some children will require:</p> <p>The setting to gather the child's views about their difficulties and the SEND Support approaches to be put in place, using for example the One Page Profile.</p> <p>The setting to raise and discuss concerns with the child's parents/carers and involve them in planning School SEND Support approaches.</p> <p>Both qualitative and quantitative measures used as a baseline from which progress can be judged. Continuous assessment, and curriculum assessment, supplemented by standardised/diagnostic tests where relevant.</p> <p>Progress and attainment clearly monitored through baseline, interim and summative assessments. These can be supplemented by standardized / diagnostic tests where appropriate.</p> <p>Consideration of their development in</p>	<p>In addition to universal and School SEND Support approaches, a few children will also require:</p> <p>Continued home-school links, so school are aware of changes in home circumstances that may impact on learning.</p> <p>Access to external services who may contribute via consultation or specialist assessment, which leads to a Specialist SEND Support Plan. Professionals may include speech and language therapist, occupational therapist, teacher of inclusive practice, the Surrey Outreach Service. Social workers, community and charity groups involved with the child/young person may also contribute.</p> <p>A few children require a statutory assessment of their special educational needs which may lead to an Education, Health and Care Plan.</p>	<p>May have involvement from more than one external agency / specialist.</p> <p>Continued liaison with parents / carers to collate evidence which may result in an application for an EHCP.</p>

<p>own performance</p>	<p>comparison to peers and their response to previous interventions.</p> <p>The Class Teacher in consultation with the SENCO to establish a clear analysis of the children's needs which can be shared with professionals when seeking advice.</p> <p>The SENCO to contact other professionals working with the child outside school (with parental permission) as part of the assessment.</p> <p>Assessment suggests that the child's cognition and learning difficulties mean they require additional to and different from provision.</p> <p>Clear plans for the use of support which relate to expected long term outcomes and include short term SMART targets.</p> <p>Liaison and advice from external professionals and support services where appropriate which may lead to a Specialist SEND Support Plan for some children. Non educational professionals may also advise in the assessment and planning.</p>		
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Intervention and Support

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children will require access to the following Intervention and Support approaches:</p> <p>Quality First Teaching or other appropriately differentiated curriculum to take account of</p>	<p>Some children may require the following additional intervention and support approaches:</p> <p>Appropriate modifications to the classroom and whole school environment.</p>	<p>In addition to the Intervention and Support approaches put in place at School SEND Support, some children may require a modified learning environment to meet their needs through Specialist SEND Support.</p> <p>A structured and personalized learning programme.</p>	<p>Frequent and higher level interventions are in place.</p> <p>An individualised curriculum linking content of whole class work and learning objectives appropriate to the child. Everyday classroom support is personalised and individual to meet needs.</p>

<p>individual needs.</p> <p>Classroom and whole school environment modified to take account of learning needs.</p> <p>Use of peer support systems across the school (e.g. peer mediators and playground buddy systems).</p> <p>Classroom groupings and seating arrangements which are used to facilitate learning. This may include planned collaborative/group work.</p> <p>Focused small group support for literacy and/or numeracy.</p> <p>Out of hours learning opportunities (e.g. homework clubs, lunchtime clubs etc.). Special arrangements in place for testing & assessments when required.</p> <p>Peer and adult support on ad hoc basis or limited targeted adult support which may include use of HLTAs, TAs and adult volunteers.</p> <p>Teaching children thinking skills and helping them to become aware of their own learning processes.</p> <p>Praising the child's strengths and achievements so that</p>	<p>Additional adult support may be required within a small group to provide a range of evidence based interventions and support approaches.</p> <p>Individual arrangements made for seating and groupings to meet individual needs.</p> <p>Close home-school links are maintained, so that the school are aware of any changes in home circumstances that may impact on learning.</p> <p>Child and parent involvement in teaching programme clearly defined.</p> <p>Considering carefully the child's learning styles and ensuring that this is reflected in the styles of teaching (e.g. use of multi-sensory teaching strategies).</p> <p>Flexible grouping strategies, including ones where the child can work with more able peers.</p> <p>Increasing differentiation of activities and materials to ensure access to texts</p> <p>Arrangements considered for pre-teaching new skills and concepts before the lesson including identifying and pre-teaching subject specific vocabulary, supported with visuals as appropriate.</p> <p>Staff trained in working with children with specific needs.</p> <p>Staff skilled in breaking down skills into finely detailed steps.</p>	<p>Help in understanding ideas concepts and experiences when information cannot be gained through first hand sensory or physical experiences. Help to connect and generalise concepts e.g. Semantic Links, mind mapping.</p> <p>Providing for alternative means access to tasks involving reading and writing e.g. Reading pens, recording devices, scribes, paired working, computer software, coloured overlays.</p> <p>Access to ICT and to specialist equipment and materials as necessary e.g. Clicker 7.</p> <p>A secure, structured and safe learning environment.</p> <p>Interventions should be well-founded evidence based interventions.</p> <p>A cycle of intervention should always last a minimum of two terms and where needed three.</p> <p>A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.</p>	<p>A high level of care and supervision.</p> <p>A secure, structured and safe learning environment.</p> <p>Independent skills are encouraged and taught in both the everyday classroom and within interventions.</p> <p>Personalised transition support is provided between year groups/phases.</p>
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<p>self-esteem is maintained and enhanced.</p> <p>Careful consideration given to the use of language in the classroom and strategies to promote the learning of vocabulary.</p> <p>Use of visual resources to support understanding of information and concepts.</p> <p>Use of classroom display and resources, word banks/times tables mats/number lines and squares/topic vocabulary.</p>	<p>Delivering instructions in short chunks and checking for understanding, giving the child time to process language and respond.</p> <p>Where appropriate explicit teaching of study skills, collaborative learning approaches, listening skills, strategies for homework, etc.</p> <p>Small group support to implement highly structured personalised reading and/or spelling programmes on a daily basis.</p> <p>Use of approaches which involve children in explicit monitoring and feedback about progress e.g. Precision Teaching.</p> <p>Staff who provide strategies to aid organisation.</p> <p>Interventions should be well-founded evidence based interventions.</p> <p>A cycle of intervention should always last a minimum of two terms and where needed three.</p> <p>A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.</p>		
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Evaluating Progress and Reviewing

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children's and young people's progress must be monitored through regular reviews in consultation with</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment</p>	<p>Review through the annual review of the Education, health and Care Plan.</p>

<p>themselves and their parents/carers. Through school reports, termly assessments with available data through the school tracking system with analysis of learning and progress to inform next steps.</p>	<p>process and should be fully recorded.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/ resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's/young person's progress.</p> <p>Children's /young person's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Where appropriate reviews can involve professionals if they have provided advice.</p> <p>In analysing the progress that has been made the child may: No longer need special educational provision and needs will be met from universal approaches. Continue to need special educational provision through a School SEND Support Plan as needs cannot be met from universal approaches. Needs support through Specialist SEND Support approaches.</p>	<p>process and should be fully recorded. For some children/young people, very small steps of progress may be identified.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/ resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child.</p> <p>In analysing the progress that has been made the child may: No longer need provision through a Specialist Support SEND Plan and needs will be met through a School SEND Support Plan or universal approaches. Continue to need provision through a Specialist SEND Support Plan as needs cannot be met through School SEND Support. Need special educational provision and</p>	<p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child/young person.</p> <p>In analysing the progress that has been made, the child / young person may: No longer need provision through an Education, Health and Care Plan and agree that needs will be met through a Specialist SEND Support Plan. Continue to need educational provision through an EHCP as needs cannot be met through a Specialist SEND Support Plan.</p>
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		referral for a statutory assessment.	
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COMMUNICATION AND INTERACTION PROFILE OF NEED			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
	Speech		
<p>Pupils aware of pre-arranged cues for active listening (e.g. symbol, prompt card)</p> <p>Pupil's name or agreed cue used to gain individual's attention – and before giving instructions</p> <p>Key words/vocabulary emphasized when speaking and displayed visually with picture cues</p> <p>Range of multi-sensory approaches used to support spoken language e.g. symbols, pictures, concrete apparatus, artefacts, role-play</p> <p>Instructions broken down into manageable chunks and given in the order they are to be done, supported by visuals as needed</p> <p>Delivery of information slowed down with time given to allow processing</p> <p>Pupils are encouraged and shown how to seek clarification</p> <p>Prompt cards using a narrative framework (who, where, when, what</p>	<p>Some speech is unclear</p> <p>Discuss with link therapist at planning meeting, and follow advice</p>	<p>Ongoing involvement needed with speech and language therapist.</p> <p>Impacting on literacy attainment and/or wellbeing and/or social interaction</p> <p>Impacting on ability to demonstrate their learning</p> <p>Demonstrating frustration at not being understood</p> <p>Ongoing support needed from school i.e. daily programme</p>	<p>Unintelligible</p> <p>Communication system (e.g. Alternative and Augmented Communication like ProLoQuo2Go) needs specialist and intensive support in the classroom</p>
	Language		
	<p>Difficulties with:</p> <ul style="list-style-type: none"> • Following instructions • Answering questions • Learning new vocabulary • Thinking of the right word • Saying sentences in the right order • Retelling stories or events <p>Use familiar school-based programmes, with experienced staff.</p>	<p>May have evidence of behaviour or social and emotional difficulties, linked to frustration around language</p> <p>Language difficulties affecting access to curriculum</p> <p>Discuss with link therapist at planning meeting, and follow advice</p>	<p>Persistent and severe language difficulties preventing CYP from accessing curriculum without high level of individualised adult support</p> <p>SLT contributes to EHCP process</p>

<p>happened etc.) used to support understanding of question words</p> <p>Talking buddies or similar used to encourage responses</p> <p>TAs used effectively to explain and support pupils to ask and answer questions</p>	<p>Ask specialist agencies for example speech and language therapists, specialist teachers of inclusive practice, educational psychologists to signpost to other programmes</p> <p>Limited progress with language-based programmes</p>		
Interaction			
<p>Classroom furniture and groupings consider whether pupils with speech & communication needs can see visual prompts and the teacher</p> <p>Access to a quiet, distraction free work station if needed</p> <p>Appropriate use of visual timetables for class and individualised when needed</p> <p>Minimise use of abstract language</p> <p>Clear lesson structure with learning objectives presented orally and visually.</p> <p>Understanding checked – by asking pupils what they are learning and what they have to do.</p> <p>Activities and listening broken up – with breaks for more kinaesthetic activities.</p> <p>Key words/vocabulary emphasised when speaking and displayed clearly.</p>	<p>Engages with peers and adults but is more confident on their own terms</p> <p>May lack confidence and show limited social understanding</p> <p>Evidence of anxiety but can self-regulate</p> <p>Needs support to manage unstructured times e.g. break</p> <p>See if training available from local ASD Outreach team</p> <p>Ask specialist agencies for example the ASD Outreach, speech and language therapist, specialist teachers of inclusive practice and educational psychologist to signpost to resources/problem solve</p>	<p>Frequent unexpected behaviour in social interactions (i.e. language, eye contact, proximity) requiring adult support</p> <p>Some rigid and obsessive behaviours but can respond to boundaries and expectations that are consistently reinforced within a structured environment</p> <p>Passive or withdrawn presentation affecting access to curriculum/socialisation</p> <p>Requires planned support to manage transitions</p> <p>Specific support needed for calming and self-regulation</p> <p>Discuss with link therapist at planning meeting and follow advice. Therapist to signpost to other services where appropriate</p>	<p>Difficulties with social interaction and behaviour preventing child/young person from accessing curriculum without high level of individualised adult support</p> <p>Speech and language therapist contributes to statutory assessment</p> <p>Therapist to signpost to other services where appropriate e.g. Autism Outreach, educational psychologist</p>

Pre-teaching of subject vocabulary.			
Sensory indicators			
<p>Evidence of some hypo and hyper sensory sensitivities.</p> <p>Can self-manage distress/behaviour, arising from sensory stimuli.</p> <p>Some evidence of low self-esteem.</p> <p>Some personal safety risks.</p>	<p>Sensory perceptions present some barrier to communication, social access and learning.</p> <p>Evidence of some anxiety but can self-regulate.</p> <p>Some difficulty to self-manage distress-behaviour (including anxiety) in response to sensory stimulus.</p> <p>Some hypo/hyper sensory sensitivity and/or in seeking sensory feedback.</p> <p>Some confusion between fantasy and reality.</p> <p>Sensory perceptions present some barriers to communication, social access and learning.</p> <p>Support for personal safety.</p>	<p>Considerable hypo/hyper sensory reaction.</p> <p>Increasingly unable to self-manage distress-behaviour. (including anxiety) in response to sensory stimulus.</p> <p>High/low pain threshold.</p> <p>Confusion between fantasy and reality resulting in dangerous/disruptive actions.</p> <p>Shows some awareness of danger.</p>	<p>Very significant/consistent hypo/hyper sensory reaction.</p> <p>Evidence of self-harm.</p> <p>Little awareness of danger.</p> <p>Very vulnerable</p>

Assessment and Planning

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children require:</p> <p>Systems in place for staff to routinely seek children's views about their progress with learning for example through using the One Page Profile.</p> <p>Systems in place for staff to regularly seek parents' views about their children's communication and interaction skills.</p>	<p>In addition to universal assessment and planning approaches, some children will require:</p> <p>The setting to gather the child's views about their difficulties and the SEND Support approaches to be put in place, using for example the One Page Profile.</p> <p>The setting to raise and discuss concerns with the child's parents and involve them in planning support approaches.</p>	<p>In addition to universal and School SEND Support approaches, some children will also require:</p> <p>The setting to gather the child's views about the difficulty and support approaches to be put in place.</p> <p>The setting to raise and discuss concerns with the child's parents and involve them in planning Specialist SEND Support approaches drawing on the School SEND Support Plan.</p>	<p>In addition to Specialist SEND Support approaches, a few children may require a referral for a statutory assessment</p> <p>High level of structure to the environment with visual support throughout.</p> <p>Highly predictable routine including lunch-time, and breaks.</p> <p>Personalised curriculum and teaching structures.</p>

<p>A whole school target setting, tracking and review process. Routine assessment of children's speaking and listening skills.</p> <p>Appropriate arrangements to be in place for assessment of the classroom and school environment and the impact on children's communication and interaction which are reviewed at least annually.</p> <p>Subject and class teachers who take account of access strategies and teaching styles when planning.</p> <p>Encouragement for children and young people to evaluate their own performance.</p>	<p>Liaison and consultation with external professionals and support services where appropriate.</p> <p>Close home school links, so school are aware of changes in home circumstances that may impact on progress.</p> <p>The SENCO contacts other professionals working with child outside school with parents' permission.</p> <p>The class teacher in consultation with the SENCO to establish a clear analysis of the child's needs. Assessment suggests that difficulties in child's communication and interaction mean they require additional and different provision.</p> <p>Access to advice from specialist trained teachers and support staff. Measures should be made of the impact of the child's difficulties on their ability to access the curriculum.</p> <p>Both qualitative and quantitative measures may be used as a baseline for which progress can be judged.</p> <p>Consideration of children's development in comparison to their peers and the response to previous interventions.</p> <p>Access to knowledge of how to support communication.</p> <p>Clear plans for the use of support which relate to the long term expected outcomes and include short term SMART targets within School SEND Support Plan.</p>	<p>Continued close home-school liaison, so that school/setting are aware of changes in home circumstances that may interact on communication and interaction.</p> <p>Access to external services who may contribute via consultation or specialist assessment, which leads to a Specialist SEND Support Plan. Professionals may include speech and language therapist, occupational therapist, teacher of inclusive practice, the Surrey Outreach Service.</p> <p>Social workers, community and charity groups involved with the child/young person may also contribute.</p> <p>Rigorous qualitative and quantitative measures should be used as a baseline from which progress can be judged.</p> <p>Measures of the impact of the child's difficulties on their ability to access the curriculum.</p> <p>The Specialist SEND Support Plan will relate to expected long term outcomes and include short term SMART targets.</p> <p>Assessment of needs may indicate for a few children that their needs cannot be met within Specialist SEND Support. They will require a referral for statutory assessment.</p>	<p>Consistent home/school programmes with family support.</p> <p>Easy availability of quiet space.</p> <p>High level of individual support.</p> <p>Sensory room.</p>
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	For some children more targeted support is required through a Specialist SEND Support Plan may be required. This may involve a range of professional involvement.		
Intervention and Support			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children will require access to the following Intervention and Support approaches:</p> <p>Curriculum differentiated appropriately to take account of individual needs.</p> <p>Staff set personalised learning targets for all children.</p> <p>Classroom and whole school environment modified to take account of communication and interaction needs.</p> <p>Some adult monitoring/support to promote social skills and interactions with peers.</p> <p>Class based teaching with differentiated group work as appropriate within class setting.</p> <p>Curriculum access facilitated by modification of task presentation.</p>	<p>In addition to universal approaches, some children may require School SEND Support approaches</p> <p>Small group work within class to support appropriate aspects of the differentiated curriculum.</p> <p>Adult support used to prepare specific resources including use of appropriate ICT programmes to support language and communication.</p> <p>Teaching of specific social interaction skills and social use of language with opportunities to generalise the skills used on a daily basis through small group work.</p> <p>Curriculum delivery modified to accommodate reluctance to accept adult direction.</p> <p>School staff use augmentative and/or alternative means of communication, (e.g. use of symbols and visual prompts). Transition between tasks and specific use of visual communication systems (e.g. visual timetable, visual agenda, Now and Then Boards)</p> <p>Flexible use of staffing and resources to support access to learning and teaching.</p>	<p>In addition to the intervention and support approaches put in place at School SEND Support, some children may require the support through Specialist SEND Support.</p> <p>Teaching strategies which consider specific difficulties with social understanding and the generalisation of skills.</p> <p>A structured language intervention with support to generalize taught skills may be devised by speech and language therapists. Specialist teachers of inclusive practice and the Surrey Outreach Service may also be involved.</p> <p>Transactional supports.</p> <p>A consistent approach to multi-sensory communication, sensory profile and sensory diet. Social awareness and skills programmes. Approaches for example Circle of Friends, buddying systems to develop peer support.</p> <p>Visual approaches to develop social understanding including comic strip conversations and Social Stories.</p>	<p>In addition to the intervention and support approaches put in place at Specialist SEND Support, a few children may need a statutory assessment.</p> <p>A high level of adult support may be required to provide:</p> <p>A highly structured and personalised teaching environment.</p> <p>A high level of care and supervision.</p> <p>Staff trained and skilled in teaching children/young people with significant communication and interaction needs.</p> <p>Staff trained and skilled in responding to very challenging behaviours.</p>

<p>Positive self-esteem maintained through developing areas of strength.</p> <p>Staff appropriately prepare students for routine changes (e.g. change in lessons, change in activity, change in teaching staff)</p> <p>After school clubs and activities that can provide opportunities to reinforce children's strengths and for social communication in informal settings.</p> <p>Staff model appropriate social behaviour and interaction.</p> <p>Clear, simple and positive instructions with visual support if necessary, e.g. visual timetable.</p> <p>Appropriate use of visual prompts, to show what behaviour and actions are expected.</p> <p>Additional adult support is used to support group work in the classroom.</p> <p>Language is given priority in planning to facilitate effective curriculum access.</p> <p>Use of a structured approach for</p>	<p>Close home - school liaison to ensure reinforcement of strategies and the generalisation of skills.</p> <p>Verbal explanations require simplification with visual and/or experiential and/or concrete support.</p> <p>Reduce anxiety through frequently adapting and structuring the learning and social environment as appropriate.</p> <p>Adaptations made to include use of key wording and pre-teaching to introduce, teach and reinforce specific vocabulary and concepts, including specific subject vocabulary.</p> <p>Simplification and repetition of instructions, use of gesture and symbols required for effective teaching and learning.</p> <p>Differentiation of spoken and written language, activities and materials in class including use of ICT.</p> <p>Approaches to build understanding of abstract and figurative language.</p> <p>Small group work outside the classroom to address specific language, social communication and listening skills targets as appropriate.</p> <p>Children may require withdrawal from the classroom to a sanctuary at times of stress.</p> <p>Some additional adult support may be</p>	<p>Adaptation of tasks to take account of preferred learning style eg, planned strategies to ensure co-operation in less preferred areas of curriculum.</p> <p>Targeted small group work to work within/outside class group as appropriate to support specific aspects of the curriculum.</p> <p>Some individual work to address specific targets.</p> <p>Staff trained and skilled in responding to challenging behaviours.</p> <p>Targeted programmes used to manage emotional and behavioural needs throughout the school day.</p> <p>A secure, structured and safe learning environment.</p> <p>Interventions should be well-founded evidence based interventions.</p> <p>A cycle of intervention should always last a minimum of two terms and where required three.</p> <p>A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.</p>	
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<p>tasks and activities with a clear beginning middle and end.</p> <p>Whole staff awareness of the implications of communication and interaction difficulties.</p> <p>Appropriate differentiation of spoken and written language, activities and materials in class.</p>	<p>provided at unstructured times (e.g. break-times).</p> <p>Modification to the teaching environment to take account of sensory sensitivities.</p> <p>Interventions should be well-founded evidence based interventions.</p> <p>Additional adult support may be required within a small group to implement support strategies and approaches.</p> <p>A cycle of intervention should always last a minimum of two terms and where needed three.</p> <p>A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.</p>		
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Evaluating Progress and Reviewing

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children's and young people's progress must be monitored through regular reviews in consultation with themselves and their parents/carers. Through school reports, termly assessments with available data through the school tracking system with analysis of learning and progress to inform next steps.</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's/young person's progress.</p> <p>Children's /young person's views should</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded. For some children/young people, very small steps of progress may be identified.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's progress.</p>	<p>Review through the annual review of the Education, health and Care Plan.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the</p>

	<p>always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Where appropriate reviews can involve professionals if they have provided advice.</p> <p>In analysing the progress that has been made the child may: No longer need special educational provision and needs will be met from universal approaches. Continue to need special educational provision through a School SEND Support Plan as needs cannot be met from universal approaches. Needs support through Specialist SEND Support approaches.</p>	<p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child.</p> <p>In analysing the progress that has been made the child may: No longer need provision through a Specialist Support SEND Plan and needs will be met through a School SEND Support Plan or universal approaches. Continue to need provision through a Specialist SEND Support Plan as needs cannot be met through School SEND Support. Need special educational provision and referral for a statutory assessment</p>	<p>appropriate external professionals working with the child/young person.</p> <p>In analysing the progress that has been made, the child / young person may: No longer need provision through an Education, Health and Care Plan and agree that needs will be met through a Specialist SEND Support Plan. Continue to need educational provision through an EHCP as needs cannot be met through a Specialist SEND Support Plan.</p>
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SEMH PROFILE OF NEED

All statements below need to be in context of comparison with a child of expected development and progress. There should be reference to how the difficulties below impact on the CYP access to learning and social environment.

If the child has experienced adverse childhood experiences consideration should be made to move to Early Help.

Provision of medical diagnosis related to SEMH will be reviewed in terms of the impact on the school experience.

Guidance on severity & frequency- evidence through school based/professional observations and monitoring

MODERATE= Evident 2 days a week

SIGNIFICANT= Evident 4 days a week

FREQUENT/SUSTAINED = Evident multiple times throughout the school day

UNABLE= Not evident

INAPPROPRIATE= Not within age expected development/behaviours

INDEPENDENTLY= Able to work at age expectations without adult intervention

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
	SOCIAL: Relationships & Interacting with others		
Child is broadly working within the appropriate developmental learning phase.	Moderate difficulty in Social skills: Difficulty building and/or maintaining relationships with others	Significant difficulty in social skills leading to isolation or conflict with peers and adults in structured or unstructured times	Unable to build and/or maintain relationships with peers or adults
They may require support from time to time for specific areas of need but generally make the required progress as a result.	Moderate difficulty in turn taking/sharing/ participation in group work	Significant difficulty in turn taking, sharing/ with peers requiring intervention e.g. desire to control activities and group situations	Unable to turn take independently
Can remain on task with some additional prompts.	Inappropriate physical contact with others	Inappropriate physical contact with others which <u>may</u> lead to harm	Frequent inappropriate physical contact with others which <u>leads</u> to an outcome of harm
Can work independently with appropriate differentiation and access to good quality first teaching.	Moderate difficulty in using and reading non-verbal cues	Significant difficulty in reading and understanding and responding appropriately non-verbal cues	Unable to independently read and understand and respond appropriately to non-verbal cues

Moderate difficulty with defiance and refusal behaviours e.g. refusal to work, refusal to follow directed instructions	Significant difficulty with defiance and intimidating behaviours e.g. refusal to work, refusal to follow directed instructions, verbal abuse to others	Frequent & sustained difficulty with defiance and intimidating behaviours e.g. oppositional behaviour e.g. defiant towards staff, non-compliant, verbally abusive
SOCIAL: Language		
Moderate use of inappropriate or offensive language within the school environment (This includes all discriminatory language related to protected characteristics as defined in the Equalities Act 2010)	Significant use of inappropriate or offensive language within the school environment	Frequent & sustained use of inappropriate or offensive language within the school environment
EMOTIONAL		
Pupils in this category may also have a diagnosed mental health condition e.g. anxiety, attachment disorder- consideration needs to be given on the impact of need rather than a particular diagnosis		
Low self-esteem- e.g. lacks confidence, shy, hesitant	Significant Low self-esteem- e.g. lacks confidence, shy, hesitant impacting on progress and participation	Frequent & sustained Low self-esteem- an evident difficulty on progress and participation
Moderate difficulty in managing and regulating emotions	Significant difficulty in managing and regulating emotions	Frequent & sustained difficulty in managing and regulating emotions
Moderate avoidant behaviour e.g. hiding under tables, work refusal	Significant avoidant behaviour e.g. leaving the classroom, running off	Frequent & sustained avoidant behaviour e.g. leaving the classroom, attempting to leave the school site
Observations of being 'withdrawn' which is impacting on access to the curriculum and during social times	Observations of being 'withdrawn' which is causing significant impact on access to the curriculum and during social times	Observations of being 'withdrawn' which is causing significant and sustained impact on access to the curriculum and during social time
Observations of 'anxious' behaviour or increasing levels of stress are impacting on the access to curriculum and school day	Levels of stress or anxiety cause significant difficulty to access the curriculum and school day	Levels of stress or anxiety cause frequent and sustained difficulty to access the curriculum and school day

	At risk of self-harm	Currently Self-harming which requires first aid or hospital treatment
LEARNING BEHAVIOURS		
Moderate difficulty in following classroom routines e.g. difficulty coping with boundaries, difficulty in coping with changes in routine/staff etc	Significant difficulty in following classroom routines	Unable to independently follow classroom routines e.g. Unable to manage transitions or 'unstructured' times independently
Moderate difficulty with attention, focus & concentration e.g.- fails to stay seated, difficulty in organising themselves, requires refocusing, fails to complete work A diagnosis of ADHD/ADD does not automatically qualify for an EHCP, the analysis of impact of behaviours on learning is to be used.	Significant difficulty with attention, focus & concentration e.g.: Requires frequent adult intervention to refocus, remain seated, organise their learning	Frequent and sustained difficulty with attention, focus & concentration. e.g. Unable to commence tasks, organise their learning, remain on task independently
Moderate difficulty with passive behaviours e.g.- opts out of situations, lack of response/reaction	Significant difficulty with passive behaviours e.g.- opts out of situations, lack of response/reaction, challenge to distract entrenched behaviour	Frequent & sustained difficulty with passive behaviours
Moderate difficulty with disruptive behaviours e.g. disrupting the learning activity by making noise, distracting peers, calling out	Significant difficulty with disruptive behaviours e.g. tasks are disrupted	Frequent & sustained difficulty with disruptive behaviours e.g. tasks/lessons are disrupted
Moderate difficulty with 'avoidance' behaviours e.g. finds excuses to avoid situations without deliberate disruption	Significant difficulty with 'avoidance' behaviours	Frequent & sustained difficulty with 'avoidance' behaviours e.g. work is not completed independently

	Moderate physical challenge to others e.g. pushing, hitting, kicking, locking others out of defined area, non-deliberate harm to others Assessment of risk is expected to be in place & reviewed	Significant physical challenge to others e.g. pushing, hitting, kicking, intent to harm others, intent to use implements to cause harm, Safety of others compromised Assessment of risk is expected to be in place & reviewed	Frequent & sustained physical challenge to others e.g. pushing, hitting, kicking, intent to harm others, intent to use implements to cause harm Safety of others compromised Assessment of risk is expected to be in place & reviewed
	Moderate observation of 'Risk' behaviours e.g., absconding lessons, behaviour shows a lack of danger awareness Assessment of risk is expected to be in place & reviewed	Significant observation of 'Risk' behaviours e.g. attempting to leave the school site, absconding lessons, follows or copies dangerous behaviours No regard of personal safety Assessment of risk is expected to be in place & regularly reviewed	Frequent & sustained observation of 'Risk' behaviours e.g. attempting to leave the school site, absconding lessons No regard of personal safety or that of others Assessment of risk is expected to be in place & frequently reviewed

Assessment and Planning

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children require:</p> <p>Systems to be in place for staff to routinely seek information about children's emotional and social concerns.</p> <p>Systems to be in place for child/young person to be able to access named or key person at times of need.</p> <p>Systems to be in place for staff to regularly seek the views of parents about their children's social and emotional well-being.</p>	<p>In addition to universal assessment and planning approaches, some children will require:</p> <p>The setting to gather the child's views about their difficulties and the SEND Support approaches to be put in place, using for example the One Page Profile.</p> <p>The setting to raise and discuss concerns with the child's parents and involve them in planning support approaches.</p> <p>Class teacher in consultation with the SENCO has established a clear analysis of the child's needs based on adjustments and strategies tried.</p>	<p>In addition to universal and School SEND Support approaches some children will also require:</p> <p>Circle of Friends/peer or buddy support .</p> <p>Home communication system in place.</p> <p>Behaviour contract.</p> <p>External services contribute via consultation or specialist assessment, leading to a more specifically focused plan.</p> <p>Close home-school links, so school are aware of changes in home circumstances that may impact on behaviour.</p>	<p>In addition to Specialist SEND Support approaches a few children will also require:</p> <p>More than one outside agency involved, such as EPS, SLT, Social Care, CAMHS.</p> <p>1:1 or small group support throughout the day.</p> <p>Visual time table/task planner, use of signs/symbols across the curriculum.</p> <p>Transition support/programme between year groups/phases.</p>

<p>Appropriate arrangements for assessment of the classroom and school environment which are reviewed at least annually.</p> <p>A whole school behaviour policy which sets out the way the school promotes positive behaviour.</p> <p>Whole staff awareness of the implications of emotional, social and mental health difficulties.</p> <p>Appropriate whole school policies which set out the school's approach to pastoral support and developing the emotional well-being of children, (e.g. Citizenship programmes, anti-bullying approaches).</p> <p>A whole school approach to be in place to develop behaviour for learning.</p> <p>Health and safety and risk assessment policies to be in place and appropriate risk assessments to be completed.</p>	<p>Consideration of individual child's development in comparison to peers and their response to previous interventions.</p> <p>Liaison and consultation with external professionals and support services to signpost to other programmes.</p> <p>Close home-school links, so school are aware of changes in home circumstances that may impact on the child's well-being.</p> <p>The SENCO contacts other professionals working with child outside school (with parental permission) for advice.</p> <p>Both qualitative and quantitative measures may be used as a baseline from which progress can be judged.</p> <p>Measures should also be made of the impact of the child's difficulty on their ability to access the curriculum.</p> <p>Clear plans for the use of support which relate to expected long term outcomes and include short term SMART targets in School SEND Support approaches.</p> <p>For some children, assessment suggests that difficulties in a child's emotional and social development or mental health problems means they require additional and different provision. External services may contribute through advice and /or consultation, which may lead to a Specialist SEN Support Plan, involving a range of professionals.</p>	<p>Rigorous qualitative and quantitative measures should be used as a baseline from which progress can be judged.</p> <p>Measures should also be made of the impact of the child's difficulties on their ability to access the curriculum.</p> <p>Access to external services who may contribute via consultation or specialist assessment, which leads to a Specialist SEND Support Plan. Professionals may include speech and language therapist, occupational therapist, teacher of inclusive practice, the Surrey Outreach Service.</p> <p>Social workers, community and charity groups involved with the child/young person may also contribute.</p> <p>A few children may require a statutory assessment of their special educational needs.</p>	<p>In school plan to target behaviour, social skills, emotional literacy and indicating underlying difficulties. Counselling play therapy.</p> <p>Solution focused approaches</p> <p>Multiple support strategies for learning and unstructured times.</p> <p>Management of diagnoses as indicated.</p> <p>Outreach support and in school advice, specialist teachers, special school.</p>
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Intervention and Support

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children will require access to the following Intervention and Support approaches:</p> <p>Curriculum differentiated appropriately to take account of individual needs.</p> <p>know the level of difficulty of any text pupil expected to read.</p> <p>Key words/vocabulary emphasised when speaking and displayed clearly.</p> <p>Pre-teaching of subject vocabulary. Instructions broken down into manageable chunks and given in sequence.</p> <p>Teach sequencing as a skill – sequencing alphabet, stories etc.</p> <p>Encourage pupils to explain – to check understanding. Resources, equipment, homework diaries make use of consistent symbols and colour coding.</p> <p>Links to prior learning made explicit. Key learning points reviewed at appropriate times during and at end of lesson.</p> <p>Colour coded word walls consistently and in alphabetical order.</p>	<p>In addition to Universal approaches, some children may require the following intervention through School SEND Support approaches:</p> <p>Further modifications to the classroom and whole school environment to take account of individual needs.</p> <p>Attention paid to seating arrangements which facilitate appropriate social contact, access to materials etc.</p> <p>Support through flexible grouping strategies.</p> <p>Class wide approaches to develop social and emotional well-being (e.g. use of Circle Time.)</p> <p>Additional adult support may be required within a small group.</p> <p>To develop social skills and emotional awareness.</p> <p>Structured activities to develop specific social skills.</p> <p>Break and/or lunchtime support to engage in supported activities with peers.</p> <p>Support to develop ability to co-operate with school and adult expectations may include: A clear and consistently applied hierarchy of rewards and sanctions. A cumulative reward system, separate from sanctions, should be kept.</p>	<p>In addition to the School SEND Support approaches put in place at the targeted level these children may require:</p> <p>Access to a greater range of appropriate well-founded evidence based interventions.</p> <p>Support to develop ability to complete classroom tasks independently and improve focus may include: Reduced level of language. Strategies to reduce anxiety (amber to green). Provision of a distraction free work area on the edge of a group. Activities which are broken into small achievable tasks e.g. Now and Next board. Activity breaks within tasks. Timed activities with the use of visual prompts and reminders e.g. good sitting/ listening. Social Stories</p> <p>A modified learning environment to meet the needs of the individual child.</p> <p>Child/young person may attend an in-school support centre either full time, during periods of stress, or on the basis of withdrawal from lessons which are particular trouble spots.</p> <p>A level of adult support may be required to provide: A structured Individual Behaviour Plan.</p> <p>A level of care and supervision for individual programmes - to develop social and emotional</p>	<p>In addition to the Intervention through Specialist SEND Support approaches a few children may also require -</p> <p>Access to specialist intervention through an EHCP.</p> <p>Staff trained and skilled in supporting children with exceptionally challenging behaviour.</p> <p>A small group support programme using Cognitive Behavioural principles.</p> <p>A highly modified learning environment.</p> <p>Child/young person may attend an off-site support centre either part or full time for fixed periods.</p>

<p>Alternative ways to record learning. for example, diagrams, mind maps, voice recorders.</p> <p>Use of writing frames to aid early organisation.</p> <p>Alphabet strips, number lines. Key words on desks, on display.</p> <p>Staff set personalised learning targets for all children.</p> <p>Classroom and whole school environment modified to take account of social and emotional needs.</p> <p>Consistent behaviour management by all staff including regular reinforcement of positive behaviours.</p> <p>Appropriate differentiation of the curriculum to ensure that children are motivated to learn and to minimise emotional, social and behavioural difficulties.</p> <p>Use of peer support systems across the school for example peer mediators, playground buddy systems.</p> <p>After school homework and other clubs.</p>	<p>Planned small group work where strategies for managing anger or conflict can be discussed and role played.</p> <p>Home-School behaviour communication system in place.</p> <p>Calm and consistent approaches in place to manage behaviour by all staff.</p> <p>Awareness of pupils' individual needs shared across staff team, as appropriate.</p> <p>Other support to develop emotional security and sense of belonging in vulnerable pupils can include:</p> <p>Helping the child feel safe and secure.</p> <p>Enabling the child to share control through child led activities.</p> <p>Asking the child to identify a safe place/ space.</p> <p>Providing a calm/fidget box.</p> <p>Placement in a nurture group.</p> <p>Small group support activities such as Circle of Friends.</p> <p>A weekly small group support programme to develop social skills including skills in recognising and managing emotions.</p> <p>Interventions should be well-founded evidence based interventions.</p> <p>A cycle of intervention should always last a minimum of two terms and where needed three.</p> <p>A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.</p>	<p>skills throughout the school day.</p> <p>Staff trained and skilled in supporting children and young people with challenging behaviours.</p> <p>A secure, structured and safe learning environment.</p> <p>Advice from professionals for example EPS, SALT, specialist teacher of Inclusion if not already sought.</p> <p>Structured activities/quiet place at playtime/ lunchtime</p> <p>Referral to CAMHS Monitored by Inclusion Officer (IO).</p> <p>A cycle of intervention should always last a minimum of two terms and where needed three.</p> <p>A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.</p>	
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Evaluating Progress and Reviewing			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children's and young people's progress must be monitored through regular reviews in consultation with themselves and their parents/carers. Through school reports, termly assessments with available data through the school tracking system with analysis of learning and progress to inform next steps.</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's/young person's progress.</p> <p>Children's /young person's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Where appropriate reviews can involve professionals if they have provided advice.</p> <p>In analysing the progress that has been made the child may: No longer need special educational provision and needs will be met from universal approaches.</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded. For some children/young people, very small steps of progress may be identified.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child.</p> <p>In analysing the progress that has been made the child may: No longer need provision through a Specialist Support SEND Plan and needs</p>	<p>Review through the annual review of the Education, health and Care Plan.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child/young person.</p> <p>In analysing the progress that has been made, the child / young person may: No longer need provision through an Education, Health and Care Plan and agree that needs will be met through a Specialist SEND Support Plan.</p> <p>Continue to need educational</p>

	<p>Continue to need special educational provision through a School SEND Support Plan as needs cannot be met from universal approaches.</p> <p>Needs support through Specialist SEND Support approaches.</p>	<p>will be met through a School SEND Support Plan or universal approaches.</p> <p>Continue to need provision through a Specialist SEND Support Plan as needs cannot be met through School SEND Support.</p> <p>Need special educational provision and referral for a statutory assessment.</p>	<p>provision through an EHCP as needs cannot be met through a Specialist SEND Support Plan.</p>
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MULTI SENSORY IMPAIRMENT (deaf blindness) Profile of Need

Information relevant to MSI learners will also be within the HI and VI profiles of need and may be within the medical profile of need.

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
Combination of clinically identified hearing and vision impairment which could affect learning. This may be unilateral (affect one ear or eye) or bilateral (both)	Combination of clinically identified hearing and vision impairment. This may be unilateral (affect one ear or eye) or bilateral (both) and will affect some aspects of learning.	Combination of clinically identified hearing and vision impairment which will affect learning.	Combination of clinically identified hearing and vision impairment where there may be a severe/profound impairment of vision and/or hearing. This will significantly affect learning, and will affect communication, social interaction, abstract reasoning, generalisation and interaction with the environment.
May struggle to complete tasks in the available time.	May require additional time for completion of tasks and sensory breaks.	Likely to require additional time for completion of tasks and sensory breaks.	Additional time for completion of tasks and sensory breaks will be the usual way of working and should be reflected in formal testing and exam arrangements.
May appear to ignore or misunderstand instructions.	Instructions may need to be delivered in clear steps to ensure they can be processed and followed.	Instructions should be clear and supported with appropriate visual or tactile reinforcement (e.g. keywords, pictures, objects)	Highly structured and individual learning.
Some adjustments may be made to curriculum delivery, including presentation of information.	Differentiation and / or some modification needed in some subject areas.	Considerable differentiation and / or some modification needed in most subject areas.	Fully modified adjustments made to curriculum materials. Braille or Moon tactile diagrams, 3D

			representations to access curriculum.
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Assessment and Planning

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children require:</p> <p>Systems to be in place for staff to routinely seek information about a child's hearing and vision needs and concerns.</p> <p>Systems to be in place for staff to regularly seek the views of parents about their children's hearing and vision needs.</p> <p>Appropriate arrangements for assessment of the classroom and school environment which are reviewed at least annually – in relation to class noise levels, school and site being physically accessible to children with a visual impairment, lighting etc.</p> <p>Whole staff awareness of the implications of multisensory impairment including hearing and visual difficulties and knowledge of strategies that facilitate the inclusion of children with multisensory impairment.</p> <p>Appropriate whole school policies for supporting children with multisensory impairment.</p>	<p>In addition to universal assessment and planning approaches, some children will require:</p> <p>The setting to gather the child's views about their difficulties and the SEND Support approaches to be put in place, using for example the One Page Profile.</p> <p>The setting to raise and discuss concerns with the child's parents and involve them in planning support approaches.</p> <p>Class teacher in consultation with the SENCO has established a clear analysis of the child's needs.</p> <p>Consideration of individual child's development in comparison to peers and their response to previous interventions.</p> <p>Liaison and consultation with external professionals and support services, where appropriate.</p> <p>Close home-school links, so school are aware of changes in circumstances that may impact on the child's multisensory (hearing/vision) needs.</p> <p>Assessment and observation by subject /</p>	<p>In addition to universal and School SEND Support approaches some children will also require:</p> <p>External services contribution via consultation or specialist assessment, leading to a specific Specialist SEND Support Plan.</p> <p>Continued close home-school links, so school are aware of changes in circumstances that may impact on the child's vision and hearing.</p> <p>Access to external services who may contribute via consultation or specialist assessment, which leads to a Specialist SEND Support Plan. Professionals may include speech and language therapist, occupational therapist, teacher of inclusive practice, the Surrey Outreach Service and physiotherapists – in order to facilitate the inclusion of children with multi-sensory impairment.</p> <p>Social workers, community and charity groups involved with the child/young person may also contribute.</p> <p>SENCO and teaching staff may need to refer to external support services, for example qualified teacher for multisensory impairment, ophthalmology, audiology, ENT</p>	<p>A few children's multi-sensory needs are more severe and cannot be met by School of Specialist SEND Support approaches.</p>

<p>Health and safety and risk assessments policies to be in place and appropriate risk assessments completed.</p> <p>There should be effective internal communication and liaison arrangements between staff.</p> <p>Where there are suspicions of multisensory difficulties, schools should advise parents to seek a hearing and vision assessment</p>	<p>class teacher or SENCO indicates child's multisensory (hearing/vision) difficulty affecting curriculum access as indicated by attainment below expected level/ability to engage in school activities.</p> <p>Where there are suspicions of ongoing hearing and/or vision difficulty schools should advise parents to seek any appropriate medical advice.</p> <p>Careful monitoring of hearing and visual access to the curriculum by qualified Teacher for Multisensory Impairment. Assessment of functional vision and hearing by qualified Advisory Teacher for Children with Multisensory Impairment.</p> <p>Continuous assessment and curriculum assessments may be supplemented by diagnostic tests.</p> <p>Clear plans for the use of support which relate to expected long term outcomes and include short term SMART targets in the School SEND Support Plan.</p>	<p>and further specialist assessments and advice.</p> <p>Measures should also be made of the impact of the child's difficulty on their ability to access the curriculum.</p> <p>In drawing up the Specialist SEND Support Plan; the SENCO may need to include social workers and other community and charity groups.</p> <p>A few children may require a statutory assessment of their special educational needs which may lead to an Education, Health and Care Plan.</p>	
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Intervention and Support

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
Equipment and resources as recommended by Sensory Support Team and / or health professionals.	Some trained support to access the curriculum.	High level of trained support required to access the curriculum. This may be an Intervenor.	Constant level of trained support (Intervenor) required to access the curriculum.
Enlarged copies of texts and will require individual copies of resources as not able to share text books or worksheets.	Preparation of additional curriculum materials. May have targets on the use of the senses.	Preparation of additional curriculum materials and a high level of curriculum differentiation. Aspects of a deafblind curriculum may be required.	All aspects of the curriculum highly differentiated.

Classroom positioning requirements to enhance access	Suitable lighting and seating for specific tasks	Suitable lighting and seating may require suitable work areas and support for moving around the building.	Suitable lighting and seating may require suitable work areas and support for moving around the building.
May need opportunities to develop use and understanding of language.	Some delay in the use and understanding of language. May need pre and post teaching of new key vocabulary and concepts.	May require modified methods of communication and / or communication support. Pre and post teaching of new key vocabulary and concepts	Modified methods of communication and / or communication support. A multidisciplinary approach to communication will be required.
May experience some friendship difficulties.	Support during unstructured times where needed. May become isolated or fail to pick up social cues. In conversation may redirect to known topics.	Support during unstructured times and with peer interaction where needed.	Support for planned social interaction and independence. May require support to manage equipment.
Dependent on level of VI may need mobility training from paediatric habilitation officer for orientation and independent travel within school.	Dependent on level of VI likely to need mobility training for orientation and independent travel within school from/ directed by a paediatric habilitation officer.	Dependent on level of VI likely to need mobility training from / directed by a paediatric habilitation officer for orientation and independent travel within school, including long cane skills.	Will need mobility training including long cane skills alongside independent living skills training from/ directed by a paediatric habilitation officer. Wheelchair mobility training may be required for some learners.
Training and advice for setting from Qualified Teacher for MSI	Training and advice for setting from Qualified Teacher for MSI. Input into assessment.	Training and advice for setting from Qualified Teacher for MSI. Long term assessment and involvement from ATMSI.	Training, assessment, advice and direct input for setting from Qualified Teacher for MSI. This will include issue based work.
May be involvement of therapists.	May be involvement of therapists and a range of health professionals.	May be involvement of therapists and a range of health and other professionals.	Multidisciplinary approach required. A range of professionals will be involved. This can be a significant number of professionals.
May use hearing aids and / or glasses. May require a reading / writing slope	May use hearing aids and / or glasses as well as other amplification equipment such as a radio aid or sound field system. May use low vision aids.	May use hearing aids and / or glasses as well as other amplification equipment such as a radio aid or sound field system. May use low vision aids. . May also use assistive technology (such as a magnifier or CCTV)	May use hearing aids and / or glasses as well as other amplification equipment such as a radio aid or sound field system. May use low vision aids. May also use assistive technology (such as a magnifier or CCTV). Augmentative and Alternative Communication Technology may also be used.
	Grouping and support mindful of need for self –esteem and confidence building.	May require individual and small group teaching. Flexible use of grouping strategies.	May require additional time out of whole group setting. Access to

	<p>Access to appropriate evidence based interventions.</p> <p>A cycle of intervention should always last a minimum of two terms and where needed to be extended.</p> <p>A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.</p>	<p>Access to appropriate evidence based interventions.</p> <p>A cycle of intervention should always last a minimum of two terms and where needed to be extended.</p> <p>A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.</p>	<p>appropriate evidence based interventions.</p>
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Evaluating Progress and Reviewing

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children's and young people's progress must be monitored through regular reviews in consultation with themselves and their parents/carers. Through school reports, termly assessments with available data through the school tracking system with analysis of learning and progress to inform next steps.</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/ resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's/young person's progress.</p> <p>Children's /young person's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded. For some children/young people, very small steps of progress may be identified.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/ resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate</p>	<p>Review through the annual review of the Education, health and Care Plan.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child/young person.</p> <p>In analysing the progress that has been made, the child /young person may:</p>

	<p>Where appropriate reviews can involve professionals if they have provided advice.</p> <p>In analysing the progress that has been made the child may:</p> <p>No longer need special educational provision and needs will be met from universal approaches.</p> <p>Continue to need special educational provision through a School SEND Support Plan as needs cannot be met from universal approaches.</p> <p>Needs support through Specialist SEND Support approaches.</p>	<p>external professionals working with the child.</p> <p>In analysing the progress that has been made the child may:</p> <p>No longer need provision through a Specialist Support SEND Plan and needs will be met through a School SEND Support Plan or universal approaches.</p> <p>Continue to need provision through a Specialist SEND Support Plan as needs cannot be met through School SEND Support.</p> <p>Need special educational provision and referral for a statutory assessment</p>	<p>No longer need provision through an Education, Health and Care Plan and agree that needs will be met through a Specialist SEND Support Plan.</p> <p>Continue to need educational provision through an EHCP as needs cannot be met through a Specialist SEND Support Plan.</p>
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SENSORY HI PROFILE OF NEED			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
A mild hearing loss (21 – 40dB). May also include some children with a moderate loss	Moderate hearing loss (41 – 70dB)	Severe hearing loss (71 – 95dB). May also include some children with a moderate loss.	Profound hearing loss, unaided excess of 95dB. May also include some children with a severe loss.
May use hearing aids and assistive listening devices (ALD). May require training in the use of any assistive technology and/or hearing aids.	Needs support to use learned skills independently May use hearing aids and assistive listening devices. May require training in the use of any assistive technology and/or hearing aids.	Uses aids, technology and may use visual communication (BSL, SSE) May require training in the use of any assistive technology and/or hearing aids.	Uses hearing aids or cochlear implants and ALD technology. May use visual communication. May also have complex learning difficulties or speech and language difficulties/delay associated with HI or as a result of additional needs. May require training in the use of any assistive technology and/or hearing aids.
Difficulties more noticeable when there is background noise. May have trouble hearing some speech sounds.	May have speech and language delay / gaps in vocabulary May need encouragement to engage/access social interactions	Access to speech is very limited and considerable differentiation and / or modification is needed in all subject areas	Unaided access to spoken language not possible.
Assessment and Planning			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
All children require: Systems to be in place for staff to routinely seek information about children's hearing needs and concerns. Systems to be in place for staff to regularly seek the views of parents about their children's hearing needs. Appropriate arrangements for	In addition to universal assessment and planning approaches, some children will require: The setting to gather the child's views about their difficulties and the SEND Support approaches to be put in place, using for example the One Page Profile. The setting to raise and discuss concerns with the child's parents and involve them in planning these support approaches.	In addition to universal and School SEND Support approaches some children will also require: Continued close home-school links, so school are aware of changes in circumstances that may impact on the child's hearing. Access to external services who may contribute via consultation or specialist assessment, which leads to a Specialist SEND Support	A few children have hearing loss needs that are more severe and cannot be met by universal or Specialist SEND Support approaches.

<p>assessment of the classroom and school environment which are reviewed at least annually – in relation to class noise levels.</p> <p>Whole staff awareness of the implications of hearing difficulties and knowledge of strategies that facilitate the inclusion of children with hearing impairment.</p> <p>Appropriate whole school policies for supporting children with hearing difficulties.</p> <p>Health and safety and risk assessments policies to be in place.</p> <p>There should be effective internal communication and liaison arrangements between staff.</p> <p>Where there are suspicions of hearing difficulties schools should advise parents to seek a hearing assessment.</p> <p>The School Nursing Service can be contacted to discuss hearing concerns. Referrals for hearing tests can be completed by the School Nurse.</p>	<p>Class teacher in consultation with the SENCO has established a clear analysis of the child's needs.</p> <p>Consideration of individual child's development in comparison to peers and their response to previous interventions.</p> <p>Liaison and consultation with external professionals and support services, where appropriate.</p> <p>Close home-school links, so school are aware of changes in circumstances that may impact on the child's hearing needs.</p> <p>Assessment and observation by subject/class teacher or SENCO indicates child's hearing difficulty affecting curriculum access as indicated by attainment below expected level/ability to engage in school activities.</p> <p>Where there are suspicions of ongoing hearing difficulties schools should advise parents to seek any appropriate medical advice.</p> <p>Teacher of the Deaf or educational audiologist input may be requested for assessments for additional audiological equipment (e.g. a radio aid).</p> <p>Continuous assessment and curriculum assessments may be supplemented by diagnostic tests.</p> <p>For some children a Specialist SEND</p>	<p>Plan. Professionals may include speech and language therapist, occupational therapist, teacher of inclusive practice, the Surrey Outreach Service and physiotherapists – in order to facilitate the inclusion of children hearing impairment. Social workers, community and charity groups involved with the child/young person may also contribute.</p> <p>SENCO and teaching staff may need to refer to external support services for example qualified Teacher of the Deaf, audiology, ENT and further specialist assessments and advice.</p> <p>Rigorous qualitative and quantitative measures should be used as a baseline from which progress can be judged.</p> <p>Measures should also be made of the impact of the child's difficulty on their ability to access the curriculum.</p> <p>Some children may require a statutory assessment of their special educational needs.</p>	
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	Support Plan may be required. This will relate to long term outcomes and include short term targets. This may involve a range of professionals including: Advisory Teaching Service, Children and Young People's Service, Educational Psychology Service, Targeted Support Teams, Social Care Teams, a range of health professionals and other support groups.		
Intervention and Support			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
Be aware of background noise. Additional attention should be paid to Speech development, oral expression Sentence structure/vocabulary and grammar.	May need small group teaching in addition to support in integrated classwork for language extension and re-enforcement.	May need individual or small group teaching in addition to support in integrated classwork for language extension and re-enforcement.	Requires exceptional differentiation, together with individual or small group teaching in addition to support in integrated classwork for language extension and re-enforcement.
	Will need access to good speech models auditory training and visual reinforcement	Access to good speech models, auditory training and visual reinforcement.	Access to good speech models, auditory training and visual reinforcement. May be reliant on signed communication.
	May need some support to access learning and the curriculum.	May need high level of support for learning and access to the curriculum.	Will need high and constant level of support for learning and access to the curriculum.
Speech and language therapy service; may include advice from specialist HI SLT	Speech and language therapy service; including advice or consultation with specialist HI SLT	Speech and language therapy service, including advice or consultation with specialist HI SLT	Speech and language therapy service, including advice or consultation with specialist HI SLT
Training and advice for setting from Qualified Teacher for Hearing Impairment (may also be referred to as Teacher of the Deaf/ ToD)	Training and advice for setting from Qualified Teacher for HI / ToD. Input into assessment.	Training and advice for setting from Qualified Teacher for HI/ToD. Long term assessment and involvement from ATHI.	Training, assessment, advice and direct input for setting from Qualified Teacher for HI / ToD
	Support/training for learning BSL/SSE Advice from Deaf Instructor	Support/training for learning BSL/SSE Input from Deaf Instructor	Support/training for learning BSL/SSE Input from Deaf Instructor
	A cycle of intervention should always last a minimum of two terms and where needed to be extended.	A cycle of intervention should always last a minimum of two terms and where needed to be extended.	

	A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.	A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.	
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Evaluating Progress and Reviewing

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children's and young people's progress must be monitored through regular reviews in consultation with themselves and their parents/carers. Through school reports, termly assessments with available data through the school tracking system with analysis of learning and progress to inform next steps.</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/ resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's/young person's progress.</p> <p>Children's /young person's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Where appropriate reviews can involve professionals if they have provided advice.</p> <p>In analysing the progress that has been made the child may:</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded. For some children/young people, very small steps of progress may be identified.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/ resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child.</p> <p>In analysing the progress that has been made the child may:</p>	<p>Review through the annual review of the Education, health and Care Plan.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child/young person.</p> <p>In analysing the progress that has been made, the child / young person may:</p> <p>No longer need provision through an Education, Health and Care Plan and agree that needs will be met through a Specialist SEND Support Plan.</p> <p>Continue to need educational</p>

	<p>No longer need special educational provision and needs will be met from universal approaches.</p> <p>Continue to need special educational provision through a School SEND Support Plan as needs cannot be met from universal approaches.</p> <p>Needs support through Specialist SEND Support approaches.</p>	<p>No longer need provision through a Specialist Support SEND Plan and needs will be met through a School SEND Support Plan or universal approaches.</p> <p>Continue to need provision through a Specialist SEND Support Plan as needs cannot be met through School SEND Support.</p> <p>Need special educational provision and referral for a statutory assessment</p>	<p>provision through an EHCP as needs cannot be met through a Specialist SEND Support Plan.</p>
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SENSORY VI PROFILE OF NEED			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
Functional visual impairment and / or field loss which impedes visual access to the curriculum and environment.	Functional visual impairment and / or field loss which impedes visual access to the curriculum and environment.	Functional visual impairment and / or field loss which impedes visual access to the curriculum and environment.	Functional visual impairment and / or profound field loss which impedes visual access to the curriculum and environment.
Vision is not brought to within what is considered the normal range (6/6 to 6/12) when using both eyes together and wearing glasses, contact lenses or following surgery.	<p>Vision is not brought to within what is considered the normal range (6/6 to 6/12) when using both eyes together and wearing glasses, contact lenses or following surgery.</p> <p>Meets one of the criteria for registration as sight impaired / partially sighted if visual acuity is measured at 6/18 or even better if a large part of the field of vision or peripheral vision is missing.</p> <p>Or at a minimum of 6/24 with a moderate reduction of field of vision or with central vision that is clouded or blurry.</p>	<p>Vision is not brought to within what is considered the normal range (6/6 to 6/12) when using both eyes together and wearing glasses, contact lenses or following surgery.</p> <p>Meets one of the criteria for registration as sight impaired / partially sighted if visual acuity is measured at between 3/60 to 6/60 with a full field of vision.</p>	<p>Vision is not brought to within what is considered the normal range (6/6 to 6/12) when using both eyes together and wearing glasses, contact lenses or following surgery.</p> <p>Meets one of the criteria for registration as severely sight impaired / blind if visual acuity is measured at between 3/60 and 6/60 with a severe restriction of field of vision; or 6/60 and above with a considerable reduced field of vision.</p>
Some indicators likely to include – difficulty seeing the whiteboard which others see clearly,	May have a distinct head position when concentrating on using their vision.	Increasing difficulty writing on a line or reading back own work,	May be registered educationally blind.

<p>May tire easily in visual tasks, Is bothered by glare/bright light or cannot see in low light, Bumps into obstacles or trips over steps, Is unable to name/match colours</p>	<p>Has difficulty writing on a line or reading back own work, Has difficulty following a line of print – misses out words Has difficulty with fine motor skills/hand eye co-ordination, May experience difficulties with friendships.</p>	<p>Increasing difficulty following a line of print – misses out words Increasing difficulty with fine motor skills/hand eye co-ordination. May experience difficulty with social interaction due to missed incidental learning.</p>	<p>May experience difficulty with social interaction due to missed incidental learning. Complex learning difficulties other than that as a result of VI.</p>
<p>Some adjustments to be made to curriculum delivery, visually presented information and some reformatting, enlarged materials</p>	<p>Differentiation and / or some modification needed in some subject areas.</p>	<p>Considerable differentiation and / or some modification needed in some subject areas. Printed curriculum materials will require adaptation into large print to enable equal access to the curriculum.</p>	<p>Full modification and adaptation of curriculum materials. Large Print, braille or other tactile representations to enable equal access to the curriculum.</p>
	<p>Additional time and rest breaks may need to be established as the usual way of working and recognised in exam arrangements.</p>	<p>Additional time and rest breaks need to be established as the usual way of working and recognised in exam arrangements. If appropriate practice will be needed to develop the use of a scribe / alternative recording methods.</p>	<p>Additional time and rest breaks need to be established as the usual way of working and recognised in exam arrangements. If appropriate practice will be needed to develop the use of a scribe / alternative recording methods.</p>

Assessment and Planning

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children require:</p> <p>Systems to be in place for staff to routinely seek information about children's visual needs/concerns.</p> <p>Systems to be in place for staff to regularly seek the views of parents about their children's visual needs.</p> <p>Appropriate arrangements for assessment of the classroom and school environment which are reviewed at least annually in relation to school and site being physically</p>	<p>In addition to universal assessment and planning approaches, some children will require:</p> <p>The setting to gather the child's views about their difficulties and the SEND Support approaches to be put in place, using for example the One Page Profile.</p> <p>The setting to raise and discuss concerns with the child's parents and involve them in planning support approaches.</p> <p>Class teacher in consultation with the SENCO has established a clear analysis of</p>	<p>In addition to universal and School SEND Support approaches a few children will also require specialist SEND Support:</p> <p>Continued close home-school links, so school are aware of changes in circumstances that may impact on the child's vision.</p> <p>Rigorous qualitative and quantitative measures should be used as a baseline from which progress can be judged.</p> <p>Measures should also be made of the</p>	<p>A few children need that are more severe and cannot be met by universal, School SEND Support or Specialist SEND Support approaches.</p>

<p>accessible to children with a visual impairment.</p> <p>Whole staff awareness of the implications of visual difficulties and knowledge of strategies to facilitate the inclusion of children with a visual impairment.</p> <p>Appropriate whole school policies to be in place for supporting children with visual difficulties.</p> <p>Health and safety and risk assessment policies to be in place and appropriate risk assessments completed.</p> <p>There should be effective internal communication and liaison arrangements between staff.</p> <p>Where there are suspicions of visual Difficulties schools should advise parents to seek medical advice (e.g. G.P, school nurse).</p>	<p>the child's needs.</p> <p>Consideration of individual child's development in comparison to peers and their response to previous interventions.</p> <p>Liaison and consultation with external professionals and support services, where appropriate.</p> <p>Close home-school links, so school are aware of changes in circumstances that may impact on the child's visual needs.</p> <p>Assessment and observation by subject/class teacher or SENCO indicates child's visual difficulties affecting curriculum access as indicated by attainment below expected level/ability to engage in school activities.</p> <p>Where there are suspicions of ongoing visual difficulties, schools should advise parents to seek any appropriate medical advice.</p> <p>Careful monitoring of visual access to the curriculum.</p> <p>Assessment of functional vision by Advisory Teacher for Children with Visual Impairment.</p> <p>Continuous assessment and curriculum assessments may be supplemented by diagnostic tests.</p> <p>For some children a Specialist SEND Support Plan may be required. This may</p>	<p>impact of the child's difficulties on their ability to access the curriculum.</p> <p>Access to external services who may contribute via consultation or specialist assessment, which leads to a Specialist SEND Support Plan.</p> <p>Professionals may include speech and language therapist, occupational therapist, teacher of inclusive practice, the Surrey Outreach Service and physiotherapists – in order to facilitate the inclusion of children with visual impairment.</p> <p>Social workers, community and charity groups involved with the child/young person may also contribute.</p> <p>SENCO and teaching staff may need to refer to external support services for example Teacher of the Visually Impaired, and Ophthalmology for further specialist assessments and advice.</p> <p>A few children may require a statutory assessment of their special educational needs which may lead to an Education, Health and Care Plan.</p>	
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	involve a range of professionals including: Advisory Teaching Service, Children and Young People's Service, Educational Psychology Service, Targeted Support Teams, Social Care Teams, a range of health professionals and other support groups.		
Intervention and Support			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
Equipment and resources as recommended by Sensory Support Team or ophthalmologist	Some support to access the curriculum. May require training in the use of any assistive technology and/or low vision aids.	High level of support required to access the curriculum. May require training in the use of any assistive technology and/or low vision aids.	Constant level of support required to access the curriculum. Will require training in the use of assistive technology and where applicable low vision aids.
Enlarged copies of texts	Preparation of additional curriculum materials	Preparation of additional curriculum materials	Preparation of additional curriculum materials
		Pre and post teaching / tutoring	Generalisation of objects and development of concepts will require direct input. Pre and post teaching / tutoring of key vocabulary.
Appropriate seating arrangements	Appropriate seating arrangements	Appropriate seating arrangements	Appropriate seating arrangements
May need mobility training for orientation and independent travel within school from / directed by a qualified paediatric habilitation officer.	Likely to need mobility training for orientation and independent travel within school from / directed by a qualified paediatric habilitation officer. Also, may need independent living skills training.	Will need mobility training including long cane skills from / directed by a qualified paediatric habilitation officer. Also, will need independent living skills training.	Will need mobility training including long cane skills from / directed by a qualified paediatric habilitation officer. Also, will need independent living skills training.
Training and advice for setting from Qualified Teacher for VI	Training and advice for setting from Qualified Teacher for VI. Input into assessment.	Training and advice for setting from Qualified Teacher for VI. Long term assessment and involvement from ATVI.	Training, assessment, advice and direct input for setting from Qualified Teacher for VI.
	A cycle of intervention should always last a minimum of two terms and where needed to be extended. A cycle of intervention will need to be delivered regularly and consistently and	A cycle of intervention should always last a minimum of two terms and where needed to be extended.	

	should be clearly evidenced through record keeping.	A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.	
Evaluating Progress and Reviewing			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children's and young people's progress must be monitored through regular reviews in consultation with themselves and their parents/carers. Through school reports, termly assessments with available data through the school tracking system with analysis of learning and progress to inform next steps.</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/ resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's/young person's progress.</p> <p>Children's /young person's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Where appropriate reviews can involve professionals if they have provided advice.</p> <p>In analysing the progress that has been made the child may:</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded. For some children/young people, very small steps of progress may be identified.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/ resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child.</p> <p>In analysing the progress that has been made the child may:</p> <p>No longer need provision through a</p>	<p>Review through the annual review of the Education, health and Care Plan.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child/young person.</p> <p>In analysing the progress that has been made, the child / young person may:</p> <p>No longer need provision through an Education, Health and Care Plan and agree that needs will be met through a Specialist SEND Support Plan.</p> <p>Continue to need educational provision through an EHCP as needs cannot be met through a Specialist SEND Support Plan.</p>

	<p>No longer need special educational provision and needs will be met from universal approaches.</p> <p>Continue to need special educational provision through a School SEND Support Plan as needs cannot be met from universal approaches.</p> <p>Needs support through Specialist SEND Support approaches.</p>	<p>Specialist Support SEND Plan and needs will be met through a School SEND Support Plan or universal approaches.</p> <p>Continue to need provision through a Specialist SEND Support Plan as needs cannot be met through School SEND Support.</p> <p>Need special educational provision and referral for a statutory assessment.</p>	
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PHYSICAL AND MEDICAL PROFILE OF NEED			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
Mild physical difficulties related to fine/gross motor, spatial awareness	More significant physical difficulties that are likely impair mobility and / or communication.	Physical difficulties that impair mobility and / or communication	Multiple and complex physical difficulties
A diagnosed and usually controlled medical condition	A diagnosed and established medical condition which may be controlled/	A constant medical condition which may affect day to day functioning	A constant and severe medical condition which has profound effects on day to day functioning. Condition may be life threatening or limiting.
Assessment and Planning			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children require:</p> <p>Systems to be in place for staff to routinely seek information about children's physical needs/concerns.</p> <p>Systems to be in place for staff to regularly seek the views of parents about their children's physical/medical needs.</p> <p>Appropriate arrangements for assessment of the classroom and school environment which are reviewed at least annually.</p> <p>Whole staff awareness of the implications of physical and medical difficulties</p>	<p>In addition to universal assessment and planning approaches, some children will require:</p> <p>The setting to gather the child's views about their difficulties and the SEND Support approaches to be put in place, using for example the One Page Profile.</p> <p>The setting to raise and discuss concerns with the child/young person's parents and involve them in planning the School SEND Support approaches.</p> <p>Class teacher in consultation with the SENCO has established a clear analysis of the child's needs.</p> <p>Consideration of individual child's development in comparison to peers and their response to previous interventions.</p>	<p>In addition to universal and School SEND Support approaches a few children will also require:</p> <p>Access to external services who may contribute via consultation or specialist assessment, which leads to a Specialist SEND Support Plan.</p> <p>Professionals may include speech and language therapists, occupational therapists, teacher of inclusive practice, the Surrey Outreach Service and physiotherapists – in order to facilitate the inclusion of children with physical and/or medical needs.</p> <p>Social workers, community and charity groups involved with the child/young person may also contribute.</p> <p>Continued close home-school links, so</p>	<p>A few children's physical and medical needs are more severe and cannot be met by universal or Specialist SEND Support approaches.</p>

<p>Appropriate whole school policies for supporting children with physical and medical needs.</p> <p>Health and safety and risk assessments policies to be in place.</p> <p>Effective internal communication and liaison arrangements between staff.</p> <p>Universal through to specialist – School Nurse can be contacted for advice and support. The School Nurse may highlight specialist nurses to offer specific support or offer advice on schools' management of the physical and medical needs.</p> <p>The School Nursing Service would take steps to ensure that a child could be safely managed in school due to their health needs. This may mean that schools have contact details for the specialist nurses so that further training can be delivered i.e. emergency medication for epilepsy or suctioning for respiratory problems or the School Nurse will offer advice on how to manage in school. The School Nurse could contact parents to discuss concerns and support in ensuring these are addressed appropriately.</p>	<p>Liaison and consultation with external professionals and support services, where appropriate (e.g. Advisory Teaching Service, Educational Psychology Service, Occupational Therapy Service etc.).</p> <p>Close home-school links, so school are aware of changes in circumstances that may impact on the child's physical/medical needs.</p> <p>Assessment and observation by subject/class teacher or SENCO indicates child's physical difficulties affecting curriculum access as indicated by attainment below expected level/ability to engage in school activities.</p> <p>Where there are suspicions of physical or medical difficulties schools should advise parents to seek medical advice (e.g. G.P., School Nurse).</p> <p>Continuous assessment and curriculum assessments may be supplemented by diagnostic tests.</p> <p>For some children a Specialist SEND Support Plan may be required. This may involve a range of professionals including: Advisory Teaching Service, Children and Young People's Service, Educational Psychology Service, Targeted Support Teams, Social Care Teams, a range of health professionals and other support groups.</p>	<p>school are aware of changes in circumstances that may impact on the child's physical and medical difficulties.</p> <p>Rigorous qualitative and quantitative measures should be used as a baseline from which progress can be judged.</p> <p>Measures should also be made of the impact of the child's difficulty on their ability to access the curriculum.</p> <p>A few children may require a statutory assessment of their special educational needs which may lead to an Education, Health and Care Plan.</p>	
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Intervention and Support			
Universal	School SEND Support	Specialist SEND Support	Statutory assessment
Some differentiation may be required for their physical access to curriculum, (PE, practical subjects)	May need differentiation to access wider curriculum.	Significant differentiation of the majority of the curriculum	Significant differentiation of all of the curriculum.
	May need support from an adult for care needs. May be wheelchair dependent	Likely to need support from an adult for care needs. May be wheelchair dependent	Will require significant support from an adult for care needs. May be wheelchair dependent
Completion of risk assessments and intimate care plans as required.	Completion of risk assessments and intimate care plans as required.	Completion of risk assessments and intimate care plans as required.	Completion of risk assessments and intimate care plans as required.
	Additional time and rest breaks may need to be established as the usual way of working and recognised in exam arrangement. If appropriate practice will be needed to develop the use of a scribe / alternative recording methods.	Additional time and rest breaks may need to be established as the usual way of working and recognised in exam arrangement. If appropriate practice will be needed to develop the use of a scribe / alternative recording methods	Additional time and rest breaks need to be established as the usual way of working and recognised in exam arrangement. If appropriate practice will be needed to develop the use of a scribe / alternative recording methods
Health care plan. Some training from specialist Health Care professionals may be needed.	Health care plan. Training from Health Care professionals.	Health care plan. Training from Health Care professionals.	Health care plan. Training from Health Care professionals.
Advice may be needed from an Advisory Teacher for Physical Disability	Training and advice for setting from Advisory Teacher for Physical Disability. Input into assessment.	Training and advice for setting from Advisory Teacher for Physical Disability.	Training, assessment, advice and direct input for setting from Advisory Teacher for Physical Disability.
	A cycle of intervention should always last a minimum of two terms and where needed to be extended. A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.	A cycle of intervention should always last a minimum of two terms and where needed to be extended. A cycle of intervention will need to be delivered regularly and consistently and should be clearly evidenced through record keeping.	

Evaluating Progress and Reviewing

Universal	School SEND Support	Specialist SEND Support	Statutory assessment
<p>All children's and young people's progress must be monitored through regular reviews in consultation with themselves and their parents/carers. Through school reports, termly assessments with available data through the school tracking system with analysis of learning and progress to inform next steps.</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/ resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's/young person's progress.</p> <p>Children's /young person's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Where appropriate reviews can involve professionals if they have provided advice.</p> <p>In analysing the progress that has been made the child may: No longer need special educational provision and needs will be met from universal approaches.</p>	<p>Reviews of progress should take place at least three times per year.</p> <p>Reviews should feed into the assessment process and should be fully recorded. For some children/young people, very small steps of progress may be identified.</p> <p>Reviews should include specific reference to progress towards desired outcomes and targets. If targets are not met, strategies/ resources should be changed, or targets reduced.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child.</p> <p>In analysing the progress that has been made the child may: No longer need provision through a Specialist Support SEND Plan and needs will be met through a School SEND Support Plan or universal</p>	<p>Review through the annual review of the Education, health and Care Plan.</p> <p>Parents should always be involved in the review of the child's progress.</p> <p>Children's views should always be sought as part of the review process.</p> <p>Records of steps taken to meet the needs of individual children should be kept and made available as needed.</p> <p>Reviews should involve the appropriate external professionals working with the child/young person.</p> <p>In analysing the progress that has been made, the child / young person may: No longer need provision through an Education, Health and Care Plan and agree that needs will be met through a Specialist SEND Support Plan.</p> <p>Continue to need educational provision through an EHCP as needs cannot be met through a Specialist SEND Support Plan.</p>

	<p>Continue to need special educational provision through a School SEND Support Plan as needs cannot be met from universal approaches. Needs support through Specialist SEND Support approaches.</p>	<p>approaches.</p> <p>Continue to need provision through a Specialist SEND Support Plan as needs cannot be met through School SEND Support. Need special educational provision and referral for a statutory assessment.</p>	
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