

Special Educational Needs and Disability (SEND) Policy

'Working together to achieve success'

Introduction

This policy explains how Mossgate Primary School makes provision for pupils with SEND, in line with our school ethos and current legislative requirements: SEND Code of Practice 2014 and Equality Act 2010.

- The school's SENDCo (Special Educational Needs and Disability Coordinator) is Mrs Nicola Boswell.
- The school's Inclusion Leader is Mrs Helen Taylor.
- Mrs Boswell and Mrs Taylor have achieved the National Award for SEN Co-ordination.

See Appendix 1 for other Key personnel.

Parents requiring further information about the provision for SEND in the school should, in the first instance, talk to their child's class teacher or contact the SENDCo or Inclusion Leader.

The school's **SEND Information Report**, which also acts as our **Local Offer**, provides much greater detail on the context of the school and the provision for children with SEND and should be read in conjunction with this policy.



Our mission:

'Working together to achieve success'

- As active and healthy **individuals** who are inquisitive, have the belief to try new things and manage risks safely.
- As resilient, confident and independent **learners** who strive to achieve their best.
- As **honest, courteous** and **kind friends** who **respect** and value difference and have the **courage** to challenge discrimination.
- As active and **responsible** and **respectful citizens** who have a positive impact within their school, community and wider world.

Definition of Special Educational Needs and Disabilities

A child or young person has SEND if they have a learning difficulty or disability which calls for special educational provision to be made for him or her.

These needs can be categorised in four key areas:

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

A student has a learning difficulty or disability if he or she:

- Has a significantly greater difficulty in learning than the majority of students of the same age;
- Has a disability, which prevents or hinders the child from making use of facilities of a kind generally provided for others of the same age in mainstream schools.

Aims

- At Mossgate, we believe that good practice for pupils with SEND is good practice for all. If children are not able to 'learn the way we teach' then we must 'teach the way they learn'.
- Our Mission Statement is: 'Working together to achieve success'. We believe that for children to succeed, school, parents, children and other agencies need to work together in partnership.
- Our school community aims to provide an education that develops all children to their full potential within a safe, happy and caring environment. We believe that people learn best in different ways. At our school, we provide a rich and varied learning environment that allows all children to develop their skills and abilities to together full potential.

- We are committed to meeting the special educational needs of pupils and ensuring that they make good progress and reach their full potential. This is achieved through targeted and focussed provision with maximum impact, building confidence and self-esteem. We aim to raise the aspirations of and expectations for all pupils with special educational needs.
- This policy aims to provide full access to the National Curriculum and to encourage success and participation for all pupils, whatever their level of ability.

All pupils should have access to a broad and balanced curriculum. The National Curriculum Inclusion Statement states that teachers should set high expectations for every pupil, whatever their prior attainment. Teachers should use appropriate assessment to set targets which are deliberately ambitious. Potential areas of difficulty should be identified and addressed at the outset. Lessons should be planned to address potential areas of difficulty and to remove barriers to pupil achievement. In many cases, such planning will mean that pupils with SEN and disabilities will be able to study the full national curriculum

Objectives

In order to achieve these aims, we will:

- Use our best endeavours to make sure that a child with SEND gets the support they need;
- Ensure that students with SEND engage in activities alongside those students who do not have SEND;
- Identify pupils with SEND as early as possible and to make appropriate intervention through targeted teaching methods;
- Identify pupils of all ability who are underachieving, act upon this and support pupils to make optimum progress;
- Provide a SENDCo and Inclusion Leader who will work with the SEND Policy and Information Report;
- Provide support and advice for all staff working with special educational needs pupils;
- Develop partnerships with parents/ carers in the education of their child and involve parents/ carers and pupils in the review process;
- Produce an Annual SEND Information Report.

Identifying Special Educational Needs and Disabilities

We believe early identification is vital. The SEND Code of Practice (2014) states, 'For some children, SEN can be identified at an early age. However, for other children and young people difficulties become evident as they develop' therefore we continually monitor the progress made by individuals throughout their time at Mossgate. The school uses appropriate screening and assessment tools from both in school resources and, where needed, outside agency support. By gaining accurate and informative assessments, the school can gain an understanding of the child's needs, which enables the planning and delivery of effective adjustments, support and interventions. Progress is tracked regularly and where appropriate, more frequently than this. The Inclusion Leader liaises closely with the Senior Leadership Team to analyse data and individually track pupils who are experiencing difficulties.

If we believe that your child has a special educational need, we will invite you to attend a meeting where we will share our concerns. During this meeting, we will work together to complete an '**Initial Assessment Form**' (Appendix 3). This form will be used to collate past and current information about your child in a number of areas including:

- Cognition and Learning
- Social, Emotional and Mental Health
- Communication and Interaction
- Physical and/ or Sensory

The information shared will be used to identify areas of strength and areas of need. We will also gather the views of your child. Following this meeting, school, alongside parents, will decide on an appropriate course of action including whether to place the child on the **SEND Register**. A child will be added to the SEND register if they require special educational provision that is different from or additional to that normally

available to pupils of the same age. If the child is placed on the SEND Register, a **Level 2+ Action Plan** (Appendix 4) will be written alongside the parents and with the input of the child.

If parents believe that their child may have a special educational need, they are encouraged to discuss this with the class teacher and/ or the SENDCo. This discussion may also result in the completion of an **'Initial Assessment Form'** (Appendix 3) as well as a decision about next steps (see above paragraph).

Class teachers discuss any concerns with the Inclusion Leader and Headteacher. During progress meetings, SEND children are discussed on an individual basis with class teachers and the SENDCo. The meetings also allow staff to discuss any children they are concerned about who may not have identified SEND needs. If further action is deemed necessary, the parents are informed immediately. All criteria for defining Special Educational Needs are in accordance with the Lancashire Education Authority Policy.

Triggers for identification of a Special Educational Needs include:

- Little or no progress made when teaching approaches/ learning styles are particularly targeted to improve the child's identified area of need;
- Work continues at levels significantly below those expected for a child of a similar age in certain areas of the Early Years Foundation Stage or in English and Mathematics skills resulting in poor attainment in some framework or learning areas;
- Communication or interaction difficulties which create barriers to learning and specific interventions are needed;
- Social, emotional or mental health difficulties which are not improved by the techniques normally employed in the nurturing environment of the school;
- Sensory or physical difficulties which create barriers to progress despite the provision of personal aids or specialist equipment.

If concerns remain about the progress a child is making, despite additional support, strategies, resources etc, the school may, with parental permission, seek the advice from an external agency such as Educational Psychologists, Support Services, The Inclusion and Disability Support Service (IDSS), The Mental Health Support Team, Specialist Teachers, The District 1 Inclusion Hub or similar. This will always be arranged with agreement from parents. Reports and information gathered by specialists will be always be shared with parents.

Additionally, some children may receive support from our National Health Service colleagues e.g. Speech Therapy, Occupational Therapy and Child and Adolescent Mental Health Services (CAMHS).

Any plans shared with the school by these agencies are implemented by staff within school in liaison with the appropriate agency.

Factors which are NOT SEND, but may affect a child's progress and attainment, are taken into consideration and adaptations are made accordingly. These may include:

- A disability under the Equality Act 2010 - all reasonable adjustments will be made in order that they can access the full curriculum
- Attendance and Punctuality
- Health and Welfare
- English as an Additional Language (EAL)
- Being in receipt of Pupil Premium Grant (PP)
- Being a Looked After Child
- Being a child of Serviceman/woman

Persistent, disruptive or withdrawn behaviour does not necessarily mean that a child has SEND. Any concerns over a pupil's behaviour will be investigated on the premise that the behaviour is an underlying response to a need. This may be a learning difficulty or another factor, as noted above. School staff will endeavour to recognise and quickly identify the reasons for the behaviour and take all reasonable steps to

address the root cause. Behaviour incidents are logged on our internal record keeping system and reviewed regularly by a member of the SLT. The SENDCo and Inclusion Leader are part of this process so we can quickly identify whether the behaviour is part of a Special Educational Need. If this is the case, we will follow the SEND procedures.

The Graduated Approach to SEND

The Key Principles:

- All class teachers are responsible and accountable for the progress and development of the pupils in their class, including where pupils access support from teaching assistants or specialist staff. All children are included in all lessons through an ethos of quality first teaching which is adapted to respond to their strengths and needs as set out in the Teachers Standards (2012).
- High quality teaching, differentiated for individual pupils, is the first step in responding to pupils who have or may have SEND. However, despite this, some children need additional help to make progress in their learning.
- Additional intervention and support cannot compensate for a lack of good quality teaching.
- Pupils who join school (either from an Early Years setting or another primary school) with an already identified SEND, will be catered for in the same way as those identified by this school.
- Following identification of SEND, we follow a cycle of '**Assess, Plan, Do and Review**' to produce **Level 2+ Action Plans** (see Appendix 4). This approach enables staff and parents to identify the child's areas of need and set targets, plan a programme to address the need, give time to deliver the programme and then review the impact of the plan against the targets. Staff continually monitor the impact of the strategies and adapt if necessary (see Appendices 4 and 5 for more details). The plans will also include ways that parents and carers can support the child at home in relation to particular targets.
- Parents and carers are invited to review the impact of the support provided through the **Level 2+ Action Plan** at least 3 times per year alongside the child and the class teacher. Parents and will be given clear information about the impact and will be involved with planning next steps for their child.
- When planning work for children with special educational needs, teachers give due regard to information and targets contained in the children's **Level 2 + Action Plans**. Teachers have high expectations for every pupil, whatever their prior attainment. Teachers use appropriate assessments to set targets which are deliberately ambitious. Potential areas of difficulty are identified and addressed through a range of strategies and resources such as pre-teaching/ post teaching and use of practical resources. Lessons are planned to address potential areas of difficulty and to remove barriers to pupil achievement.
- Members of the senior leadership team and SENDCo will meet with staff to discuss all pupils who have a Level 2+ Action Plan to ensure that the targets on the plans meet the needs of the children. Plans are reviewed at least termly. If children achieve targets before the plans are reviewed, new targets are set and reference is made to these new targets when the plans are evaluated at the end of the term. Parents and pupils are involved in the evaluation of these plans at least three times per year.
- If a child has been seen by an Educational Psychologist, the SENDCo will work alongside the child, parents and class teacher to complete an **SEN Support Plan**. This takes into account the findings of the assessment and sets longer term outcomes which will be broken down into targets over a period of time (usually one year).

The Mossgate Continuum

- **Level 1** – The majority of the school pupils will be on the Level 1 continuum. The child is working at age related expectations, above them or just below them. Children may be having additional support e.g. interventions/ extra reading/ medical / attendance support but they are making progress.
- **Level 2** – The child requires special educational provision that is different from or additional to that normally available to pupils of the same age. At this point, the child will be placed on the school's **SEND Register** and a **Level 2+ Action Plan** will be written by school staff, alongside parents and the child. For some children, we will access support from other professionals including Speech and Language Therapists, Occupational Therapists, Physiotherapists and Specialist Teachers. Their advice will be used to inform the **Level + Action Plan**. Most children who have SEND, have their needs met through this level which is known as **SEN Support**.

- **Level 3** – If the child does not make adequate progress, despite appropriate support, we will seek the specialist advice of an Educational Psychologist. If the child is seen by an Educational Psychologist, a **SEN Support Plan** will be written by the school, alongside the child and parents, using the information from the Educational Psychologist's Report. The SEN Support Plan will identify longer term outcomes and will be used to inform the **Level 2+ Action Plan**. If there continues to be concerns about the progress of a child or the complexity of their needs, a request will be made for an **assessment by the Local Authority** to identify whether the child needs an Education, Health and Care Plan.
- **Level 4** – A child will be placed at **Level 4** if the Local Authority agree to issue an **Education, Health and Care Plan**. This plan is for children and young people aged up to 25 years who need more support than is available through SEN Support. Education, Health and Care Plans identify educational, health and social needs and set out the additional support to meet those needs.

Provision

- The provision which the school makes is fully detailed in the school's Information report which is available from the school office or in the INCLUSION Section on the school's website.
- A Graduated Approach to provision is used to identify possible support, adaptations and interventions which could be used to support individuals. This can be found in **Appendix 5**.
- The provision including strategies and resources is constantly changing and evolving.
- Pupils will have access to this provision on an evidenced -needs basis and we will endeavour to ensure all pupils' needs are fully met. However, occasionally we may identify that we are unable to fully meet the needs of a pupil through our own provision arrangements. In these circumstances an assessment of the unmet needs would be carried out through the Early Help Assessment process which will involve parents, pupils and all agencies involved in the pupils' care. More information on this can be found on the Lancashire County Council website: <https://www.lancashire.gov.uk/practitioners/supporting-children-and-families/early-help-assessment/>
- As a result of the Early Help Assessment process, parents and a multi- agency team may decide that school should apply for a Statutory Integrated Assessment of a pupil's needs i.e. apply for an Education Health and Care Plan (EHC Plan). Further information on this process may be found at www.lancashire.gov.uk/SEND
- The SEND Code of Practice (2015) states, "All children and young people are entitled to an appropriate education, one that is appropriate to their needs, promotes high standards and the fulfilment of potential. This should enable them to: achieve their best; become confident individuals leading fulfilling lives; and make successful transition into adulthood, whether into employment, further or higher education or training." As part of our endeavour to provide the best possible provision for children with SEND, that is appropriate to their needs and promotes high standards and the fulfilment of potential, children sometimes access provision in different classes across our school. This could be for individual lessons such as phonics, or for larger proportions of the day so that the child can access provision and curriculum appropriate to their needs and next steps such as continuous provision. This decision will be made in conjunction with parents and will be reviewed regularly as part of our Assess, Plan, Do, Review Cycle.

Supporting Pupils and Families

- The Local Authority's Local Offer (Regulation 53 Part 4) may be found at: <https://www.lancashire.gov.uk/children-education-families/special-educational-needs-and-disabilities/> This links to the school's Information Report which details how the school works with and supports families of pupils with SEND. It also details other arrangements such as access to Statutory Assessment Tests (SATs) and transition to high schools.
- Parents and carers are valued and their contribution in terms of identification and support for pupils with SEND is fully recognised. Parents/ Carers are always welcome to discuss any matter relating to their child's progress. The arrangements to keep parents informed about matters relating to SEND (as described in this policy), are additional to the standard methods of reporting and consulting available to all parents. Parents will be invited to a formal meeting to review progress and plan next steps at least three times per year.

- The school's statutory SEND Information Report (Regulation 51, Part 3, section 69(3) (a) of the Act) will be available on the school website annually.
- Pupils with special educational needs will be admitted to school in line with the school's admissions policy. The school is aware of the statutory requirements with regard to SEND and will meet these requirements. The school will use induction meetings to work closely with parents to ascertain whether a pupil has been identified as having special educational needs or a disability. If the school is alerted to the fact that a pupil may have SEND, we do our best endeavours to collect all relevant information and plan a relevant differentiated curriculum.

Supporting pupils at school with medical conditions

The school recognises that pupils at school with medical conditions should be properly supported so that they have full access to education, including school trips and physical education. Some children with medical conditions may be disabled and where this is the case the school will comply with its duties under the Equality act 2010.

- Pupils who have medical needs may require intervention and support from staff in school and will have a Health Care Plan written for them, in liaison with the Health service and the parents. This ensures a safe, agreed set of principles and procedures to ensure the pupil's needs are fully met and all health and safety arrangements have been addressed. If appropriate, a Health Care Plan with the pupil's photograph, stating emergency procedures and contact details will be held in a secure location in the school office and on CPOMS.
- Some pupils may also have special educational needs and may have an Education, Health and Care (EHC) Plan which brings together their education, health and social care needs and the SEND Code of Practice (2014) is followed. Provision will be made for the pupils in accordance with their EHC Plan.
- The school's policy for supporting pupils with medical conditions can be obtained from the school office and website.

Children Looked After (CLA) by the Local Authority

Pupils who are being looked after by the local authority may require intervention and support from staff in school and will have a Personal Education Plan (PEP) written for them, in liaison with Children's Social Care.

Monitoring and Evaluating SEND

- For pupils with an Education, Health and Care Plan, annual reviews (6 monthly for under 5s) are carried out in accordance with the appropriate legislation and the SEND Code of Practice.
- Monitoring activities (book looks, pupil interviews, lesson observations and learning walks) include SEND pupils.
- An Inclusion Report is jointly written by the SENDCo and Inclusion Leader for the Governing Body termly. The SEND Governor meets with the SENDCo / Inclusion Leader focussing on SEND provision and next steps.
- The impact of SEND work is evaluated through action plans, annual reviews for EHCPs, pupil progress meetings, staff appraisals and termly inclusion meetings.
- As part of the School Development Plan, the SENDCo identifies key actions and updates progress against this on a termly basis.

Training and Resources

- The overall level of funding (the National Budget) for SEND is delegated to the school by the Local Authority and is identified in the school budget statement. This amount is not ring-fenced.
- The responsibility for determining the amount of resource for SEND lies with the school Governors who seek advice from the Headteacher, SENDCo and Inclusion Leader.
- The resources for SEND are used to provide teaching assistants, specific training on SEND and specialist resources. The costs of the Inclusion Leader are met from the main school budget.

- Resources purchased may include specialist equipment such as computers, software packages, e.g. IDL, Dictaphones, visual impairment equipment and voice recognition software which is specific to the needs of the child.
- The SENDCo has the key responsibility for determining the allocation of these resources in consultation with the Senior Leadership team and the rest of the staff.
- In order to maintain and develop the quality of teaching and provision to respond to the strengths and needs of all pupils, all staff are encouraged to undertake training and development. All teaching staff and teaching assistants will be provided with general or specific training on meeting the needs of SEND within their classroom. The SENDCo is aware of relevant courses within the local area relating to SEND. All staff will have access to this information and the Inclusion leader advises as necessary.
- Whole school training on SEND is arranged, as appropriate and teaching assistants are invited. This may be delivered by the SENDCo, Inclusion leader or by the specialist services working within school e.g. Specialist teachers.
- There is an expectation that staff who receive training will disseminate their knowledge to others to benefit all working with SEND.
- All teachers and support staff undertake induction training on taking up a post and this includes a meeting with the SENDCo to explain the systems and structures in place around the school's SEND provision and practice and to discuss the needs of individual pupils.
- The school's SENDCo regularly attends the Local Authority SENDCo network meetings in order to keep up to date with local and national updates in SEND.

Roles and Responsibilities

- The Governors must have regard for the Code of Practice (Children and Families Act 2014, part 3) when carrying out their duties towards all pupils with SEND.
- The Governors and Headteacher are responsible for the school's policy and approach to meeting pupils' special educational needs.
- The SENDCo is the school's "responsible person" and manages the school's special educational needs work. They will keep the Governing Body informed of the special educational needs provision made by the school.
- The SENDCo is responsible: for keeping a register of pupils with SEND and updating this; for all children on the SEND register: for supporting teachers in writing Level 2+ Action Plans and assessing pupil progress; purchasing and organising resources; liaising with external agencies; making referrals; ensuring that appropriate records are kept; supporting the transition of pupils with SEND into the school and into high school; liaising with the SEND Governor and preparing appropriate reports; and liaising with the non-teaching staff in relation to SEND.
- Teaching Assistants are a valuable part of the support for students with SEND. They work under the direction of the class teacher to deliver targeted 1:1 or group teaching, as detailed in a child's Level 2+ Action Plan and focused in-class support whilst encouraging independence.
- The Inclusion Leader is responsible for completing Health Care plans for children in school.

Storing and Managing Information

Documents relating to children with SEND are stored in a locked cupboard in school and / or on the school's server which is password protected. Some documents, such as Level 2+ Action Plans are held on the school's server in an area which can only be accessed by teachers. Records relating to children who have left are passed to the new school as soon as it is practical. Copies are kept in locked cupboards of past pupils until the person is 30.

Reviewing the Policy

This policy will be reviewed on an annual basis. The process of review will involve the SENDCo, Inclusion Leader, the SEND Governor, the Chair of Governors and the Headteacher. Review of the policy will take into account:

- The progress made by students with SEND at school;
- The success of the school at including students with SEND;
- Any recommendations from OFSTED or the LA about improving practice;
- Any factual changes, such as names of personnel.

Accessibility

- Further detail on the school’s approach to accessibility (including curriculum, written and physical accessibility) can be found in the school’s SEND Information Report.
- School operates an open-door policy so parents can contact staff by appointment throughout the school day. Appointments with the SENDCo, Inclusion Leader or Headteacher can be made via the school office.

Dealing with Complaints

- If a parent of a pupil with SEND is concerned about the provision that school is making for them, they should, in the first instance, refer the matter to the pupil’s class teacher and / or SENDCo.
- The school’s Complaints Policy can be found on our website if you feel your concerns have not been dealt with.

Bullying

The schools Anti-Bullying Policy is available from our website and school office.

Monitoring and Review

Monitoring is the responsibility of the Headteacher, Governors (through the School Improvement Committee) and leader with responsibility for SEND. Staff, parents and pupils have been consulted. The policy will be reviewed annually.

The school is aware of our legal duties under the Equality Act 2010, to promote equality of opportunity and to reduce discrimination.

Further details about how the school keeps children with SEND safe can be found in the Local Offer.

Reviewed by the Subject Leader:	Approved by Governors:	Next review date:
Autumn 2023	Autumn 2023	Autumn 2024

Appendix 1

List of Personnel Involved in SEND

Name	Position
Nicola Boswell	SENDCo
Helen Taylor	Inclusion Leader, Designated Safeguarding Lead, Looked After Children Lead, Managing Medical Needs Lead
Julie Ashton	SEND Governor
John Manley and Nichola Buczynski	Chair of Governors
Rob Smith	Headteacher and Designated Safeguarding Lead

Glossary of Abbreviations

SEND	Special Educational Needs and Disability
SENDCo	Special Educational Needs and Disability Coordinator
LA	Local Authority
IDSS	Inclusion and Disability Support Service
EHC Plan	Education, Health Care Plan
CAMHS	Child and Adolescent Mental Health Services

Appendix 2

The Mossgate Approach to SEND

	WHAT	WHO	HOW
ASSESS	Initial Concern	Parents/ school	Professional Dialogue Level 2 Initial Assessment form completed with parents Improving Achievement Meeting Inclusion team meet to decide on approach
	Classroom adaptations and/or targeted support in class	Class teacher (CT) Teaching assistant (TA)	Examples may include: Classroom Positioning Organisation Aids (task Ladder) Coloured overlays Focus Group with CT/ TA
	Targeted and time limited assessments	SENDCo or qualified SEND teacher	WRAT / BPVS / attendance / medical/PIVATS assessments

	WHAT	WHO	HOW
PLAN	Parents informed of intention to make additional provision	Class Teacher	Meeting
	Pupil added to SEND register	SENDCo	
	Level 2+ action Plan written (usually*) with 1,2 or 3 Specific, Measurable, Attainable, Realistic, Timed (SMART) targets	Class teacher with the support from the SENDCo	Parents involved throughout the Level 2+ Action Plan process. Plans will be reviewed formally at least three times per year. Parents and pupils will be involved in reviewing targets and identifying next steps.

* For some children with additional needs, an action plan may not be necessary. This will be decided when the Inclusion team meet.

	WHAT	WHO	HOW
DO	1:1 / small group teaching towards Level 2+ Action Plan Targets	Delivered by Class teacher or Teaching Assistant	Little or often, as specified on the Level 2+ Action Plan
	Progress towards Level 2+ Action Plan targets monitored	TA supervised by Class Teacher. Pupils are involved in the process	Weekly (through the weekly monitoring sheet) Checked by CT every 2-3 weeks
	Revision of Level 2+ Action Plan targets	Class Teacher	As and when necessary (when targets met or adjusted)
	Teachers and /or Teaching Assistants access Continuing professional Development courses to enhance their understanding of a specific difficulty relating to a child in their class	Class Teacher (Need identified by CT, Inclusion Leader)	When appropriate

	WHAT	WHO	HOW
Review	Full review of Level 2+ Action Plan at least 3 times per year	Class teacher (informed by weekly monitoring) Teaching Assistant, Pupil, Parents	Evaluations of Level 2+ Action Plans completed alongside parents and pupils.
	SEND Register updated	SENDCo	Significant changes during the year will also result in an update

	Outcome	Next Steps	Notes
REVIEW OUTCOMES	Progress is accelerated and provision needed to maintain this is commensurate with peers	Needs can now be met through classroom differentiation, adaptations and /or intervention Removed from SEND register	Professional dialogue between teachers, SENDCo and parents before decision to remove from the SEND register is made.
	Progress is good but additional provision needs to continue	New Level 2+ Action Plan completed Continue with cycle to next review	Evaluation and new action plan shared with parents/ carers.
	Progress remains slow/ inadequate despite the use of evidence based approaches and well-matched interventions	With the permission of parents, school will refer the pupil for specialised assessments and advice from external agencies and professionals	Further external agency support. Where a pupil has a pre-existing recognised difficulty (for example: speech and language difficulty or autistic spectrum condition) the expertise of external agencies and professional may, with parental permission, be sought at an earlier stage. If the child is seen by an Educational Psychologist, they will move to Level 3 on the continuum. A request may be made for Statutory Assessment to the Local Authority.
	Despite the school having taken the relevant action to identify, assess and meet the needs of a pupil (as above) the pupil has not made expected progress	The school is unable to fully meet the needs of the pupil through its own provision arrangements School, and parents/ carers should consider applying for an EHCP.	Education, Health and Care Plans are the replacement for Statements of Special Educational Needs. If the Local Authority agrees to issue an EHC Plan, they child will move to Level 4 on the continuum.

Inclusion Continuum

Level 1 Children, young people and families whose needs are met by universal services and are thriving		
	Indicators	Action
Health and Wellbeing	<ul style="list-style-type: none"> • CYP meeting development milestones • Good hygiene • Able to perform self-care duties as appropriate to age • Appropriately cared for when ill • Good emotional health and/or well being • Age appropriate social and communication skills • Positive sense of self and abilities 	<ul style="list-style-type: none"> • Routine assessments take place e.g. weight/ height checks/ hearing
Safe From Harm	<ul style="list-style-type: none"> • Positive attachments • Stable home environments • Able to recognise unsafe activities, places, etc • Secure relationships 	<ul style="list-style-type: none"> • Complete training on health and safety with children e.g. road safety
Contribute and Engage	<ul style="list-style-type: none"> • CYP attending school/nursery regularly • CYP who have their social, moral, spiritual and cultural needs met • CYP reaching learning milestones • Good relationships with peers and adults • Appropriate stimulation, boundaries and guidance • Good home/school link • CYP appear happy, good level of emotional literacy • Good level of self-esteem and confidence 	<ul style="list-style-type: none"> • Staff to complete concerns files • Staff to record any incidents of bullying/ racism
Aspire and Achieve	<p>Effective support networks</p> <ul style="list-style-type: none"> • Confident in social settings • Experiences success and achievement • Positive role models • Good relationships with employer • Planned progression beyond statutory education • Access to learning resources • Parents are able to offer stability • Parents are economically active • Access to appropriate family supports • Suitable accommodation • Reasonable income, being used appropriately to meet needs • Good access to services <p>* Children achieving age related expectations or above.</p>	<ul style="list-style-type: none"> • Teacher assess half termly and completes trackers • Discussed with a member of SLT • Continue First Quality teaching • Complete interventions for those children who require acceleration
Positive Response	Keep child at level 1	
Negative Response	Discuss Child with member of Inclusion Leader/ SEND Coordinator Complete a Level 2 Assessment Report and give copy to Inclusion Leader	

Level 2

Children, young people and families who have additional unmet needs and are **just coping**, thus may be in need of Early Support from Services

	Indicators	Action
Health and Wellbeing	<ul style="list-style-type: none"> • Slow reaching developmental milestones (e.g. below centile chart height and weight) • Early/unsafe sexual activity • Missing/poor attendance at medical appointments • Not registered with a GP • Some relationship difficulties (e.g. divorce/separation, bereavement) • Frequent illnesses and infections/minor health injuries/problems • Unnecessarily accessing health services e.g. walk in clinics/A&E • CYP for whom there are emotional, physical/behavioural health concerns • Vulnerability to mental health problems due to family history or circumstances • At risk of self-harm • Delayed speech or language/poor concentration • Starting to experiment with substances/drugs • Insecurities about identity • Clothing needs/no/inappropriate school uniform • Poor development of self-care skills • Parents struggling to address own emotional needs • Poor home routines • Families with poor hygiene • CYP who appear hungry in school • CYP at risk of/showing signs of an eating disorders 	<ul style="list-style-type: none"> • EHA process started- TAF meetings take place • Health and Wellbeing Leader to meet parents annually • CAMHs referral completed if required • School Nurse informed of child- completes a review of medical issues • Health and Wellbeing Plan completed and reviewed annually • Chronology of actions updated by staff • SMART Targets set and regularly reviewed with parents and child
Safe From Harm	<ul style="list-style-type: none"> • Families subject to discrimination/harassment • Change in family circumstances • Very young parents • Parent(s) who are absent • Inappropriate childcare • Basic care is not consistent • Wider family and friends may engage in unsafe activities • At risk of eviction through non-payment of rent/utilities • CYP beginning to misuse substances • Lack of evidence of attachment/bonding • CYP at risk of entering the Criminal Justice System – engaging in low level offending or anti-social behaviour. • CYP who have started going missing from home • CYP involved in contact/residence disputes • Families where concerns are beginning to emerge about domestic abuse • Families where concerns are beginning to emerge about substance misuse • Parents who are care leavers 	<ul style="list-style-type: none"> • EHA process started- TAF meetings take place • Children’s Centre Referral completed if required • Health and Wellbeing Leader to meet parents annually • Chronology of actions updated by staff • SMART Targets set and regularly reviewed with parents and child

<p>Contribute and Engage</p>	<ul style="list-style-type: none"> • Attendance is below 95% to 90% Young carers • Lack of stimulation, boundaries or guidance • Some difficulties in building/sustaining relationships with peers and adults • Low/ threatened self-esteem and confidence • Limited access to age-appropriate leisure facilities and/or quality education including nursery • Low expectations from community, school and parents/carers • CYP presenting challenging behaviour in school • CYP refusing to go to school • Bullied or bullying behaviour • Lack of positive role models • Inappropriate responses and actions • Find managing change difficult • Does not always understand how actions impact on others • Sometimes engages in low level offending or anti-social behaviour • CYP presenting increasing problems where parents are finding it difficult to manage • Conflicts within the community • Family has recently moved from out of/into the area • CYP from migrant families whose first language isn't English • CYP is withdrawing from peers and/or parents • CYP is disengaging with family, school and peers • CYP spends lot of time alone 	<ul style="list-style-type: none"> • EHA process started - TAF meetings take place • Child completes social group sessions if appropriate • Meet with parents regarding attendance • SMART Targets set and regularly reviewed with parents and child
<p>Aspire and Achieve</p>	<ul style="list-style-type: none"> • Child has additional needs and is working below national expectations for their age- See Provision Criteria Attitudes are affecting their ability to achieve economic well being • Fixed term exclusion • CYP who missed important education appointments • Below educational levels/not meeting learning milestones • CYP may require a differentiated approach to education, additional to/different from their peers • Irregular attendance and CYP starting to have significant unauthorised absence from school/nursery • At risk of making ill-informed/inappropriate progression decisions • Not settled in employment, education or training post 16 • Not in education, employment or training (NEET)- less than 6 weeks • Not completing education plan • Has isolated or unsupported carer • High number of children or more than two under 5 • Low income may affect wider family unit • Periods of unemployment may affect wider family unit • Inadequate poor housing/home conditions due to overcrowding, lack of heating or structure 	<ul style="list-style-type: none"> • EHA process started- TAF meetings take place • Group or 1-1 intervention with class teacher or TA • Staff to complete Chronology of actions • Initial Assessment Meeting with parents. • SMART Targets set and regularly reviewed with parents and child • Specialist equipment purchased e.g. pencil grips if used • Specialist Teacher input- e.g. IDSS, SEND Co • CAMHs referral completed if required
<p>Positive Response</p>	<p>Child goes to Level 2 or Level 1</p>	
<p>Negative Response</p>	<p>Child goes to Level 3 Child's needs assessed by specialist staff e.g. Educational Psychologist</p>	

Level 3

Children, young people and families are **struggling to cope** and need a coordinated targeted response.

	Indicators	Action
Health and Wellbeing	<ul style="list-style-type: none"> • Family relationship difficulties (e.g. hostile, divorce/separation, bereavement) • Carers with chronic ill health or terminal illness • Problematic diet at risk of obesity or malnourishment (failure to thrive) • Eating disorders • Slow in reaching developmental milestones, including poor or delayed speech • Refusal to register with GP • Non - attendance at health appointments • Deteriorating mental health • Health and wellbeing concerns not being met • Very frequent significant illnesses and infections/minor health injuries/ problems • Frequently and unnecessarily accessing health services e.g. walk in clinics/ A&E • CYP for whom there are emotional, physical/behavioural health concerns • Poor emotional health and/or well being • Early signs of self-harming behaviour • Delayed speech or language/poor concentration • Escalating experimentation with Substances/drugs/alcohol • Identity issues impacting on emotional health and well being • Parents/carers with mental health issues impacting on ability to parent • No home routine • Hygiene and self-care needs struggling to be met • Eating disorders impacting on development and health • Pregnant age 16 years or under • Complex or multiple health issues being met via a variety of health professionals • Inability of parents to be warm and affectionate 	<ul style="list-style-type: none"> • EHA in place and TAF meetings take place • Chronology of actions updated by staff • SMART Targets set and regularly reviewed with parents and child • Health and Wellbeing Leader meet parents to review Health and Wellbeing Plan annually or when health issues have changed • Additional support from outside agencies e.g. OT/ Nurse/ CAMHS/ Children's Centre/ Special School e.g. Loyne/ Hillside
Safe From Harm	<ul style="list-style-type: none"> • Significant insecurities about identity • Exposure to problematic substance misuse/experimenting with substances. • CYP entered the Criminal Justice System at pre-conviction stage e.g. has received an Out of Court Disposal • Increasing risk of vulnerability to sexual activity/teenage pregnancy. • Difficulty coping with anger, frustration and upset. • At imminent risk of eviction through non-payment of rent/utilities • CYP who are repeatedly missing from home • CYP beyond parenting control • Families where there are concerns about Domestic Abuse 	<ul style="list-style-type: none"> • EHA in place and TAF meetings take place • Chronology of actions updated by staff • SMART Targets set and regularly reviewed with parents and child • Additional support from outside agencies e.g. OT/ Nurse/ CAMHS/ Children's Centre/ Special School e.g. Loyne/ Hillside
Contribute and Engage	<ul style="list-style-type: none"> • Disruptive/challenging behaviour by parent or child linked to poor attachment • Poor stimulation, boundaries or guidance 	<ul style="list-style-type: none"> • EHA in place and TAF meetings take place • Staff monitor child's attendance half termly

	<ul style="list-style-type: none"> • Irregular attendance – below 90% and CYP starting to have significant unauthorised absence from school/nursery • Starting to offend/reoffend 	<ul style="list-style-type: none"> • Referral to Local Authority Attendance Team • Inclusion Leader meets with parents to complete an Attendance Action Plan • Chronology of actions updated by staff • SMART Targets set and regularly reviewed with parents and child • Additional support from outside agencies e.g. OT/ Nurse/ CAMHS/ Children’s Centre/ Special School e.g. Loyne/ Hillside
Aspire and Achieve	<ul style="list-style-type: none"> • Children is achieving significantly below age related expectations- see provision criteria Challenging and disruptive behaviour impacting on daily life, achievements and relationships. • Low income/periods of unemployment affect significantly wider family unit • Not in education, employment or training (NEET)- more than 6 weeks • Will require a differentiated approach to education, additional to/different from their peers. 	<ul style="list-style-type: none"> • EHA in place and TAF meetings take place • Educational Psychologist assessment completed • SEN Support Plan completed following Educational Psychologist assessment. • Specialist teacher support- IDSS / OT etc • Chronology of actions completed by staff • Additional support from outside agencies e.g. OT/ Nurse/ CAMHS/ Children’s Centre/ Special School e.g. Loyne/ Hillside • SMART Targets set and reviewed regularly with parents /child • 1-1 work with child focussed on SMART Targets • Specialist equipment purchased
Positive Response	Child goes to Level 2	
Negative Response	Child in Need section 17 or Child in Need of Protection- Section 47 response by DSP EHCP request completed Move child to Level 4	

Level 4

These children, young people and families are **not coping** and are more likely to need a response from a specialist service

	Indicators	Action
Health and Wellbeing	<ul style="list-style-type: none"> • Substance misuse which has chronic health implications for the child and is detrimental to their development. • Mental Health/severe bouts of depression/self-harm/Threats of suicide. • Dental/Optical concerns not being met. • Risky sexual activity (child/young person) • Complex Medical Needs and/or Disability • All areas of life affected by problematic substance misuse • Acute mental health problems (suicidal, severe depression, self-harming) • No sense of identity/ CYP self-image is distorted • Severe child obesity or malnourishment (failure to thrive) • Developmental milestones unlikely to be met • Non-attendance at essential medical appointments • Basic care needs are rarely being met • Serious lack of stability and routine, appropriate stimulation, boundaries and guidance • Inability of parents to be warm and affectionate to children • No positive relationships • Notification for children who are living in potential private fostering arrangements. 	<ul style="list-style-type: none"> • EHCP completed • Staff to attend Child in Need / Child in Need of Protection meetings/ reviews and to report to other agencies • Annual Review
Safe From Harm	<ul style="list-style-type: none"> • Challenging/disruptive behaviour putting others in danger. Regularly involved in criminal/ anti-social behaviour. • Inadequate supervision • Inappropriate care arrangements • At risk of sexual exploitation • Risky sexual activity (child/young person) • Sexually active under 13 years • Parental refusal to engage over concerns • Parents overly punitive • Young/inexperienced parents with no support • Repeated incidents of domestic abuse having impact on children or Family has experienced serious domestic violence • Unsuitable and unsafe housing • Parents have significant mental health needs impacting on their parenting ability • Parents/ carers have significant Learning Disability which may be impacting on their parenting. • Privately fostered children <ul style="list-style-type: none"> • Evidence of risk of sexual exploitation/abuse. • Dysfunctional attachment between parent of child leading to significant harm. • Challenging/disruptive behaviour putting self/ others in danger. 	<ul style="list-style-type: none"> • EHCP completed • Staff to attend Child in Need / Child in Need of Protection meetings/ reviews and to report to other agencies • Annual Review

	<ul style="list-style-type: none"> • Involved in sexual exploitation • Suffering or at risk of suffering physical, emotional or sexual abuse • Children whose basic needs are persistently neglected • Deliberate self-harm • CYP assessed as high risk either to themselves or others as a result of their offending behaviour • Regularly involved in anti-social and criminal activities • Poor abusive relationship with sibling/ parental relationships • Child is left to care for themselves although they are not able • Parents may have abandoned child • Person identified as posing a risk to children living in the home • Children who disappear or are missing from home regularly/for a long period • Children subject to CP Plan • Child previously removed from parents • Destructive involvement from extended family • Serious substance misuse Child/Young Person/Family Member • Dangerous house or accommodation which places child in danger • Family breakdown • Children who abuse other children • Children at risk of forced marriage • Victim or witness of a crime • Parents/ carers have significant learning disability which impacts on their parenting ability. 	
Contribute and Engage	<ul style="list-style-type: none"> • Significant impact on not engaging with speech or language support • Subject to frequent harassment and hostility • Extreme financial difficulties preventing CYP basic needs being met • Out of control in the community • Prosecution for offences resulting in court orders • Those in need of intensive support- individualised packages because of extreme isolation • Child subject to emotional abuse with no self- esteem or sense of self-worth. 	<ul style="list-style-type: none"> • EHCP completed • Staff to attend Child in Need / Child in Need of Protection meetings/ reviews and to report to other agencies • Annual Review
Aspire and Achieve	<ul style="list-style-type: none"> • Will require specialist educational provision/resources either within mainstream/ special school- see provision criteria • Repeated permanent school exclusion • School exclusion with other risk factors • Denied access to stimulation 	<ul style="list-style-type: none"> • SMART targets set and reviewed regularly • Specialist teacher / school input • Specialist help from Special School etc • Annual Review

	<ul style="list-style-type: none">• Denied access to stimulation• Prosecution for offences resulting in court orders• Subject to proceedings in family courts• Young person is unable to cope with everyday life (including employment)• Out of control in the community• Young person living alone and not coping• Chaotic family life• Homeless and not eligible for temporary housing• Family not entitled to benefits with no means of other support• Inadequate poor housing• Extreme financial difficulties (debt) not allowing needs to be met• Chronically socially excluded/extreme isolation• Sexual exploitation associated to financial reasons	
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Appendix 3

Level 2- Initial Assessment Form

Name of Child	
Date of Birth	
Admission Group	
Parent/ Guardian Name	
Home Address	
Contact Number	

Relevant History	
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Areas of Concern

Cognition and Learning	
Communication and Interaction	
Social, Emotional and Mental Health	
Physical and/ or Sensory	

Actions

Actions	
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Form Completed by:

Parent/ Guardian signature:

Date:



Level 2+ Children with Additional Needs Action Plan

Name:	DOB:	Admission Group:	Inclusion Level:
Action Plan No:	Date of Action Plan:	Date of Review:	People Present:
Primary Area of Need and Diagnosis (if applicable):			

Date	Area of Need e.g. SEN, <u>attendance</u> , <u>medical</u> , EHCP Outcome (Based on assessments)	Target and Outcome Required (Plan)	Action (Do) Include strategies, resources and people involved, further advice to be sought, further assessments to be carried out, any use of external advice.	Time Scale	Evaluation and Impact (Review)						
			Quality First Teaching: SEN Support: Support at home:		Pupil <table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 33%; background-color: red;"></td> <td style="width: 33%; background-color: yellow;"></td> <td style="width: 33%; background-color: green;"></td> </tr> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> </table> Parents School						

A Graduated Approach

Universal Support	Targeted Support	Specialist Support
<ul style="list-style-type: none"> • Quality First Teaching. • Differentiated curriculum. • In class TA or teacher targeted support. • Extra time given for processing. • Visual timetables and other visual aids such as checklists. • Opportunities for overlearning. • Accessible equipment for all. • Use of word banks, times tables mats, number lines and squares and topic vocabulary. • Daily reading. • Clear, simple and positive instructions. • Equipment and resources as recommended by specialists. • Pre-teaching vocabulary. • Writing slopes and pencil grips. • Movement breaks. • Rest breaks. • Well organised classrooms to meet the physical and sensory needs of the class. • Whole class emotional thermometer. • Use of rewards and praise linked to school values. • Relationships with key staff. • Different sized exercise books. • Radio Aid system. • Wobble cushion. • Use of screens. 	<ul style="list-style-type: none"> • Level 2+ Action Plan • Modifications made to classroom and environment including resources specific to the needs of the individual e.g. individual timetable, individual word banks, individual learning mat, individual emotional thermometer. • 1:1 precision teaching. • Implementation of strategies advised by Speech and Language Therapists. • Implementation of strategies suggested by Occupational Therapist/ Physiotherapist. • Social stories. • Access to own work area. • More frequent sensory/ movement breaks. • Use of ear defenders. • Social skills and friendship skills interventions including 'Talk About' resources. • English IDL • Maths IDL. • Lexia • Interventions with teacher or TA e.g. phonics, spelling, reading, maths. • Auditory processing support from class TA. • Providing means to access tasks and alternative ways of recording e.g. scribe, recording devices, paired working, use of laptop, coloured overlays. • Access to additional ICT provision to support in class. • Transition planning with SENCo. • Daily check in with key adult. • Small group or individual sessions linked to emotional regulation, social skills and anger management. • Additional support at unstructured times. • Paired reading intervention. • Use of Emotionally Based School Avoidance resources. 	<ul style="list-style-type: none"> • Level 2+ Action Plan • 1:1 Speech and Language sessions with therapist and/ or TA/teacher. • 1:1 sessions with Occupational Therapist/ Occupational Therapist. • 1:1 Write from the Start – fine motor skills. • 1:1 Speed Up programme. • Personalised 1:1 support based on English/ Maths needs. • Individualised timetables. • 1:1 sessions with specialist teacher. • Working with outside agencies for support; e.g. Educational Psychologist, Speech and Language Therapists, OT, Physiotherapist, specialist teachers. • Support from Education Mental Health Practitioner (EMHP). • Support from CAMHS. • Support from Educational Psychologist. • Support from Specialist Teacher. • Support from QToD – Quality Teacher of the Deaf. • Support from QTVI – Quality Teacher of the Visually Impaired.